



**TENDER ENQUIRY NO: 2018\_RTRMH\_155808\_1**

**NIT FOR PROVIDING  
OPD/IPD/ EMERGENCY REGISTRATION  
SERVICES  
ON OUTSOURCED BASIS FOR RAO TULA  
RAM MEMORIAL HOSPITAL, JAFFARPUR,  
NEW DELHI**

**MEDICAL SUPERINTENDENT  
RAO TULA RAM MEMORIAL HOSPITAL  
JAFFARPUR, NEW DELHI  
GOVT. OF NCT OF DELHI**

**Office of The Medical Superintendent  
Rao Tula Ram Memorial Hospital  
Jaffarpur, New Delhi- 110073  
NOTICE INVITING TENDER**

E-Tenders are invited under **Two-Bid** system for providing registration services for OPD,IPD and emergency, on outsourced basis, from reputed agencies from all over India having office in Delhi and having capacity for providing services **for a period of 01 year. extendable for another 01 year which can be further extended for a period of 3 months and maximum of upto 6 months in case of exigency** and unavoidable circumstances to Rao Tula Ram Memorial Hospital.

The Bid documents along with terms and conditions etc. are available on the website <https://www.govtprocurement.delhi.gov.in> and can be downloaded therefrom. For registration and for e-procurement training and for any other assistance& clarifications with respect to training and submission of online tenders, Tenderer must contact NIC Help Desk - Address - 6th Level, C-Wing, Vikas Bhawan-II, Metcalfe House, Upper Bela Road, Delhi, India. Contact Telephone number 011-23813523 &Toll Free no.18002337313.

**SCHEDULE OF TENDER**

<b>Tender Enquiry No.</b>	
<b>Date of release of tender through e-procurement</b>	As per details at e-tender website
<b>Date of pre-bid meeting</b>	
<b>Last date/time for downloading of Bid documents</b>	
<b>Last date/time for submission of Bid</b>	
<b>Last date/time for submission of EMD</b>	
<b>Date/Time of opening of Prequalification cum Technical Bids</b>	
<b>Date / Time of opening of Financial Bids</b>	<i>(To be notified later on website)</i>

The above dates may be changed and any notification for the changed dates will be available on the above website and the bidders are strongly advised to regularly visit the website regarding revision in schedule if any, and other information.

**MEDICAL SUPERINTENDENT,  
RTRM Hospital, Jaffarpur, New Delhi-110073,  
Govt. of NCT of Delhi**

## **Disclaimer**

1. The Medical Superintendent, Rao Tula Ram Memorial Hospital (RTRMH), its employees and advisors make no representation or warranty and shall have no liability to any person, including any Bidder under any law, statute, rules or regulations or tort, principles of restitution or unjust enrichment or otherwise for any loss, damages, cost or expense which may arise from or be incurred or suffered on account of anything contained in this Notice Inviting Tender Document / Request for Proposal (“NIT” or “**BID DOCUMENT**”) or otherwise, including the accuracy, adequacy, correctness, completeness or reliability of the BID DOCUMENT and any assessment, assumption, statement or information contained therein or deemed to form part of this BID DOCUMENT or arising in any way for participation in this tender process.
2. The assumptions, assessments, statements and information contained in this BID DOCUMENT, especially the work load, may not be complete, accurate, adequate or correct. Each Bidder should, therefore, conduct its own due diligence, investigations and analysis and should check the accuracy, adequacy, correctness, reliability and completeness of the assumptions, assessments, statements and information contained in this BID DOCUMENT and obtain independent advice from appropriate sources.
3. The Authority may in its absolute discretion, but without being under any obligation to do so, update, amend or supplement the information, assessment or assumptions contained in this BID DOCUMENT.
4. The issue of this BID DOCUMENT does not imply that the Authority is bound to select a Bidder or to appoint the Selected Bidder or the Service Provider, as the case may be, for the Computerized OPD/IPD/Emergency registration Services and the Authority reserves the right to reject all or any of the Bidders or Bids without assigning any reason whatsoever.
5. The Bidder shall bear all its costs associated with or relating to the preparation and submission of its Bid including but not limited to preparation, copying, postage, delivery fees, expenses associated with any demonstrations or presentations which may be required by the Authority or any other costs incurred in connection with or relating to its Bid. All such costs and expenses will remain with the Bidder and the Authority shall not be liable in any manner whatsoever for the same or for any other costs or other expenses incurred by any Bidder in preparation or submission of the Bid, regardless of the conduct or outcome of the Bidding Process.
6. The statements and explanations contained in this BID DOCUMENT are intended to provide a better understanding to the Bidders about the subject matter of this BID DOCUMENT and should not be construed or interpreted as limiting in any way or manner the scope of services and obligations of the Service Provider set forth in the Agreement or the Authority’s rights to amend, alter, change, supplement or clarify the scope of work, the Computerized OPD/IPD/Emergency registration Services be awarded pursuant to this BID DOCUMENT or the terms thereof or herein contained. Consequently, any omissions, conflicts or contradictions in this BID DOCUMENT are to be noted, interpreted and applied appropriately to give effect to this intent, and no claims on that account shall be entertained by the Authority.

**GOVT. OF NCT OF DELHI**  
**Office of The Medical Superintendent**  
**Rao Tula Ram Memorial Hospital**  
**Jaffarpur, New Delhi- 110073**  
**TENDER DOCUMENT**

**Instructions to Bidders**

**1. General**

1.1. E-Tenders are invited under **Two-Bid** system for providing registration services for OPD,IPD and emergency, on outsourced basis, from reputed agencies, from all over India having office in Delhi and having capacity for providing services **for a period of 01 year extendable for another 01 year which can be further extended for a period of 3 months and maximum of upto 6 months in case of exigency** and unavoidable circumstances to the Rao Tula Ram Memorial Hospital.

The Bid documents along with terms and conditions etc. are available on the website <https://www.govtprocurement.delhi.gov.in> and can be downloaded therefrom. For registration and for e-procurement training and for any other assistance& clarifications with respect to training and submission of online tenders, Tenderer must contact NIC Help Desk - Address - 6th Level, C-Wing, Vikas Bhawan-II, Metcalfe House, Upper Bela Road, Delhi, India. Contact Telephone number 011-23813523 & Toll Free no.18002337313.

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<b>Date / Time of opening of Financial Bids</b>	<i>(To be notified later on website)</i>

The above dates may be changed and any notification for the changed dates will be available on the above website and the bidders are strongly advised to regularly visit the website regarding revision in schedule if any, and other information.

1.2 All subsequent updates, amendments & corrigenda, clarifications of the prebid conference etc. related to this tender will only appear on this Delhi Govt. e-tender portal <https://govtprocurement.delhi.gov.in>.

1.3 The complete bids should be submitted before the due date and time of submission as mentioned in clause 1.1. The bids shall be opened in Office of M.S., Rao Tula Ram Memorial Hospital, Jaffarpur, New Delhi-110073 in presence of Bidders or their authorised representatives who opt to be present as per schedule mentioned in clause 1.1 above.

- 1.4 In the event of any of the above-mentioned date of opening of bids being declared as a holiday/closed day in the office of the Govt., the Bids will be opened on the next working day at the same time.
- 1.5 Furnished counters (with tables and Chairs) along with electricity connection shall be provided by the Hospital. The cost of electricity shall be borne by the hospital. The space and electricity so provided shall be free of charge. It is expected that the bidder shall take this into account while quoting the rates.
- 1.6 The bid shall be valid for a period of 120 days from last date of submission of bids.
- 1.7 Annual tender value is approx. Rs. 34,00,000/-.

## **2. ELIGIBLE BIDDERS**

- 2.1. The bidder for qualification may be a single entity or a combination of entities (i.e. the "Consortium"), coming together to implement the Project. However, no bidder applying individually or as a member of a Consortium, as the case may be, can join hands with another bidder.
- 2.2. The bidder may be
- i.A single business entity under the Companies Act 1956 or an incorporated entity under equivalent acts of the parent country (in case of foreign entities) or
  - ii.An organization registered under the Societies Registration Act 1860 or any relevant Act of a State or Union Territory in India or
  - iii.A Public Trust registered under the Indian Trusts Act 1882 or any other equivalent act of a state or union territory in India or
  - iv. A Charitable Company registered under Section 25 of the Companies Act, 1956 or
  - v.A partnership firm or
  - vi. A proprietorship firm or
  - vii. Any combination of (i),(ii),(iii),(iv),(v) or (vi) with a formal intent to enter into an agreement or under an existing agreement to form a Consortium. A Consortium shall be eligible for consideration subject to the conditions set out in Clause 2.1.
- 2.3. The bidder must have at least one branch office in Delhi

### **2.4.TECHNICAL AND FINANCIAL CAPACITY:**

- 2.4.1. The bidder should have established experience of at least **five** years reckoned backwards with reference to last date of bid submission in the development and operation of software solutions.
- 2.4.2. The bidder should have adequate human, managerial, technical and financial resources to undertake the contract.
- 2.4.3. The bidding firm/company must have adequate skilled and trained manpower (in software development cycle/hardware and networking/project management) and requisite experience. The bidder should have at least two inhouse (onboard) software development teams.
- 2.4.4. The bidder shall also provide valid attested copies of all the documents/certificates/registration required under the scope of this tender.
- 2.4.5. The bidder should meet the following conditions of experience and financial capacity for bidding: At least three completed works with satisfactory completion certificate from their concerned client (as per clause 2.4.1) during last 5 years.
- 2.4.6. The bidding entity should also have an average annual financial turnover equal to or more than Rs.Ten lakhs during the last three financial years.
- 2.4.7. The firm should be ISO 9001:2000 or ISO 9001:2015 certified.
- 2.5. The eligibility criteria in case of a consortium shall have to be met by the lead member of the consortium.

- 2.6. A copy of the certificate from the statutory auditor or CA in fulfilment of the criteria mentioned in clause 2.4.6 shall require to be submitted in support of eligibility along with copies of certified audited balance sheets.

### **3. QUALIFICATION OF THE BIDDERS:-**

- 3.1 The Bidder, to qualify for award of contract, shall submit a power of attorney authorizing the signatories of the bid to commit each member of the Partnership/Company/Society/Consortium/Joint venture.
- 3.2 Memorandum of Understanding shall be provided in case the Bidder comprises of Joint venture/ Consortium/Partnership.
- 3.3 Nomination of one of the members of the partnership, consortium or joint venture to be in charge and this authorization shall be covered in the power of attorney signed by the legally authorized signatories of all members of consortium/joint venture/partnership firm.
- 3.4 Details of the intended participation by each member shall be furnished with complete details of the proposed division of responsibilities and corporate relationships among the individual members.
- 3.5 Resolution of the board of directors authorising the signatories in this regard is to be furnished in case of company.
- 3.6 The bidder shall submit full details of his ownership and control or, if the Bidder is a partnership, joint venture or consortium, full details of ownership and control of each member thereof.
- 3.7 The bidder should submit online
- i). A partnership deed in case of a partnership firm and PAN number of the partners,
  - ii). Memorandum and article of association and certificate of registration in case of Private / Public limited company or registered society and
  - iii). PAN number of the proprietor in case of proprietorship concern
  - iv). PAN number of each member of the consortium
  - v). Certificate of registration of GST issued by GST Authorities in regard of the bidding entities
- 3.8 Bidder must upload scanned authenticated copies of all requisite documents, duly self-attested, along with technical bid of the tender.
- 3.9 Each Bidder (each member in the case of partnership firm/joint venture/consortium) or any associate is required to confirm and declare with his bid that no agent, middleman or any intermediary has been, or will be, engaged to provide any services, or any other item or work related to the award and performance of this contract. They will have to further confirm and declare that no agency commission or any payment which may be construed as an agency commission will be paid and that the tender price will not include any such amount. If the Medical Superintendent, RTRMH subsequently finds to the contrary, the Department reserves the right to declare the Bidder as non-compliant and declare any contract if already awarded to the Bidder to be null and void.
- 3.10 Canvassing or offer of an advantage or any other inducement by any person with a view to influencing acceptance of a bid will be an offence under Laws of India. Such action will result in the rejection of bid, in addition to other punitive measures.

### **4. ONE BID PER BIDDER:-**

Each bidder shall submit only one tender either by himself or as a partner in joint venture or as a member of consortium. If a bidder or if any of the partners in a joint

venture or any one of the members of the consortium participate in more than one bid, the bids are liable to be rejected.

## **5. COST OF BID:-**

The bidder shall bear all costs associated with the preparation and submission of his bid and the Department will in no case shall be responsible or liable for those costs, regardless of the conduct or outcome of the tender process.

## **6. VISIT TO DEPARTMENT:-**

The bidder is required to provide 'Computerisation of OPD registration services in RTRMH' with requisite Equipment, material, uniformed trained personnel and will use its services for as specified in the SCOPE OF WORK and is advised to visit and acquaint himself with the area and operational system. The costs of visiting shall be borne by the bidder. It shall be deemed that the contractor has undertaken a visit to the Department and is aware of the operational conditions prior to the submission of the tender documents.

## **7. TENDER DOCUMENTS:**

### **7.1. Contents of Tender Documents.**

7.1.1. The Tender Invitation Document has been prepared for the purpose of inviting tenders for providing the computerization of OPD, casualty & indoor patient Registration Services in RTRMH. The Tender document comprises of:

- a) Notice of Invitation of Tender.
  - b) Instructions to bidders
  - c) Terms and Conditions.
  - d) Annexures:-
    - i. Tender form for the computerization of OPD casualty & indoor patient Registration Services in RTRMH of Delhi Government (Annexure-I)
    - ii. Scope of Work (Annexure-II)
    - iii. Method of award of work (Annexure-III)
    - iv. Check list for Bid Security (EMD) (Annexure-IV)
    - v. Check list for Pre qualification cum Technical Evaluation (Annexure-V)
    - vi. Undertaking (Annexure-VI-VII)
    - vii. Price bid format (Annexure-VIII)
  - viii. Format of Bank Guarantee for Performance Security (Annexure-IX)
    - ix. Format of Indemnity Bond (Annexure-X)
    - x. Format of Bank Guarantee for Bid Security (EMD) (Annexure-XI)
  - xi. Format of Agreement (Annexure-XII)
    - xii. Formats of stationary for OPD/Emergency/IPDCards (Annexure XIII)
- 7.1.2 The bidder is expected to examine all instructions, Forms, Terms and Conditions in the Tender document. Failure to furnish all information required by the Tender document or submission of a tender not substantially responsive to the Tender document in every respect will be at the bidder's risk and may result in rejection of his bid.
- 7.1.3 The bidder shall not make or cause to be made any alteration, erasure or obliteration to the text of the Tender document.

## **7.2. CLARIFICATION OF TENDER DOCUMENT:-**

7.2.1 The bidder shall check the pages of all documents against page number given

in index and, in the event of discovery of any discrepancy or missing pages the bidder shall inform the Office of Medical Superintendent, RTRMH.

7.2.2 In case the bidder has any doubt about any points in the Tender document, he shall seek clarification from the Office of the Medical Superintendent, RTRMH not later than two weeks before submitting his bid. Any such clarification, together with all details on which clarification had been sought, will be copied to all bidders without disclosing the identity of the bidder seeking clarification. All communications between the bidder and the Department shall be carried out in writing.

7.2.3 Except for any such written clarification by the Department, which is expressly stated to be an addendum to the tender document issued by the Office of Medical Superintendent, RTRMH, no written or oral communication, presentation or explanation by any other employee of the Department shall be taken to bind or fetter the Department under the contract.

## **8. PREPARATION OF BIDS:-**

8.1.1 Language-The bids and all accompanying document shall be in English. In case any accompanying documents are in other languages, it shall be accompanied by an English translation. The English version shall prevail in matters of interpretation.

8.1.2 Documents Comprising the Bid.

8.1.3 Tender document issued for the purposes of tendering as described in Clause 7.1 of instructions to bidders and any amendments issued shall be deemed as incorporated in the Bid.

8.1.4 The bid security (EMD) for the tender shall be **Rs Seventy Thousad only**. The bidder shall, on or before the date given in the Notice Inviting Tender, submit his bid through e-tendering. The bidder shall also drop the EMD in sealed envelope clearly marked with the name of the Tender in the tender box placed at CT Branch, RTRMH, Jaffarpur, New Delhi. A copy of the EMD shall also require to be uploaded on e-tender portal.

8.1.5 One copy of the Tender document and Addenda, if any, thereto with each page signed and stamped shall be attached to acknowledge the acceptance of the same.

8.1.6 The contractor shall deposit Earnest Money Deposit (Bid Security) for an amount as per clause 8.1.4 in the form of Fixed Deposit Receipt/Bank Guarantee (as per Annexure XI) from a commercial bank, in an acceptable form in favour of Medical Superintendent, Rao Tula Ram Memorial Hospital. The Bid Security will remain valid for a period of 45 days beyond the final bid validity period (165 days from last date of bid submission). Bid securities of the unsuccessful bidders will be returned to them at the earliest after expiry of the final bid validity and latest on or before the 30th day after the award of the contract.

8.1.7 These shall be addressed to the Medical Superintendent, RTRMH and submitted in the Office of Medical Superintendent, RTRMH at the address given in the Tender document.

8.1.8 The Bidder (member in case of joint venture/ consortium/ partnership firms) shall furnish the details regarding total number of works, as stated in Clause 2.4 of Instructions to bidders, completed in preceding five years, which were similar in nature and complexity as in the present contract requiring supply of trained man power to provide Computerisation of OPD, Casualty and Indoor Patient registration Services in Hospitals, in any city in India, including private sector.



## **8.2. BID PRICES:-**

- 8.2.1. The financial bid will be opened after the bidder's pre-qualification cum technical bids is qualified. The bids will be evaluated on the basis of **Administrative Charges at S. No. 2** provided in Annexure VIII. The contract will ordinarily be awarded to the lowest bidder L1 in case there is tie between L1 (i.e. there are more than one bidder quoting the same L1 Price), the bidder with higher average annual turnover will be declared the successful bidder and the contract will be awarded to that bidder. In case, the average annual turnover also same the final selection will be done by draw of lots in presence of the bidders/bidder's representatives who chose to be present. The quoted price in S. No. 2 of Price Bid (Annexure VIII) should not be in any case be less than 7.5% of the total cost per counter per shift per month as mention in S. No. 1 in Price Bid. Any rates quoted below this will be summarily rejected and no correspondence will be entertained in this regard.
- 8.2.2. Conditional bids/offers will be summarily rejected.

## **8.3. FORM OF BID:-**

The Form of Bid shall be completed in all respects and duly signed and stamped by an authorized and empowered representatives of the Bidder. If the Bidder comprises a partnership firm, consortium or a joint venture, the Form of Bid shall be signed by a duly authorized representative of each member of participant thereof. Signatures on the Form of Bid shall be witnessed and dated. Copies of relevant power of attorney shall be attached.

## **8.4. CURRENCIES OF BID AND PAYMENT:-**

The Bidder shall submit his price bid/offer in Indian Rupees and payment under this contract will be made in Indian Rupees.

## **8.5. DURATION OF CONTRACT:-**

The contract shall be valid for a period of **for a period of 01 year extendable for another 01 year which can be further extended for a period\*- of 3 months and maximum of upto 6 months in case of exigency.**

## **8.6. BID SECURITY/ EARNEST MONEY DEPOSIT (EMD):-**

- 8.6.1. The contractor shall deposit Bid Security (Earnest Money Deposit) as per clause 8.1.4 in the form of Fixed Deposit Receipt or Bank Guarantee from a commercial bank in an acceptable form in favour of Medical Superintendent, Rao Tula Ram Memorial Hospital, Jaffarpur, New Delhi along with the Tender document before the due date. The Bid Security will remain valid for a period of 45 days beyond the bid validity period (165 days from last date of bid submission).
- 8.6.2. Any Tender not accompanied by Bid Security shall be rejected.
- 8.6.3. Bid securities of the unsuccessful bidders will be returned to them at the earliest after expiry of the final bid validity and latest on or before the 30th day after the award of the contract.
- 8.6.4. Bid security of the successful bidder shall be returned on receipt of Performance Security by the Department and after signing the agreement.
- 8.6.5. Bid Security shall be forfeited if the bidder withdraws his bid during the period of Tender validity.

- 8.6.6. Bid Security shall be forfeited if the successful bidder refuses or neglects to execute the Contract or fails to furnish the required Performance Security within the time frame specified by the Department.

## **8.7. FORMAT AND SIGNING OF BID:-**

- 8.7.1. The bidder shall submit online a scanned copy of the Tender document and addenda, if any, thereto, with each page of this document signed and stamped to confirm the acceptance of the terms and conditions of the tender by the bidder.
- 8.7.2. The documents comprising the bid shall be typed or written in indelible ink and all pages of the bid shall be signed by a person or persons duly authorized to sign on behalf of the bidder. All pages of the bid, where entries or amendments have been made, shall be signed by the person or persons signing the bid. The bidder shall submitted online scanned copies of the same.
- 8.7.3. The bid shall contain no alterations, omissions or additions except those to comply with instruction issued by the Department or are necessary to correct errors made by the bidder, in which case such corrections shall be initialled/ signed and dated by the person or persons signing the bid.

## **9. SUBMISSION OF BIDS:-**

- 9.1 The bidder shall submit the Pre-qualification cum Technical Bid and the Financial Bids online on the e-tender web portal uploading scanned copies of documents specified in the pre qualification cum technical bid after authenticating the documents.
- 9.2 Bidder shall be required to drop the following documents in original in sealed cover duly super scribed 'Bid Security for Computerisation of OPD, Casualty and Indoor patient registration services in RTRMH' in the tender box kept at the Care Taking Branch (Room No. 34) in the administrative block, RTRMH.
- (i) **Bid security (EMD)**
- (ii) **Annexure VI**
- (iii) **Annexure-VII**
- 9.3 The sealed cover of Bid Security should consist of Bid Security (Earnest Money Deposit) for an amount of as per clause 8.1.4, in form of Fixed Deposit Receipt / Bank Guarantee (as per Annexure XI) from a commercial bank.
- 9.4 The sealed covers shall be addressed to the Medical Superintendent, RTRMH and submitted before the last date and time of submission of bids.
- 9.5 The online submission of bids shall contain self attested scanned copies of
- Bid Security (Earnest Money Deposit) for an amount as per 8.1.4
  - One recent passport size photograph(s) of the authorized person(s) pasted on duly filled up Annexure I
  - The bidding entity's PAN card as per clause 3.7 of instructions to bidders
  - The bidding entity's GST Registration as per clause 3.7 of instructions to bidders
  - Valid Provident Fund Registration Number of the bidding entity
  - Valid ESI Registration Number of the bidding entity
  - Valid Licence and Number of the bidding entity under Contract Labour Act and under any other Acts/Rules
  - Proof of experience as stated in Clause 2.4.1 and 2.4.5 of Instruction to bidders supported by documents from the concerned organizations

- ix. Project completion certificate or Phase completion certificates with satisfactory performance certificates
- x. Copy of ISO 9001 :2000 or ISO 9001:2015 for the firm(s)
- xi. Proof of Average Annual turnover as stated in Clause 2.4.6 of Instruction to bidders supported by audited Balance Sheet
- xii. Copy of the certificate from the statutory auditor or CA in fulfilment of the eligibility criteria mentioned in clause 2.4
- xiii. Memoranda of association and certificate of registration in case of partnership, society, company or consortium, as per clause 3.2
- xiv. Duly filled and signed Annexures-IV
- xv. Duly filled and signed Annexures- V
- xvi. Duly filled and signed Annexures- VI
- xvii. Duly filled and signed Annexures- VII
- xviii. Technical proposal (Technical details of the project to proposed – configuration of hardware, platform, software design, Database etc.)
- xix. Tender documents and addenda/corrigendum

9.6 The tender shall remain valid and open for acceptance for a period of 120 days from the last date of submission of tender.

#### **9.7 Late and Delayed Tenders:-**

Bids must be received in the Department at the address specified above not later than the date and time stipulated in the NIT. The Department may, at its discretion, extend the deadline for submission of bids in which case all rights and obligations of the Department and the Bidder will be the same.

Any bid received by the Department after the deadline for submission of bids, as stipulated above, shall not be considered and will be returned unopened to the bidder.

### **10. BID OPENING AND EVALUATION:-**

#### **10.1. Opening of the Bids**

10.1.1. The authorized representatives of the Department will open the Prequalification/Technical Bids in the presence of the Bidders or of their representatives who choose to attend at the appointed place and time.

10.1.2 The bid of any bidder who has not complied with one or more of the conditions will be summarily rejected.

10.1.3 Conditional bids will also be summarily rejected.

#### **10.2. Evaluation of the Bids**

10.2.1 Subsequently, the technical bids will be evaluated as per the methodology given in the Annexure-III of the Tender document.

10.2.2 Financial bids of only the technically qualified bidders in accordance to Annexure —III will be opened for evaluation in the presence of qualified bidders.

### **11. RIGHT TO ACCEPT ANY BID AND TO REJECT ANY OR ALL BIDS:-**

11.1 The Medical Superintendent, RTRMH, Government of NCT of Delhi, is not bound to accept the lowest or any bid and may at any time by notice in writing to

the bidders terminate the tendering process.

11.2 The Medical Superintendent, RTRMH, Government of NCT of Delhi, may terminate the contract if it is found that the agency is black listed on previous occasions by the any of the Departments/Institutions/Local Bodies/ Municipalities /Public Sector Undertakings, etc.

11.3 The Medical Superintendent, RTRMH, Government of NCT of Delhi, may reject the Bid in the event that the Bid is accepted but the successful bidder fails to furnish the Performance Security or fails to execute the contract agreement.

## **12. AWARD OF CONTRACT:-**

12.1. The Medical Superintendent, RTRMH, Government of NCT of Delhi, will award the contract to the successful evaluated bidder whose bid has been found to be responsive and who is eligible and qualified to perform the contract satisfactorily as per the terms and conditions incorporated in the bidding document.

12.2. The Medical Superintendent, RTRMH, Government of NCT of Delhi, will communicate the successful bidder by facsimile confirmed by letter transmitted by Speed Post/Registered post that his bid has been accepted. This letter (hereinafter and in the condition of contract called the "Letter of Offer") shall prescribe the amount which department will pay to the contractor in consideration of the execution of work/services by the contractor as prescribed in the contract.

12.3. The successful bidder will be required to execute a contract agreement in the form specified in Annexure-XII within a period of 30 days from the date of issue of Letter of Offer.

12.4. The successful bidder shall be required to furnish a Performance Security within 15 days of receipt of 'Letter of Offer' for an amount of ten per cent of the total value of the contract in the form of Fixed Deposit Receipt /Bank Guarantee from a commercial bank in an acceptable form (Annexure-IX) in favour of "Medical Superintendent, Rao Tula Ram Memorial Hospital, Jaffarpur, New Delhi". The Performance Security shall remain valid for a period of 60 days beyond the date of completion of all contractual obligations. In case the contract period is extended further, the validity of Performance Security shall also be extended by the contractor accordingly.

12.5. Failure of the successful bidder to comply with the requirements of above clauses shall constitute sufficient grounds or the annulment of the award and forfeiture of Bid Security.

## **TERMS AND CONDITIONS OF CONTRACT**

**1. Scope of Work:** As per Annexure II

**2. Responsibility of hospital:**

2.1. The hospital shall be providing furnished registration counters with free electricity to the vendor. The counters shall require to be established, equipped and run by the vendor.

2.2. The hospital shall also allow the vendor to have a connection to its Computer network subjected to vendor installed system meeting the criteria of the IT/cyber security policy.

- 2.3. The specific inputs required for development of software, formats of the slips/reports, shift wise details shall be provided by the hospital concerned.
- 2.4. The services provided will be periodically checked by the Medical Superintendent, RTRMH or any person authorized by him based on certain objective criteria. Hospital shall also identify an officer as nodal officer to deal with the vendor in day to day working of the work.
- 2.5. The individual agreements in regard of the tender shall be entered between the Medical Superintendent of RTRMH and the vendor.

### **3. Responsibility of Vendor:**

- 3.1. The vendor shall establish, equip and run the requisite number of counters in the hospitals as per requirement of the hospital.
- 3.2. The vendor shall ensure that all software provided/used in the premises shall be legal and licensed.
- 3.3. The vendor will provide the trained manpower for running the counters. It will be the sole responsibility of the contractor that the men engaged are trained and the Department will not be liable for any mishap, directly or indirectly.
- 3.4. The vendor shall prepare the requisite software for implementation as per schedule and will implement it before the due date.
- 3.5. The vendor shall submit daily/weekly/monthly/quarterly/annual/other reports in both digital and hardcopy.
- 3.6. All the consumables and disposables required for the services are to be procured by the contractor. All consumables and disposables should be eco-friendly. The printed stationary as per specifications bearing the hospital name and other particulars for OPD and Emergency registration as per format provided by the hospital concerned shall be provided by the vendor.
- 3.7. The vendor shall also abide by all the statutory requirements in respect of running any such system or the manpower deployed.
- 3.8. The vendor shall abide by the service level agreement clauses as per Para 7 of the terms and conditions and scope of work (Annexure II).

### **4. Submission of Bills:**

- 4.1. The payment would be made month wise based on the actual shift manned/operated by the personnel supplied by the contractor and based on the documentary proof jointly signed by the representative of the Department and the contractor/his representative/personnel authorized by him. No other claim on whatever account shall be entertained by the Department.
- 4.2. The bills will be submitted by the bidder to the Medical Superintendent, RTRMH on monthly basis. The payment of such bills shall be made as per government rules by the hospital concerned. The hospital will make all efforts to make payments within 30 days of submission of verified bills.
- 4.3. The Department will deduct Income Tax at source under Section 194-C of Income Tax Act from the contractor at the prevailing rates of such sum as income tax on the income comprised therein.
- 4.4. The contractor will have to deposit the proof of depositing employee's contribution towards PF/ESI and other statutory deductions/ obligations of each employee in every month.
- 4.5. If as a result of post payment audit any overpayment is detected in respect of any work done by the agency or alleged to have done by the agency under the tender, it shall be recovered by the Department from the contractor.

- 4.6.If any underpayment is discovered, the amount shall be duly paid to the contractor by the Department.
- 4.7.The contractor shall provide the copies of relevant records during the period of contract or otherwise even after the contract is over whenever required by the Department.

## **5. Penalties**

- 5.1.For the delayed Execution of the work, a penalty of 2% of the annual cost per week or part thereof for delayed execution shall be levied. If the delay is for more than 4 weeks, the agreement will be liable to be cancelled and Performance Guarantee shall stand forfeited.
- 5.2.For poor quality of paper and printing a penalty of Rs 2000 per occasion shall be levied.
- 5.3.For downtime exceeding the defined limit as given; a penalty of Rs 5000 per occasion shall be levied.
- 5.4.For Late submission of reports beyond the stipulated time in as given in Scope of Work Annexure II, clause 14; a penalty of Rs. 100 per day per report shall be levied. However, the total amount of penalty on this account shall not exceed the total performance guarantee during the contract period.
- 5.5.For wrong coding of diagnosis/ incomplete entry of diagnosis a penalty of Rs 100 per such occasion shall be levied.
- 5.6.For late opening of any counter a penalty of Rs 1000 per occasion shall be levied.
- 5.7.For nonfunctioning of any counter for more than 4 hours continuously in a shift a penalty of Rs. 5000 per occasion in addition to any other applicable penalty shall be levied.
- 5.8.The decision of the Medical Superintendent, RTRMH shall be final and binding in regard of deciding about the penalties.

- 6. Termination Clause:** Medical Superintendent, RTRMH may terminate the contract after giving a notice of 1 month without assigning any reason.The Contractor may also terminate the contract after giving a minimum notice of 3 months to the hospital authority.

## **7. Service Level Agreement**

- 7.1.In case any of contractor's personnel(s) deployed under the contract is (are) absent, a penalty equal to double the wages of number of staff/supervisors absent on that particular day shall be levied by the Department and the same shall be deducted from the contractor's bills.
- 7.2.In case any of contractor's personnel deployed under the contract fails to report in time and contractor is unable to provide suitable substitute in time for the same it will be treated as absence and penalty as mentioned in clause 5 of the terms and conditions shall be levied.
- 7.3.In case any public complaint is received attributable to misconduct/misbehaviour of contractor's personnel, a penalty of Rs.500/for each such incident shall be levied and the same shall be deducted from contractor's bill. Further the concerned contractor's personnel shall be removed from the system immediately.
- 7.4.In case the contractor fails to commence/execute the work as stipulated in the agreement or unsatisfactory performance or does not meet the statutory requirements of the contract, Principal Employer reserves the right to impose

the penalty as detailed below:-

- 7.4.1. 2% of the annual cost of order/agreement per week, upto four weeks delays.
- 7.4.2. After four weeks delay the Department may cancel the agreement and get this job to be carried out preferably from other agency from open market. The difference, if any, will be recovered from the defaulter contractor and also shall be black listed for a period of four years from participating in such type of tender and his Performance Guarantee/Security may also be forfeited, if so warranted.
- 7.5. The Department reserves the right to cancel or reject all or any of the tender without assigning any reason.
- 7.6. Any act on the part of the tenderer to influence anybody in the Department is liable to rejection of his tender.
- 7.7. Every employee so engaged by the contractor shall wear uniform and a badge wearing his/her name, while on duty. The said uniform and badge shall be provided by the contractor at his own cost.

#### **7.8.MANPOWER DEPLOYED :**

- 7.8.1 The contractor shall engage the men/women whose age shall be above 18 years only.
- 7.8.2 Manpower so engaged should be trained DEO operations before joining.
- 7.8.3 The IT assistant/DEO with minimum six month course on computers and one IT assistant/DEO per counter per 8 hour shift shall be required.
- 7.8.4 One supervisor, Graduate with at least 5 year IT experience shall require to be deployed.
- 7.8.5 The contractor shall deploy his personnel only after obtaining the Department approval duly submitting curriculum vitae (CV) of these personnel, the Department shall be informed at least one week in advance and contractor shall be required to obtain the Department's approval for all such changes along with their CVs.
- 7.8.6 In addition, Department will also arrange training in batches by Civil Defence and Fire Service Departments for deployed manpower. During this training, contractor shall have to arrange for substitute for the staff undergoing training.
- 7.8.7 The list of staff going to be deployed shall be made available to the Department and if any change is required on part of the Department fresh list of staff shall be made available by the contractor after each and every change.
- 7.8.8 Only physically fit personnel shall be deployed for duty by the contractor.
- 7.8.9 The contractor shall ensure that the staff shall not take part in any staff union and association activities.
- 7.8.10 The staff engaged by the contractor shall be available all the time as per their duty roster and they shall not leave their place of duty without the prior permission of the authorized officer of the Department.
- 7.8.11 The contractor shall be responsible to provide immediate replacement to take place of any staff engaged by him, who is not available for duty at the place of posting and such other additional staff as may be required for additional counters for which prior information have been given.
- 7.9. The contractor shall abide by and comply with all the relevant laws and statutory requirements covered under Labour Act, Minimum Wages and (Contract Labour (Regulation & Abolition Act 1970), EPF etc. with regard

to the personnel engaged by him for the awarded works. It will be the responsibility of the contractor to provide details of manpower deployed by him, in the Department and to the Labour department.

- 7.10. The contractor shall be liable and responsible to provide all the benefits viz. Provident Fund, ESI, Bonus, Gratuity, Leave, etc. to the staff engaged by him. As far as EPF is concerned, it shall be the duty of the Contractor to get PF code number allotted by RPFC against which the PF subscription, deducted from the payment of the personnel engaged and equal employer's amount of contribution should be deposited with the respective PF authorities within seven days of closing of every month. Giving particulars of the employees engaged for the sanitation works, is required to be submitted to the Department. In any eventuality, if the contractor failed to remit employee/employer's contribution towards PF subscription etc. within the stipulated time, the Department is entitled to recover the equal amount from any money due or accrue to the Contractor under this agreement or any other contract and will be deposited with RPFC on behalf of the contractor.
  - 7.11. The Department shall have the right to ask for the removal of any person of the contractor, who is not found to be competent and orderly in the discharge of his duty.
  - 7.12. The contractor shall not engage any sub-contractor or transfer the contract to any other person in any manner.
  - 7.13. The antecedents of staff deployed shall be got verified by the contractor from local police authority and an undertaking in this regard to be submitted to the department and department shall ensure that the contractor complies with the provisions.
  - 7.14. The Contractor will maintain a register on which day to day deployment of personnel will be entered. This will be countersigned by the authorized official of the Department. While raising the bill, the deployment particulars of the personnel engaged during each month, shift wise, if any, should be shown. The Contractor has to give an undertaking duly countersigned by the concerned official of the Department, regarding payment of wages as per rules and laws in force, before receiving the 2nd payment onwards.
  - 7.15. That in the event of any loss occasioned to the Department, as a result of any lapse on the part of the contractor which will be established after an enquiry conducted by the Department, the said loss can claim from the contractor up to the value of the loss. The decision of the Medical Superintendent, RTRMH will be final and binding on the contractor.
  - 7.16. The Department may direct the contractor, to have any person removed that is considered to be undesirable or otherwise and similarly Contractor reserves the right to change the staff with prior intimation to the Department.
  - 7.17. The contractor will deploy supervisor as per the need given by the Department. The supervisor shall be required to work as per the instructions of Department.
  - 7.18. Other service level agreement conditions shall be as per Scope of Work as given in Annexure II of this tender document.
8. The vendor will deposit a performance Guarantee/Security in the form of Fixed Deposit Receipt/Bank Guarantee (Annexure IX) from a nationalised bank in the name of **Medical Superintendent, Rao Tula Ram Memorial Hospital, Jaffarpur, New Delhi** equal to **10%** of the value of contract with the department valid for a period not less than 60 days after fulfilment of all contractual liabilities.



9. All liabilities arising out of accident or death while on duty shall be borne by the contractor.
10. The contractor and its staff shall take proper and reasonable precautions to preserve from loss, destruction, waste or misuse the areas of responsibility given to them by the Department and shall not knowingly lend to any person or company any of the effects of the Department under its control. The contractor shall be responsible to maintain all property and any equipment of the Department entrusted to it. Any damage or loss caused by contractor's persons to the Department in whatever shape would be recovered from the contractor.
11. The staff engaged by the contractor shall not accept any gratification or reward in any shape.
12. The personnel supplied have to be extremely courteous with very pleasant mannerism in dealing with the Staff/visitors, especially with female staff/visitors and should project an image of utmost discipline. The Department shall have right to have any person moved in case of patient/staff/visitor complaints or as decided by representative of the Department if the person is not performing the job satisfactorily or otherwise. The contractor shall have to arrange the suitable replacement in all such cases.
13. The contractor shall abide by and comply with all the relevant laws and statutory requirements covered under various laws such as Labour Act, Minimum Wages Act, Contract Labour (Regulation and abolition) Act, EPF, ESI and various other Acts as applicable from time to time with regard to the personnel engaged by the contractor for the Department.
14. The contractor shall ensure that its personnel shall not at any time, without the consent of the Department in writing divulge or make known any trust, accounts matter or transaction undertaken or handled by the Department and shall not disclose to any information about the affairs of Department. This clause does not apply to the information, which becomes public knowledge.
15. Any liability arising out of any litigation (including those in consumer courts) due to any act of contractor's personnel shall be directly borne by the contractor including all expenses/fines. The concerned contractor's personnel shall attend the court as and when required.
16. **FORCE MAJEURE:-** If at any time during the currency of the contract, either party is subject to force majeure, which can be termed as civil disturbance, riots, strikes, tempest, acts of God etc. which may prevent either party to discharge the obligation, the affected party shall promptly notify the other party about the happening of such an event. Neither party shall by reason of such event be entitled to terminate the contract in respect of such performance of their obligations. The obligations under the contract shall be resumed as soon as practicable after the event has come to an end or ceased to exist. The performance of any obligations under the contract shall be resumed as soon as practicable after the event has come to an end or ceased to exist. If the performance of any obligation under the contract is prevented or delayed by reason of the event beyond a period mutually agreed to, if any, or seven days, whichever is more, either party may at its option

terminate the contract.

17. "NOTICE TO PROCEED" means the notice issued by the Department to the contractor communicating the date on which the work/services under the contract are to be commenced.
18. If the contractor is a joint venture/consortium/group/partnership of two or more persons, all such persons shall be jointly and severally liable to the Department for the fulfilment of the terms of the contract. Such persons shall designate one of them to act as leader with authority to sign. The joint venture/consortium/group/partnership shall not be altered without the approval of the Department.
19. PERIOD OF CONTRACT: The contract period shall be Twelve months from the date of the commencement (as mentioned in Notice to Proceed).
20. During the course of contract, if any of contractor's personnel are found to be indulging in any corrupt practices causing any loss of revenue to the Department shall be entitled to terminate the contract forthwith duly forfeiting the contractor's Performance Guarantee.
21. The Department shall not be responsible for providing residential accommodation to any of the personnel of the contractor.
22. The Department shall not be under any obligation for providing employment to any of the worker of the contractor after the expiry of contract. The Department does not recognize any employee employer relationship with any of the workers of the contractor.
23. **OBLIGATION OF THE CONTRACTOR:-**
  - 23.1. The contractor shall ensure full compliance with tax laws and IT laws of India with regard to this contract and shall be solely responsible for the same. The contractor shall submit copies of acknowledgements evidencing filing of returns every year and shall keep the Employer fully indemnified against liability of tax, interest, penalty etc. of the contractor in respect thereof, which may arise.
  - 23.2. The contractor shall disburse the wages to its staff deployed in the Department every month through ECS only and submit the documentary proof along with bills.
  - 23.3. **DEFAULT IN MAKING PAYMENT OF WAGES TO PERSON ENGAGED:** In the event of default being made in the payment of any money in respect of wages of any person deployed by the contractor for carrying out of this contract and if a claim therefore is filed in the office of the Labour Authorities and proof thereof is furnished to the satisfaction of the Labour Authorities, the Department may, failing payment of the said money by the contractor, make payment of such claim on behalf of the contractor to the said Labour Authorities and any sums so paid shall be recoverable by the Department from the contractor.
  - 23.4. If any money shall, as the result of any instructions from the Labour authorities or claim or application made under any of the Labour laws, or Regulations, be directed to be paid by the Department, such money shall

be deemed to be payable by the contractor to the Department within seven days. The Department shall be entitled to recover the amount from the contractor by deduction from money due to the contractor or from the Performance Security.

23.5. The bidder should be registered with the concerned authorities of Labour Department under Contract Labour (R&A) Act 1970 and Delhi Works Contract Act. (Wherever applicable). It will be the duty of the Vendor to get appropriate licenses from various authorities as applicable.

**24. INDEMNITY:** The contractor shall indemnify and hold the Department harmless from and against all claims, damages, losses and expenses arising out of, or resulting from the works/services under the contract provided by the contractor.

**25. DISPUTE RESOLUTION:-**

25.1. Any dispute and or difference arising out of or relating to this contract will be resolved through joint discussion of the authorities' representatives of the concerned parties. However, if the disputes are not resolved by joint discussions, then the matter will be referred for adjudication to a sole Arbitrator appointed by the Lieutenant Governor of Delhi.

25.2. The award of the sole Arbitrator shall be final and binding on all the parties. The arbitration proceeding's shall be governed by Indian Arbitration and Conciliation Act 1996 as amended from time to time. The cost of Arbitration shall be borne by the respective parties in equal proportions. During the pendency of the arbitration proceeding and currency of contract, neither party shall be entitled to suspend the work/service to which the dispute relates on account of the arbitration and payment to the contractor shall continue to be made in terms of the contract. Arbitration proceedings will be held at Delhi/New Delhi only.

**26. JURISDICTION OF COURT:-** The courts at Delhi/New Delhi shall have the exclusive jurisdiction to try all disputes, if any, arising out of this agreement between the parties.

## ANNEXURES

- I. Tender form for the computerization of OPD casualty and indoor patient Registration Services in RTRMH (Annexure-I).
- II. Scope of Work (Annexure-II)
- III. Method of award of work (Annexure-III)
- IV. Check list for Bid Security (EMD) (Annexure-IV)
- V. Check list for Pre qualification cum Technical Evaluation (Annexure-V)
- VI. Undertakings (Annexure-VI-VII)
- VII. Price Bid Format (Annexure-VIII)
- VIII. Format of Bank Guarantee for Performance Security (Annexure-IX)
- IX. Format of Indemnity Bond (Annexure-X)
- X. Format of Bank Guarantee for Bid Security (EMD) (Annexure-XI)
- XI. Format of Agreement (Annexure-XII)
- XII. Formats of stationary (Annexure-XIII)

**TENDER FORM**  
**Computerisation of OPD, Casualty and Indoor Patient**  
**Registration Services in Rao Tula Ram Memorial Hospital, Jaffarpur**

Tender No:

Due date for tender:

Opening time &amp; date of tender:

Affix duly  
attested P.P.  
Size  
photograph of  
the bidder

S No	Item	Detail
1 .	<b>Details of Bidder</b>	
	i. Name of Bidding Entity	
	ii. Registration number of the Bidding Entity	
	iii. Regd. Address	
	iv. PAN No.	
2.	<b>Details of Authorized Signatory of bidder for the tender</b>	
	i. Name	
	ii. Designation	
	iii. Address	
	iv. Office Telephone No	
	v. Mobile No.	
	vi. Fax No.	
3.	<b>Details of Authorised Person of bidder to deal with</b>	
	i. Name	
	ii. Designation	
	iii. Communication Address	
	iv. Telephone No	
	v. Fax No.	
	vi. Email address	
4.	i. Please specify as to whether bidder is a sole Proprietor/partnership Firm/Company/Society/Consortium ii. Name, address/ Telephone No. of Director/ partners	A. B. C. D.

:

5.	Details of earnest money deposited
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	Amount	
	ii. FDR/BG No.	
	iii. Date of issue	
	iv. Name of the issuing authority	
	v. Validity till	
6.	Confirm your organisation employs more than 20 employees	
7.	a) PF Registration No. b) ESI Registration No. c) GST Registration No.	
8.	Any other information.	

**9. Declaration by the contractor:-**

This is to certify that I / We before signing this tender have read and fully understood all the terms and conditions and instruction contained herein and undertake myself / ourselves abide by the said terms and conditions.

Dated:

(Signature of Tenderer)  
Name:  
Designation:  
Address:  
Phone No.(O) :

## Computerisation of OPD, Casualty and Indoor Patient Registration Services at RTRMH

### SCOPE OF WORK

1. The present work on Computerization of Hospital OPD/Emergency/Indoor Admission Registration Services is to be awarded on outsourcing basis.
2. The hospital shall be providing:
  - 2.1. Furnished counters (Tables and Chair) along with electricity connection shall be provided by the Hospital. The cost of electricity shall be borne by the hospital. The space and electricity so provided shall be free of charge. It is expected that the bidder shall take this into account while quoting the rates.
  - 2.2 The hospital shall also allow the vendor to have a connection to its Computer network subjected to vendor installed system meeting the criteria of the IT/cyber security policy. Wherever, a system of Internal Networking wiring exists in the hospital, the bidder shall explore its usefulness and if required shall arrange the same at his own cost.
  - 2.3 The counters shall require to be established, equipped and run by the vendor.
3. The services provided will be periodically checked by the Medical Superintendent concerned or any person authorized by him based on certain objective criteria. Each hospital shall also identify an officer as nodal officer to deal with the vendor in day to day working of the work.
4. The system is to be established for Hospital OPD, Casualty and IPD, Registration for Rao Tula Ram Memorial Hospital, Govt. of NCT of Delhi, Jaffarpur, New Delhi-110073

#### 5. No. of Counters

- 5.1. Number of counters to be setup in Rao Tula Ram Memorial Hospital (including its Polyclinic) and OPD/Csualty/IPD attendance is as under:

s. n.	Name of hospital	Total OPD registration(old and new) in 2017-18	Total Emergency Registration on 2017-2018	OPD counters required	Total IPD registration in 2017-18	IPD /Emergency counters required (24*7)	Counters required for polyclinic	Total counters
1.	Rao Tula Ram Memorial Hospital	555883	146760	5	13350	1x3(shift) = 3	1	9

- 5.2. The above mentioned number of counters may increase or decrease as per requirement any time during the contract period and the exact number and functioning shall be decided by the MS RTRMH. For any increase or decrease in the number of counters, the payment will be correspondingly

increased or reduced proportionately at the quoted rates, with cap of 20% hike.

- 5.3. For the functioning of counters for special requirement other than working days the MS of RTRMH shall decide.

**6. Counter Timings:**

- 6.1 All counters shall operate on shift basis with each shift being for 8 hours.
- 6.2 The OPD counters shall operate on single shift basis on all working days of the hospitals. The OPDs of the hospitals function on all working days (throughout the year except on Sunday and Gazetted holidays). The hospitals also run some Sunday Clinics and some of the counters shall be required to be operative on Sunday/holidays as decided by the MS, RTRMH concerned. The registration counter timing [shifts shall be decided by the MS of RTRMH as per requirement].
- 6.3 Emergency /IPD Registration Timings shall function round the Clock on 8 hour shift basis.

**7. The awarded work to be accomplished shall include :**

- 7.1. To establish a Central Computerized Hospital Patient Registration of OPD/ Casualty/Admissions, Medical Records Department (coding and Entry of Diagnosis) and shall include:
- i. Registration of new OPD cases, Revisits, Cross Referrals, Emergency Registration, Indoor admissions
  - ii. Collection of Diagnosis Slips, Coding and data Entry as per ICD 10
  - iii. Collection of details of Indoor Patients, Coding of Diagnosis and data Entry as per ICD 10 in the software
  - iv. Analysis and generate daily / monthly / annual data reports and/or any report as mandated by government from time to time.
- 7.2. The required Software Solution is expected to include the following in order to support the clinical and administrative activities of the hospital. These are general need-based requirements. On award of contract, the Vendor will interact with various departments and work out the details so that the system is designed to meet the specific requirement of the hospital. Post implementation, there may also be subsequent customizations and enhancements which will be carried in consultation with the Hospital by vendor.
- 7.3. A unique ID will be generated for each patient. Data retrieval of the patient will be based on this unique ID.

**8. IMPLEMENTATION OF AWARDED PROJECT/TIME FRAME:**

- 8.1. Software development: one month from the date of award of order
- i. Development of software — 21 days after award
  - ii. Resubmission of software after incorporating suggestions: within next 7 days
  - iii. LAN and Hardware installation: one month from the date of award of order.
- 8.2. No payment shall be made to the vender during development phase.

**9. OPD Registration**

- 9.1. The objective is to keep the patient waiting time below 10 minutes per patient for OPD registration.
- 9.2. For OPD the average approximate processing time with the patient on the counter shall be appx. 45 seconds. New OPD registration slip should

include the following details or the details approved by Medical Superintendent, RTRMH:

- Name, Age, Sex, Address(area/locality), Father/Mother Name
- Special Status :
  - DGEHS beneficiary..... DGEHS Card No.....
  - Sr Citizen
  - Disabled
  - Referral
  - BPL Patients
  - GRC/Stree Shakti Patients
  - MLC
  - Any other special category
- Date and Time of First Registration, Department, Room No.

9.3. The OPD registration slip shall also mention the registration Number, Room no and the queue number for that room. The format of stationary is given in Annexure XIII. The final modalities /format of registration as decided by the hospital concerned shall be final.

9.4. Follow up/Revisits - For follow up patient revisits to the hospital OPD on another date, relevant details will be entered in the database and fresh date will be put on the old card by stamp. Unique registration number given per patient shall remain same and should be traceable with the details of the patient and registration number. Revisit continuation slip shall also be generated and printed. Continuation sheet with all relevant details including date of last visit and diagnosis printed shall be given if required.

9.5. The modalities/format of registration as decided by the hospital concerned shall be final.

9.6. There should be provision in the software for accessing the patient data from any other hospital software applications such as investigations.

9.7. Change of department and Cross Referrals - Any patient may require one or more consultant's opinion from different dept (Cross referrals). In case of referrals from one specialty to another the referred department will be endorsed on the card and entered in the patient record from the OPD/Emergency counter foil or when the patient presents at the counter.

9.8. Clinical Information including provisional and final diagnosis will be captured for patients as per ICD-IO standards.

#### 10. Emergency/Admission Registration

10.1. The details shall ordinarily be same as for the OPD registration. However, the counters shall work on round the clock in 8 hours shifts.

10.2. Patient demographic data as above, and Registration number, MLC Number, Specialty Dept, Unit, Name of Head of Unit/ Room In Charge (wherever applicable), Mobile Number, Room number, Token Number, Expected Service Time, Current date and Time will be printed on each registration card.

10.3. Clinical Information including provisional and final diagnosis will be captured for patients as per ICD-IO standards. Barcode scanner and printer shall be available at the emergency registration counter for management of emergency laboratory samples and reports as described under laboratory workflow.

10.4. The format of stationary is given in Annexure XIII. The final modalities /format of registration as decided by the hospital concerned shall be final.

#### 11. Indoor Registrations:



- 11.1. The details as per hospital format shall be recorded and an admission slip shall be issued. The counter shall work on round the clock. The format of stationary is given in Annexure XIII. The final modalities /format of registration as decided by the hospital shall be final.
- 11.2. Admission registration card of the patient, who is already registered for OPD/ Accidents and Emergency, will be made on pre-printed (Bilingual - in Hindi and English) carbonized duplicate stationary by entering the remaining data in the patient's record (e.g. complete address, attendants name and telephone number, ward name and number and location etc) as per the sample card text and format. (Admission Sheet sample as per annexure XIII).
- 11.3. The patient will retain the unique id number and a new admission number will be generated / allocated. For subsequent admissions of the same patient, the patient record / data will be updated indicating the segregated subsequent admission data under unique patient ID.
- 11.4. All admission registrations will be done only after due authorization of the unit in charge or his/her authorized doctor. The authorization slips issued by the doctors admitting the patients will be maintained separately for verification.
- 11.5. **Issue of Attendance Pass:** One Visitors pass (and one attendance pass with different colour codes) shall be generated, printed and issued at time of admission to family member of the admitted patient. Validity of the attendant pass will be till discharge. Form & design of pass shall be similar to standard conference badge with at least 200GSM paper.
12. Validity of cards and Lost cards:
  - 12.1. OPD Card will be valid from the date of First registration for the period of the 1 (one) year. Admission and Emergency card will be valid for one visit/admission only. Provision of OPD, Emergency and admissions of all visits of the patients should be available in real time.
  - 12.2. Lost cards - For the patients reporting loss of registration card, the patient data will be searched using the search criteria and a new registration card will be printed.
13. Integration of all proposed services (software modules): All the components of the services as per scope of work shall be integrated.
14. Analysis of data and Generation of Reports : The system should be capable of generating the following daily / monthly / annual reports as given below:
  - 14.1. Daily Reports (to be submitted by 10.00 AM of succeeding working day to the MS/authorised officer)
    - a) Report for OPD for Age, Sex (M-F-Child), wise compiled morbidity report as per ICD 10 and total Number of patients
    - b) Department /Room wise patients  
**DepttRoom No. Patients**
    - c) Shift wise and Daily for Casualty and Indoor (ward Wise)  
**WardRegistration**
    - d) Communicable cases disease Report as under IDSP (list of disease to be provided by the hospital concerned)  
**Disease CodeDeptt/ward No of cases**
    - e) Line listing of notifiable disease cases (list of disease to be provided by the hospital concerned)  
**Diagnosis NameAge Sex Address**
    - f) BPL referral Report
    - g) Cross Referral Report

- h) No of patients advised admission — Deptt wise
  - i) No of individual samples registered and tests done in laboratory /Blood Bank
  - j) Birth and Death Registration report for submission /transmission to local bodies
- 14.2. Weekly Reports (to be submitted by on first working day of the succeeding week to the MS/authorised officer)  
Weekly Compiled Reports as under 14.1 above for the Week starting Monday
- 14.3. Monthly Reports (to be submitted by 3rd working day of the succeeding month to the MS/authorised officer)
- i. Compiled Reports as under 14.1 above for the month
  - ii. Age, Sex, (M-F-C)wise compiled morbidity report as per ICD 10
  - iii. Communicable cases disease Report as per CBHI format
  - iv. NonCommunicable cases disease Report as per CBHI format (list of disease to be provided by the hospital concerned)
- | DiseaseCode                            | Deptt/ward | No of cases |
|--|------------|-------------|
| v. Age Sex Locality wise               |            |             |
| vi. Age Sex wise Cross referral Report |            |             |
| vii. Age Sex wise Special OPD reports  |            |             |
- 14.4 Annual Reports
- a. Compiled Reports as under 14.1 above for the year
  - b. Age Sex (M-F-C)wise compiled morbidity report as per ICD 10
- 14.5. Any other report as decided by the MS of RTRMH
15. Inbuilt Monitoring system in Software
- 15.1. The software developed/deployed should have inbuilt system of monitoring the performance of the counters with software driven documents and verifiable by third party or hospital administration.
- 15.2. The software should also have provision to check the number of slips issued at any counter during a particular interval of time to keep a track if inefficiency and to pick up blank minutes.
- 16. Technical Specs of the Paper/Slips**
- 16.1. OPD/Casualty/IPD Slip :
- i. Preprinted A4 size, At least 120 GSM, with 1 inch width detachable portion to record diagnosis
  - ii. Printing Single Colour
  - iii. Patient details to be printed in Laser Print
  - iv. The format of stationary is given in Annexure XIII. The final modalities /format of registration as decided by the hospital concerned shall be final.
- 16.2. Technical Specs of the Reports as given in clause 14.1 above
- i. A4 size, At least 70 GSM
  - ii. Printing Single Colour Laser
- 17. MANPOWER :**
- 17.1. The IT assistant/DEO must be matriculate and have minimum six month course in computers.
- 17.2. One supervisor, Graduate with at least 5 years IT experience, for trouble shooting / Help Desk 24x7 managed by the technical staff.
18. Hospital Information Management System is under the process of

implementation in Delhi Govt Hospitals. As and when HIMs is implemented in the hospital, the services may be modified as per government directives.

**19. HARDWARE (PCs, Server, Printers, LAN, UPS etc), SYSTEM SOFTWARE, NETWORKING):**

- 19.1. The Vendor shall provide the complete hardware i.e. PCs/Laptops, Servers, printers, UPS, networking equipment, system software and the application software etc at his own cost.
- 19.2. The Vendor will deploy sufficient Hardware to take care of proposed system requirements including service time/waiting time/standards as defined. Hardware and system software installed should be of standard quality and configuration with guarantee / warranty for the period of contract. The systems deployed should be brand new including computers and printers with latest configuration.
- 19.3. Desktop/Laptop Configuration - Hardware should be capable enough to support application/system software with the operational load and requirements (Suggested minimum hardware - Intel i3 Processor based PC/Laptop, latest Windows OS/ Linux & other required application software.
- 19.4. Laser Jet Printer - The printer speed should be capable of handling the operational load. Print quality should be as per the industry standards and readable at all the times. Dot matrix printers shall not be permissible.
- 19.5. UPS - The UPS should be able to provide the power back for each individual PC, Servers, networking equipments and printers for a minimum for 30 minutes.
- 19.6. Server
  - i. Main server Hardware should be capable enough to support application/system Software and database with the operational load and requirements. Suggested Hardware (minimum) Xeon dual core or above 4/ 8 GB RAM
  - ii. SATA hard drives with mirroring or RAID, Windows server OR Linux application software, Anti virus
  - iii. There should be an additional standby server to avoid operational loss due to Main Server Breakdown. Additional printers & PC at least 15% of total requirement should be available as standby in case of breakdown of any PC or printer.
  - iv. Vendor shall be allowed to use its cloud services rather than having onsite servers.
- 19.7. Third Party software - The Vendor shall take care of License required for 3rd party software if any used in the proposed system at their own cost.
- 19.8. Up gradation - In case any new technology is introduced during the phase of installation and contract period same must be incorporated (if required for improvements of service quality delivery) at the same price, without any costs to the Hospital, within the same terms of contract. Upgrades of all the existing software during the contract period should be provided by the Vendor and same should be at the same cost.
- 19.9. Networking (components, configuration and fittings) and Management: The networking of the buildings shall be done as per networking standards to the entire satisfaction of the Hospital authorities. Existing LAN system installed during previous computerization process may be checked for functionality and may be utilized. Further extension

- /repairs/modifications should be done at vendor's cost. Vendor is required to conduct the survey and submit the detailed networking plan specifying the route, depth, and facilities etc to be created, for the approval. Proposed work shall be taken up by the Vendor, strictly in accordance with the layout plan submitted & approvals of works thereof.
- 19.10. Network shall be managed by the trained manpower of the Vendor as per the networking protocols and industry standards thereof.
- 19.11. The system should provide connectivity for user/password access to retrieve patient reports through computers on existing network of the hospitals.
- 19.12. System Administration should support a formalized Systems Administration for the management of all components specifically
- Backups/Restores
  - Anti-virus
  - Software upgrades
  - Network management
  - Database administration
  - User/ Application / Database/ Network Security issues
  - Data processing and management control
  - Trouble shooting
- 19.13. No equipment shall be removed from the premises of the hospital by the company without the concurrence of the hospital authority including for purpose of replacement of the spares etc.
- 19.14. The vendor shall provide the complete hardware, system software and the application software.
- 19.15. The vendor shall provide/arrange for the stationary after getting them printed and consumable items required. Printing formats will be provided by the hospital.
- 19.16. The vendor shall provide trained manpower for each shift.
- 19.17. Number of computers and manpower will be such so as to keep waiting time below 10 minutes per patient.
- 19.18. The vendor shall ensure secure Data and backup of the same always available on demand. Backup should be available in the Hard disk as well as on CD.
- 19.19. The safe custody of the equipment provided by the vender in the hospital shall be the responsibility of the vendor.
- 19.20. After the contract period is over the vender can remove hardware, software developed and power back up system installed by the vender. However database generated will be the property of the Hospital and vender shall handover the same in good condition to the hospital authorities in usable form.
- 19.21. The vender shall take care of License required for 3<sup>rd</sup> party software used if in his system at his own cost.
- 19.22. The software developed shall be web based and Administerial control of the system and application software shall be transferred to Medical Superintendent, RTRMH
- 19.23. In case any new technology is introduced during the phase of installation the same must be incorporated at the same price within the same terms of contract.

## 20. Application Software

20.1. Vendor should develop web based user friendly application software using technologies offered by Microsoft / Oracle/ Linux/ Java. Data base should be Microsoft SQL server / Oracle data base / My SQL or any other industry Standard data base.

20.2. General Functionality / specification of the Software /System:

The application software shall

- i. Ensure the accessibility of patient data by all authorized users in the healthcare system
- ii. Provide access to external and internal, data banks only to the authorized person
- iii. Be capable of capturing data from different places and make it available at a single place for data capturing, viewing, modifications, report generation, investigation, research purposes updating of existing patient details subject to authorization etc.
- iv. System should allow searching for a particular patient by using a variety of alternative selection criteria such as complete or partial Name, Date of birth, Admitting department, Admitting ward and floor. Physician in charge, Date of admission or any combination of the above or other fields maintained in databases
- v. Have no limitation as to the number of users it is able to support concurrently.
- vi. Provide on-line enquiry facilities about information held in the system, to be available 24 hours a day/365 days a year.
- vii. Allow up to 25% workload increase per annum and the projected workload as given elsewhere in the document.
- viii. Support an automatic log-off after a certain time period e.g. 2 minutes or system administrator configurable time period.
- ix. The required system shall be a ready-made package with minimal modifications and is expected to meet the requirements of the Document
- x. Be based on a friendly graphical user interface (GUI).
- xi. Support auditing (Audit tracking in terms of User IDs, Date and time of last updates and the last changes)
- xii. Provide constant monitoring and troubleshooting of security system function
- xiii. Validation of the patient registration data in the software should be as per the print outs generated
- xiv. System should support bar coding driven entry / ordering / delivery system for patient identification, labelling, tracking and entering data whenever required & Print bar codes whenever and where needed. Software should be able to pick up repeat entries of same patient
- xv. System should be capable of making full use of the new technologies of databases and the new communication possibilities (e.g. intranet and internet technologies) & be capable of stepwise evolution over time as new software modules are added to enable the storing of the specialized information generated by the various distinct specialties in hospitals until the complete EMR concept is achieved.
- xvi. **Standards:**
  - a. Should be compatible with industry standards
  - b. Comply with communication protocols and standards widely accepted in the industry
  - c. Support of XML for export and import

- xvii. **Integration** : The software should
  - a. Be capable of integration with other systems through stable and public interfaces,
  - b. Allow for the future introduction of the subsystems or modules
- 20.3. Openness: The software should allow any subsystem or module to be replaced or added independently of the other subsystems. In order to ensure the use of open standards for the interfaces of the integration mechanism the providers are required to include a statement of conformance with the adopted open standards.
- 20.4. **Adaptability** : The system should
  - a. Exploit its Relational Database Management System (RDBMS) capability.
  - b. Be capable of adapting to future changes in procedure, workload, volume of data input or volume of data storage or organizational structure.
  - c. The Coding of Diseases/Operations/Procedures will have the following main characteristics:
    - (i) Support a classification system widely accepted internationally such as ICD-IO.
    - (ii) Ensure that the use of such classification systems will be able to facilitate clinical care and allow statistical analysis and transmission of information.
    - (iii) Provide the option of appending an unlimited number of new codes to the system
    - (iv) Be regularly updated with regard to the codification system whenever a new update on ICD is released by WHO / concerned agency.
- 20.5. **Development, Deployment, Customizations and Enhancements**
  - a. System Requirement Specifications / User Requirement Definitions should be signed off by the authorized representative of Hospital before starting of the development of application.
  - b. The software will be customized and enhanced as per the requirements of the Hospital after the implementation.
  - c. As per the future requirement, there may be a remote registration centers as well. These centers should also be able to connect to the application and database. The application will be extendable to a WEB based application with remote access through secured web and registration.
- 20.6. Acceptance Testing:
  - a. An acceptance testing procedure, to be worked out jointly by the Vendor and the Hospital, to test individual components and successful integration of all components shall be followed.
  - b. Acceptance testing should then be carried out as per the signed off system requirement specification and should be signed off by authorized representative of Hospital before deployment of the application.
  - c. Hospital shall issue the acceptance certificate on successful commissioning of various component of the project viz. Hardware, software, Local Area Network, Cabling, Manpower deployment. Cost of the testing procedure will be borne by the Vendor.
  - d. The subject approval is also governed and binding on Vendor of the written stipulation/ terms and conditions defined and based on this clear understanding & others not explicitly. It would be required in executing the subject scope of work, to liaise with the authorized representative of the Hospital.

- e. Administrable control/ rights: The software developed shall be web based and Administrative rights of the system and application software shall be transferred to Medical Superintendent of the RTRMH. For this purpose a computer in the office of Medical Superintendent or any other location shall also be networked with the system used for patient's registration.
21. Administrable control of the software shall be with the Medical Superintendent of RTRMH. For this purpose PC in the office of Medical Superintendent shall also be networked with the system used for OPD registration.
22. RESPONSE TIME: The Software implemented must provide for the response time less than 2 seconds for the information stored and less than 5 seconds for queries.
23. UPTIME: The firm will provide 99% uptime for the servers and 95% up time for rest of the system & Printers during period of contract. The penalty to be imposed for uptime less than the specified uptime will be deducted from the security deposit.
24. WARRANTY AND MAINTENANCE BACKUP:  
Service support: The firm should have well established office and service centers supported by qualified software and hardware maintenance professionals for the maintenance of the hardware and software supplied by them. It is sole responsibility of the vendor to keep servers up 99% of the time and rest of system at 95% of the time at their own cost. The vendor should stock some of essential items at the site for keeping system up as mentioned above
25. DATA MANAGEMENT/ CONFIDENTIALITY/ NONDISCLOSURE OF INFORMATION:
  - 25.1. The bidder shall :
    - i. Hold the generated Information in strict confidence and take all reasonable precautions to protect such Information
    - ii. Not disclose any such Information or any information derived therefrom to any third person or agency
    - iii. Not make any use whatsoever at any time of such Information except to internally for development of software /reports
    - iv. Not retain any such information on conclusion or termination of the contract and will also remove all hard copy and softcopy information from its records/storage.
  - 25.2. Database Management
    - i. Data entry and capture: The system should allow the use of a wide variety of devices for the capture or access of data such as PC's, notebooks.
    - ii. Data Storage : The system should:
      - Be capable of well-organized and indexed storage of information to allow efficient and reliable data retrieval for clinicians, researchers and other authorized health professionals,
      - Support secure data archiving.
    - iii. **Data Backup** :
      - The system should provide easy and reliable procedures for backup operations to be carried out at regular intervals
      - The Vendor shall ensure secure Data and backup of the same always available on demand. Backup should reside in the Hard disk as well as on reliable storage media (provided by the Vendor)
      - The Vendor will provide the backup (daily progressive and weekly full) of data and maintain up to date database with application at IT Unit /

Specified Location

- Restore should be available at any time
- Testing of data restores should be done at regular intervals and reports shall be made available to the Hospital.

iv. **Data Access:** The system should provide a simple and effective way for health care personnel to retrieve, view and print data from workstations connected with the system subject to authorization, and allow clinicians search for and view chronological records of results, according to customizable search criteria.

v. **Data Security/Data loss, theft/Data integrity**

- a. Data security and Integrity should be maintained by the Vendor by taking all suitable measures. It will include the necessary mechanisms for safeguarding the continuous availability, confidentiality and integrity of the data stored in the system. Privacy & confidentiality of Patient I Hospital data shall be maintained at all costs as under law.
- b. Vendor or any of its sub parties or Personnel shall not use, share, or distribute any information collected, retained.
- c. Data generated will be sole property of the hospital /H&FW department.
- d. Ensure that before connecting to the system the user's identity, authority level and security profile are verified.
- e. Be capable of preventing the use of unique identification numbers for any other purpose other than the provision of health care services, Be able to detect and report any breaches of security.
- f. Allow the application of consent by multiple authorized users for the opening and processing of certain files containing identification fields and sensitive personal data that can possibly be matched with external files.
- g. Support a single password to access different modules and levels of data.
- h. Use audit trails to track, all activity of data editing and editing person at all times in order to minimize the possibility of undetectable alteration of data, The data will be duly checked and verified by employing mutually agreed standard procedures, preferably by generating printout and cross-checked with the admission card. All the incomplete entries / incorrect entries/ errors in data will be duly completed / corrected by the authorized person within well-placed authorization mechanism with audit trail.
- i. The data should be exportable to Microsoft Excel and Microsoft access on demand.
- j. Data backup of the hospital data captured through the System must be stored in the onsite backup server of similar (or higher) configuration as main server and external storage device outside the network system and provided to hospital authorities. The updating frequency of the backup may be decided with MS, RTRMH.

(Signature of Tenderer)

Name:

Designation:

Address:

Phone No.(O):

Dated:



**COMPUTERISATION OF OPD, CASUALTY AND INDOOR PATIENT  
REGISTRATION SERVICES AT RTRMH**

**METHOD OF AWARD OF WORK**

1. Technical bids of only those bidders who prequalify as per eligibility conditions and have submitted the EMD shall be evaluated technically.
2. The price bids of only those bidders who qualify technically shall be opened.
3. The bids will be evaluated as per the provisions of GFR 2017 and LI of the opened bids shall be offered the letter of acceptance of tender.
4. All successful accepted bidders will have to submit the acceptance of offer along with performance Guarantee/Security of 10% of the contract value valid for a period equal to 60 days beyond the total contractual liabilities within 7 day of such intimation after which the EMD shall be returned.

**COMPUTERISATION OF OPD, CASUALTY AND INDOOR PATIENT  
REGISTRATION SERVICES IN RTRMH**

Check list for Bid Security (To be submitted offline)

	Bid Security (Earnest Money Deposit) for an amount of as per clause 8.1.4, in form of Fixed Deposit Receipt /Bank Guarantee from a commercial bank	Yes/No
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**COMPUTERISATION OF OPD, CASUALTY AND INDOOR PATIENT  
REGISTRATION SERVICES IN RTRMH**

**CHECK LIST FOR SUBMISSION OF ONLINE BID (SCANNED LEGIBLE  
PHOTOCOPIES OF AUTHENTICATED DOCUMENTS (WITH  
SIGNATURES AND COMPANY SEAL) TO BE SUBMITTED:**

S No	Document	Uploaded
1.	Scanned copy of Bid Security (Earnest Money Deposit for an amount as per 8.1.4 of Instruction to bidders	Yes/No
2.	Self attested one recent passport size photograph(s) of the authorized person(s) pasted on duly filled up Annexure I	Yes/No
3.	Self attested copy of the bidding entity PAN No. and Income tax return for last three Financial years (2014-15, 2015-16, 2016-17)	Yes/No
4.	Self attested copy of the bidding entity GST Reg. Number	Yes/No
5.	Self attested copy of valid Provident Fund Registration Number of the bidding entity	Yes/No
6.	Self attested copy of valid ESI Registration Number of the bidding entity	Yes/No
7.	Self attested copy of valid Licence and Number of the bidding entity under Contract Labour Act and under any other Acts/Rules	Yes/No
8.	Proof of experience as stated in Clause 2.4.1 and 2.4.5 of Instruction to bidders supported by documents from the concerned organizations;	Yes/No
9.	Project completion certificate or Phase completion certificates with satisfactory performance certificates.	Yes/No
10.	Copy of ISO 9001:2000 or ISO 2001:2015 for the firm(s)	Yes/No
11.	Proof of Average Annual turnover as stated in Clause 2.4.6 of Instruction to bidders supported by audited Balance Sheet	Yes/No
12.	Copy of the certificate from the statutory auditor or CA in fulfilment of the eligibility criteria mentioned in clause 2.6 of Instruction to bidders	Yes/No
13.	Memoranda of association and certificate of registration in case of partnership, society, company or consortium, as per clause 3.3 of Instruction to bidders	Yes/No
14.	Duly filled and signed Annexures-IV	Yes/No
15.	Duly filled and signed Annexures- V	Yes/No
16.	Duly filled and signed Annexures- VI	
17.	Duly filled and signed Annexures- VII.	Yes/No
18.	Technical proposal (Technical details of the project to proposed configuration of hardware, platform, software design, Database etc.	Yes/No
19.	Scanned copies of tender document and addenda/corrigenda	Yes/No
20.	Any other document(s).....	Yes/No

[FORMAT OF UNDERTAKING REGARDING ACCEPTANCE OF TENDER  
TERMS AND CONDITIONS ON Rs.100/- Rs NOINJUDICIAL  
STAMP PAPER]

To  
The M.S.  
RTRMH

Govt. of NCT of Delhi,  
New Delhi.

Reference: Computerisation of OPD, Casualty and Indoor Patient Registration Services  
in RTRMH

Sir

1. I.....,S/O/D/O /W/O..... R/O..... am fully and lawfully authorised to sign this undertaking on behalf of the bidders .....(Name of the firm, Regd. Address). ....in regard of the tender for Computerisation of OPD, Casualty and Indoor Patient Registration Services at RTRMH, Jaffarpur, new Delhi.
2. We.....  
(Name of Firm) agree to abide by all the terms & conditions as mentioned in tender document.
3. All tender documents are complete in all respect and have been duly signed.
4. We hereby undertake to we will ensue the employee engaged will be paid at such rates which are compliant to the labour laws about minimum wages, EPF, ESI, bonus etc.
5. We have enclosed Earnest Money Deposit of Rs..... only (Rupees ..... only) in form of FDR/Bank Guarantee no.....

of..... (Name of Banker) in favour of Medical Superintendent, Rao  
Tula Ram Memorial Hospital, Jaffarpur, New Delhi payable at New Delhi.

(Signature of Authorised Signatory)

With rubber stamp of the bidder

[FORMAT OF UNDERTAKING REGARDING NO CRIMINAL  
LIABILITY  
ON Rs.100/- NONJUDICIAL STAMP PAPER]

Computerisation of OPD, Casualty, Indoor Patient Registration Services in RTRMH

UNDERTAKING

1. I.....,S/o/D/O TW/O.... R/O..... am fully and lawfully authorised to sign this undertaking on behalf of the bidders (Name of the firm, Regd. Address) . in regard of the tender for Computerisation of OPD, Casualty and Indoor Patient Registration Services.
2. I hereby submit that the bidders or any of its directors/proprietors/partners have never been blacklisted by any Government agency and there is no Anticorruption/CBI case pending against the bidding firm(s) or its directors.
3. I hereby submit that the bidders or any of its directors/proprietors/partners have never been convicted in court of law .

(Signature of Authorised Signatory)  
With rubber stamp of the bidder

**COMPUTERISATION OF OPD, CASUALTY AND INDOOR  
PATIENT  
REGISTRATION SERVICES**

**FORMAT FOR PRICE BID**

(To be submitted online on e-tender portal only in prescribed online form)

SNo	Item	Rate exclusive of all Taxes in INR (in figure)	Rate exclusive of all Taxes in INR (in word)
1	Minimum wages for skilled worker/ Counter per 8 hour shift (manpower cost)	Rs. 17659/-	Rupees Seventeen Thousand Six Hundred Fifty Nine
2	Administrative Cost including Cost of Supervisor, Cost of relieving staff, Hardware, System Software, Networking, Stationary, Material etc. per counter per 8 hour shift per month		

**(Note: Bidder is required to quote against S. No. 2 only)**

**The evaluation criteria for financial bids:-**

The bids will be evaluated on the basis of **Administrative Charges at S. No. 2** provided above. The contract will ordinarily be awarded to the lowest bidder L1 in case there is tie between L1 (i.e. there are more than one bidder quoting the same L1 Price), the bidder with higher average annual turnover will be declared the successful bidder and the contract will be awarded to that bidder. In case, the average annual turnover also same the final selection will be done by draw of lots in presence of the bidders/bidder's representatives who chose to be present.

Note :-

- The bidders are advised to factor in the total cost for providing uniform & liveries, administrative and supervisory cost, cost of computer / stationery, Biometric Attendance System etc for the validity of the contract (including extension if any) in this hospital. So, the bidders are advised to quote the rates accordingly.
- The quoted price in S. No. 2 of Price Bid should not be in any case be less than 7.5% of the total cost per counter per shift per month as mention in S. No. 1 in Price Bid. Any rates quoted below this will be summarily rejected and no correspondence will be entertained in this regard.
- The amount has to be quoted in INR [whole rupees]. The rates quoted is paisa / paise will not be considered for evaluation of L1 bid hence, the bidder have to quote the rates in S.No. 2 in whole rupees only.
- This quoted rates mention at S. No.2 will not be changed during the validity of the contract.
- The rates of minimum wages whenever revised, will be enforced as per notification/orders of the Labour Department / Government of Delhi.
- The rates quoted at S. No. 2 of Price Bid should be exclusive of GST.
- The manpower cost component as at Sr. no. 1 will be reimbursed as on actual.
- Manpower cost per person per month

The contractor will be reimbursed expenditure towards costs of personnel at following rates.

S.No.	Description	Rate per person per month as per Minimum Wages Act as on date
1	Minimum Wages (skilled)	Rs.16858/-
2	EPF (including EDLI)	NIL or as applicable
3	ESI	Rs. 801/-
4	SUM TOTAL of (1+2+3)	Rs.17,659/-

9. Expenditure towards Bonus will be reimbursed if applicable.
10. Reimbursement for the relieving staff, if any, against weekly holidays shall be included in the administrative cost.
11. In addition to above, the GST as applicable shall be reimbursed to the Contractor. Bidder should carefully note that the GST is not to be included in the Financial Bid.
12. The cost towards supervision is to be included by the bidder in Supervisory cost in Sl. No. 2 in the table above.
13. No separate payment shall be made towards supervisory costs as they form part of the administrative cost quoted.
14. The number of counters may be increased or decreased as per requirement of the hospital and cost may be reimbursed on pro-rata basis.

## MODEL BANK GUARANTEE FORMAT FOR PERFORMANCE SECURITY

To  
 Medical Superintendent  
 Rao Tula Ram Memorial Hospital  
 Jaffarpur, New Delhi

WHEREAS .....  
 (name and address of the vendor) (hereinafter called "the supplier") has undertaken, in  
 pursuance of contract no... .. dated ..... to provide the establish and run the  
 Computerised OPD, Casualty and Indoor Patient registration services at  
 RTRMH, Jaffarpur, New Delhi (including its attached Polyclinic) (herein after called  
 "the contract").

AND WHEREAS it has been stipulated by you in the said contract that the vendor shall  
 furnish you with a bank guarantee by a commercial bank recognized by you for the sum  
 specified therein as security for compliance with its obligations in accordance with the  
 contract;

AND WHEREAS we have agreed to give the supplier such a bank guarantee;

NOW THEREFORE we hereby affirm that we are guarantors and responsible to you, on  
 behalf of the supplier, up to a total of Rs

.....  
 ..... (amount of the guarantee in words and figures), and we undertake to  
 pay you, upon your first written demand declaring the supplier to be in default under the  
 contract and without cavil or argument, any sum or sums within the limits of (amount of  
 guarantee) as aforesaid, without your needing to prove or to show grounds or reasons for  
 your demand or the sum specified therein.

We hereby waive the necessity of your demanding the said debt from the supplier before  
 presenting us with the demand.

We further agree that no change or addition to or other modification of the terms of the contract to be  
 performed thereunder or of any of the contract documents which may be made between you and the  
 supplier shall in any way release us from any liability under this guarantee and we hereby waive notice of  
 any such change, addition or modification.

This guarantee shall be valid until the ... day of 20.....

(Signature of the authorized officer of the Bank)

Name and designation of the officer

Seal, name & address of the Bank and address of the Branch



(to be executed on a non-judicial stamp paper of Rs. 100/-)

INDEMNITY BOND

1. This Indemnity Bond is executed on this.....day of..... by Shri..... s/o Shri..... resident of in favour of M.S., RTRMH, Govt of NCT of Delhi.
2. The executant is the Proprietor/Partner/Director of M/S \_\_\_\_\_ situated at \_\_\_\_\_ and has submitted bids to the M.S., RTRMH, Govt of NCT of Delhi for the tender on 'Computerisation of OPD, Casualty and Indoor Patient Registration services '.
3. The executant undertakes to indemnify the Rao Tula Ram Memorial Hospital (RTRMH), Govt of NCT of Delhi, from any injury, loss or damage caused to or suffered by any person or property, arising out of or relating to provision of 'Computerisation of OPD , Casualty and Indoor Patient registration and the consequential claim or claims shall be borne by the executant who hereby indemnifies and safeguards the RTRMH, Govt. of NCT of Delhi, in respect of any of such claim or claims.

EXECUTANT

## MODEL BANK GUARANTEE FORMAT FOR BID SECURITY

To  
 Medical Superintendent  
 Rao Tula Ram Memorial Hospital  
 Jaffarpur, New Delhi

WHEREAS.....

(name and address of the bidder) (hereinafter called "the supplier") has undertaken to bid for the tender no. dated . to provide 'Computerisation of OPD, casualty and indoor patient registration services in RTRMH, Jaffarpur, New Delhi (including its attached Polyclinic) (herein after called "the contract").

AND WHEREAS it has been stipulated by you in the said contract that the bidder shall furnish you with a bid security in the form of bank guarantee by a commercial bank recognized by you for the sum specified therein as security for compliance with its obligations in accordance with the tender terms and conditions;

AND WHEREAS we have agreed to give the supplier such a bank guarantee;

NOW THEREFORE we hereby affirm that we are guarantors and responsible to you, on behalf of the supplier, up to a total of Rs \_\_\_\_\_ (Rupees only), and we undertake to pay you, upon your first written demand declaring the supplier to be in default under the tender terms and conditions and without cavil or argument, any sum or sums within the limits of (amount of guarantee) as aforesaid, without your needing to prove or to show grounds or reasons for your demand or the sum specified therein.

We hereby waive the necessity of your demanding the said debt from the supplier before presenting us with the demand.

We further agree that no change or addition to or other modification of the terms of the contract to be performed thereunder or of any of the tender documents which may be made between you and the supplier shall in any way release us from any liability under this guarantee and we hereby waive notice of any such change, addition or modification.

This guarantee shall be valid until the . . . day of ....., 20

(Signature of the authorized officer of the Bank)

Name and designation of the officer

Seal, name & address of the Bank and address of the Branch

## AGREEMENT

This contract agreement made on the [-----] day of —  
 ----] [-----]

## BETWEEN

- (1) M.S., Rao Tula Ram Memorial Hospital, Government of NCT of Delhi, (hereinafter called "the Procurer"),  
 and  
 a. [insert name of Service Provider], a corporation incorporated under the laws of [insert: country of  
 Service Provider] and having its principal place of business at [insert: address of Service  
 Provider] (hereinafter called "the Service Provider")

Whereas the Procurer invited bids for certain services, viz., 'Computerisation of OPD, casualty and indoor patient registration services ' and has accepted a bid by the Service Provider for the supply of those Goods and Services in the sum of [insert Contract Price in words and figures, expressed in the Contract currency (ies) ] (hereinafter called "the Contract Price").

## NOW THIS AGREEMENT WITNESSETH AS FOLLOWS:

1. In this Agreement words and expressions shall have the same meanings as are respectively assigned to them in the Conditions of Contract referred to.
2. The following documents shall constitute the Contract between the Procurer and the Service Provider, and each shall be read and construed as an integral part of the Contract:
  - (a) This Contract Agreement
  - (b) Tender Document No.
  - (c) The Service Provider's Bid and original Price Schedules
  - (d) The Procurer's Notification of Award
  - (e) [Add here any other documents(s)]
3. The Contract shall prevail over all other Contract documents. In the event of any discrepancy or inconsistency within the Contract documents, then the documents shall prevail in the order listed above.
4. In consideration of the payments to be made by the Procurer to the Service Provider as hereinafter mentioned, the Service Provider hereby covenants with the Procurer to provide the Services and to remedy defects therein in conformity in all respects with the provisions of the Contract.
5. The Procurer hereby covenants to pay the Service Provider in consideration of the provision of the Services and the remedying of defects therein, the Contract Price or such other sum as may become payable under the provisions of the Contract at the times and in the manner prescribed by the Contract.

IN WITNESS whereof the parties hereto have caused this Agreement to be executed in accordance with the laws of [insert the name of the Contract governing law country] on the day, month and year indicated above.

For and on behalf of the Procurer

Signed: [-----]

In the capacity of [insert title or other appropriate designation]

In the presence of [insert identification of official witness]

For and on behalf of the Service Provider Signed: [insert signature of authorized representative(s) of the Service Provider]

In the capacity of [insert title or other appropriate designation]

In the presence of [insert identification of official witness]

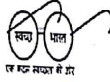
## FORMATS OF STATIONARY (All formats to Bilingual in Hindi and English)

OUTPATIENT REGISTRATION CARD COUNTER FOIL			
OPD Regn No :	Diagnosis.....	ICD Code :	Name :

OPD CARD			
Rao Tula Ram Memorial Hospital Govt. Of NCT, Jaffarpur Kalan, New Delhi, DL 110073			
OPD Regn No : Date / Time :	Deptt. :	Room No. :	Queue Token No. :
Name :	Age :	Sex:	Religion :
Address :	Category : General/ BPL/EWS/ DGEHS/ Sr Citizen/Others		
Provisional Diagnosis :		Referral to Deptt :	
Date	Investigations	History/Clinical/Findings/Reports	Treatment/Instructions

EMERGENCY REGISTRATION CARD COUNTER FOIL (To be retained by the attending doctor)		
EMERGENCY Regn No :	RTRH2018-000 77683	Diagnosis.....ICD Code :

EMERGENCY/CASUALTY REGISTRATION CARD			
<b>Rao Tula Ram Memorial Hospital</b> Govt. Of NCT,Jaffarpur Kalan, New Delhi, DL 110073 EMERGENCY REGISTRATION CARD			
Emergency Regn No. :	Date / Time : 21/7/2018 / 8 : 32 : 5 AM		MLC/NON MLC :
Name :	Age : 7 / 0 M / 0 D	Sex: Male	Religion :
Fathers/Husbands Name :			
Address :	Category : General/ BPL/ EWS/ DGEHS/ Sr Citizen/Others		
Date	Investigations	History/Clinical Findings	Treatment/Instructions



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21-Jul-18 8:32 AM

<b>Rao Tula Ram Memorial Hospital</b> Govt. Of NCT, Jaffarpur Kalan, New Delhi, DL 110073 <b>ADMISSION SUMMARY</b>							
Name :	Age :	Date Of Birth :	Sex:	Merital Status	Religion :	Ward	Treating Unit
		0 0 0					
Fathers/Husbands Name :						CR NO.:	
Full Address :				Occupation .....	Category : General/ BPL/EWS / DGEHS/ Sr Citizen/ Others.....		
				Family Income.....			
Date/time of admi. 21/7/2018/ 9 : 46 : 16 AM				Date and time of discharge/death		Days of stay	
Contact person in case of emergency(Give name address, relationship)						Telephone Number	
Previous admission(s):Give date and number :							
Provisional diagnosis(to be complete within 24hours of admission)				On admission, patient or qualified person must sign authorization for medical and /or surgical treatment			
Final diagnosis				Code Number .....			
Secondary diagnosis or complications							
Operation/Procedure							
Consultation with .....							
Result: Recovered / Improved / Not Improved / Treated / Examination only / Died / Left against Medical advise / L.W.P							
Cause of Death ..... I have examined and approved this complete medical report on							

House Physician

Registrar/S.R.Resident

Head of the Unit

**AUTHORISATION FOR MEDICAL AND/OR SURICAL TREATMENT**

I hereby authorized the physician or physicians incharge of the case of .....to administer any treatment; or to administer such anesthetics and perform such operation as may be deemed necessary or advisable in the diagnosis and treatment of this patient.

Date.....

Signature

(Nearest Relative)

Relationship to patient

Witness

**STATEMENT REGARDING PERSONAL EFFECTS**

I have been admitted to .....Hospital, Delhi and I have kept no valuable with me.

Date

Signature of patient or responsible person

Relationship to patient

**RELEASE FOR RESPONSIBILITY FOR DISCHARGE**

This is to certify that I .....a patient in Rao Tula Ram Memorial Hospital, Delhi am requesting for against the advice of the attending physician and of the hospital administration. I acknowledge that I have been informed of the risk involved and hereby release the attending physician and the hospital from all responsibility for any ill effects which may result from discharge from the hospital.

Witness

Patient or nearest relative

Witness

Relation ship to patient

Date

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RAO TULA RAM HOSPITAL JAFFAR PUR NEW DELHI -110073

**ATTENDENT PASS**

NAME OF PATIENT..... WARD NO ..... REGD NO..... DOA ..... VALID FOR  
DAYS..... DATE & TIME OF ISSUE..... Authorized Signature

21-Jul-18 9:46 AM