# World Health Partners Request for Quote/Request for Proposal For

Engagement of Private X-ray Centre for TB services for Amritsar, Patiala and Jalandhar districts of Punjab under the Global Fund-supported project "Integrated Pediatric TB and Technology-Enabled Active Case Finding (ACF)" implemented by SAATHII and World Health Partners (WHP).

# RFQ Reference No. WHP/SAATHII/ X-RAY/007/2025

Start Date: May 16, 2025End Date: May 25, 2025

#### 1. Introduction

The Integrated Pediatric TB and Technology-Enabled Active Case Finding (ACF) Project, funded by The Global Fund, is being implemented by SAATHII as Principal Recipient (PR) under the guidance of the Central TB Division (CTD) and SR partners under the guidance of the State TB Office. The key purpose of the project is to provide technical assistance to the National TB Elimination Program (NTEP) in seven states to increase the access and availability of pediatric TB services across all levels of health system in both public and private health sector, and identify new TB cases among key vulnerable populations in 42 selected districts using Al technology enabled Handheld X-ray device.

World Health Partners (WHP) is a non-governmental organization that sets up programs to bring sustainable healthcare within easy access to underserved and vulnerable communities. It innovatively harnesses already available resources more efficiently by using evidence-based management and technological solutions. WHP is best known for its programs focused on Tuberculosis, primary healthcare, family planning, MNCH, and mental health. The organization uses all available resources--both in the public and private sectors-- to ensure that people living in any part of the project area will have access to high-quality treatment.

To support the above-mentioned project, we are inviting quotations for the below mentioned 20 blocks of Punjab:

| Sr. No. | Block    | District                |  |  |
|---------|----------|-------------------------|--|--|
| 1       | Lopoke   |                         |  |  |
| 2       | Manawala |                         |  |  |
| 3       | Ramdass  | Amritsar                |  |  |
| 4       | Tarsikka | (6 blocks)              |  |  |
| 5       | Majitha  |                         |  |  |
| 6       | Verka    |                         |  |  |
| 7       | Sanour   |                         |  |  |
| 8       | Ghanour  | D-4'-1-                 |  |  |
| 9       | Patiala  | Patiala<br>(5 blooks)   |  |  |
| 10      | Samana   | (5 blocks)              |  |  |
| 11      | Nabha    |                         |  |  |
| 12      | Mehatpur | Jalandhar<br>(9 blocks) |  |  |
| 13      | Nurmahal |                         |  |  |
| 14      | Phillaur |                         |  |  |

| 15 | Lohian         |  |
|----|----------------|--|
| 16 | Jalandhar East |  |
| 17 | Bhogpur        |  |
| 18 | Shakoat        |  |
| 19 | Nakodar        |  |
| 20 | Rurka-Kalan    |  |

#### 2. Objective of RFQ

The primary objective of this RFQ is to invite proposals from bidder who can provide digital/handheld X-ray services for the ACF campaign. The aim is to engage the CXR centre to support the early identification of TB among KVP and the symptomatic general population.

# 3. Scope of CXR services provided by private CXR facility

- The project is collaborating with private X-ray partnership centre for Chest X-ray services so as to identify TB and other diseases that the project serves.
- The partnership CXR centre will provide CXR to the person (beneficiary) referred by the project from the community camps, household visits or any other service delivery points. We use the word beneficiary or Key vulnerable populations (KVPs) interchangeably.
- The lab shall conduct CXR and provide electronic CXR reports and digital images.
- Report should be given as per the standard CXR report format. Radiological findings and impressions/conclusions should be specifically mentioned in the report issued as per standard formats suitable for TB detection.
  - CXR radiological reports issued by Qualified radiologists registered with the Medical Council of India (MCI) or equivalent authority. Radiological findings and impressions/conclusions should be specifically mentioned in the report issued as per the standard formats prescribed for TB detection.
  - Conclusions should mention CXR findings suggestive of TB or not suggestive of TB
- Lab shall share electronic CXR digital images and reports of the persons, who underwent CXR, with the project team (by email to the team) who referring to CXR centre within 48 hours from the service delivery.
- Digital X Ray image (printed version) and the CXR report shall be given to the person who undergoes CXR.
- Quality assurance mechanisms, infection control measures, and ongoing calibration and maintenance in place.
- The beneficiary shall be entitled to access CXR services at the designated lab or hospital during designated operational hours.
- Data management, reporting, and confidentiality shall be adhered by the bidder as per government norms.

#### 4. Documentation

Project will send referral slip along with the beneficiary. The beneficiary will carry
referral slip to the partner lab that is issued by any of the project staff, ASHA, CHO,
STS, PHC MO, or other public healthcare personnel.

- Lab must ensure to collect & retain both copies of referral slips from the referred KVP before providing CXR services.
- A separate record containing details/serial number of referrals slip and beneficiary name, contact number, ID card, etc., of each beneficiary shall be maintained at the lab and made available for verification upon request by a competent authority. A signature or thumb impression shall be obtained as proof of service delivery to the beneficiary. This will also have a declaration that no additional cost is charged for taking CXR and issuing report

| Sr.<br>No | Referral slip no. | Date of CXR | Name | Person referred | Contact detail | ID card<br>number | Signature/Thumb impression |
|-----------|-------------------|-------------|------|-----------------|----------------|-------------------|----------------------------|
|           | · •               | referral    |      |                 |                | (Aadhar)          | <u>-</u>                   |
|           |                   | Telellai    |      |                 |                | (Addital)         |                            |

- After completion of each month, private CXR lab must ensure to submit an invoice including tax, having details for the number of CXR services provided during the month.
- This invoice should be sent to WHP by the first week of next month. Invoice must be supported by.
  - Referral slip in original
  - CXR digital film (hard or soft copy)
  - CXR report of each patient (hard or soft copy).
  - The lab should maintain a file with the separate record file (table mentioned above), along with the hard copies of referral slips, and the copy of CXR records for data validation by the project team.

# 5. Eligibility Criteria

- The bidder should have a **digital or handheld CXR machine** for service delivery
- A lab/facility shall have trained radiographers and Qualified radiologists registered with the Medical Council of India (MCI) or equivalent authority
- The lab must maintain all necessary certifications and accreditations required to operate as a diagnostic imaging facility, specifically
  - o **AERB**
  - Local government registration

#### 6. Submission requirement

Interested bidders are requested to submit the following

- Technical Proposal:
  - Working hours of the CXR center
  - o AERB and local government registration
  - o Specification of CXR machine
  - o Per day CXR capacity of the machine in a working hour
- Financial Proposal
  - Per scan cost including tax and report

<sup>\*</sup>Performa attached in Annexure 1 to submit the documents

#### 7. Duration of Contract

- The contract is valid for a brief period of 6 months, till the project team, along with the government, makes arrangements for providing CXR at the community level through a portable X-ray device.
- The extension of the contract will be done based on the project requirements and guidance from the funder and the government.
- The notice period to stop the services is 7 days.
- The above mentioned documentation mechanisms to be ensured.

#### 8. Evaluation Criteria

- Type of machine (Digital/Handheld/Conventional)
- AERB and local government registration
- Capacity to conduct CXR in a day
- Cost of CXR/beneficiary
- Past work experience working with the government in the last 3 years

#### 9. Terms and Conditions

- The procurement unit considers block as a unit.
- The following payment mechanisms will be adhered to. Payment will be done as per the agreed rate contract on the submission of agreed invoice documents.
- The MoU/contract will be terminated based on mutual agreement for the delay in service, quality of service, and non-compliance to registration/certification or delay in payments.
- WHP reserves the right to invite fresh bids with or without amendment of the RFQ at
  any stage or to terminate at any time the entire bidding/selection process without
  any liability or any obligation to any of the Bidders and without assigning any reason
  whatsoever.
- A Bidder shall not have a conflict of interest that affects the bidding process. Any Bidder found to have a Conflict of Interest shall be disqualified.
- All Bidders are required to submit their Bid in accordance with the terms outlined in this RFQ.
- Notwithstanding anything to the contrary contained in this RFQ, the detailed terms specified in the agreement shall have an overriding effect.
- Responses to quotes must be received no later than the date and time indicated on the RFQ.

#### 10. Deadline for submission

- All quotations should be submitted on or before the last date. The last date for submission of quotes is **May 25, 2025**
- All quotations should be submitted with CXR facility stamp and signature
- Quotes can be emailed to <u>purchase@whpindia.org</u> with the subject line "RFQ Reference No. WHP/SAATHII/ X-RAY/007/2025"

If any query and concern, please contact Mr. Ritesh Kumar on mobile: 9560955884 or write us on **ritesh@whpindia.org** 

# Annexure 1.

Kindly provide the quotation in below prescribed format with duly stamp and signature by the bidder.

| Date:                       |
|-----------------------------|
| District:                   |
| Block:                      |
|                             |
| Name of the facility:       |
| Owner of the facility:      |
| Registration in the name of |

Address of the facility

| Sr. | Particulars  | Details   | Submission |
|-----|--|---|------------|
| No. |  |   | status     |
| 1   | Working hours of the CXR center  | In hour   |            |
| 2   | AERB and local government registration   | Attested photocopy                                  |            |
| 3   | Specification of CXR machine   | Handheld/Digital/Conventional                       |            |
| 4   | Per day CXR capacity of the machine in a working hour  | Number  |            |
| 5   | Per CXR cost including tax   | In Rs.  |            |
| 6   | Per CXR report cost including tax  | In Rs.  |            |
| 7   | Total CXR cost including X-<br>ray film and report, including<br>tax   | In Rs.  |            |
| 8   | Highest qualification of radiologist (qualification certificate and registration with MCI or another agency) | Attested qualification and registration certificate |            |