Standard Bidding Document

TENDER FOR HIRING OF THE SERVICES FOR TURNKEY ESTABLISHMENT, INTEGRATION & OPERATIONS OF DIGITAL TELEMEDICINE ECOSYSTEM (PILOT PHASE)
(Non-Consultancy Services)

National

Two Stage (First Phase)

September 07, 2026

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PROCUREMENT NOTICE

PROCUREMENT OF NON-CONSULTANCY SERVICES

1. The **IDSRS Project, NIH (IDSRS Project)** has reserved Funds for the procurement planned for FY **2026-27**. The **IDSRS Project, NIH (IDSRS Project)** intends to apply part of the proceeds of this Fund to cover eligible payments under the contract for the "**TENDER FOR HIRING OF THE SERVICES FOR TURNKEY ESTABLISHMENT, INTEGRATION & OPERATIONS OF DIGITAL TELEMEDICINE ECOSYSTEM (PILOT PHASE)**" with the reference of **"P97228"**

2. The **IDSRS Project, NIH (IDSRS Project)** invites Bids through **EPADS v2.0** from eligible Bidders registered on **EPADS v2.0** for provision of Non-Consultancy Services.

3. **Two Stage** Procedure of Principal Method of Procurement (i.e. Open Competitive Bidding) will be used by adopting **Least Cost Based Selection (LCBS)**Technique for the subject procurement, in line with the Public Procurement Rules, 2004 and any Regulations, and Instructions issued by the Authority (from time to time).

4. All Bids must be accompanied by a Bid Security described in Bid Security Section in Bidding Document in the form of **Call at Deposit** or Bid Securing Declaration on the prescribed format described.

5. E-Bidding documents, containing detailed terms & conditions, specifications and requirements etc. are available on **e-Pak Acquisition and Disposal System (EPADS)** at **https://epads.gov.pk/opportunities/federal/procurements/97228**.

6. The e-bids, prepared in accordance with the instructions in the e-Bidding documents, must be submitted through **EPADS v2.0** on or before **Tuesday, September 29, 2026 01:00 PM**. E-bids will be opened on the same day at **Tuesday, September 29, 2026 01:30 PM**. Manual submission of Bids shall not be entertained. Those vendors who have not yet registered on the new version of **EPADS v2.0,** may register themselves on **https://vendors.epads.gov.pk/**.

A tutorial to explain the registration process is available at **https://www.youtube.com/watch?v=MNW6T38v7tc**

7. In terms of Rules 48 of Public Procurement Rules, 2004 Grievance Redressal Committee (GRC) is notified for the subject procurement and notification copy is available on the procuring agency's website and also available on **EPADS v2.0** as well as Authority's website at (**www.ppra.org.pk**).

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Instructions to Bidders

A. Introduction

1. **Scope of Bids**

1.1. The Procuring Agency (PA), as indicated in the **Bids Data Sheet (BDS)** invites Bids through **EPADS v2.0** for the provision of Non-Consultancy Services for as specified in the BDS and **in Section Evaluation Criteria, Specifications & Schedule of Requirements**. The name, identification, and number of items/deliverables are provided in the **BDS**. **Two Stage** procedure of the open competitive method shall be used. The successful Bidders will be expected to provide the services within the specified period and timeline(s) as stated in the **BDS**.

2. **Source of Funds**

2.1. Source of funds is referred in Clause-1 of Invitation for Bids.

3. **Fraudualent & Corrupt Practices**

3.1. As defined under Rule 2(1)(f) of the Public Procurement Rules, 2004.

4. **Eligible Bidders**

4.1. A bidder is eligible to participate in a procurement process if the bidder:

4.1.1. possesses or has access to the technical competence, financial resources, equipment and other physical facilities, personnel, managerial capability, experience and reputation necessary to complete the procurement contract;

4.1.2. has the legal capacity to enter into a procurement contract;

4.1.3. is not insolvent, in receivership, bankrupt or being wound up and its activities or affairs are not suspended or being administered under any Act, by a court or by a judicial officer;

4.1.4. is not the subject of legal proceedings for any of the matters mentioned in sub-rule (c);

4.1.5. has fulfilled or has made substantial arrangements satisfactory to the relevant authorities, to fulfil its obligations to pay taxes and social security (where applicable) other contributions of its employees; and

4.1.6. has not, or in the case of a company, its owners and beneficial owners, directors or officers have not, been convicted of a criminal offence related to:

4.1.6.1. its professional conduct; or

4.1.6.2. a bidder (or, in the case of a company, its key individuals such as owners, beneficial owners, directors, or officers) must not have engaged in any prohibited practice, such as fraud, corruption, collusion, or coercion, within the time period stated in the bidding documents, which can be up to three years before the start of the procurement process. Additionally, the bidder must not have been debarred (i.e., banned) from participating in public procurement processes in Pakistan or by any international organization or country. If they have, they are ineligible to participate in the current bidding.

4.2. The procuring agency may require a bidder participating in the procurement process to provide the prescribed documentary evidence or other information to satisfy itself that the bidder is qualified in accordance with the criteria in sub-clause (1).

4.3. A procuring agency shall set out in the bidding document all the criteria for qualification to be applied in accordance with sub-clause (1).

4.4. Except as permitted under the Ordinance, Rules and Regulations, the procuring agency shall not establish a criterion for eligibility of a bidder that:

4.4.1. discriminates against or among a bidder or against categories of bidders; or

4.4.2. is not required for the performance of the procurement contract; or

4.4.3. is not related to the avoidance or management of legal, reputational or economic risk to the procuring agency unless it is in the national interest to do so, and the criteria is set out in the bidding documents.

4.5. A procuring agency shall assess the eligibility of a bidder for participation in the procurement process against the criteria for qualification under sub-clause (1).

4.6. In the case of a joint venture, consortium, or association, all members shall be jointly and severely liable for the execution of the contract in accordance with the terms and conditions of the contract. The joint venture, consortium, or association shall nominate a lead member as nominated in the BDS,

4.7. who shall have the Authority to conduct all business for and on behalf of any and all the members of Joint venture, consortium, or association during the bidding process, and in case of award of contract, during the execution of the contract.

4.8. The appointment of the lead Member in the joint venture, consortium, or association shall be confirmed by submission of valid power of Attorney to the procuring agency.

4.9. Subject to the limits specified in the BDS, the procuring agency may allow bidders to participate in the form of a Joint Venture (JV). However, each party in the JV must individually meet the eligibility criteria specified in the BDS

4.10. No Bidder can be a sub-contractor while submitting a Bids individually or as a member of a joint venture in the same Bidding process.

5. **Qualification of the Bidder**

5.1. All Bidders shall provide in Section VI, Bid Forms, a preliminary description of the proposed work method and schedule, including drawings and charts, as necessary.

B. Bidding Documents

6. **Contents of Standard Bidding Document**

6.1. The Services required, bidding procedure, and terms and conditions of the contract are prescribed in the bidding document. In addition to the Invitation for Bids, the bidding document which should be read in conjunction with any addendum issued by the Procuring Agency include:

Section I -Invitation to Bid
Section II Instructions to Bidders (ITB)
Section III Bid Data Sheet (BDS)
Section IV Eligible Countries
Section V Evaluation Criteria, Specifications, Schedule of Requirements, and Technical Specifications.
Section VI Bidding Forms
Section VII Fraudaulent & Corrupt Practices
Section VIII – Material & Non-material deviation
Section IX General Conditions of Contract (GCC)
Section X Special Conditions of Contract (SCC)
Section XI Contract Forms

6.2. The Bidder is expected to examine all instructions, requirements, forms, terms and specifications in the bidding documents. Failure to furnish all the information required in the bidding document will be at the Service provider’s risk and may result in the rejection of his bids.

7. **Clarifications**

7.1. Clarifications of the bidding documents may be requested in writing through EPADS v2.0 by any bidder up to three days prior to the deadline for the submission of bids.

The procuring agency shall respond promptly and in writing to any request by a bidder for clarification of the bidding documents and, in any event, no later than two days prior to the deadline for the submission of bids or proposals.

Responses to requests for clarification shall be communicated simultaneously and in writing to all bidders participating in the procurement proceedings.

No bidder shall be allowed to alter or modify his bid after the bids have been opened however, the procuring agency may seek and accept clarification to the bid that do not change the substance of the bid, through EPADS v2.0.

7.2. Procuring Agency's response will be uploaded on the EPADS v2.0, including a description of the inquiry.

7.3. Should the Procuring Agency deem it necessary to amend the bidding document as a result of a clarification, it shall do so following the procedure under **ITB 1.1.**

7.4. If indicated **in the BDS**, the bidder’s designated representative is invited at the bidder’s cost to attend a pre-bid meeting at the place, date and time mentioned **in the BDS**. During this pre-bid meeting, prospective bidder(s) may request clarification(s) regarding the schedule of requirements, the Evaluation Criteria or any other aspects of the bidding document.

7.5. Minutes of the pre-bid meeting, if applicable, including the text of the questions asked by bidders, and the responses given, together with any responses prepared after the meeting will be uploaded on EPADS v2.0. Any modification to the bidding document that may become necessary as a result of the pre-bid meeting shall be made by the Procuring Agency exclusively through the use of an Addendum.

7.6. To assist in the examination, evaluation and comparison of Bids of the Bidders, the Procuring Agency may, ask any Bidder for a clarification of its bid including breakdown of prices, through EPADS v2.0. Any clarification submitted by a bidder that is not in response to a request by the Procuring Agency shall not be considered.
No change in the prices or substance of the bid shall be sought, offered, or permitted.
The alteration or modification in the bid which in any way affect the following parameters will be considered as a change in the substance of a

bid:

7.6.1. evaluation & qualification criteria;

7.6.2. required scope of work or specifications;

7.6.3. all securities requirements;

7.6.4. tax requirements;

7.6.5. terms and conditions of bidding documents; and

7.6.6. change in the ranking of the bidders.

From the time of bid(s) opening to the time of contract award, if any bidder wishes to contact the procuring agency on any matter related to the bid, it should do so in writing or through electronic form that provides record of the content of communication.

8. **Amendment of Bidding documents**

8.1. Before the deadline for submission of bids, the procuring agency for any reason, whether at its own initiative or in response to a clarification requested by a prospective bidder or pre-bid meeting may modify the bidding documents by issuing addendum.

8.2. Any addendum issued including the notice of any extension of the deadline shall be part of the bidding document and shall be uploaded on EPADS v2.0 as well as Authority's website. The procuring agency shall promptly publish the addendum at the procuring agency's website indicated in the **BDS**:

Provided that the bidder who had either already submitted his bid, shall have the right to withdraw his already submitted bid and submit the revised bid, prior to the original or extended bid submission deadline.

8.3. To give prospective bidders reasonable time in which to take an addendum/corrigendum into account in preparing their bids, the Procuring Agency may, at its discretion, extend the deadline for the submission of bids:

Provided that the Procuring Agency shall extend the deadline for submission of bids, if such an addendum is issued within last three (03) days of the bid submission deadline.

C. Preparation of Bids

9. Documents Constituting the Bids

9.1. The bids prepared by the bidders shall constitute the following components: -

9.1.1. Forms of bid and Bid Prices completed in accordance with ITB BDS, GCC and SCC;

9.1.2. Documentary evidence established in accordance with BDS that services to be provided by the bidder are eligible services, and conform to the bidding documents;

9.1.3. Documentary evidence established in accordance with BDS that the bidder is eligible and/or qualified for the subject bidding process;

9.1.4. Documentary evidence established, that the bidder has been authorized to provide the services;

9.1.5. Bid security or Bids Securing Declaration furnished in accordance with BDS; and

9.1.6. Any other document required in the BDS.

10. **Documents Establishing Eligibility of the Services and Conformity to bidding documents**

10.1. To establish the conformity of the Non-Consulting Services to the Bidding document, the bidder shall furnish as part of its bid the documentary evidence that services provided conform to the requirements.

10.2. Standards for the provision of the Non-Consulting Services are intended to be descriptive only and not restrictive.

11. **Documents Establishing Eligibility and Qualification of the Bidder**

11.1. Pursuant to BDS, the bidder shall furnish, as part of itsbid, all those documents establishing the bidder's eligibility to participate in the bidding process and/or its qualification to perform the contract if its bid is accepted.

11.2. The documentary evidence of the bidder's eligibility to bids shall establish to the satisfaction of the procuring agency that the bidder, at the time of submission of its bid, is from an eligible country as defined in Section-IV titled as "Eligible Countries".

11.3. The documentary evidence of the bidder's qualifications to perform the contract if its bid is accepted shall establish to the satisfaction of procuring agency that:

11.3.1. the bidder has the financial, technical, and supply/production capability necessary to perform the Contract, meets the qualification criteria specified in BDS.

11.3.2. that the bidder meets the qualification criteria listed in the Bids Data Sheet.

12. **Form of Bid**

12.1. **The bidder shall fill the Form of Bid furnished in the bidding documents. The Bid Forms must be completed without any alterations to its format and no substitute shall be accepted.**

13. **Bids Prices**

13.1. The Bids Prices quoted by the bidder in the Forms of Bid and in the price schedule shall conform to the requirements specified or exclusively mentioned hereafter in the bidding document.

13.2. All items in the Schedule of Requirements must be listed and priced separately in the Price Schedules. If a Price Schedule shows items listed but not priced and neither explicitly mentioned, their prices shall be construed to be included in the prices of other items.

13.3. The Bid price to be quoted in the Forms of Bid shall be the total price of the bid, excluding any discounts offered.

13.4. The bidder shall indicate on the appropriate Price Schedule, the unit prices (where applicable) and total bid price of the services, it proposes to provide under the contract.

13.5. Prices quoted by the bidder shall be fixed during the currency of the contract and not subject to variation on any account. A bid submitted with an adjustable price will be treated as non-responsive and shall be rejected, unless otherwise price adjustment is permissible under Conditions of the Contract. (May be reviewed)

14. **Price Adjustment**

14.1. Price adjustment shall not be applicable.

14.2. Procuring agency may increase the remuneration of the human resources involved in non-consultancy services on annual basis as per agreement.

14.3. **Procuring agency shall incorporate the provisions to allow wage rate in compliance with Federal Government's minimum wage notification, subject to the applicability in that case.**

15. **Bids Currencies**

15.1. Prices shall be quoted in Pakistani Rupees unless otherwise specified in the BDS.

16. **Bid Validity Period**

16.1. Bid(s) shall remain valid for the period specified in the BDS after the bid submission deadline prescribed by the Procuring Agency. A Bid valid for a shorter period shall be rejected by the Procuring Agency as non-responsive. The period of bid validity will be determined from the complementary bid securing instrument i.e. the expiry period of bid security or bid securing declaration as the case may be.

17. **Bid Security or Bid Securing Declaration**

17.1. Unless otherwise specified in the BDS, the bidder shall furnish as part of its bid, in the amount and currency specified in the BDS or Bid Securing Declaration on the format provided in Section VI (Bid Forms) The scanned copy of the Bids Security shall be uploaded in the EPADS v2.0 while submitting bid, whereas the original forms of Bid Security shall be submitted to the procuring agency before the bid submission deadline. The bidder who failed to submit the original bid security before the submission deadline shall be disqualified straightaway.

17.2. The Bid Security or Bid Securing Declaration is required to protect the Procuring Agency against the risk of Bidder’s conduct which would warrant the security’s forfeiture.

17.3. The Bid Security shall be payable promptly upon written demand by the Procuring Agency in case any of the conditions listed in BDS, GCC and SCC are invoked.

17.4. Unsuccessful Bidders’ Bid Security will be discharged or returned as promptly as possible after the award of contract, however in no case later than thirty (30) days after the expiration of the period of Bid Validity prescribed by the Procuring Agency. The Procuring Agency shall make no claim to the amount of the Bid Security, and shall promptly return the Bid Security document, whichever of the following that occurs earliest:

17.4.1. the expiry of the Bid Security;

17.4.2. the entry into force of a procurement contract and the provision of a Performance Guarantee, for the performance of the contract if such a guarantee, is required by the bidding document;

17.4.3. the rejection by the Procuring Agency of all Bids;

17.4.4. the withdrawal of the Bid prior to the deadline for the submission of bids, unless the bidding document stipulate that no such withdrawal is permitted.

17.5. The Bid Security may be forfeited or the Bid Securing Declaration executed:

17.5.1. if a bidder:

17.5.1.1. withdraws its bid during the period of bid validity as specified by the Procuring Agency, and referred by the bidder in the Forms of Bid, except as provided for in the ITBs; or

17.5.1.2. does not accept the correction of errors, or

17.5.2. in the case of a successful bidder fails:

17.5.2.1. **to sign the contract in accordance with SCC; or**

17.5.2.2. **to furnish Performance Guarantee in accordance with BDS and SCC.**

17.6. **The bid security shall be valid for a period specified in BDS. Bids with shorter bid security validity period shall be rejected straight away.**

18. **Alternative Bids by Bidders**

18.1. Alternatives will not be considered, unless specifically allowed for in the BDS.

18.2. When alternative times for completion are explicitly invited, a statement to that effect will be included in the BDS and the method of evaluating different time schedules will be described in Evaluation and Qualification Criteria.

19. **Withdrawal, Substitution, and Modification of Bids**

19.1. Before Bids submission deadline, any bidder may withdraw, substitute, or modify his bid after it has been submitted.

20. **Format and Signing of Bids**

20.1. The bidder shall prepare and submit his bid with due diligence after carefully reading all the terms and conditions before submission through

EPADS v2.0.

20.2. Any interlineations, erasures, or overwriting shall be valid only if they are signed by the person(s) signing the forms of bid.

D. Submission of Bids

21. **Submission of Bids through EPADS v2.0 before Dead deadline**

21.1. The Technical and Financial Bids as the case may be, shall be submitted in the due portion of the EPADS v2.0, before bid submission deadline. The bid submission option shall be automatically disabled once the deadline is over.

21.2. The Procuring Agency may, under exceptional circumstances and at its discretion, extend the deadline for the submission of bids by amending the Bidding Documents. In such a case, all rights and obligations of the Procuring Agency and the Bidders that were previously subject to the original deadline shall thereafter be subject to the revised deadline.

E. Opening and Evaluation of Bids

22. **Opening & Evaluation of Bids by the Procurement Cell/Evaluation Committee**

22.1. The Procuring Agencies to constitute odd number Bid Evaluation Committee for the purpose of bid opening and evaluation of all procurements. As per Rules 29 & 30 of Public Procurement Rules, 2004,
The Procuring Agencyis required to establish a Procurement Cell/Evaluation Committee which shall Evaluate the Bids inaccordance with the evaluation criteria, terms and conditions given in the bidding documents.

23. **Opening of Bids**

23.1. The Bid Evaluation Committee of the Procuring Agency will open all bids through EPADS, in the presence of bidders' or their representatives who

choose to attend, and other parties with a legitimate interest in the bid proceedings at the place, on the date and at the time, specified in the **BDS**. The Bidders' representatives present shall sign attendance sheet as proof of their attendance.

23.2. The bids shall be opened one at a time, and the following read out and recorded: (a) the name of the bidder; (c) the presence of a bid security, if required; and (d) any other details as the procuring agency may consider appropriate.

23.3. No bid will be rejected at the time of bid opening except for bids whose bid security has not been provided to the procuring agency before submission deadline**.**

23.4. The procuring agency shall prepare minutes of the bid opening. The record of the bid opening shall include, as a minimum: the name of the bidder and the bid price, if applicable.

24. **Confidentiality**

24.1. Information relating to the examination, clarification, evaluation and comparison of bids and recommendation of contract award shall not be disclosed to bidders or any other person(s) not officially concerned with such process, until the time of the announcement of the respective evaluation report.

24.2. Any effort by a bidder to influence the procuring agency processing of bids or award decision may result in the rejection of his bid.

25. **Preliminary Examination of Bids**

25.1. Prior to the detailed evaluation of bids, the procuring agency will determine whether each bid:

25.1.1. meets the eligibility criteria defined in **BDS**;

25.1.2. has been prepared as per the format and contents defined by the procuring agency in the bidding document;

25.1.3. is accompanied by the required securities; and

25.1.4. is substantially responsive to the requirements of the bidding document.

25.2. The procuring agency will confirm that the documents and information specified under **BDS, GCC and SCC** have been provided in the bids. If any of these documents or information is missing, or is not provided in accordance with the Instructions to Bidders, the bids shall be rejected.

25.3. If a bid is not substantially responsive, it will be rejected by the procuring agency and may not subsequently be evaluated for complete technical responsiveness.

26. **Examination of Terms and Conditions, Technical Evaluation**

26.1. The procuring agency shall evaluate the technical aspects of the bids submitted in accordance with **BDS,** to confirm that all requirements specified in **Evaluation Criteria, Technical Specifications and Schedule of Requirements**, prescribed inthe bidding document have been met without material deviation or reservation.

26.2. If after the examination of the terms and conditions and the technical evaluation, the procuring agency determines that the bid is not substantially responsive in accordance with BDS**,** it shall reject the bids.

27. **Correction of Errors**

27.1. Bids determined to be substantially responsive will be checked for any arithmetic errors. Errors will be corrected as follows: -

27.1.1. if there is a discrepancy between unit prices and the total price that is obtained by multiplying the unit price and quantity, the unit price shall prevail, and the total price shall be corrected, unless in the opinion of the procuring agency there is an obvious misplacement of the decimal point in the unit price, in which the total price as quoted shall govern and the unit price shall be corrected;

27.1.2. if there is an error in a total corresponding to the addition or subtraction of sub-totals, the sub-totals shall prevail and the total shall be corrected; and

27.1.3. where there is a discrepancy between the amounts in figures and in words, the amount in words will govern.

27.1.4. Where there is discrepancy between grand total of price schedule and amount mentioned on the Forms of bid, the amount referred in Price Schedule shall be treated as correct subject to elimination of other errors.

27.2. The amount stated in the bid will be adjusted by the procuring agency in accordance with the above procedure for the correction of errors and, with the concurrence of the bidder that shall be considered as binding upon the bidder. If the Bidder does not accept the corrected amount, his bid will then be rejected, and the Bid Security may be forfeited or the Bid Securing Declaration may be executed.

28. **Conversion to Single Currency**

28.1. As per Rule 30 of Public Procurement Rules, 2004.

29. **Evaluation of Bids**

29.1. The procuring agency shall evaluate bids in accordance with Rule 30 of Public Procurement Rules, 2004 and compare only those bids determined to be substantially responsive.

29.2. In evaluating the Technical Bids of each Bidder, the Procuring Agency shall apply the evaluation criteria and methodologies specified in the Bid Data Sheet (BDS) and in accordance with the Statement of Requirements and Technical Specifications. No other evaluation criteria or methodologies shall be permitted.

29.3. In case of tie of bids, the bidders shall be provided an opportunity to offer their best and final monetary offer through EPADS. However, in no case the rates shall be higher than the original financial bids.

29.4. The Procuring agency evaluation of a bid will take into account:

29.4.1. the bid price, excluding provisional sums and the provision, if any, for contingencies in the summary bill of quantities, but including day work items, where priced competitively;

29.4.2. price adjustment for correction of arithmetic errors in accordance with **ITB 6;**

29.5. converting the amount resulting from applying (a) and (b) above, if relevant, to a single currency in accordance with **ITB 7**;

29.6. The estimated effect of the price adjustment provisions of the Conditions of Contract, applied over the period of execution of the Contract, shall not be taken into account in bid evaluation.

29.7. If these bidding documents allow bidders to quote separate prices for different lots, and the award to a successful bidder of multiple lots, the methodology of evaluation to determine the lowest evaluated lot combinations in the Form of Bid, is specified in the **BDS.**

30. **Determination of Most Advantageous Bids**

30.1. Selection technique will be adopted for determining the Successful Bid in accordance with the criteria referred in the **BDS** or prescribed in the separate section titled as Evaluation Criteria.

31. **Abnormally Low Financial Bids**

31.1. Procuring agency may reject a bid if it has determined that the price, in combination with other constituent elements of the bid, is abnormally low in relation to the subject matter of the procurement, such that it raises material concerns on the part of the procuring agency, as to the ability of the bidder to perform the procurement contract satisfactorily for the offered price.

A procuring agency shall not reject a bid as abnormally low under sub-clause (1) above unless the procuring agency –

31.1.1. requested in writing through EPADS from the bidder a written clarification of his bid, including a detailed price analysis of his bid price in relation to the subject matter of the procurement contract, scope, methodology, schedule, allocation of risks and responsibilities and any other requirements of the bidding document; and

31.1.2. having taken account, the information provided by the bidder in response to a request under paragraph (a) and the information included in the bid, the procuring agency determines that the bidder has failed to demonstrate its ability to perform the procurement contract satisfactorily for the offered price.

The procuring agency shall promptly communicate to the bidder concerned its decision to reject the bid, including the reasons for the decision.

32. **Rejection of Bids**

32.1. As per Rule 33 of the Public Procurement Rules, 2004

33. **Single Responsive Bid**

33.1. The procuring agency may consider single responsive bid subject to underlying conditions of Rule 38(b) of the Public Procurement Rules, 2004.

34. **Arbitration**

34.1. As per Rule 49 of Public Procurement Rules, 2004.

F. Award of Contract

43. **Criteria of Award**

43.1. The procuring agency will award the Contract to the bidder whose bid has been determined to be substantially responsive to the bidding document and who has been declared as most advantageous Bid.

44. **Procuring Agency's Right to reject All Bids**

44.1. The procuring agency reserves the right to reject all the Bids and to annul the procurement process at any time prior to acceptance of the bid(s), without thereby incurring any liability to the affected bidder(s).

44.2. Notice of the rejection of all bids shall be given promptly to all bidders that have submitted the bids. The procuring agency shall upon request communicate to any bidder the grounds for the rejection of his bid, but is not required to justify those grounds.

45. **Notification of Award**

45.1. Prior to the award of contract, the procuring agency shall issue a Final Evaluation Report giving justification for acceptance or rejection of the bids.

45.2. Bidder whose bid has been accepted, will be notified for the award by the Procuring Agency prior to expiration of the Bid Validity period through EPADS. The Letter of Acceptance will state the sum that the procuring agency will pay the successful bidder in consideration for the execution of the scope of works as prescribed by the Contract (hereinafter and in the Contract called the "Contract Price).

45.3. The notification of award will constitute the formation of the Contract, subject to the condition that bidder furnish the Performance Guarantee and signing of the contract.

46. **Signing of Contract**

46.1. Promptly after notification of award, Procuring Agency shall send the successful bidder the draft agreement, incorporating all terms and conditions as agreed by the parties to the contract. The successful bidder and the procuring agency shall sign the contract.

47. **Performance Guarantee**

47.1. After the receipt of the Letter of Acceptance, the successful bidder, within the specified time, shall deliver to the Procuring Agency a Performance Guarantee in the amount and in the form stipulated in the **BDS**

and SCC, denominated in the type and proportions of currencies in the Letter of Acceptance and in accordance with the Conditions of Contract.

47.2. Failure of the successful bidder to comply with the requirement of **BDS, SCC and GCC** shall constitute sufficient grounds for the annulment of the award and forfeiture of the bid security, in which event the procuring agency may make the award to the next ranked bidder or call for new bids.

48. **Corrupt & Fraudulent Practices**

48.1. Procuring Agencies (including beneficiaries of Government funded projects and procurement) as well as Bidders/Contractors under Government financed contracts, observe the highest standard of ethics during the procurement and execution of such contracts, and will avoid to engage in any corrupt and fraudulent practices.

G. Grievance Redressal & Complaint Review Mechanism

53. **Constitution of Grievance Redressal**

53.1. Procuring agency shall constitute a Grievance Redressal Committee (GRC) comprising of an odd number of persons with proper power and authorization to address the complaint. The GRC shall not have any of the members of Procurement Evaluation Committee.

54. **GRC Procedure**

54.1. Any aggrieved party or bidder as the case may be, may file grievance in accordance with Rule 48 of the Public Procurement Rules, 2004 and Redressal of Grievance Regulations, 2022

H. Blacklisting/ Debarment

55. **Procedure for Blacklisting/Debarment**

55.1. The procuring agency may initiate blacklisting proceedings against contractor/supplier in accordance with Rule-19 of the Public Procurement

Rules, 2004 , Mechanism for Blacklisting, Debarment Regulations, 2024 and Regulation on “procedure for filling and disposal of review petition under rule-19(3) of the Public Procurement Rules, 2004.

Bid Data Sheet

Bids Data Sheet (BDS)

The following specific data for the procurement of Non-Consultancy Services to be procured shall complement, supplement, or amend the provisions in the Instructions to Bidders (ITB). Whenever there is a conflict, the provisions herein shall prevail over those in ITB.

BDS Clause Number
ITB Number

Amendments of, and Supplements to, Clauses in the Instruction to Bidders

A. Introduction

BDS Clause Number 1

Name of Procuring Agency: **IDSRS Project, NIH (IDSRS Project)**

The subject of procurement is: **TENDER FOR HIRING OF THE SERVICES FOR TURNKEY ESTABLISHMENT, INTEGRATION & OPERATIONS OF DIGITAL TELEMEDICINE ECOSYSTEM (PILOT PHASE)**

Expected commencement date:

BDS Clause Number 2

Financial year for the operations of the Procuring Agency: **2026-27**

Name and identification number of the Contract: **P97228**

BDS Clause Number 3

JV/Consortium or Association Allowed: **Yes**
Number of JV/Consortium Members: **3**

B. Bidding Documents

BDS Clause Number 4

The Bidders may seek clarifications through **EPADS v2.0**: Clarification Date: Monday, September 28, 2026

BDS Clause Number 5

Any addendum, in case issued, shall be published on **IDSRS Project, NIH (IDSRS Project)** website and on **EPADS v2.0**.

BDS Clause Number 6

List of documents required along with the bid:

1. Complete Technical Proposal along with all documents/evidence required under the Mandatory Eligibility Criteria and Technical Evaluation Criteria; signed Bid Forms and undertakings; Bid Security; JV/Consortium Agreement and Power of Attorney (where applicable); applicable licences/registrations; and all other documents prescribed in the Bidding Documents.

BDS Clause Number 7

The qualification criteria to establish the supply / production capability of the bidder.

see Eligibility Criteria

BDS Clause Number 8

Services and Their related documents:
See section Required Services and Scope of Work

BDS Clause Number 9

Price schedule will be provided according to the format defined and acquired.
see section price schedule.

BDS Clause Number 10

Specifications:

see section of specifications.

C. Preparation of Bids

BDS Clause Number 11

The price shall be **Fixed**.

BDS Clause Number 12

Currency of the Bids shall be : **PKR**

BDS Clause Number 13

The Bids/Bid Validity period shall be: **180 Days**

BDS Clause Number 14

The amount of Bid Security shall be as defined in Bid Security Section for items and lots given in **BDS 6**
The Bid Security shall be in the form of: **Call at Deposit**

BDS Clause Number 15

The Bids security shall be valid for twenty-eight (28) days beyond the expiry of the Bids validity period specified in the bidding documents, for example the bid validity is 90 days so the bid security shall be valid for 90+28 = 118 days.

BDS Clause Number 16

Alternative Bids to the requirements of the bidding documents will not be permitted.

D. Submission of Bids

BDS Clause Number 17

Bid shall be submitted online on EPADS v2.0 whereas hard copy of the bid security should be submitted to the following;

IDSRS Project, NIH, Islamabad

Bids that are not submitted on EPADS v2.0 shall be disqualified.

The deadline for Bids submission is: **Tuesday, September 29, 2026 01:00 PM**

E. Opening and Evaluation of Bids

BDS Clause Number 18

The Bids opening shall take place on **EPADS v2.0**.

Day *:* ***Tuesday***

Date: ***Tuesday, September 29, 2026***

Time *:* ***01:30 PM***

BDS Clause Number 19

Selection technique adopted will be: **Least Cost Based Selection (LCBS)**
see Evaluation Criteria

F. Award of Contract

BDS Clause Number 20

The Performance guarantee shall: **7.00%**.

The Performance Guarantee shall be acceptable in the form of: **Call at Deposit**

21.

51.1

Arbitrator shall be appointed by mutual consent of the both parties.

G. Review of Procurement Decisions

BDS Clause Number 22

Grievence against this procurement shall be submitted online on EPADS v2.0.

Eligibility Criteria

Bidder's Type	Required Registration
Any	NADRA CITIZENSHIP (CNIC/NICOP) FBR (NTN) FBR (GSTN) Registrar of Firms

Eligibility Criteria	Document
Legal Status: Minimum Requirement: Bidder must be a legally registered entity. Documents Required: Valid Certificate of Incorporation/Registration; in case of JV/Consortium, each member shall separately submit its Certificate of Incorporation/Registration.	Yes
Tax Registration: Minimum Requirement: Bidder must be registered with FBR and appear on the Active Taxpayer List (ATL). Documents Required: Valid NTN, STRN and ATL proof; in case of JV/Consortium, each member shall separately submit the required tax registration and ATL evidence.	Yes
Bid Security: Minimum Requirement: Bid Security shall be submitted in accordance with the BDS/Bidding Documents. Documents Required: Original CDR as prescribed in the BDS; in case of JV/Consortium, Bid Security shall be submitted by the Lead Member on behalf of the JV/Consortium.	Yes

Relevant Experience: Minimum Requirement: Minimum five (05) years' relevant experience in telemedicine, digital health, large-scale IT systems, call centre operations or similar integrated service-delivery projects, with at least one (01) relevant contract/project or verifiable B2C deployment. Documents Required: Contract/work order/completion certificate; for B2C, verifiable platform/usage evidence; in case of JV/Consortium, documents shall be provided by the Lead Member.	Yes
Financial Capacity: Minimum Requirement: Average annual turnover of at least PKR 500 million during the last three (03) financial years. Documents Required: Audited Financial Statements for the last three (03) financial years duly audited/certified by a Chartered Accountant; in case of JV/Consortium, financial capacity may be demonstrated on a combined basis by the members.	Yes
Technical Capability: Minimum Requirement: Capability to deploy/operate integrated telemedicine/digital services, including telemedicine/digital health, call centre/teleconsultation, IT-enabled services or similar logistics/field operations. Documents Required: Contracts/work orders/completion certificates/client references; for B2C, verifiable platform/usage evidence; in case of JV/Consortium, documents shall be provided by the Lead Member.	Yes
Regulatory Compliance: Minimum Requirement: Bidder shall possess all applicable regulatory licences/registrations for healthcare, pharmacy and diagnostic components, including Drug Sale Licence and FBR POS Integration, where applicable. Documents Required: Valid licences/certificates and applicable regulatory approvals; in case of JV/Consortium, documents shall be provided by the Relevant Member responsible for the respective regulated component.	Yes
PSEB Registration: Minimum Requirement: Entity responsible for development, deployment or operation of IT/software components shall be registered with Pakistan Software Export Board (PSEB). Documents Required: Valid PSEB Registration Certificate; in case of JV/Consortium, certificate shall be provided by the Lead Member or Relevant Member allocated the IT/software scope under the JV Agreement.	Yes

Blacklisting Status: Minimum Requirement: Bidder must not be blacklisted/debarred by any Procuring Agency/Government organization under applicable Public Procurement Rules. Documents Required: Notarized Affidavit on Stamp Paper of Rs. 500/-; in case of JV/Consortium, each member shall separately submit the prescribed affidavit.	Yes
Litigation Disclosure: Minimum Requirement: Bidder shall disclose all litigation, if any. Documents Required: Details through Notarized Affidavit on Stamp Paper of Rs. 500/-; in case of JV/Consortium, each member shall separately submit the prescribed litigation disclosure/affidavit.	Yes
Acceptance of Tender Conditions: Minimum Requirement: Bidder shall accept all terms and conditions of the Bidding Documents without deviation. Documents Required: Signed undertaking on Letterhead; in case of JV/Consortium, the undertaking shall be submitted by the Lead Member on behalf of the JV/Consortium.	Yes
Completeness of Bid: Minimum Requirement: Complete Bid shall be submitted through EPADS in accordance with the Bidding Documents. Documents Required: Complete EPADS submission together with all prescribed signed documents; in case of JV/Consortium, submission shall be made by the Lead Member along with all required member-specific documents.	Yes

Evaluation Criteria

Least Cost Based Selection (LCBS)

Weightage

Technical Evaluation %
100

Technical Marks	**100**
Passing Marks	**70**
Technical Evaluation Criteria	

Platform Capacity & Scale (Average Daily Throughput) Lead Member: Evaluation shall be based on proven average daily consultation throughput of a live and operational telemedicine/digital health platform. Evidence Required: System-generated usage reports, dashboards or analytics covering at least the last three (03) months; client-issued certificate(s) confirming operational deployment and consultation volume; publicly verifiable platform links and operational/performance reports, where applicable; and supporting evidence establishing ownership/operation of the claimed platform. Only consultations processed through a live operational system shall be considered; pilot, demo, test or non-operational environments shall not qualify. The Procuring Agency (PA) may verify platform status, records and claimed volumes directly from clients/issuing authorities and may require independent third-party verification/ certification of system-generated or quantitative claims at the Bidder's cost. (Qualitative)(Doc Required) Proven average daily throughput of 5,000 or more completed teleconsultations/day on a live operational platform **(8)** Proven average daily throughput of 2,500–4,999 completed teleconsultations/day on a live operational platform **(6)** Proven average daily throughput of 1,000–2,499 completed teleconsultations/day on a live operational platform. **(4)** Proven average daily throughput of below 1,000 teleconsultations/day, supported by a credible scaling plan and documented load-test evidence. **(2)**	8

Active Doctor Network & Availability Lead Member: Evaluation shall be based on the number of verifiable active doctors registered with and providing teleconsultations through the bidder’s live operational telemedicine/digital health platform. Evidence Required: System-generated active-doctor reports/analytics covering at least the last three (03) months; PM&DC registration details; specialty-wise active usage reports; and client-issued certificates or verifiable platform records supporting the claimed network. An Active Doctor means a PM&DC-registered medical practitioner who has completed at least one (01) teleconsultation during the relevant reporting period. Duplicate, inactive or merely enrolled practitioners shall not be counted. PA may verify practitioner registration, platform activity and claimed figures from PM&DC/client/platform records and may require independent third-party verification/certification of system-generated or quantitative claims at the Bidder’s cost. (Qualitative)(Doc Required) 10,000 or more verifiable active PM&DC-registered doctors meeting the prescribed Active Doctor definition. **(7)** 5,000–9,999 verifiable active PM&DC-registered doctors meeting the prescribed definition. **(5)** 2,000–4,999 verifiable active PM&DC-registered doctors meeting the prescribed definition. **(3)** 500–1,999 verifiable active PM&DC-registered doctors meeting the prescribed definition. **(1)**	7

Call Center Capacity & IT Infrastructure Lead Member: Evaluation shall be based on the bidder’s proven number of active operational call-center agents supported by functional call-center infrastructure and technology. Evidence Required: HR/payroll records supported by attendance logs or shift rosters covering at least the last three (03) months; ACD/CRM or equivalent system-generated reports demonstrating active agent utilization; facility details including seating capacity, telephony and supporting IT infrastructure; and client-issued certificates/operational records, where applicable. Active Agents means personnel actually handling live customer calls or teleconsultation support; administrative, supervisory, inactive or non-operational personnel shall not be counted. PA may verify records and physically inspect the claimed facility and may require independent third-party verification/certification of system-generated or quantitative claims at the Bidder’s cost. (Qualitative)(Doc Required) 200 or more verifiable active operational agents supported by functional call-center infrastructure. **(5)** 100–199 verifiable active operational agents supported by functional call-center infrastructure. **(3)** 50–99 verifiable active operational agents supported by functional call-center infrastructure. **(2)**	5

Call Center / Teleconsultation Operations Experience Lead Member: Evaluation shall be based on proven years of relevant operational experience in healthcare call-center, teleconsultation, telemedicine or digital-health service delivery. Evidence Required: Contracts, Work Orders, Purchase Orders, Framework/Service Agreements clearly establishing scope and duration; completion certificates or evidence of ongoing engagements; client references/performance certificates; and operational reports demonstrating call volumes, teleconsultations handled or relevant service-delivery metrics. Experience shall be counted only where the submitted evidence establishes actual operational healthcare call-center/teleconsultation services. Generic customer-support helplines, complaint centers or unrelated/non-healthcare call-center experience shall not qualify. PA may verify experience directly from clients/issuing authorities and may require independent third-party verification/certification of material claims at the Bidder’s cost. (Qualitative)(Doc Required) 10 years or more of verifiable qualifying healthcare call-center/teleconsultation operational experience **(5)** 7 years or more but less than 10 years of verifiable qualifying experience. **(4)** 5 years or more but less than 7 years of verifiable qualifying experience. **(2)**	5

AI/ML & Healthcare Integration Capability (Sovereign AI + HL7/FHIR Integration) Aggregate: Evaluation shall be based on demonstrated implementation of AI-enabled telemedicine solutions and/or healthcare system integration with EMR/EHR, HIS, LIS or other healthcare information systems using HL7, FHIR, APIs or equivalent interoperability standards. Evidence Required: Contracts/Work Orders, completion or client certificates; architecture and integration documents; deployment/commissioning reports; and technical documentation demonstrating implemented AI functionality and healthcare interoperability. Marks shall be awarded only for verifiable capability/successfully implemented and operational solutions, as applicable to the scoring band. Proposed, pilot, demo, conceptual or theoretical solutions shall not qualify as successfully implemented projects. PA may verify submitted evidence and may require independent third-party verification/certification of material technical claims at the Bidder’s cost. (Qualitative)(Doc Required) Two (02) or more successfully implemented projects involving an AI-enabled Telemedicine Platform integrated with EMR/EHR, HIS, LIS or other healthcare systems using HL7/FHIR/APIs or equivalent. **(5)** One (01) successfully implemented project involving an AI-enabled Telemedicine Platform or Healthcare System Integration. **(3)** Verifiable AI-enabled Telemedicine Platform or Healthcare Integration capability, supported by satisfactory documentary evidence. **(1)**	5

Relevant Project Experience (Telemedicine / Digital Health / Large-scale IT Service Delivery) Lead Member: Evaluation shall be based on completed or ongoing projects of similar nature and scale. Evidence Required: Contracts, Work Orders, Purchase Orders, Framework Agreements or completion/ongoing certificates clearly establishing project scope and duration. For B2C deployments, system-generated analytics covering at least the last three (03) months, publicly verifiable platform links, ownership/control evidence and operational dashboards/reports demonstrating scale shall be submitted. Project/client references and summaries showing nature, scope, users/transactions and geographical coverage may also support the claim. Only telemedicine, digital health, health-tech, HIS, EMR/EHR, teleconsultation or comparable large-scale IT service-delivery projects shall qualify; generic unrelated IT projects shall not. PA may verify claims and require independent third-party verification/certification at Bidder’s cost. (Qualitative)(Doc Required) Five (05) or more verifiable completed/ongoing projects of qualifying similar nature and scale. **(10)** Three (03) to four (04) verifiable completed/ongoing projects of qualifying similar nature and scale. **(8)** Two (02) verifiable completed/ongoing projects of qualifying similar nature and scale. **(6)** One (01) verifiable completed/ongoing project of qualifying similar nature and scale. **(3)**	10

Financial Capacity (Average Annual Turnover) Aggregate: Evaluation shall be based on average annual turnover during the last three (03) financial years. Evidence Required: Audited Financial Statements for the last three (03) financial years, duly audited/certified by a Chartered Accountant, together with auditor certificate and attested bank statements as prescribed. The mandatory minimum average annual turnover is PKR 500 Million. In case of JV/Consortium, audited financial statements of each member shall be submitted together with a consolidated schedule clearly showing each member's turnover, combined average annual turnover and supporting arithmetic/calculation. Only figures supported by prescribed financial evidence shall be considered. PA may verify financial information from the auditor, bank or other issuing authority and may require independent third-party verification/certification of material financial claims at the Bidder's cost. (Qualitative)(Doc Required) Average annual turnover of PKR 2.00 Billion or above during the prescribed three-financial-year period. **(10)** Average annual turnover of PKR 1.00 Billion to below PKR 2.00 Billion during the prescribed period. **(8)** Average annual turnover of PKR 500 Million to below PKR 1.00 Billion during the prescribed period. **(5)** Average annual turnover below the mandatory minimum PKR 500 Million. **(1)**	10

Digital Outreach, Platforms & Content Strength Aggregate: Evaluation shall be based on proven digital audience reach/user interactions and volume of health-awareness content through owned/managed digital platforms. Evidence Required: Verifiable Google/App/Social/Meta/YouTube or equivalent analytics covering at least the last six (06) months; direct public URLs of owned/managed platforms; evidence of ownership/admin control; analytics showing MAU, impressions, reach, engagement/interactions with date stamps; and publicly verifiable health-awareness content repository/count. Client certificates, contracts, campaign reports or completion evidence may also be submitted, where applicable. Screenshots alone shall not be sufficient unless supported by verifiable links and system/platform analytics. PA may verify platform ownership, content and analytics and may require independent third-party verification/certification of system-generated or quantitative claims at the Bidder’s cost. (Qualitative)(Doc Required) ≥2 Million monthly user interactions AND ≥2,000 verifiable health-awareness videos/content items. **(10)** ≥1 Million monthly user interactions AND ≥1,000 verifiable health-awareness videos/content items. **(8)** ≥500,000 monthly user interactions AND ≥500 verifiable health-awareness videos/content items. **(6)** ≥250,000 monthly user interactions AND ≥200 verifiable health-awareness videos/content items. **(4)** Verifiable digital outreach/content presence below the above scoring thresholds. **(2)**	10

Execution & Multi-Channel Campaign Capability Aggregate: Evaluation shall be based on successfully executed nationwide, provincial or other large-scale awareness/outreach campaigns using multiple communication channels. Qualifying channels include Digital, Television, Radio, Print, Outdoor and Field Outreach. Evidence Required: Work Orders, contracts, Purchase Orders or framework agreements clearly establishing campaign scope; completion/performance certificates or evidence of ongoing campaigns; campaign reports showing channel mix and geographical coverage; media plans, release orders, publication/broadcast records and digital execution evidence; and publicly verifiable links/publications/broadcast/social-media or campaign materials, where applicable. Only successfully executed and verifiable campaigns shall qualify. PA may verify campaigns directly from clients/media/platform records and may require independent third-party verification/certification of material claims at the Bidder’s cost. (Qualitative) (Doc Required) ≥3 verifiable nationwide/provincial/large-scale campaigns, each demonstrating execution across at least 3 qualifying communication channels. **(6)** ≥2 verifiable campaigns, each demonstrating execution across at least 3 qualifying communication channels. **(4)** ≥1 verifiable campaign demonstrating execution across at least 2 qualifying communication channels. **(2)**	6

Public Health Outreach, Targeting & Analytics Aggregate: Evaluation shall be based on successfully executed public-health awareness/outreach campaigns demonstrating audience targeting/segmentation and use of campaign analytics to measure performance. Evidence Required: Campaign reports; documented audience-targeting strategy, segmentation or demographic/geographical targeting; system/platform analytics, dashboards or KPI reports with date stamps; client-issued certificates, completion/performance documents; and publicly verifiable campaign links, reports or publications, where applicable. Only successfully executed and verifiable public-health campaigns shall qualify; proposed or conceptual campaigns shall not be considered. PA may verify submitted campaign records, targeting and analytics from clients/platforms and may require independent third-party verification/certification of system-generated or quantitative claims at the Bidder’s cost. (Qualitative)(Doc Required) ≥3 verifiable public-health awareness/outreach campaigns demonstrating BOTH audience targeting/segmentation AND campaign analytics **(4)** 2 verifiable public-health awareness/outreach campaigns demonstrating BOTH audience targeting/segmentation AND campaign analytics. **(3)** 1 verifiable public-health campaign demonstrating audience targeting OR campaign analytics. **(2)** Limited public-health outreach experience supported by partial documentary evidence. **(1)**	4

Pharmacy Network & Coverage Aggregate: Evaluation shall be based on the bidder/JV’s existing active, licensed and system-integrated pharmacy network or a binding commitment to establish the prescribed network. Evidence Required: Valid Drug Sale Licence(s) for each claimed pharmacy location; branch/location list with complete addresses and operational status; and evidence of system integration for order processing, e-prescription and dispensing, supported by operational records/client agreements where applicable. Only active, licensed, operational and system-integrated pharmacy locations shall be counted; proposed, inactive or partner-only locations without demonstrated integration shall not qualify as existing locations. Where marks are claimed against future establishment, the prescribed notarized undertaking and comparable pharmacy-operations evidence shall be submitted. PA may verify licences, locations, integration and operational status and may require independent third-party verification/certification of material claims at Bidder’s cost (Qualitative)(Doc Required) 15 or more existing active, licensed, operational and system-integrated pharmacy locations, supported by prescribed evidence. **(5)** 8–14 existing active, licensed, operational and system-integrated pharmacy locations, supported by prescribed evidence. **(3)** Binding undertaking to establish at least 15 licensed and system-integrated pharmacy locations within 90 days of Contract Award, supported by comparable pharmacy-operations evidence. For 02 marks: undertaking should be notarized and commit to ≥15 licensed/system-integrated locations within 90 days; failure to establish is to be treated as material breach. **(2)**	5

Prescription Processing Volume (Actual Usage) Aggregate: Evaluation shall be based on proven average monthly volume of prescriptions actually processed/dispensed through the bidder/JV’s operational pharmacy or digital prescription system. Evidence Required: System-generated prescription logs/analytics covering at least the last three (03) months; dashboards/reports showing monthly prescription volumes with date stamps; evidence linking prescription processing with actual dispensing/fulfilment; and client-issued certificates or independent records, where available. Only completed and system-processed prescriptions shall be counted; draft, cancelled, duplicate or otherwise unfulfilled records shall not qualify. PA may verify prescription records, system data and claimed volumes and may require independent third-party verification/certification of system-generated or quantitative claims at Bidder’s cost. (Qualitative)(Doc Required) 30,000 or more verifiable completed/system-processed prescriptions per month, supported by prescribed operational evidence. **(5)** 15,000–29,999 verifiable completed/system-processed prescriptions per month, supported by prescribed operational evidence **(3)** Below 15,000 verifiable completed/system-processed prescriptions per month or insufficient evidence of claimed volume. **(2)**	5

Warehousing & Cold Chain Capability Aggregate: Evaluation shall be based on existing operational and DRAP-compliant warehousing facilities with functional temperature-controlled/cold-chain capability for medicines and applicable healthcare products. Evidence Required: Valid DRAP licence(s)/certification(s), as applicable; warehouse details including location, capacity and storage specifications; temperature monitoring/log records covering at least the last three (03) months; and documentary evidence of functional cold-chain infrastructure, equipment, monitoring arrangements and applicable SOPs. Only operational and compliant facilities having functional temperature-controlled storage shall qualify; proposed, non-operational or inadequately evidenced facilities shall not be counted. PA may verify regulatory status, inspect facilities and validate cold-chain records and may require independent third-party verification/certification of material claims at Bidder’s cost. (Qualitative)(Doc Required) Two (02) or more operational DRAP-compliant warehouses with demonstrated functional cold-chain/temperature-controlled storage capability. **(4)** One (01) operational DRAP-compliant warehouse with demonstrated functional cold-chain/temperature-controlled storage capability. **(2)**	4

Institutional Supply & Pharmacy Operations Experience Aggregate: Evaluation shall be based on proven experience in healthcare/pharmaceutical institutional supply contracts together with active pharmacy operations and/or medicine supply-chain management. Evidence Required: Contracts, Work Orders, Purchase Orders or agreements identifying client, scope and duration; completion/ongoing performance evidence; operational records demonstrating medicine supply, dispensing and/or pharmacy transactions; and client references/performance certificates, where applicable. Company profile alone shall not establish qualifying experience. Only healthcare/pharmaceutical institutional supplies and active pharmacy/medicine supply-chain operations shall qualify; unrelated supplies, isolated transactions, trading-only, licensing-only or inactive operations shall not be considered. PA may verify submitted records directly from clients/regulators and may require independent third-party verification/certification of material claims at Bidder’s cost. (Qualitative)(Doc Required) 6 or more qualifying institutional healthcare/pharmaceutical supply contracts. **(6)** 4–5 qualifying institutional healthcare/pharmaceutical supply contracts. **(4)** 2–3 qualifying institutional healthcare/pharmaceutical supply contracts. **(2)** 1 qualifying institutional healthcare/pharmaceutical supply contract. **(1)**	6

Operational Readiness (Islamabad & Karachi) Aggregate: Evaluation shall be based on demonstrated operational presence and readiness to support project implementation in both Islamabad and Karachi. Evidence Required: Lease/ownership documents and verifiable office addresses demonstrating existing operational offices; relevant registration/official records linked with the claimed locations, where applicable. Where existing offices are not available, a notarized binding undertaking to establish fully functional offices in both cities within thirty (30) days of Contract Award shall be submitted along with an implementation plan covering timeline, staffing and facility arrangements. Virtual, shared-address or non-functional offices shall not qualify as existing operational presence. PA may verify submitted records and physically inspect claimed facilities and may require independent third-party verification/certification of material claims at Bidder’s cost. (Qualitative)(Doc Required) Existing fully operational and verifiable offices in both Islamabad and Karachi. **(4)** Binding undertaking to establish fully functional offices in both Islamabad and Karachi within 30 days of Contract Award. **(2)**	4

Deployment Experience (Relevant & Multi-Component) Aggregate: Evaluation shall be based on proven experience of successfully deploying integrated solutions across multiple locations involving IT systems, kiosks and/or associated infrastructure. Evidence Required: Contracts, Work Orders or Completion Certificates clearly demonstrating scope, deployment locations and implemented components; project/deployment summaries identifying integrated components and geographical coverage; and client-issued references/performance certificates supporting successful multi-location deployment. Only relevant integrated deployments implemented across multiple locations shall qualify; single-location assignments or standalone IT supplies/services without demonstrated multi-component deployment shall not qualify. PA may verify submitted projects directly from clients/issuing authorities and may require independent third-party verification/certification of material claims at Bidder’s cost. (Qualitative)(Doc Required) 3 or more verifiable multi-location deployments involving integrated IT systems, kiosks and/or associated infrastructure. **(3)** 1–2 verifiable multi-location deployments involving integrated IT systems, kiosks and/or associated infrastructure. **(2)**	3

Integrated Deployment Capability Aggregate: Evaluation shall be based on demonstrated capability to execute end-to-end projects integrating IT systems, physical infrastructure and field operations as part of a coordinated service-delivery solution. Evidence Required: Relevant project case studies, contracts/work orders, system/solution architecture diagrams, deployment and commissioning reports, operational records and client references demonstrating actual integration of the claimed components. Full marks shall require verifiable execution integrating all three components; isolated or standalone implementation shall not qualify for full marks. PA may verify submitted projects and operational evidence directly from clients/issuing authorities and may require independent third-party verification/certification of material claims at Bidder’s cost. (Qualitative)(Doc Required) Proven execution of project(s) demonstrating integrated delivery of all three components: IT systems + physical infrastructure + field operations. **(3)** Partial demonstrated integration involving any one (01) or two (02) of the prescribed components. **(1)**	3

Required Services

Lot Title : Digital Telemedicine Ecosystem (Pilot Phase) – Complete Lot

Bid Security : 40000000 PKR

Position	Delivery Schedule	Quantity
CAPEX – Establishment, Development, Supply, Installation, Integration & Commissioning of Digital Telemedicine Ecosystem	**Address:** IDSRS Project, NIH, Islamabad **Schedule:** Within three (03) months from commencement of Contract **Quantity:** 1/Qty	1/Qty
OPEX – Operations & Service Delivery of Digital Telemedicine Ecosystem	**Address:** IDSRS Project, NIH, Islamabad **Schedule:** During operational period up to completion of minimum 3.6 million consultations or 30 June 2028, whichever occurs earlier **Quantity:** 1/Qty	1/Qty

Related Services :

Yes

Digital Telemedicine Ecosystem (Pilot Phase) – Complete Lot

Position	Related Services
CAPEX – Establishment, Development, Supply, Installation, Integration & Commissioning of Digital Telemedicine Ecosystem	Turnkey design, development, supply, installation, integration, testing, commissioning, training and handover, including associated hardware, software, licences and materials.
OPEX – Operations & Service Delivery of Digital Telemedicine Ecosystem	Operations, maintenance and support, including teleconsultation, call center, pharmacy, diagnostics, field services, hosting and associated services.

Services Specifications

Lot Title : Digital Telemedicine Ecosystem (Pilot Phase) – Complete Lot

Position: CAPEX – Establishment, Development, Supply, Installation, Integration & Commissioning of Digital Telemedicine Ecosystem

Specifications / Requirements:

As per Bidding Documents, Scope of Work, Technical Specifications, BOQs, SLA/KPIs and Price Schedule – CAPEX.

Position: OPEX – Operations & Service Delivery of Digital Telemedicine Ecosystem

Specifications / Requirements:

As per Bidding Documents, Scope of Work, SLA/KPIs and Price Schedule – OPEX, including applicable S1, S2 and S3 service scenarios.

Scope of Work

The Procuring Agency intends to hire a Service Provider/JV/Consortium on a turnkey basis for the design, development, establishment, integration, deployment, commissioning, operation, maintenance and transfer of a Digital Telemedicine Ecosystem (Pilot Phase) for IDSRS, National Institute of Health.

The scope shall include, but not be limited to: (i) development and operation of a production-grade telemedicine platform comprising patient mobile/web applications, practitioner portal, administration portal, Electronic Medical Record (EMR) and e-Prescription; (ii) provision of teleconsultation services through PM&DC-registered medical practitioners; (iii) establishment, equipping, staffing and 24/7 operation of call-centre services; (iv) deployment and operation of thirty (30) telemedicine kiosks and field-based Telemedicine Health Workforce; (v) pharmacy network, medicine supply, warehousing, cold-chain and last-mile delivery; (vi) rapid point-of-care diagnostics and laboratory referral management; (vii) media, public awareness and health communication; (viii) ICT infrastructure, hosting, connectivity, cybersecurity, backup and disaster recovery; (ix) National Telemedicine Data Hub and IDSRS Telemedicine Command Centre; (x) integration with IDSRS disease surveillance, public-health reporting and other notified health information systems; and (xi) training, technical support, operations, maintenance, data/asset handover and transition.

Telemedicine Centres shall be established at IHITC, Islamabad and NIRMF, Karachi, with field operations covering Islamabad Capital Territory and Karachi. The programme shall provide primary and secondary level healthcare, while tertiary, emergency, surgical, obstetric and intensive-care services shall be managed through referral.

The Service Provider shall have full and undivided responsibility for the complete turnkey solution and coordination of all consortium members, subcontractors and third-party suppliers. The commercial model shall comprise CAPEX on a lump-sum basis and OPEX on an all-inclusive per-consultation basis under the prescribed service scenarios.

The Contract shall remain in force until completion of 3,600,000 consultations or 30 June 2028, whichever occurs earlier, including the prescribed mobilisation and deployment period.

The complete scope, specifications, quantities, service levels, performance requirements, implementation arrangements, deliverables, BOQs and all other technical and operational requirements shall be strictly in accordance with Annexure-I – Scope of Work, SLA/KPIs and the Bidding Documents, which shall form an integral part of this procurement.

Price Schedule

For Individual Positions

#	Position Title	Quantity	Unit Price (PKR)	Total Price (PKR)	Delivery Location	Delivery Period / Year	Country of Origin
1							
2							

For Lots

#	Lot Title	Total Lot Price (PKR)	Country of Origin
1	[Lot 1 Title]		

PUBLIC PROCUREMENT REGULATORY AUTHORITY
(PPRA)
EPADS

General Conditions of Contract

A. General

1. **Definitions**

1.1. Unless the context otherwise requires, the following terms whenever used in this Contract shall have the same meaning and shall be interpreted as indicated

1.1.1. “Applicable Law” means the laws and any other instruments having the force of law in the Government’s Country, or in such other country as may be specified in the Special Conditions of the Contract (SC), as they may be issued and in force from time to time;

1.1.2. “The Contract” means an agreement enforceable by law;

1.1.3. “The Contract Price” means the price payable to the Contractor under the Contract for the full and proper performance of its contractual obligations;

1.1.4. “The Services” means the work to be performed by the Contractor pursuant to this Contract and as prescribed in the Specifications and Schedule of Activities included in the Contractor’s Bid;

1.1.5. “Ancillary Services” means those services ancillary to the provision of Services, such as transportation and insurance, and any other incidental services, such as installation, commissioning, provision of technical assistance, training, and other such obligations of the Contractor covered under the Contract;

1.1.6. “GCC” means the General Conditions of Contract contained in this section;

1.1.7. “SCC” means the Special Conditions of Contract by which the GCC may be amended or supplemented;

1.1.8. **“**Day” means calendar day unless indicated otherwise;

1.1.9. “Effective Date” means the date on which this Contract comes into force and effect;

1.1.10. “The Contractor” means the individual or corporate body whose Bids to provide the Services has been accepted by the Procuring Agency;

1.1.11. “The Project Site,” where applicable, means the place or places named in Bid Data Sheet and technical Specifications;

1.1.12. “Government” means the Government of Pakistan;

1.1.13. “Local Currency” means the currency of Pakistan;

1.1.14. “In Writing” means communicated in written form with proof of receipt;

1.1.15. “Completion Date” means the date of completion of the Services by the Contractor as certified by the Procuring Agency;

1.1.16. “Foreign Currency” means any currency other than the currency of the country of the Procuring Agency;

1.1.17. “Party” means the Procuring Agency or the Contractor, as the case may be, and “Parties” means both of them;

1.1.18. "Service" means any object of procurement other than goods or works;

1.1.19. “Subcontractor” means any entity to which the Bidder subcontracts any part of the Services.

2. **Applicable Law**

2.1. The contract shall be governed and interpreted in accordance with the laws of Pakistan, unless otherwise specified in SCC.

3. **Language**

3.1. The Contract as well as all correspondence and documents relating to the Contract exchanged between the Contractorand the Procuring Agency, shall be written in the **English language** unless otherwise stated in the **SCC** . Supporting documents and printed literature that are part of the Contract may be in another language provided these are accompanied by an accurate translation of the relevant passages in English, in which case, for purposes of interpretation of the Contract, this translation shall govern.

4. **Notices**

4.1. Any notice, request, or consent made pursuant to this Contract shall be in writing and shall be deemed to have been made when delivered in person to an authorized representative of the Party to whom the communication is addressed, or when sent by registered mail, telex, telegram, or facsimile to such Party at the address specified in the **SCC**.

5. **Location**

5.1. The Services shall be performed at such locations as the Procuring Agency may approve and as specified in **SCC.**

6. **Authorized Representatives / Authority of Member in charge**

6.1. Any action required or permitted to be taken, and any document required or permitted to be executed, under this Contract by the Procuring Agency or the Contractor may be taken or executed by the officials specified in the **SCC**.

B. Commencement, Completion, Modification, and Termination of Contract

7. **Effectiveness of Contract**

7.1. This Contract shall come into effect on the date the Contract is signed by both parties and such other later date as may be stated in the **SCC.**

8. **Commencement of Services**

8.1. The Contractor shall confirm availability of Key Experts and begin carrying out the Services not later than the number of days after the Effective Date specified in the **SCC.**

9. **Program schedule**

9.1. Before commencement of the Services, the Contractor shall submit to the Procuring Agency for approval a Program showing the general methods, arrangements, order and timing for all activities. The Services shall be carried out in accordance with the approved Program as updated.

10. **Starting Date/Expiration Date**

10.1. The Contractor shall start carrying out the Services Five (05) days after the date the Contract becomes effective, or at such other date as may be specified in the **SCC.**

10.2. Unless terminated earlier pursuant to Clause **GCC 14** hereof, this Contract shall expire at the end of such time period after the Effective Date as specified in the **SCC.**

11. **Entire Agreement**

11.1. This Contract contains all covenants, stipulations and provisions agreed by the Parties. No agent or representative of either Party has authority to make, and the Parties shall not be bound by or be liable for, any statement, representation, promise or agreement not set forth herein.

12. **Modification**

12.1. Any modification or variation of the terms and conditions of this Contract, including any modification or variation of the scope of the Services, may only be made by written agreement between the Parties. However, each Party shall give due consideration to any modification(s) or variation(s) made by the other Party.

12.2. In cases of any modification(s) or variation(s), the prior written consent of the Procuring Agency is required.

13. **Force Majeure**

13.1. **Definition**

For the purposes of this Contract, “Force Majeure” means an event which is beyond the reasonable control of a Contractor and which makes a Contractor’s performance of its obligations under the Contract impossible or so impractical as to be considered impossible under the circumstances.

13.2. **No Breach of Contract**

The failure of a Party to fulfill any of its obligations under the contract shall not be considered to be a breach of, or default under, this Contract in so far as such inability arises from an event of Force Majeure, provided that the Party affected by such an event (a) has taken all reasonable precautions, due care and reasonable alternative measures in order to carry out the terms and conditions of this Contract, and (b) has informed the other Party as soon as possible about the occurrence of such an event.

13.3. **Extension of Time**

Any period within which a Contractor shall, pursuant to this Contract, complete any action or task, shall be extended for a period equal to the time during which such Party was unable to perform such action as a result of Force Majeure.

13.4. **Payments**

During the period of their inability to perform the Services as a result of an event of Force Majeure, the Contractor shall be entitled to continue to be paid under the terms of this Contract, as well as to be reimbursed for additional costs reasonably and necessarily incurred by them during such period for the purposes of the Services and in reactivating the Service after the end of such period.

14. **Termination**

14.1. **By the Procuring Agency**

The Procuring Agency may terminate this Contract in case of the occurrence of any of the events specified in paragraphs (a) through (e) of this Clause. In such an occurrence the Procuring Agency shall give at least thirty (30) calendar days' written notice of termination to the Contractor in case of the events referred to in (a) through (d); at least sixty (60) calendar days' written notice in case of the event referred to in (e);

14.1.1. If the Contractor fails to remedy a failure in the performance of its obligations hereunder, as specified in a notice of suspension;

14.1.2. If the Contractor becomes (or, if the Contractor consists of more than one entity, if any of its members becomes) insolvent or bankrupt or enter into any agreements with their creditors for relief of debt or take advantage of any law for the benefit of debtors or go into liquidation or receivership whether compulsory or voluntary;

14.1.3. If the Contractor fails to comply with any final decision reached as a result of arbitration proceedings;

14.1.4. If, as the result of Force Majeure, the Contractor is unable to perform a material portion of the Services for a period of not less than sixty (60) calendar days;

14.1.5. If the Procuring Agency, in its sole discretion and for any reason whatsoever, decides to terminate this Contract;

14.2. **By the Contractor**

The Contractor may terminate this Contract, by not less than thirty (30) calendar days' written notice to the Procuring Agency, in case of the occurrence of any of the events specified in paragraphs (a) through (d) of this Clause.

14.2.1. If the Procuring Agency fails to pay any money due to the Contractor pursuant to this Contract and not subject to dispute within forty-five (45) calendar days after receiving written notice from the Contractor that such payment is overdue;

14.2.2. If, as the result of Force Majeure, the Contractor is unable to perform a material portion of the Services for a period of not less than sixty (60) calendar days;

14.2.3. If the Procuring Agency fails to comply with any final decision reached as a result of arbitration;

14.2.4. If the Procuring Agency is in material breach of its obligations pursuant to this Contract and has not remedied the same within forty-five (45) days (or such longer period as the Bidder may have subsequently approved in writing) following the receipt by the Procuring Agency of the Contractor's notice specifying such breach.

C. Obligations of the Contractor

15. **General**

15.1. **Standard of Performance**

15.1.1. The Contractor shall perform the Services and carry out the Services with all due diligence, efficiency and economy, in accordance with generally accepted professional standards and practices, and shall observe sound management practices, and employ appropriate technology and safe and effective equipment, machinery, materials and methods. The Contractor shall always act, in respect of any matter relating to this Contract or to the Services, as a faithful adviser to the Procuring Agency, and shall at all times support and safeguard the Procuring Agency's legitimate interests in any dealings with the third parties;

15.1.2. The Contractor shall employ and provide such qualified and experienced Experts and Sub-Contractors as are required to carry out the Services.

15.2. **Law Applicable to Services**

The Contractor shall perform the Services in accordance with the Contract and in accordance with the Law of Pakistan and shall take all practicable steps to ensure that any of its Experts and Sub-Bidders, comply with the Applicable Law.

16. **Conflict of Interests**

16.1. **Contractor Not to Benefit from Commissions and Discounts**

The remuneration of the Contractor shall constitute the Contractor's sole remuneration in connection with this Contract or the Services, and the Contractor shall not accept for their own benefit any trade commission, discount, or similar payment in connection with activities pursuant to this Contract or to the Services or in the discharge of their obligations under the Contract, and the Contractor shall use their best efforts to ensure that the Personnel, any Subcontractors, and agents of either of them similarly shall not receive any such additional remuneration.

16.2. **Contractor and Affiliates Not to be Otherwise Interested in Project**

The Contractor agree that, during the term of this Contract and after its termination, the Contractor and its affiliates, as well as any Subcontractor and any of its affiliates, shall be disqualified from providing Services (other than the Services and any continuation thereof) for any project resulting from or closely related to the Services.

16.3. **Prohibition of Conflicting Activities**

Neither the Bidder nor its Subcontractors nor the Personnel shall engage, either directly or indirectly, in any of the following activities:

16.3.1. during the term of this Contract, any business or professional activities in the Government's country which would conflict with the activities assigned to them under this Contract;

16.3.2. during the term of this Contract, neither the Contractor nor their Subcontractors shall hire public employees in active duty or on any type of leave, to perform any activity under this Contract;

16.3.3. after the termination of this Contract, such other activities as may be specified in the **SCC.**

17. **Insurance to be Taken Out by the Contractor**

17.1. The Contractor(a) shall take out and maintain, and shall cause any Subcontractors to take out and maintain, at its (or the Sub-contractors', as the case may be) own cost but on terms and conditions approved by the Procuring Agency, insurance against the risks, and for the coverage, as shall be specified in the **SCC**; and (b) at the Procuring Agency's request, shall provide evidence to the Procuring Agency showing that such insurance has been taken out and maintained and that the current premiums have been paid.

18. **Contractor's Actions Requiring Procuring Agency's Prior Approval**

18.1. The Contractor shall obtain the Procuring Agency's prior approval in writing before taking any of the following actions:

18.1.1. appointing such members of the Personnel not provided by the Contractor;

18.1.2. changing the Program of activities; and

18.1.3. any other action that may be specified in the **SCC.**

19. **Reporting Obligations**

19.1. The Contractor shall submit to the Procuring Agency the reports and documents in the numbers, and within the periods as prescribed by the Procuring Agency.

20. **Liquidated Damages**

20.1. **Payments of Liquidated Damages**
The Contractor shall pay liquidated damages to the Procuring Agency at the rate per day stated in the **SCC** for each day that the Completion Date is later than the Intended Completion Date. The total amount of liquidated damages shall not exceed the amount defined in the **SCC**. The Procuring Agency may deduct liquidated damages from payments due to the Contractor. Payment of liquidated damages shall not affect the Contractor's liabilities.

20.2. **Correction for Over-payment**
If the Intended Completion Date is extended after liquidated damages have been paid, the Procuring Agency shall correct any overpayment of liquidated damages by the Contractor by adjusting the next payment certificate. The Contractor shall be paid interest on the overpayment, calculated from the date of payment to the date of repayment, at the rates specified in **SCC.**

20.3. **Lack of performance penalty**

If the Contractor has not corrected a Defect within the time specified in the Procuring Agency's notice, a penalty for Lack of performance will be paid by the Contractor. The amount to be paid will be calculated as a percentage of the cost of having the Defect corrected, assessed as specified in the Contractor

21. **Performance Guarantee**

21.1. Within the time stipulated in the acceptance letter from the Procuring Agency, the successful Bidder shall furnish the Performance Guarantee in shape and amount **specified in SCC.**

21.2. The proceeds of the Performance Guarantee shall be payable to the Procuring agency as compensation for any loss resulting from the Supplier's failure to complete its obligations under the Contract.

21.3. The Performance Guarantee shall be denominated in the currency of the Contract, or in a freely convertible currency acceptable to the Procuring agency and shall be in the acceptable form as specified in **SCC**.

21.4. The Performance Guarantee will be discharged by the Procuring agency and returned to the Supplier not later than thirty (30) days following the date of completion of the Supplier's performance obligations under the Contract, including any warranty obligations, unless otherwise **specified in SCC.**

22. **Sustainable Procurement**

22.1. The Contractor shall conform to the sustainable procurement contractual provisions, if and as specified in the **SCC.**

D. Contractor's Personnel

23. **Description of Personnel**

23.1. The titles, agreed job descriptions, minimum qualifications, and estimated periods of engagement in the carrying out of the Services of the Contractor's Key Personnel. The Key Personnel listed by title as well as by name are hereby approved by the Procuring Agency.

24. **Removal and / or Replacement of Personnel**

24.1. Except as the Procuring Agency may otherwise agree, no changes shall be made in the Key Personnel. If, for any reason beyond the reasonable control of the Contractor, it becomes necessary to replace any of the Key Personnel, the Contractor shall provide as a replacement a person of equivalent or better qualifications.

24.2. If the Procuring Agency finds that any of the Personnel have (i) committed serious misconduct or have been charged with having committed a criminal action, or (ii) have reasonable cause to be dissatisfied with the performance of any of the Personnel, then the Contractor shall, at the Procuring Agency's written request specifying the grounds thereof, provide as a replacement a person with qualifications and experience acceptable to the Procuring Agency.

24.3. The Contractor shall have no claim for additional costs arising out of or incidental to any removal and/or replacement of Personnel.

E. Obligations of the Procuring Agency

25. **Change in the Applicable Law**

25.1. If, after the date of this Contract, there is any change in the Applicable Law with respect to taxes and duties which increases or decreases the cost of the Services rendered by the Contractor, then the remuneration and reimbursable expenses otherwise payable to the Contractor under this Contract shall be increased or decreased accordingly by agreement between the Parties, and corresponding adjustments shall be made to the amounts referred in the **SCC.**

26. **Services and Facilities**

26.1. The Procuring Agency shall make available to the Contractor and the Experts, for the purposes of the Services and free of any charge, the services, facilities and property described in the Terms of Reference, at the times and in the manner specified in the Terms of Reference.

26.2. In case that such services, facilities and property shall not be made available to the Contractor, the Parties shall agree on (i) any time extension that it may be appropriate to grant to the Contractor for the performance of the Services, (ii) the manner in which the Contractor shall procure any such services, facilities and property from other sources, and (iii) the additional payments, if any, to be made to the Contractor as a result thereof.

F. Payments to the Contractor

27. **Contract Price**

27.1. The price payable shall be in Pakistani Rupees unless otherwise specified in the **SCC**.

28. **Terms and Conditions of Payment**

28.1. Payments will be made to the Contractor according to the payment schedule stated in the **SCC** and as per actual invoice submitted by the Contractor.

28.2. Unless otherwise stated in the **SCC**, the advance payment shall be made against the provision by the Contractor of a bank guarantee for the same amount, and shall be valid for the period stated in the **SCC.** Any other payment shall be made after the conditions listed in the **SCC** for such payment have been met, and the Contractor have submitted an invoice to the Procuring Agency specifying the amount due.

29. **Quality Control Identifying Defects**

29.1. The principle and modalities of Inspection of the Services by the Procuring Agency shall be as indicated in the **SCC.** The Procuring Agency shall check the Contractor's performance and notify him of any Defects that are found. Such checking shall not affect the Contractor's responsibilities. The Procuring Agency may instruct the Contractor to search for a Defect and to uncover and test any service that the Procuring Agency considers may have a Defect. Defect Liability Period is as defined in the **SCC**.

30. **Correction of Defects, and Lack of Performance Penalty**

30.1. The Procuring Agency shall give notice to the contractor of any Defects before the end of the Contract. The Defects liability period shall be extended for as long as Defects remain to be corrected.

30.2. Every time notice a Defect is given; the contractor shall correct the notified Defect within the length of time specified by the Procuring Agency's notice.

30.3. If the contractor has not corrected a Defect within the time specified in the Procuring Agency's notice, the Procuring Agency will assess the cost of having the Defect corrected, the contractor will pay this amount, and a Penalty for Lack of Performance.

31. **Settlement of Disputes Amicable Settlement**

31.1. The Parties shall use their best efforts to settle amicably all disputes arising out of or in connection with this Contract or its interpretation.

32. **Dispute Settlement**

32.1. **Arbitration**

If any dispute of any kind whatsoever shall arise between the procuring agency and the contractor in connection with or arising out of the Contract, including without prejudice to the generality of the foregoing, any question regarding its existence, validity or termination, or the execution of the contract, the parties shall seek to resolve any such dispute or difference by mutual consultation. If the parties fail to resolve such a dispute or difference even after negotiations or mediation, then the dispute shall be referred within fourteen (14) days in writing by either party to the Arbitrator, with a copy to the other party.

Any dispute in respect of which a notice of intention to commence arbitration has been given, in accordance with **GCC sub-clause 32.1**, shall be finally settled by arbitration. Arbitration may be commenced prior to or after completion of the Contract. Arbitration proceedings shall be conducted in accordance with Arbitration Act 1940.

Notwithstanding any reference to arbitration herein, the parties shall continue to perform their respective obligations under the Contract unless otherwise agreed. The Procuring Agency shall continue to pay the Contractor any undisputed amounts due under the Contract during the resolution of any dispute.

Special Conditions of Contract

SECTION VIII. SPECIAL CONDITIONS OF CONTRACT

The following Special Conditions of Contract shall supplement the General Conditions of Contract. Whenever there is a conflict, the provisions herein shall prevail over those in the Conditions of Contract. The corresponding clause number of the GCC is indicated in parentheses.

Number of GC Clause

Amendments of, and Supplements to, Clauses in the General Conditions of Contract

Definitions

The Procuring Agency is: IDSRS Project, NIH (IDSRS Project), Project Director IDSRS Project, NIH, Islamabad

The Supplier is:

The title of the subject procurement is:TENDER FOR HIRING OF THE SERVICES FOR TURNKEY ESTABLISHMENT, INTEGRATION & OPERATIONS OF DIGITAL TELEMEDICINE ECOSYSTEM (PILOT PHASE)

Number of GC Clause 2

Applicable/Governing Law:

The Contract shall be interpreted in accordance with the laws of Islamic Republic of Pakistan

Number of GC Clause 3

Language:

The language of the Contract, all correspondence and communications to be given, and all other documentation to be prepared and supplied under the Contract shall be in **English.**

Number of GC Clause 4

Notices:

The addresses for the notices are:

Procuring Agency:

IDSRS Project, NIH (IDSRS Project), Project Director
IDSRS Project, NIH, Islamabad
+92-332-033-2089
procurement.idsrs@nih.org.pk

Contractor/ Bidder:

[Name, address and telephone number].

The Contractor/ Bidder’s Representative(s)

[Name, address, telephone number and e-mail address]

Number of GC Clause 6.1

The Authorized Representatives are:

For the Procuring Agency:

IDSRS Project, NIH (IDSRS Project), Project Director
IDSRS Project, NIH, Islamabad
+92-332-033-2089
procurement.idsrs@nih.org.pk

For the Bidder:

Name: ……

Designation: ……..

Address: ……..

Number of GC Clause 7

Effectiveness of the contract

The Contractor/Bidder shall be effective within ….. days from the date of signature of the Contract by both parties

Number of GC Clause 8

Commencement of Contract:

The Contractor/ Bidder shall provide Non-Consultancy Services from the effective date of contract.

Number of GC Clause 10.2

Expiration of Contract:

The time period shall be …….

Number of GC Clause 14

Termination

In the event of termination of the contract due to any reason as already defined in the General Conditions of Contract, the Bidder shall be responsible for providing to the Authority the Services till the time of alternate arrangements.

Number of GC Clause 16

Conflict of Interest:

The Procuring Agency reserves the right to determine on a case-by-case basis whether the Bidder should be disqualified from providing services due to a conflict of a nature described in Clause GCC C2**.**

Number of GC Clause 20

Liquidated Damages

If the Bidder fails to provide services as required under the contract or in case of any data loss/data breach or any incident compromising the data security or other such failures related to any services, the Bidder shall pay to the Procuring Agency as Liquidated Damages at a rate of **0.10%** to **10.00%** of the Contract value, in accordance with the extent of performance failure & the cost of investigating such incidents as judged by the Authority.

Number of GC Clause 21

Performance Guarantee:

The amount of performance guarantee shall be 7.00% of the contract price in acceptable form of Call at Deposit

Number of GC Clause 27

Currency of Payment:

All the payment to be released to the contractor/Bidder shall be in Pakistani Rupees.

Number of GC Clause F

Payment terms:

Payment will be made to the Bidder against the procured Goods and services according to the actual invoice or running bills submitted by the Bidder against the services provided within the time given in the conditions of the contract.

Number of GC Clause F

Identifying Defects:

The Authority reserves the right at any time to inspect the premises of the provider to inspect the goods and monitor the goods being provided.

Inspections & Tests Requirements

For successful installation, integration, testing, commissioning and operational readiness of the complete Digital Telemedicine Ecosystem (Installation, Testing & Commissioning Report by Procurement Committee / Inspection Team)

For conformity of supplied equipment, systems, software and associated components with the approved specifications and performance requirements (Inspection/Verification Report by Procurement Committee / Inspection Team)

For successful completion of User Acceptance Testing (UAT), including functional, integration, interoperability, security and performance/load testing prior to Go-Live (UAT Report by Procurement Committee / Inspection Team / authorized technical experts).

For verification of service delivery, SLA/KPI compliance, consultation records and operational performance during the Contract Period (Monthly/Periodic Performance Report verified by Procuring Agency / authorized Third-Party Monitor).

For inspection and verification of telemedicine kiosks, call centre, pharmacy network, warehouses/cold-chain, field workforce and other operational facilities as specified in the Scope of Work (Inspection Report by Procurement Committee / Inspection Team / authorized Third-Party Monitor).

For verification of cybersecurity, data protection, backup, disaster recovery and system security requirements prior to Go-Live and during operations (Compliance/Test Report by authorized Technical/Inspection Team or independent Third-Party Expert, where required).

For final acceptance and handover of all Government-owned CAPEX assets, system credentials, source/configuration records, databases, backups, technical documentation and other contractual deliverables upon completion/termination (Final Acceptance & Handover Report by Procurement Committee / Inspection Team).

For verification of interoperability and successful end-to-end integration of the Telemedicine Platform with EMR/e-Prescription, call centre, kiosks, pharmacy, diagnostics, National Telemedicine Data Hub and IDSRS systems (Integration Test Report by authorized Technical/Inspection Team).

Delivery & Documents

Supplier/Service Provider’s invoice with description, quantity, applicable CAPEX/OPEX rates, taxes and total amount, supported by prescribed acceptance/service verification documents.

Packing list identifying equipment/hardware and quantities delivered, where applicable.

Insurance certificate for equipment/goods during transit, delivery and installation, where applicable.

Manufacturer’s/OEM’s/Supplier’s valid warranty certificates for supplied equipment, hardware and other applicable CAPEX items.

Inspection, Installation, Testing & Commissioning/Acceptance Report issued or endorsed by the Procuring Agency’s authorized Inspection/Technical Team, as applicable.

Certificate of Origin for imported equipment/hardware, where applicable.

Delivery challans/receiving documents for all supplied CAPEX equipment, hardware and associated items, duly acknowledged by the authorized representative of the Procuring Agency.

For OPEX payments, monthly invoice supported by verified consultation/service records, SLA/KPI performance report and other supporting documents prescribed in the Bidding Documents.

Number of GC Clause F 5 & 6

Following is the guidance for Dispute Resolution

i. If any dispute of any kind whatsoever shall arise between the Authority and the Bidder in connection with or arising out of the Contract, including without prejudice to the generality of foregoing, any question regarding its existence, validity, termination and the execution of the Contract – whether during developing phase or after their completion and whether before or after the termination, abandonment or breach of the Contract – the parties shall seek to resolve any such dispute or difference by mutual diligent negotiations in good faith within 14 (fourteen) days following a notice sent by one Party to the other Party in this regard**.**

ii. At future of negotiation the dispute shall be resolved through mediation and mediator shall be appointed with the mutual consent of the both parties**.**

iii. At the event of failure of mediation to resolve the dispute relating to this contract such dispute shall finally be resolved through binding Arbitration by sole arbitrator in accordance with Arbitration Act 1940. The arbitrator shall be appointed by mutual consent of the both parties**.** The Arbitration shall take place in Islamabad, Pakistan and proceedings will be conducted in English language.

iv. The cost of the mediation and arbitration shall be shared by the parties in equal proportion however the both parties shall bear their own costs and lawyer's fees regarding their own participation in the mediation and arbitration. However, the Arbitrator may make an award of costs upon the conclusion of the arbitration making any party to the dispute liable to pay the costs of another party to the dispute**.**

v. Arbitration proceedings as mentioned in the above clause regarding resolution of disputes may be commenced prior to, during or after completion of the contract.

Notwithstanding any reference to the arbitration herein, the parties shall continue to perform their respective obligations under the Contract unless they otherwise agree that the Authority shall pay the Bidder any monies due to the Bidder.

Arbitrator's fee:

The fee shall be specified in Pak Rupees, as determined by the Arbitrator, which shall be shared equally by both parties**.**

Appointing Authority for Arbitrator:

By the Mutual Consent or in accordance with the provisions of Arbitration Act, 1940, in case the parties fail to reach a consensus on the name of sole arbitrator, any party may submit an application to the Chief Justice Islamabad High Court for appointment of sole arbitrator. The Chief Justice IHC may appoint a former judge of any High Court or Supreme Court as the sole arbitrator to resolve the dispute between the parties.

Rules of procedure for arbitration proceedings:

Any dispute between the Authority and a Bidder who is a national of the Islamic Republic of Pakistan arising in connection with the present Contract shall be referred to adjudication or arbitration in accordance with the laws of the Islamic Republic of Pakistan including Arbitration Act 1940, however above provision shall prevail in referring the case to the Arbitrator.

Place of Arbitration and Award:

The arbitration shall be conducted in English language and place of arbitration shall be at Islamabad. The award of the arbitrator shall be final and shall be binding on the parties.

Bid Securing Declaration

Form 9: Bid Securing Declaration

Date: *[insert date (as day, month and year)]*

Bid No.:***P97228***

To: **IDSRS Project, NIH (IDSRS Project), Project Director IDSRS Project, NIH, Islamabad**

We, the undersigned, declare that:

We understand that, according to your conditions, Bids must be supported by a Bid Securing Declaration.

We accept that we will be blacklisted and henceforth cross debarred for participating in respective category of public procurement proceedings for a period of (not more than) six months, if fail to abide with a bid securing declaration, however without indulging in corrupt and fraudulent practices, if we are in breach of our obligation(s) under the Bid conditions, because we:

1. have withdrawn or modified our Bid during the period of Bid Validity specified in the Form of Bid;

2. Disagreement to arithmetical correction made to the Bid price; or

3. having been notified of the acceptance of our Bid by the Procuring Agency during the period of Bid Validity, (i) failure to sign the contract if required by Procuring Agency to do so or (ii) fail or refuse to furnish the Performance Security or to comply with any other condition precedent to signing the contract specified in the Bidding Documents.

We understand this Bid Securing Declaration shall expire if we are not the successful

Bidder, upon the earlier of (i) our receipt of your notification to us of the name of the successful Bidder; or (ii) twenty-eight (28) days after the expiration of our Bid.

Contract Form

SECTION IX: CONTRACT FORMS

THIS AGREEMENT made the _____ day of _____ 20_____ between **IDSRS Project, NIH (IDSRS Project), Project Director IDSRS Project, NIH, Islamabad**

(hereinafter called "the Procuring Agency") of the one part and *[name of Bidder]* of *[city and country of Bidder]* (hereinafter called "the Bidder") of the other part:

WHEREAS the Procuring Agency invited Bids for provision of goods, viz., **TENDER FOR HIRING OF THE SERVICES FOR TURNKEY ESTABLISHMENT, INTEGRATION & OPERATIONS OF DIGITAL TELEMEDICINE ECOSYSTEM (PILOT PHASE) (*P97228*)** and has accepted a Bids by the Bidder for the provision of Goods in the sum of *[contract price in words and figures]* (hereinafter called "the Contract Price").

NOW THIS CONTRACT WITNESSETH AS FOLLOWS:

1. In this Contract 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 be deemed to form and be read and construed as part of this Contract, In the event of any ambiguity or conflict between the Contract Documents listed below, the order of precedence shall be the order in which the Contract Documents are listed below:-

1. This form of Contract;
2. the Form of Bids and the Price Schedule submitted by the Bidder;
3. the Schedule of Requirements;
4. the Technical Specifications;
5. the Special Conditions of Contract;
6. the General Conditions of the Contract;
7. the Procuring Agency's Letter of Acceptance; and
8. [*add here: any other documents*]

3. In consideration of the payments to be made by the Procuring Agency to the Bidder as hereinafter mentioned, the Bidder hereby covenants with the Procuring Agency to provide the Goods related services and to remedy defects therein in conformity in all respects with the provisions of the Contract.

4. The Procuring Agency hereby covenants to pay the Bidder in consideration of the provision of Goods 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 Contract to be executed in accordance with their respective laws the day and year first above written.

Signed, sealed, delivered by _____the _____ (for the Procuring Agency)

Witness to the signatures of the Procuring Agency:

……

Signed, sealed, delivered by _____the _____ (for the Procuring Agency)

Witness to the signatures of the Bidder: ……

Integrity Pact

Integrity Pact

DECLARATION OF FEES, COMMISSION AND BROKERAGE ETC. PAYABLE BYTHE SUPPLIERS OF GOODS, SERVICES & WORKS IN CONTRACTS WORTH RS.10.00 MILLION OR MORE

Contract Number: Contract Value: Contract Title:

Dated:

[Name of Supplier] hereby declares that it has not obtained or induced the procurement of any contract, right, interest, privilege or other obligation or benefit from Government of Pakistan or any administrative subdivision or agency thereof or any other entity owned or controlled by it (GoP) through any corrupt business practice.

Without limiting the generality of the foregoing [Name of Supplier] represents and warrants that it has fully declared the brokerage, commission, fee etc. paid or payable to anyone and not given or agreed to give and shall not give or agree to give to anyone within or outside Pakistan either directly or indirectly through any natural or juridical person, including its affiliate, agent, associate, broker, consultant, director, promoter, shareholder, sponsor or subsidiary, any commission, gratification, bribe, finder's fee or kickback, whether described as consultations fee or otherwise, with the object of obtaining or inducing the procurement of a contract, right, interest, privilege or other obligation or benefit in whatsoever form from GoP, except that which has been expressly declared pursuant hereto.

[Name of Supplier] certifies that it has made and will make full disclosure of all agreements and arrangements with all persons in respect of or related to the transaction with GoP and has not taken any action or will not take any action to circumvent the above declaration, representative or warranty.

[Name of Supplier] accepts full responsibility and strict liability for making and false declaration, not making full disclosure, misrepresenting fact or taking any action likely to defeat the purpose of this declaration, representation and warranty. It agrees that any contract, right interest, privilege or other obligation or benefit obtained or procured as aforesaid shall, without prejudice to any other right and remedies available to GoP under any law, contract or other instrument, be voidable at the option of GoP.

Notwithstanding any rights and remedies exercised by GoP in this regard, [Name of Supplier] agrees to indemnify GoP for any loss or damage incurred by it on account of its corrupt business practices and further pay compensation to GoP in an amount equivalent to ten time the sum of any commission, gratification, bribe, finder's fee or kickback given by [Name of Supplier] as aforesaid for the purpose of obtaining or inducing the procurement of any contract, right, interest, privilege or other obligation or benefit in whatsoever form from GoP.

Performance Guarantee Form

Performance Guarantee Form

To: **IDSRS Project, NIH (IDSRS Project), Project Director IDSRS Project, NIH, Islamabad**

WHEREAS *[name of Bidder]* (hereinafter called "the Bidder") has undertaken, in pursuance of Contract No. *[reference number of the contract]* dated *[insert date]* for provision of Goods*(*hereinafter called "the Contract").

AND WHEREAS it has been stipulated by you in the said Contract that the Bidder shall furnish you with a Bank Guarantee by a reputable bank for the sum specified therein as security for compliance with the Bidder's performance obligations in accordance with the Contract.

AND WHEREAS we have agreed to give the Bidders guarantee:

THEREFORE, WE hereby affirm that we are Guarantors and responsible to you, on behalf of the Bidder, up to a total of *[amount of the guarantee in words and figures],* and we undertake to pay you, upon your first written demand declaring the Bidder 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.

This guarantee is valid until the: *[insert date]*

Signature and seal of the Guarantors

_____

[name of bank or financial institution]

_____

[address]

_____

[date}

Annexure

Form 1 - Letter of Bid

To be completed and submitted by the Bidder as the formal Letter of Bid for the Stage-I Technical Proposal. No financial information shall be included.

Technical Submission (Vendor)

Document Required

See Form Under Additional Forms and Documents: **Form 1 - Letter of Bid** (page number: 92)

Form II - Financial Letter of Bid (Stage-II)

To be completed and submitted only by technically qualified Bidders invited to Stage-II as the formal Letter of Bid accompanying the Financial Proposal.

Financial Submission (Vendor)

Document Required

See Form Under Additional Forms and Documents: **Form II - Financial Letter of Bid (Stage-II)** (page number: 94)

Form III – Bidder Information Form

To be completed by the Bidder providing its legal, registration, ownership and authorized representative information, together with the prescribed supporting documents.

Technical Submission (Vendor)

Document Required

See Form Under Additional Forms and Documents: **Form III – Bidder Information Form** (page number: 97)

Form IV – Bidder’s JV/Consortium Members Information Form

To be completed separately for each member of a Joint Venture/Consortium, where applicable, together with the prescribed supporting documents.

Technical Submission (Vendor)

Document Required

See Form Under Additional Forms and Documents: **Form IV – Bidder's JV/Consortium Members Information Form** (page number: 99)

Form V – Price Schedule / Financial Proposal Form

To be completed and submitted at Stage-II, providing the Bidder's CAPEX lump-sum prices and OPEX scenario-based unit prices for financial evaluation in accordance with the prescribed methodology.

Financial Submission (Vendor)

Document Required

See Form Under Additional Forms and Documents: **Form V – Price Schedule / Financial Proposal Form** (page number: 101)

Form VI – Blacklisting Undertaking

To be completed, signed and submitted by the Bidder/JV/Consortium as the prescribed undertaking regarding non-blacklisting, authenticity of documents, conflict of interest and compliance with the Bidding Documents.

Technical Submission (Vendor)

Document Required

See Form Under Additional Forms and Documents: **Form VI – Blacklisting Undertaking** (page number: 105)

Form VII – Form of Contract

Prescribed Form of Contract setting out the agreement to be executed between the Procuring Agency and the successful Contractor upon award of the Contract.

Information (Read-Only)

See Form Under Additional Forms and Documents: **Form VII – Form of Contract** (page number: 107)

Form VIII – Integrity Pact

Prescribed Integrity Pact forming part of the Bidding/Contract Documents and applicable to the successful Bidder in accordance with the applicable procurement requirements.

Information (Read-Only)

See Form Under Additional Forms and Documents: **Form VIII – Integrity Pact** (page number: 109)

Form IX – Service Level Agreement (SLA)

Mandatory – To be duly signed and stamped on each page by the authorized representative and submitted with the Technical Proposal as unconditional acceptance of the SLA requirements.

Technical Submission (Vendor)

Document Required

See Form Under Additional Forms and Documents: **Form IX – Service Level Agreement (SLA)** (page number: 111)

Additional Instructions to Bidders (AITB)

Additional Instructions to Bidders supplementing and, where expressly stated, amending the standard Instructions to Bidders (ITB) for implementation of the Two-Stage Bidding Procedure under Rule 36(c), including Stage-I and Stage-II submission, evaluation and related procedural requirements.

Information (Read-Only)

See Form Under Additional Forms and Documents: **Additional Instructions to Bidders (AITB)** (page number: 117)

Additional Bid Data Sheet (ABDS)

Additional Bid Data Sheet supplementing and, where expressly stated, replacing or amending the standard Bid Data Sheet (BDS), specifying procurement-specific requirements including bid validity, Bid Security, submission, evaluation, contract term and other applicable bidding particulars.

Information (Read-Only)

See Form Under Additional Forms and Documents: **Additional Bid Data Sheet (ABDS)** (page number: 122)

Additional General Conditions of Contract (AGCC)

Additional General Conditions of Contract supplementing and, where expressly stated, amending the standard GCC, including provisions relating to turnkey obligations, SLA remedies, insurance, data protection, intellectual property, CAPEX assets, handover and other contractual requirements.

Information (Read-Only)

See Form Under Additional Forms and Documents: **Additional General Conditions of Contract (AGCC)** (page number: 126)

Additional Special Conditions of Contract (ASCC)

Additional Special Conditions of Contract supplementing and, where expressly stated, replacing or completing the standard SCC, including procurement-specific provisions relating to Performance Guarantee, Liquidated Damages, contract effectiveness and term, inspections, acceptance, Defect Liability Period, locations, insurance and other contractual particulars.

Information (Read-Only)

See Form Under Additional Forms and Documents: **Additional Special Conditions of Contract (ASCC)** (page number: 131)

Annexure-I (Scope of Work)

Detailed Scope of Work and Technical Requirements defining the complete turnkey requirements for the design, development, establishment, integration, deployment, commissioning, operation, maintenance and transfer of the Digital Telemedicine Ecosystem (Pilot Phase), including all technical, operational, implementation, deliverable, performance and handover requirements. The Bidder shall comply with the Scope of Work in its entirety and address all requirements in its Technical Proposal. No separate signature/stamp is required on this document.

Information (Read-Only)

See Form Under Additional Forms and Documents: **Annexure-I (Scope of Work)** (page number: 135)

Procurement Forms

Past Experience and Completed Contracts

Bidder shall provide details of relevant past experience and completed contracts, supported by documentary evidence, in accordance with the eligibility and qualification criteria specified in the Bidding Documents.

See Form Under Additional Forms and Documents: **Past Experience and Completed Contracts** (page number: 173)

Historical Contract Non-Performance, and Pending Litigation and Litigation History

Bidder shall disclose details of contract non-performance, pending litigation and litigation history, if any, along with supporting documents/declarations, in accordance with the Bidding Documents.

See Form Under Additional Forms and Documents: **Historical Contract Non-Performance, and Pending Litigation and Litigation History** (page number: 174)

Current Contracts and Their Progress

Bidder may provide details of current contracts/assignments and their implementation status for assessment of ongoing commitments and operational capacity.

See Form Under Additional Forms and Documents: **Current Contracts and Their Progress** (page number: 176)

Average Annual Turnover

Bidder shall demonstrate an average annual turnover of at least PKR 500 million during the last three (03) financial years, supported by audited financial statements duly audited/certified by a Chartered Accountant.

See Form Under Additional Forms and Documents: **Average Annual Turnover** (page number: 177)

PUBLIC PROCUREMENT REGULATORY AUTHORITY
(PPRA)
EPADS

Additional Forms and Documents

Letter of Bid – Technical Proposal – Stage – I

INSTRUCTIONS TO BIDDERS: DELETE THIS BOX ONCE YOU HAVE COMPLETED THE DOCUMENT

The Bidder must prepare the Letter of Bid on stationery with its letterhead clearly showing the Bidder's complete name and business address.

Note: All italicized text in black font is to help Bidders in preparing this form and Bidders shall delete it from the final document.

Date of this Bid submission: [*insert date (as day, month and year) of Bid submission*]

RFB No.: [*insert number of Bidding process*]

Request for Bid No.: [*insert identification*]

Alternative No.: [*insert identification No if this is a Bid for an alternative*] To:

[*insert complete name of Procuring Agency*]

We, the undersigned Bidder, hereby submit our Technical Proposal for Stage-I of this two-stage procurement. We confirm that no financial information is included in this submission.

In submitting our Bid, we make the following declarations:

(a) **No reservations:** We have examined and have no reservations to the bidding document, including addenda issued in accordance with Instructions to Bidders (ITB 9);

(b) **Eligibility**: We meet the eligibility requirements and have no conflict of interest in accordance with ITB 3;

(c) **Bid Security (CDR)**: We have submitted the Bid Security in accordance with the requirements of the Bidding Documents, AITB 7 and ABDS 6.;

(d) **Conformity:** We offer to perform the Services in conformity with the Bidding Documents, Scope of Work, Technical Specifications, and Schedule of Requirements: [*insert a brief description of the Goods and Related Services*];

(e) **Bid Validity Period**: Our Bid shall remain valid for one hundred and eighty (180) days from the date of opening of the Technical Proposals, or for such extended period as may be applicable in accordance with ABDS 5, and shall remain binding upon us during such period;

(f) **Performance Security**: If our Bid is accepted, we commit to obtain a performance security in accordance with the bidding document;

(g) **One Bid per Bidder**: We confirm that neither we, nor any member of our Joint Venture/Consortium (where applicable), have submitted more than one Bid for this procurement, either individually or as a member of another Joint Venture/Consortium submitted in accordance with AITB 2;

(h) **Suspension and Debarment**: We, along with any of our subcontractors, suppliers, consultants, manufacturers, or service providers for any part of the contract, are not subject to, and not controlled by any entity or individual that is subject to, a temporary suspension or a debarment imposed by the Procuring Agency including blacklisting under PPRA Rule 19.;

(i) **State-owned enterprise or institution**: [*select the appropriate option and delete the other*] [*We are not a state-owned enterprise or institution*] / [*We are a state-owned enterprise or institution but meet the requirements of ITB Clause 3.4]*];

(j) **Binding Contract**: We understand that this Bid, together with your written acceptance thereof included in your Letter of Acceptance, shall constitute a binding contract between us, until a formal contract is prepared and executed;

(k) **Not Bound to Accept**: We understand that you are not bound to accept the Most Advantageous Bid or any other Bid that you may receive; and

(l) **Fraud and Corruption**: We hereby certify that we have taken steps to ensure that no person acting for us, or on our behalf, engages in any type of Fraud and Corruption.

Name of the Bidder: *[*insert complete name of Bidder*]

Name of the person duly authorized to sign the Bid on behalf of the Bidder: ** [*insert complete name of person duly authorized to sign the Bid*]

Title of the person signing the Bid: [*insert complete title of the person signing the Bid*]

Signature of the person named above: [*insert signature of person whose name and capacity are shown above*]

Date signed [*insert date of signing*] **day of** [*insert month*], [*insert year*]

*: In the case of the Bid submitted by a Joint Venture / Consortium specify the name of the Joint Venture / Consortium as Bidder.

**: Person signing the Bid shall have the power of attorney given by the Bidder. The power of attorney shall be attached with the Bid Schedules duly notarized and authorizing the signatory to bind the Bidder / Lead Member (in case of JV/Consortium).

Letter of Bid – Financial Proposal – Stage - II

INSTRUCTIONS TO BIDDERS: DELETE THIS BOX ONCE YOU HAVE COMPLETED THE DOCUMENT

The Bidder must prepare the Letter of Bid - Financial Proposal on stationery with its letterhead clearly showing the Bidder's complete name and business address.

Note: All italicized text is to help Bidders in preparing this form.

Date of this Bid submission: [*insert date (as day, month and year) of Bid submission*]

No.: [*insert number of bidding process*]

Name of Project.: [*insert identification*]

Alternative No.: [*insert identification No if this is a Bid for an alternative*]

To: [*insert complete name of Procuring Agency*]

We, the undersigned Bidder, hereby submit the second part of our Bid, the Financial Proposal.

In submitting our Financial Proposal, we make the following additional declarations:

(a) **Bid Validity Period**: Our Financial Proposal shall remain binding for the remainder of the Bid Validity Period applicable in accordance with ABDS 5, including any duly authorized extension thereof.;

(b) **Total Price:** The Total Bid Price shall be quoted in Pak Rupees (PKR) in accordance with the prescribed Financial Proposal Forms and shall comprise the Total CAPEX Price and Total OPEX Price. The Total Evaluated Cost shall be determined in accordance with the Financial Evaluation Method prescribed in the Bidding Documents.

(c) **Discounts:** The discounts offered and the methodology for their application are:

i. The discounts offered are: [*Specify in detail each discount offered*]

ii. The exact method of calculations to determine the net price after application of discounts is shown below: [*Specify in detail the method that shall be used to apply the discounts*]; Any discount offered shall be clearly linked to the financial structure (CAPEX and OPEX components) and shall be applied consistently for evaluation purposes. Any discount offered shall be unconditional, clearly identified, and applicable to the relevant CAPEX and/or OPEX component(s) for the purpose of financial evaluation.

(d) **Commissions, gratuities and fees:** We have paid, or will pay the following commissions, gratuities, or fees with respect to the bidding process or execution of the Contract: [*insert complete name of each Recipient, its full address, the reason for which each*

commission or gratuity was paid and the amount and currency of each such commission or gratuity].

Name of Recipient	Address	Reason	Amount

(If none has been paid or is to be paid, indicate "none.")

Failure to disclose such commissions, if applicable, may result in disqualification under applicable procurement rules.

(e) **Binding Contract:** We understand that this Bid, together with your written Letter of Acceptance, shall constitute a binding contract between us until a formal Contract Agreement is executed. We further confirm that our Financial Proposal has been prepared in accordance with the Financial Proposal Forms and the Financial Evaluation Model specified in the Bidding Documents. The quoted prices shall remain firm and fixed during the Bid Validity Period and throughout the Contract, except as otherwise provided in the Contract.

(f) **Financial Proposal:** We confirm that all prices quoted in our Financial Proposal are inclusive of all applicable taxes, duties, levies, insurance, transportation, logistics, installation, commissioning, licensing, hosting, manpower, operational costs, overheads, and all other costs necessary for complete performance of the Contract, unless otherwise specified in the Bidding Documents.

Name of the Bidder: *[*insert complete name of the Bidder*]

Name of the person duly authorized to sign the Bid on behalf of the Bidder: ** [*insert complete name of person duly authorized to sign the Bid*]

Title of the person signing the Bid: [*insert complete title of the person signing the Bid*]

Signature of the person named above: [*insert signature of person whose name and capacity are shown above*]

Date signed [*insert date of signing*] **day of** [*insert month*], [*insert year*]

*: In the case of the Bid submitted by a Joint Venture / Consortium specify the name of the Joint Venture / Consortium as Bidder.

**: Person signing the Bid shall have the power of attorney given by the Bidder. The power of attorney, duly notarized, shall be attached with the Bid Schedules and shall authorize the signatory to bind the Bidder / Lead Member (in case of JV/Consortium).

Bidder Information Form (Attach with Technical Bid)

[The Bidder shall fill in this Form in accordance with the instructions indicated below. No alterations to its format shall be permitted and no substitutions shall be accepted.]

Date: *[insert date (as day, month and year) of Bid submission*]

No.: *[insert number of Bidding process]*

Alternative No.: *[insert identification No if this is a Bid for an alternative]*

Page_____of_____pages

1. Bidder's Name *[insert Bidder's legal name]*
2. In case of JV / Consortium, legal name of each member: *[insert legal name of each member in JV / Consortium]*
3. Bidder's actual or intended country of registration: *[insert actual country of registration]*
4. Bidder's year of registration: *[insert Bidder's year of registration]*
5. Bidder's Address in country of registration: *[insert Bidder's legal address in country of registration]*
6. Bidder's Authorized Representative Information Name: *[insert Authorized Representative's name]* Address: *[insert Authorized Representative's Address]* Telephone/Fax numbers: *[insert Authorized Representative's telephone/fax numbers]* Email Address: *[insert Authorized Representative's email address]*

7. Attached are copies of original documents of *[check the box(es) of the attached original documents]*

☐ Articles of Incorporation (or equivalent documents of constitution or association), and/or documents of registration of the legal entity named above.

☐ In case of JV / Consortium, letter of intent to form JV / Consortium or JV / Consortium agreement, in accordance with ITB 3 (Eligibility and JV/Consortium Requirements).

☐ Declaration that the Bidder is not blacklisted or under any conflict of interest in accordance with ITB Clause 3 and applicable PPRA Rules

8. Included are the organizational chart, a list of Board of Directors, and the beneficial ownership duly signed and certified by the authorized representative.

9. The Procuring Agency reserves the right to verify the authenticity of all submitted information. Any false declaration or misrepresentation shall lead to disqualification and may result in blacklisting under PPRA Rule 19.

Bidder's JV Members Information Form (In Case of Joint Venture / Consortium)

[The Bidder shall fill in this Form in accordance with the instructions indicated below. The following table shall be filled in for the Bidder and for each member of a Joint Venture / Consortium]].

Date: *[insert date (as day, month and year) of Bid submission*]

RFB No.: *[insert number of RFB process]*

Alternative No.: *[insert identification No if this is a Bid for an alternative]*

Page_____of_____pages

1. Bidder's Name: *[insert Bidder's legal name]*
2. Bidder's JV / Consortium Member's name: *[insert JV / Consortium Member's legal name]*
3. Bidder's JV / Consortium Member's country of registration: *[insert JV / Consortium Member's country of registration]*
4. Bidder's JV / Consortium Member's year of registration: *[insert JV / Consortium Member's year of registration]*
5. Bidder's JV / Consortium Member's legal address in country of registration: *[insert JV / Consortium Member's legal address in country of registration]*
6. Bidder's JV / Consortium Member's authorized representative information Name: *[insert name of JV / Consortium Member's authorized representative]* Address: *[insert address of JV / Consortium Member's authorized representative]* Telephone/Fax numbers: *[insert telephone/fax numbers of JV / Consortium Member's authorized representative]* Email Address: *[insert email address of JV / Consortium Member's authorized representative]*

7. Attached are copies of original documents of *[check the box(es) of the attached original documents]*

☐ Articles of Incorporation (or equivalent documents of constitution or association), and/or registration documents of the legal entity named above, in accordance with "ITB Clause 3 (Eligibility and JV/Consortium Requirements).

☐ Declaration of non-blacklisting and absence of conflict of interest in accordance with applicable PPRA Rules.

8. Included are the organizational chart, a list of Board of Directors, and the beneficial ownership duly signed and certified by the authorized representative of the JV / Consortium Member. All JV / Consortium Members shall be jointly and severally liable for execution of the Contract. The Procuring Agency reserves the right to verify the authenticity of all submitted information. Any misrepresentation shall result in disqualification and may lead to blacklisting under PPRA Rule 19.

Price Schedule: Financial Proposal Form

A. GENERAL INSTRUCTIONS

The Bidder shall submit the Financial Proposal strictly in accordance with the prescribed format.

The Financial Proposal shall clearly distinguish between:

(a) CAPEX (One-Time Costs)

(b) OPEX (Operational Costs under defined service scenarios)

All prices shall be quoted in Pakistani Rupees (PKR), inclusive of all applicable taxes, duties, logistics, manpower, operational expenses, and any other associated costs.

No additional payment shall be made outside the quoted prices.

The quoted prices shall remain firm and fixed throughout the Contract Term.

B. CAPEX (ONE-TIME COSTS)

Table A: CAPEX (LUMP SUM BASIS)

S. No.	Description	Unit	Quantity	Unit Price (PKR)	Total Price (PKR)
1	Telemedicine Platform Development / Customization	L.S			
2	Kiosk Hardware & Setup	L.S			
3	IT Equipment & Hardware Infrastructure (Servers, Networking, Cybersecurity)	L.S			
4	Call Center Equipment & Technology Setup (Telephony, Workstations, Networking & Related Equipment)	L.S			
5	System Integration & Interoperability				
6	Software Licensing / Integration	L.S			
7	Training & Capacity Building	L.S			
TOTAL CAPEX					

Note:

Preparation of site assessment reports, functional layouts, architectural drawings, 3D visualizations, technical specifications, and BOQs for designated Telemedicine Centres shall form part of the Scope of Work and shall not be quoted or paid as separate CAPEX items.

All assets, equipment, hardware and other items included under CAPEX and paid for by the Procuring Agency shall be the property of the Procuring Agency/Government and shall be handed over by the Contractor upon expiry or termination of the Contract, without any additional cost, in accordance with the Scope of Work and Conditions of Contract.

C. OPEX (SCENARIO-BASED PRICING)

Table B: OPEX – Scenario-Based Unit Pricing

S. No.	Scenario Description	Unit	Unit Price (PKR)
1	Consultation Call (without medicine) (S1)	Per Consultation	
2	Consultation + Medicine (Delivery / Pickup) (S2)	Per Consultation	
3	Consultation + Medicine + Diagnostic (Kiosk / Field Visit) (S3)	Per Consultation	

The quoted prices under each scenario shall be all-inclusive, covering consultation charges, medicines, diagnostics, logistics, delivery, manpower (doctors, call center agents, field staff), IT operations and all associated operational costs throughout the Contract Term.

D. OPEX EVALUATION MODEL (WEIGHTED)

Table C: Derived OPEX Cost

Description	Value
Weighted Average Price	(S1 × 0.40) + (S2 × 0.40) + (S3 × 0.20)
Total Consultations	3,600,000
Total OPEX Cost	Weighted Average Price × 3,600,000

For evaluation purposes, a weighted average of the three OPEX scenarios shall be calculated using the following distribution:

- Scenario 1 (Consultation without medicine) = 40%
- Scenario 2 (Consultation with medicine) = 40%

• Scenario 3 (Consultation with medicine + diagnostics / field services) = 20%

The weighted average price shall be multiplied by 3,600,000 consultations to determine the total OPEX cost.

The above weightages are based on estimated service utilization patterns and shall be binding for financial evaluation purposes.

No separate payment shall be made under any head.

E. GRAND TOTAL (FOR FINANCIAL EVALUATION)

Table D: Financial Summary

Component	Amount (PKR)
Total CAPEX	
Total OPEX	
GRAND TOTAL COST (CAPEX + OPEX)	

Note:

1. The quoted prices shall remain firm and fixed throughout the contract period and shall not be subject to escalation.

2. The Bidder shall not be entitled to any additional payment beyond the quoted CAPEX and OPEX rates, except where expressly provided under the Contract.

3. Any ambiguity in pricing shall be interpreted in favor of the Procuring Agency.

4. In case of abnormal variation, front-loading, unbalanced pricing, or unjustified disparity between CAPEX and OPEX components or among the defined service scenarios, the Procuring Agency reserves the right to seek clarification, justification, or take appropriate action in accordance with the Public Procurement Rules, 2004 and the Bidding Documents.

5. Arithmetic errors shall be corrected in accordance with ITB provisions.

6. The Financial Proposals of technically qualified and responsive Bidders shall be evaluated on the basis of the Grand Total Cost/Total Evaluated Cost determined in accordance with the Financial Evaluation Methodology specified in the Bidding Documents. The Bidder having the Lowest Evaluated Cost shall be ranked first.

**** The quoted prices shall be inclusive of all applicable taxes, duties, levies, insurance, transportation, logistics, installation, commissioning, licensing, hosting, manpower, operational costs, overheads, and all other costs necessary for complete performance of the Contract, unless otherwise specified in the Bidding Documents.***

Name of Bidder [insert complete name of Bidder]

Signature of Bidder [signature of person signing the Bid]

Date [Insert Date]

1. Blacklisting Undertaking

Whereas the **"Firm"** means the Bidder, whether acting individually or as a **Joint Venture / Consortium (where applicable)**, and includes its owners, directors, partners, authorized representatives, successors, assigns, and all members of the Joint Venture / Consortium.

I/we, (name and CNIC of owner and all partners) _____, CEO/proprietor/partner of the firm (name of firm and address) _____, hereby solemnly undertake the following:

1. That the Firm has **not been blacklisted, debarred, or declared ineligible** by any Federal or Provincial Government Department, Agency, Autonomous Body, Public Sector Organization, or Regulatory Authority in Pakistan, and is not currently subject to any blacklisting or debarment proceedings, to the best of our knowledge.
2. That all documents/information submitted in this bid are true, correct, and genuine, and in case of any misrepresentation, forgery, or falsification, the Firm shall be liable to disqualification, forfeiture of Bid Security, blacklisting under PPRA Rule 19, and legal action.
3. That the Firm shall not engage in cartelization, collusive practices, or any anti-competitive behavior, and any such act shall render the Firm liable to rejection of bid, forfeiture of securities, and blacklisting.
4. That the Firm shall fully comply with the **Contract, Scope of Work, Technical Specifications, Service Level Agreements (SLAs), Key Performance Indicators (KPIs),** delivery schedule, performance obligations, and all terms and conditions of the Bidding Documents.
5. That the Firm shall not attempt to influence, directly or indirectly, any member of the Procurement Committee, Technical Members/Co-opted Technical Experts, or any official of the Procuring Agency, and any such attempt shall result in disqualification, forfeiture of securities, and blacklisting.
6. That the Firm shall maintain professional conduct with all officials of the Procuring Agency and shall not engage in any act that may delay, obstruct, or interfere with the procurement process, failing which the Firm shall be liable to appropriate action under applicable rules.
7. That the Firm has carefully read and understood all provisions of the **Bidding Documents** relating to **Tender No. _____** and agrees to comply with the same in **letter and spirit**.
8. That the Firm acknowledges that any action of blacklisting, debarment, or penalties shall be taken in accordance with applicable laws, PPRA Rules, and due process, and shall be subject to the remedies available under the law.
9. That the Firm confirms that neither it, nor any of its directors, partners, Joint Venture / Consortium members (where applicable), employees, or authorized representatives has any conflict of interest in relation to this procurement, and all information furnished in the Bid is complete, accurate, and verifiable.

Name of Bidder / Joint Venture / Consortium:
Authorized Representative:
CNIC:

Designation:
Signature & Stamp:
Address:

Form of Contract

THIS AGREEMENT made the ___ day of ___ 20__ between [name and address of Procuring Agency] of Pakistan (hereinafter called the "Procuring Agency") of the one part and [name of Contractor] of [city and country of Contractor] (hereinafter called the "Contractor") of the other part:

WHEREAS the Procuring Agency invited Bids for the Turnkey Establishment, Integration, Deployment, Commissioning, Operation, Maintenance and Transfer of a Digital Telemedicine Ecosystem (Pilot Phase), and has accepted the Bid submitted by the Contractor for execution of the said Contract for the Contract Price of [amount in words and figures] (hereinafter referred to as the "Contract Price").

NOW THIS CONTRACT WITNESSETH AS FOLLOWS:

1. In this Contract 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 be deemed to form and be read and construed as part of this Contract, In the event of any ambiguity or conflict between the Contract Documents listed below, the order of precedence shall be the order in which the Contract Documents are listed below: -
   (a) This Contract Agreement;
   (b) Letter of Acceptance;
   (c) Special Conditions of Contract (SCC);
   (d) General Conditions of Contract (GCC);
   (e) Technical Specifications, Scope of Work & Schedule of Requirements (Section V);
   (f) Service Level Agreement (SLA);
   (g) Bid Data Sheet (BDS);
   (h) Instructions to Bidders (ITB);
   (i) The Contractor's Final/Revised Technical Proposal;
   (j) The Contractor's Financial Proposal including Price Schedule;
   (k) Any Addenda, Clarifications, Corrigenda, or other documents expressly forming part of the Contract
3. In consideration of the payments to be made by the Procuring Agency to the Contractor as hereinafter mentioned, the Contractor hereby covenants with the Procuring Agency to execute, deliver, operate, maintain and support the complete Turnkey Digital Telemedicine Ecosystem and perform all contractual obligations in accordance with the Contract Documents.
4. The Procuring Agency hereby covenants to pay the Contractor in consideration of the execution of the Contract and fulfilment of all contractual obligations, including CAPEX and OPEX services, 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 Contract to be executed in accordance with their respective laws the day and year first above written.

Signed, sealed, delivered by_____the_____(for the Procuring Agency)

Witness to the signatures of the Procuring Agency:

……

Signed, sealed, delivered by_____the_____(for the Supplier)

Witness to the signatures of the Supplier: ……

Form of Integrity Pact

DECLARATION OF FEES, COMMISSION AND BROKERAGE ETC. PAYABLE BY THE SUPPLIERS OF GOODS, SERVICES & WORKS IN CONTRACTS WORTH RS.10.00 MILLION OR MORE

Contract No: _____
Dated: _____
Contract Value: _____
Contract Title: **Turnkey Establishment, Integration, Deployment, Commissioning, Operation, Maintenance and Transfer of Digital Telemedicine Ecosystem (Pilot Phase)**

…… *(Including Joint Venture / Consortium, Where Applicable)* hereby declares that it has not obtained or induced the procurement of any contract, right, interest, privilege or other obligation or benefit from IDSRS Project, National Institute of Health (NIH) or any administrative subdivision or agency thereof or any other entity owned or controlled by Integrated Disease Surveillance and Response System (IDSRS), National Institute of Health (NIH), Government of Pakistan, through any corrupt business practice.

Without limiting the generality of the foregoing, *(Including Joint Venture / Consortium, Where Applicable)* represents and warrants that it has fully declared the brokerage, commission, fees etc. paid or payable to anyone and not given or agreed to give and shall not give or agree to give to anyone within or outside Pakistan either directly or indirectly through any natural or juridical person, including its affiliate, agent, associate, broker, consultant, director, promoter, shareholder, sponsor or subsidiary, any commission, gratification, bribe, finder's fee or kickback, whether described as consultation fee or otherwise, with the object of obtaining or inducing the procurement of a contract, right, interest, privilege or other obligation or benefit in whatsoever form IDSRS Project, NIH, except that which has been expressly declared pursuant hereto.

(Including Joint Venture / Consortium, Where Applicable) certifies that it has made and will make full disclosure of all agreements and arrangements with all persons in respect of or related to the transaction with IDSRS Project, NIH and has not taken any action or will not take any action to circumvent the above declaration, representation or warranty.

(Including Joint Venture / Consortium, Where Applicable) accepts full responsibility and strict liability for making any false declaration, not making full disclosure, misrepresenting facts or taking any action likely to defeat the purpose of this declaration, representation and warranty. It agrees that any contract, right, interest, privilege or other obligation or benefit obtained or procured as aforesaid shall, without prejudice to any other rights and remedies available to IDSRS Project, NIH under any law, contract or other instrument, be voidable at the option of IDSRS Project, NIH.

Notwithstanding any rights and remedies exercised by IDSRS Project, NIH in this regard, *(Including Joint Venture / Consortium, Where Applicable)* agrees to indemnify IDSRS Project, NIH for any loss or damage incurred by it on account of its corrupt business practices and further pay compensation to IDSRS Project, NIH in an amount equivalent to ten time the sum of any commission, gratification, bribe, finder's fee or kickback given by *(Including Joint Venture / Consortium, Where Applicable)* as aforesaid for the purpose of obtaining or inducing the

procurement of any contract, right, interest, privilege or other obligation or benefit in whatsoever form IDSRS Project, NIH.

Name of PA_____
Signature: _____
[Seal]

Name of Seller_____
Signature: _____
[Seal]

SERVICE LEVEL AGREEMENT (SLA)

All Service Level Requirements defined under this Contract shall be treated as mandatory minimum thresholds. Any failure to meet the specified requirement shall directly constitute a service level breach, triggering immediate and predefined deductions, penalties, or other contractual remedies, without the need for any scoring, weighting, or aggregation mechanism.

1. Objective and Scope

1.1 This Service Level Agreement (SLA) defines the **minimum performance standards, measurement mechanisms, and financial consequences** applicable to all services delivered under the Contract.

1.2 The SLA shall apply to the **entire turnkey telemedicine ecosystem**, including but not limited to software platforms, mobile and web applications, EMR systems, call center operations, Tele Health Workers, kiosks, pharmacy, logistics, IT equipment, hosting, and all associated services.

1.3 SLA compliance shall be **mandatory, continuously monitored, system-validated, and financially enforceable**, and shall form a **condition precedent for payments**.

2. Measurement and Data Integrity

2.1 All SLA measurements shall be based exclusively on system-generated logs, dashboards, and automated audit trails**.**

2.2 Manual, offline, unsupported, altered, or retrospectively entered data shall be invalid for SLA and payment purposes**.**

2.3 All SLA data shall be:

- **tamper-proof**
- **time-stamped**
- **traceable through audit logs**

2.4 The Procuring Agency shall have real-time visibility of all SLA parameters.

2.5 All data, records, reports, dashboards, consultation logs, configurations, documentation, custom developments, and outputs generated under this Contract shall be the exclusive property of the Government of Pakistan / NIH / IDSRS. Any pre-existing proprietary software, source code, frameworks, or intellectual property of the Service Provider shall remain its property unless otherwise expressly provided under the Contract.

2.6 All hosting, storage, processing, backup, and disaster recovery of programme data shall remain within Pakistan. No data shall be transferred, mirrored, or processed outside Pakistan without prior written approval of the Procuring Agency.

3. SLA Monitoring and Verification

3.1 SLA performance shall be monitored on a continuous basis and evaluated monthly.

3.2 The authorized Technical Members/Co-opted Technical Experts and/or Third-Party Monitoring, Evaluation, Validation & Inspection (TPM/E/V/I) firm, as designated by the

Procuring Agency, shall verify performance through system records, assess SLA compliance and submit findings/recommendations regarding applicable deductions or corrective actions shall:

- verify performance through system records
- certify SLA compliance
- recommend deductions or actions

3.3 The Procuring Agency reserves the right to:

- conduct random inspections and audits
- engage independent third-party verification
- cross-verify system data at any time

4. Service Level Requirements

4.1 System Performance

- System Uptime: **≥ 99.5% (monthly)**
- Average System Response Time **≤ 5 seconds**
- Application Crash Rate: **≤ 0.1%**
- Video Latency: **≤ 300 milliseconds**

4.2 Teleconsultation Services

- **Minimum 4,000 consultations per day**, ramped in accordance with the Contract Architectural Design Capacity (not a service obligation)
- **≥ 15,000 consultations per day**, demonstrated by load test at UAT
- Doctor Connection Time: **≤ 5 minutes**
- Consultation Completion Rate: **≥ 95%**
- e-Prescription Generation Time: **≤ 10 minutes**
- Video Session Drop Rate: **≤ 2%**

Only fully completed and system-recorded consultations shall be considered valid.

4.3 Call Center Operations

- Call Answer Time: **≤ 30 seconds** of 80% calls.
- Call Abandonment Rate: **≤ 5%**
- Simultaneous Call Handling Capacity: **≥ 1,800 calls**
- First Call Resolution Rate: **≥ 90%**

4.4 Service Delivery and Operations

- Complaint Resolution: **≤ 72 hours (≤ 24 hours for critical cases)**
- Medicine Delivery: **≤ 24 hours from prescription generation**
- Kiosk Availability: **≥ 95% operational uptime**
- Tele Health Worker Availability: **Tele Health Worker services shall be available in accordance with the approved deployment plan and operational hours specified in the Contract**.

4.5 Data, Security, and Compliance

- Data Accuracy: **99.9% (measured monthly against audited sample records)**

- Data Breach: **Zero tolerance (material breach)**
- Data Backup: **Automated every 6 hours**
- Disaster Recovery: **Minimum one (1) successful drill annually**

5. Penalty and Service Credit Regime

5.1 SLA breaches shall result in predefined service credits (financial deductions) without requirement of prior notice.

5.2 Penalties shall be directly deducted from payable invoices and shall be applied in accordance with the Contract after verification by the Procuring Agency.

5.3 The following penalty framework shall apply:

- Minor deviation: **1% deduction**
- Moderate deviation: **2%–3% deduction**
- Major deviation: **5% deduction**
- Critical deviation: **Up to 10% deduction**

CRITICAL — platform uptime; data breach; failure of teleconsultation, EMR or call-centre services

MAJOR — doctor connection time; service commitment volume; medicine delivery time; critical incident response and resolution

MODERATE — call answer time; call abandonment rate; kiosk availability; complaint resolution

MINOR — system response time; app crash rate; video latency; video session drop rate

5.4 Total SLA-related service credits/deductions, excluding Liquidated Damages, shall not exceed twenty percent (20%) of the monthly OPEX payment.

5.5 SLA service credits/deductions and Liquidated Damages are separate contractual remedies and may be applied concurrently where the underlying defaults are distinct. The aggregate of SLA service credits/deductions and Liquidated Damages applied in any month shall not exceed thirty percent (30%) of that month's payable invoice, and the aggregate over the Contract Term shall not exceed the amount of the Performance Security.

6. Critical Incident Management

6.1 Critical incidents shall include any disruption to:

- teleconsultation services
- EMR system
- call center operations
- data systems

6.2 The Service Provider shall ensure:

- Response Time: **≤ 4 hours**
- Resolution Time: **≤ 8 hours**

Failure shall constitute **major SLA breach**.

7. Payment Linkage

7.1 All OPEX payments shall be strictly linked with SLA compliance and verified performance**.**

7.2 The Procuring Agency reserves the right to:

- **withhold payments**
- **apply deductions**
- **suspend payments**

in case of SLA non-compliance.

7.3 No payment shall be admissible for:

- unverified services
- incomplete services
- non-compliant outputs

8. Exclusions and Exceptions

8.1 SLA exclusions shall only apply in cases of:

- **Force Majeure (approved)**
- **Pre-approved maintenance**

8.2 No exclusion shall be valid unless:

- **prior written approval** is obtained
- full supporting evidence is provided

9. Persistent Non-Compliance

9.1 Failure to meet SLA requirements for three (3) consecutive months shall constitute material breach of Contract**.**

9.2 In such case, the Procuring Agency may:

- terminate the Contract
- invoke Performance Security
- initiate legal action

10. Audit, Access, and Transparency

10.1 The Service Provider shall provide full, unrestricted, and real-time access to:

- systems
- logs
- dashboards
- APIs
- records

10.2 The Procuring Agency may conduct:

- inspections
- audits
- technical validations

at any time with or without prior notice.

11. Non-Compliance and Remedies

11.1 SLA breach shall not limit the Procuring Agency's right to:

- impose penalties
- recover damages
- enforce contractual remedies

11.2 SLA enforcement shall be without prejudice to any other rights under the Contract or applicable law**.**

12. Binding Effect

12.1 This SLA shall form an integral and binding part of the Contract.

12.2 No waiver, relaxation, or modification shall be valid unless approved in writing by the Procuring Agency**.**

13. Acceptance and Signatures

In witness whereof, the parties hereto have agreed to the terms and conditions of this Service Level Agreement (SLA), which shall form an integral part of the Contract.

The Supplier / Service Provider (Lead Member in case of Joint Venture / Consortium) confirms that it has fully understood and accepted all SLA obligations, penalties, and enforcement mechanisms, and shall have no claim against their application.

For and on behalf of the Procuring Agency

Integrated Disease Surveillance and Response System (IDSRS)
National Institute of Health (NIH), Islamabad

Name: _____
Designation: _____
Signature: _____
Official Stamp: _____
Date: _____

For and on behalf of the Supplier / Service Provider

Company Name: _____

Name: _____
Designation: _____
Signature: _____
Company Stamp: _____
Date: _____

ADDITIONAL INSTRUCTIONS TO BIDDERS

Two Stage Bidding Procedure — Rule 36(c), Public Procurement Rules 2004

Tender for Hiring of Services for Turnkey Establishment, Integration & Operations of Digital Telemedicine Ecosystem (Pilot Phase) | Ref. F.30-1/2025-IDSRS-NIH

Status of this document

These Additional Instructions to Bidders supplement the standard Instructions to Bidders published on EPADS v2.0. They are issued because this procurement is conducted under the Two Stage bidding procedure referred to at ITB 1.1, for which the standard Instructions do not provide detailed machinery.

The standard Instructions to Bidders continue to apply in full, save where a clause below expressly supplements or disapplies a specified provision. Where a clause below conflicts with the standard Instructions, the clause below shall prevail for this procurement only.

Clause references beginning "ITB" are to the standard Instructions to Bidders on EPADS. Clause references beginning "AITB" are to this document.

A. ELIGIBILITY

AITB 1. Joint Venture / Consortium — basis of assessment

Applies to: Supplements ITB 4.1(9)

1.1 For the purposes of ITB 4.1(9), the eligibility criteria applicable to each member of a Joint Venture or Consortium, and the basis on which each criterion is to be assessed, are those set out in the "Compliance Responsibility" column of the Mandatory Basic Eligibility Criteria table in the Bidding Documents.

1.2 A Joint Venture or Consortium shall comprise not more than three (03) firms, and shall satisfy the additional requirements JV-1 to JV-6 of that table.

1.3 For the purposes of the Technical Scoring Matrix, a Joint Venture or Consortium shall be evaluated as a whole in accordance with Section VI, clause 2.

AITB 2. One Bid per Bidder

Applies to: Additional

2.1 A Bidder shall submit only one Bid in the same bidding process, either individually as a Bidder or as a member of a joint venture, consortium or association.

2.2 A Bidder submitting a Bid individually or as a member of a joint venture, consortium or association shall not participate as a subcontractor in another Bid in the same bidding process.

2.3 A person or firm shall not act as a subcontractor to more than one Bidder in the same bidding process.

2.4 Violation of this Clause shall result in the disqualification of all Bids in which the Bidder or member concerned appears.

B. PREPARATION OF BIDS

AITB 3. Language of Bid

Applies to: Additional

3.1 The Bid, and all correspondence and documents relating to the Bid exchanged between the Bidder and the Procuring Agency, shall be written in the English language. Supporting documents and printed literature furnished by the Bidder may be in another language, provided they are accompanied by an accurate English translation of the relevant portions. In case of any inconsistency, the English translation shall prevail.

AITB 4. Documents constituting the Bid

Applies to: Supplements ITB 9.1, which shall be read subject to this Clause

4.1 Stage-I (Technical Proposal). The Bid submitted at Stage-I shall comprise:

(a) Bid Submission Form — Technical Proposal (without financial information);

(b) Detailed Technical Proposal, including system architecture, methodology, implementation plan and operational approach;

(c) Documentary evidence establishing the Bidder's eligibility and qualification;

(d) Documentary evidence demonstrating that the proposed solution, goods and related services conform to the requirements of the Bidding Documents;

(e) Authorization from the Original Equipment Manufacturer, where applicable;

(f) Company profile, relevant experience and past performance details;

(g) Details of key personnel and technical team;

(h) Bid Security, as required by the Bid Data Sheet;

(i) Power of Attorney authorising the signatory of the Bid; and

(j) Any other document specified in the Bid Data Sheet.

4.2 Stage-II (Revised Technical and Financial Proposal). Bidders who qualify at Stage-I shall be invited to submit:

(a) Revised Technical Proposal incorporating such modifications as have been communicated by the Procuring Agency;

(b) Financial Proposal and Price Schedule, completed in accordance with AITB 6; and

(c) Any additional documents specified in the invitation to submit final Bids.

4.3 No financial information shall be submitted at Stage-I. Any Bid containing financial information at Stage-I shall be rejected as non-responsive.

4.4 All documents submitted by the Bidder shall be duly signed by the authorised representative and shall form an integral part of the Bid.

AITB 5. Form of Bid

Applies to: Supplements ITB 12

5.1 At Stage-I, the Bidder shall submit the Bid Submission Form, Technical Proposal, together with the documents listed at AITB 4.1. No prices shall be entered on or attached to that Form.

5.2 At Stage-II, and only where invited by the Procuring Agency, the Bidder shall submit the Bid Submission Form — Financial Proposal, together with the documents listed at AITB 4.2.

5.3 The prescribed Forms for each stage are those set out in the Bidding Forms section of the Bidding Documents.

AITB 6. Bid prices

Applies to: Supplements ITB 13

6.1 No financial information shall be submitted at Stage-I.

6.2 At Stage-II, the Bidder shall submit a detailed Financial Proposal covering the entire turnkey scope of work, on the Price Schedule prescribed in the Bidding Documents.

6.3 The Price Schedule shall distinguish clearly between Capital Expenditure (CAPEX) and Operational Expenditure (OPEX), on the basis prescribed in the Bid Data Sheet.

6.4 All prices shall be quoted inclusive of all applicable taxes, duties, levies and charges.

6.5 Prices quoted by the Bidder shall remain firm and fixed for the duration of the Contract and shall not be subject to escalation.

AITB 7. Bid Security validity

Applies to: Supplements ITB 17

7.1 The Bid Security shall remain valid for the period specified in the Bid Data Sheet, which shall be not less than twenty-eight (28) days beyond the expiry of the Bid validity period.

7.2 Where the Bid validity period is extended, the Bid Security shall be extended accordingly.

C. SUBMISSION OF BIDS

AITB 8. Submission at each stage

Applies to: Supplements ITB 21

8.1 Bids shall be submitted electronically through EPADS v2.0. In addition, the Bidder shall submit one (01) original hard copy for record purposes, as specified in the Bid Data Sheet.

8.2 At Stage-I, the Bidder shall submit the Technical Proposal only. The hard copy envelope shall be marked "Technical Proposal - Stage-I".

8.3 At Stage-II, the invited Bidder shall submit the Revised Technical Proposal and the Financial Proposal. The hard copy envelope shall be marked "Revised Technical and Financial Proposal - Stage-II".

8.4 Each envelope shall be addressed to the Procuring Agency at the address given in the Bid Data Sheet, shall bear the title and identification number of this procurement, and shall state "DO NOT OPEN BEFORE" followed by the date and time specified in the Bid Data Sheet.

8.5 In case of any discrepancy between the electronic submission on EPADS and the hard copy, the electronic submission shall prevail.

AITB 9. Late Bids

Applies to: Additional

9.1 Any Bid received after the deadline for submission shall be declared late, shall be rejected, and shall not be considered for evaluation.

D. OPENING AND EVALUATION

AITB 10. Opening of Bids

Applies to: Supplements ITB 23. ITB 23.2 and ITB 23.4 shall not apply to the opening of Technical Proposals at Stage-I

10.1 Stage-I (Technical Proposals). The Procuring Agency shall open the Technical Proposals through EPADS at the date and time specified in the Bid Data Sheet, in the presence of Bidders' representatives who choose to attend. Only the Technical Proposals shall be opened at this stage. No financial information shall be read out, recorded or disclosed.

10.2 At the Stage-I opening the following shall be read out and recorded: the name of the Bidder; the presence of the Bid Security; any modification or withdrawal; and any other details the Procuring Agency considers appropriate.

10.3 Stage-II (Financial Proposals). Following technical evaluation and the approval of the competent authority, the Financial Proposals of Bidders invited to Stage-II shall be opened publicly through EPADS at a date and time communicated separately. The name of the Bidder, the total Bid price and any discounts offered shall be read out and recorded.

10.4 Financial Proposals of Bidders not qualifying at Stage-I shall not be opened or considered.

10.5 The Procuring Agency shall prepare and maintain minutes of both openings, which shall be made available to participating Bidders.

AITB 11. Technical evaluation and passage to Stage-II

Applies to: Supplements ITB 26

11.1 The Technical Proposals submitted at Stage-I shall be evaluated against the requirements of the Technical Specifications and Scope of Work, and in accordance with the criteria set out in Section VI — Evaluation and Qualification Criteria.

11.2 Only those Bidders whose Technical Proposals are found substantially responsive and which attain the minimum qualifying score stated in Section VI shall be invited to participate in Stage-II.

11.3 A Bid found not substantially responsive shall be rejected and shall not be considered further.

AITB 12. Evaluation of Bids

Applies to: Supplements ITB 29. ITB 29.4 shall not apply to the evaluation of Technical Proposals at Stage-I

12.1 Stage-I. Technical Proposals shall be evaluated on the criteria specified in Section VI. No financial information shall be taken into account.

12.2 Stage-II. The Financial Proposals of technically qualified Bidders shall be evaluated and compared on the basis of the Total Evaluated Cost for the complete scope of work, comprising Capital Expenditure (CAPEX), Operational Expenditure (OPEX), applicable taxes and duties, and any other cost component specified in the Bidding Documents.

12.3 The technical score obtained by a Bidder shall be used solely for determining technical qualification, and shall carry no weightage in the Financial Evaluation or in the final ranking.

12.4 No post-Bid negotiation or modification of Financial Proposals shall be permitted, save for the correction of arithmetic errors in accordance with the standard Instructions to Bidders.

AITB 13. Post-qualification

Applies to: Supplements ITB 31

13.1 The Procuring Agency shall satisfy itself that the Bidder determined to submit the Most Advantageous Bid is qualified to perform the Contract, by verification of the documentary evidence submitted at Stage-I in support of the Technical Scoring Matrix.

13.2 An affirmative determination shall be a prerequisite to award. In case of a negative determination the Bidder shall be disqualified and the Procuring Agency shall proceed to the Bidder having the next Lowest Evaluated Cost.

AITB 14. Domestic preference

Applies to: Additional

14.1 No domestic preference shall be applied in the evaluation of Bids under this procurement.

E. FIRST-STAGE TECHNICAL DISCUSSIONS

AITB 15. Negotiations and technical discussions

Applies to: Additional

15.1 Save for technical discussions, clarifications and refinement of technical requirements conducted during Stage-I as permitted under the Two Stage bidding procedure, no negotiations shall be conducted with any Bidder in respect of the submitted Bid. No negotiation of the Financial Proposal shall be permitted at any stage.

15.2 First-stage technical discussions shall be conducted in accordance with the following:

(a) identical information shall be provided to every Bidder;

(b) discussions shall be confined to technical subject-matter and shall make no reference to price;

(c) every session shall be minuted, with attendance recorded, and placed on the procurement record under Rule 46;

(d) all revisions to the technical requirements shall be communicated to all Bidders simultaneously and in writing at the time of the invitation to submit final Bids;

(e) the full statutory period shall be allowed for the submission of revised Bids; and

(f) no bilateral contact with any Bidder shall take place outside the minuted sessions.

15.3 Any attempt by a Bidder to influence the Procuring Agency through unauthorised contact or negotiation shall result in rejection of its Bid.

F. AWARD OF CONTRACT

AITB 16. Right to vary quantities at the time of award

Applies to: Additional

16.1 The Procuring Agency reserves the right, at the time of award, to increase or decrease the quantities specified in the Bidding Documents by up to the percentage stated in the Bid Data Sheet.

16.2 This right applies to the Operational Expenditure (OPEX) consultation ceiling only. Capital Expenditure (CAPEX) items, being quoted on a lump-sum basis, are excluded.

16.3 Any such variation shall be effected without change to the unit rates, prices or other terms of the Bid, and shall not materially alter the nature or scope of the procurement.

AITB 17. Advance payment

Applies to: Additional

17.1 No advance payment shall be admissible under this Contract unless specifically provided in the Special Conditions of Contract.

17.2 Where an advance payment is provided for, it shall not exceed the percentage stated in the Bid Data Sheet and shall be released only against an Advance Payment Security equivalent to one hundred percent (100%) of the advance amount, and only after the Contract Agreement has been signed and the Performance Security submitted.

G. BIDDING DOCUMENTS

AITB 18. Contents of the Bidding Documents

Applies to: Replaces the list at ITB 6.1 for this procurement

18.1 For this procurement, the Bidding Documents comprise the sections listed in the Table of Contents of the Bidding Documents issued on EPADS, together with the Scope of Work annexed thereto and any addendum issued by the Procuring Agency.

18.2 The Scope of Work is annexed as Annexure-I and forms an integral part of the Bidding Documents.

End of Additional Instructions to Bidders.

ADDITIONAL BID DATA SHEET

Two Stage Bidding Procedure - Rule 36(c), Public Procurement Rules 2004

Tender for Hiring of Services for Turnkey Establishment, Integration & Operations of Digital Telemedicine Ecosystem (Pilot Phase) | Ref. F.30-1/2025-IDSRS-NIH

Status of this document

This Additional Bid Data Sheet supplements the standard Bid Data Sheet published on EPADS v2.0. It is read together with the Additional Instructions to Bidders (AITB) issued for this procurement.

The standard Bid Data Sheet continues to apply, save where an entry below expressly amends or replaces a specified clause. Where an entry below conflicts with the standard Bid Data Sheet, the entry below shall prevail for this procurement only.

References beginning "BDS" are to the standard Bid Data Sheet on EPADS. References beginning "ITB" are to the standard Instructions to Bidders. References beginning "AITB" and "ABDS" are to the additional documents issued for this procurement.

A. AMENDMENTS TO THE STANDARD BID DATA SHEET

The following entries replace the corresponding entries of the standard Bid Data Sheet, which were prepared for a different procurement.

ABDS Clause No.	ITB / AITB Ref.	Amendments of, and Supplements to, Clauses in the Instructions to Bidders
ABDS 1	BDS 1 ITB 1	**Replaces BDS Clause Number 1 in full.** Name of Procuring Agency: Integrated Disease Surveillance and Response System (IDSRS), National Institute of Health (NIH), Ministry of National Health Services, Regulations & Coordination, Islamabad. The subject of procurement is: Hiring of Services for Turnkey Establishment, Integration, Deployment, Commissioning, Operation, Maintenance and Transfer of a Digital Telemedicine Ecosystem (Pilot Phase). The successful Bidder shall be responsible for end-to-end delivery, including the platform (mobile, web, EMR and e-prescription), call centre establishment and operations, tele-health workforce deployment, telemedicine kiosks, pharmacy and logistics integration, interoperability with national systems, cybersecurity, data management, and operation and maintenance for the contract term. The procurement is structured as a single turnkey contract to secure interoperability, unified accountability and seamless end-to-end service delivery, which cannot effectively be achieved through fragmented or component-wise procurement. Period for delivery of services: initial deployment and go-live within three (03) months, followed by full operational stabilisation within six (06) months from the date of signing of the Contract and issuance of the Letter of Acceptance or Work Order. **Contract Term:** The Contract shall remain in force until completion of 3,600,000 consultations or until 30 June 2028, whichever occurs earlier, including the mobilisation and deployment period.
ABDS 2	BDS 3 ITB 4 AITB 1	**Replaces BDS Clause Number 3 in full.** Joint Venture / Consortium or Association allowed: Yes. Maximum number of Joint Venture / Consortium members: three (03). For the purposes of ITB 4.1(9), the eligibility criteria applicable to each member, and the basis on which each criterion is assessed, are those set out in the Compliance Responsibility column of the Mandatory Basic Eligibility Criteria table, and the additional requirements JV-1 to JV-6 of that table shall apply. For the purposes of the Technical Scoring Matrix, a Joint Venture or Consortium shall be evaluated as a whole in accordance with Section VI, clause 2.
ABDS 3	BDS 6	**Replaces BDS Clause Number 6 in full.**

ABDS Clause No.	ITB / AITB Ref.	Amendments of, and Supplements to, Clauses in the Instructions to Bidders
	ITB 9	List of documents required with the Bid at Stage-I: as set out at AITB 4.1. List of documents required with the Bid at Stage-II: as set out at AITB 4.2. No site visit certificate, site-specific Bill of Quantities prepared on the basis of physical site assessment, or supporting drawings or designs are required for this procurement, this being a procurement of services.
ABDS 4	BDS 4 ITB 7	**Replaces BDS Clause Number 4 in full.** Bidders may seek clarification of the Bidding Documents through EPADS v2.0 up to three (03) days prior to the deadline for submission of Bids. The Procuring Agency shall respond not later than two (02) days prior to that deadline. Responses shall be communicated simultaneously and in writing to all Bidders through EPADS v2.0.
ABDS 5	BDS 13 ITB 16	**Replaces BDS Clause Number 13 in full.** Bid validity period: one hundred and eighty (180) days from the date of opening of Technical Proposals, extendable once by a further sixty (60) days in accordance with the Public Procurement Rules, 2004.
ABDS 6	BDS 14, 15 ITB 17 AITB 7	**Replaces BDS Clause Numbers 14 and 15 in full.** Amount of Bid Security: PKR 40,000,000 (Rupees Forty Million only). Form of Bid Security: Call Deposit Receipt (CDR) issued by a scheduled bank in Pakistan, in the name of Finance Manager, IDSRS Project, NIH, Islamabad. Validity of Bid Security: not less than twenty-eight (28) days beyond the expiry of the Bid validity period at ABDS 5, and extended correspondingly wherever the Bid validity period is extended. The Bid Security shall be submitted at Stage-I.
ABDS 7	BDS 17 ITB 21 AITB 8	**Replaces BDS Clause Number 17 in full.** Bids shall be submitted online through EPADS v2.0. In addition, one (01) original hard copy shall be submitted for record purposes to: IDSRS Project Office, National Institute of Health, Park Road, Chak Shahzad, Islamabad. Bids not submitted on EPADS v2.0 shall be disqualified. In case of any discrepancy between the EPADS submission and the hard copy, the EPADS submission shall prevail. Deadline for submission of Stage-I Technical Proposals: 30th September, 2026 at 12:30 PM. The deadline for submission of Stage-II Revised Technical and Financial Proposals shall be notified separately at the time of the invitation to submit final Bids.
ABDS 8	BDS 18 ITB 23 AITB 10	**Replaces BDS Clause Number 18 in full.** Opening of Stage-I Technical Proposals: through EPADS v2.0 on 30th September, 2026 at 1:00 PM, at the IDSRS Project Office, National Institute of Health, Islamabad. Only Technical Proposals shall be opened. No financial information shall be read out, recorded or disclosed. Opening of Stage-II Financial Proposals: through EPADS v2.0 at a date and time to be communicated separately to Bidders invited to Stage-II.

B. TWO STAGE PROCEDURE

The standard Bid Data Sheet contains no entries for the two stage procedure. The following are additional.

ABDS Clause No.	ITB / AITB Ref.	Amendments of, and Supplements to, Clauses in the Instructions to Bidders
ABDS 9	AITB 4	**Documents constituting the Bid.**

ABDS Clause No.	ITB / AITB Ref.	Amendments of, and Supplements to, Clauses in the Instructions to Bidders
		Stage-I: Technical Proposal only, comprising the documents listed at AITB 4.1. No financial information shall be submitted at Stage-I. Any Bid containing financial information at Stage-I shall be rejected as non-responsive. Stage-II: Revised Technical Proposal and Financial Proposal, comprising the documents listed at AITB 4.2, submitted only by Bidders invited to do so.
ABDS 10	AITB 11 ITB 26	**Technical evaluation and minimum qualifying score.** Technical evaluation shall be carried out on a total score of one hundred (100) marks, in accordance with Section VI — Evaluation and Qualification Criteria. Minimum qualifying score: seventy (70) marks. Only Bidders attaining that score and otherwise determined to be technically responsive shall be invited to Stage-II. Technical scores shall be recorded to one decimal place and shall not be rounded for the purpose of determining the minimum qualifying score.
ABDS 11	AITB 12 ITB 29	**Evaluation method.** The technical score shall be used solely for determining technical qualification and shall carry no weightage in the Financial Evaluation or in the final ranking. No combined score formula shall apply. Financial evaluation method: Least Cost Selection. Among technically qualified and responsive Bidders, the Bid having the Lowest Evaluated Cost, determined in accordance with ABDS 12, shall be the Most Advantageous Bid, subject to responsiveness, correction of arithmetic errors, price reasonableness, post-qualification and fulfilment of all requirements of the Bidding Documents.
ABDS 12	AITB 6 AITB 12	**Total Evaluated Cost — basis of financial evaluation.** The Total Evaluated Cost comprises Capital Expenditure and Operational Expenditure, calculated as follows. **(A) CAPEX. The Bidder shall quote lump-sum costs separately for all capital components, including the telemedicine platform (software, licensing, hosting, system integration and deployment); telemedicine kiosks (design, manufacture, deployment); IT equipment and hardware; call centre set-up; and any other capital component defined in the Scope of Work. All CAPEX components shall be quoted item-wise on a lump-sum basis and shall not be subject to re-measurement.** **(B) OPEX. The Bidder shall quote per-consultation rates for the following three service scenarios:** Scenario-1: Teleconsultation with Consultant (without medicine or any additional service); Scenario-2: Teleconsultation with Consultant, plus medicine (delivery or pharmacy pick-up); Scenario-3: Teleconsultation with Consultant, plus medicine, plus rapid test and/or kiosk service and/or Tele Health Worker visit. **(C) Weighted average OPEX. Weighted OPEX = (S1 × 40%) + (S2 × 40%) + (S3 × 20%).** **(D) Total OPEX. The weighted average OPEX rate multiplied by 3,600,000 (3.6 million) estimated consultations.** **(E) Total Evaluated Cost = Total CAPEX + Total OPEX, inclusive of all applicable taxes, duties and levies.** The estimated consultation figure is for evaluation purposes only and does not constitute a guarantee of volume.
ABDS 13	AITB 15	**First-stage technical discussions.** Following evaluation of Stage-I Technical Proposals, the Procuring Agency may conduct technical discussions with Bidders in accordance with AITB 15.2. Any revision to the technical requirements arising from those discussions shall be

ABDS Clause No.	ITB / AITB Ref.	Amendments of, and Supplements to, Clauses in the Instructions to Bidders
		communicated to all Bidders simultaneously and in writing at the time of the invitation to submit final Bids. No reference to price shall be made at any first-stage discussion. No negotiation of the Financial Proposal shall be permitted at any stage.

C. AWARD AND CONTRACT

ABDS Clause No.	ITB / AITB Ref.	Amendments of, and Supplements to, Clauses in the Instructions to Bidders
ABDS 14	ITB 47 AITB 13	**Performance Security.** **Amount**: seven percent (7%) of the total Contract Price. **Form:** Call Deposit Receipt issued by a scheduled bank in Pakistan, acceptable to the Procuring Agency, in the name of Finance Manager, IDSRS Project, NIH, Islamabad. **Validity:** for the contract term and for ninety (90) days thereafter, to be released within thirty (30) days of formal acceptance of final handover.
ABDS 15	ITB 46	**Signing of Contract.** The successful Bidder shall sign the Contract Agreement within seven (07) days of issuance of the Notification of Award, subject to fulfilment of all conditions precedent. A formal Contract Agreement is mandatory. No purchase order or other document shall substitute the Contract.
ABDS 16	ITB 45	**Notification of Award.** Notification of Award shall be issued through EPADS v2.0 and by official written communication, and shall be binding upon issuance.
ABDS 17	AITB 16	**Variation in quantities at the time of award.** The Procuring Agency may increase or decrease quantities by up to fifteen percent (15%). This right applies to the OPEX consultation ceiling at ABDS 12(D) only; CAPEX items, being quoted on a lump-sum basis, are excluded. Any such variation shall be effected without change to unit rates, prices or other terms of the Bid.
ABDS 18	AITB 17	**Advance payment.** No advance payment shall be made under this procurement.
ABDS 19	AITB 14	**Domestic preference.** No domestic preference shall be applied in the evaluation of Bids under this procurement.
ABDS 20	AITB 3	**Language of Bid.** English. Supporting documents and printed literature may be furnished in another language, provided they are accompanied by an accurate English translation of the relevant portions, which shall prevail in case of inconsistency.

End of Additional Bid Data Sheet.

ADDITIONAL GENERAL CONDITIONS OF CONTRACT

Two Stage Bidding Procedure — Rule 36(c), Public Procurement Rules 2004

Tender for Hiring of Services for Turnkey Establishment, Integration & Operations of Digital Telemedicine Ecosystem (Pilot Phase) | Ref. F.30-1/2025-IDSRS-NIH

Status of this document

These Additional General Conditions of Contract supplement the standard General Conditions of Contract published on EPADS v2.0. They are issued because this procurement involves a national health platform holding patient data, a fleet of physical assets vesting in Government, and a service measured against Service Levels none of which the standard Conditions address.

The standard General Conditions continue to apply in full, save where a clause below expressly amends or disapplies a specified provision. Where a clause below conflicts with the standard General Conditions, the clause below shall prevail.

References beginning "GCC" are to the standard General Conditions of Contract on EPADS. References beginning "AGCC" are to this document. Words defined in GCC 1 carry the same meaning here. Where the Contractor is a Joint Venture or Consortium, its members are jointly and severally bound by these Conditions.

A. ADDITION TO THE STANDARD GENERAL CONDITIONS

The following are the additional, supplementary and amended provisions of the standard General Conditions:

AGCC 1. Provision of services and facilities by the Procuring Agency

Applies to: GCC 26 shall not apply to this Contract

1.1 GCC 26.1, which requires the Procuring Agency to make services, facilities and property available to the Contractor free of charge, and GCC 26.2, which provides for time extension and additional payment where they are not, shall not apply.

1.2 This Contract is a turnkey engagement. The Contractor shall provide, at its own cost, all infrastructure, licences, connectivity, equipment and human resources required to perform the Services, except for the designated locations/facilities expressly identified in the Scope of Work or made available by the Procuring Agency.

AGCC 2. Force Majeure - payment during suspension of Services

Applies to: Amends GCC 13.4

2.1 GCC 13.4 shall be read subject to this Clause. Where payment under this Contract is made as a unit rate per delivered consultation, no payment shall accrue in respect of consultations not delivered during a period of Force Majeure.

2.2 The Contractor shall remain entitled to reimbursement of costs reasonably and necessarily incurred during that period for the preservation of the Services and for their reactivation, subject to the prior written approval of the Procuring Agency.

2.3 The Service Levels shall be suspended for the duration of a Force Majeure event affecting performance, and the affected period shall be excluded from the calculation of Service Level performance.

AGCC 3. Termination for convenience - treatment of Capital Expenditure

Applies to: Supplements GCC 14.1(e)

3.1 Where the Procuring Agency terminates this Contract under GCC 14.1(e), the Contractor shall be paid for Capital Expenditure items deployed, accepted and vesting in the Procuring Agency under AGCC 14, to the extent not already paid, together with Operational Expenditure accrued to the date of termination.

3.2 No payment shall be made for anticipated profit, for undelivered consultations, or for capital items not yet deployed and accepted.

3.3 Termination under GCC 14.1(e) shall not relieve the Contractor of its obligations under AGCC 15.

AGCC 4. Liquidated damages and Service Level credits

Applies to: Supplements GCC 20

4.1 GCC 20 addresses liquidated damages for delay against the Intended Completion Date. In addition, Service Level credits shall be deducted in accordance with the Service Level Agreement forming part of this Contract.

4.2 Service Level credits and liquidated damages are separate remedies and may be applied concurrently, provided that the aggregate of both applied in any month shall not exceed thirty percent (30%) of that month's payable invoice, and the aggregate over the contract term shall not exceed the amount of the Performance Guarantee.

4.3 Payment or deduction of Service Level credits shall not limit any other remedy of the Procuring Agency, including termination.

AGCC 5. Insurance

Applies to: Supplements GCC 17

5.1 The Contractor shall take out and maintain throughout the contract term, at its own cost:

(a) public liability insurance covering the kiosks, pharmacy outlets, warehouse and field operations;

(b) professional indemnity insurance covering the clinical services delivered under this Contract;

(c) asset insurance covering all Capital Expenditure equipment, whether or not vested in the Procuring Agency under AGCC 14; and

(d) motor vehicle insurance covering the field workforce fleet.

5.2 Minimum sums insured shall be as stated in the Special Conditions of Contract. Evidence of cover and of premium payment shall be furnished to the Procuring Agency on request and on each renewal.

B. DATA, RECORDS AND INTELLECTUAL PROPERTY

AGCC 6. Confidentiality

Applies to: Additional

6.1 The Contractor shall treat as confidential all information relating to the Procuring Agency, the programme and its beneficiaries, and shall not disclose it to any third party without the prior written consent of the Procuring Agency.

6.2 This obligation shall survive expiry or termination of this Contract without limit of time.

6.3 The Contractor shall procure that its personnel, sub-contractors and, where the Contractor is a Joint Venture, each of its members, are bound by obligations no less onerous.

AGCC 7. Data protection

Applies to: Additional

7.1 In respect of all personal and health data processed under this Contract, the Contractor shall:

(a) process the data only on a lawful basis and with the recorded patient consent obtained under AGCC 8;

(b) use the data solely to deliver the Services under this Contract;

(c) not appoint any sub-processor and not disclose data to any third party without the prior written approval of the Procuring Agency;

(d) notify the Procuring Agency of any personal data breach within seventy-two (72) hours of discovery, and provide a full written report within fourteen (14) days;

(e) not use the data for any secondary purpose, including analytics, research, profiling, product development or marketing;

(f) permit the Procuring Agency or its nominee to audit compliance, on reasonable notice, at the Contractor's premises; and

(g) comply with any personal data protection legislation enacted during the contract term, within ninety (90) days of its commencement.

7.2 On expiry or termination, the Contractor shall return all data in an open, non-proprietary format and shall thereafter delete all copies, certifying deletion in writing.

AGCC 8. Patient consent

Applies to: Additional

8.1 Patient registration shall not complete until the patient has given express, recorded consent to the creation and retention of an electronic health record, to its transfer to and sharing with Government health information systems including the national E-UMR and the National Health Data Centre, and to the processing described at AGCC 7.

8.2 The consent text shall be approved by the Procuring Agency and presented in both Urdu and English. Consent shall be stored against the patient record with a timestamp and version identifier, and shall be withdrawable through the mobile application and the helpline.

AGCC 9. Data residency and hosting

Applies to: Additional

9.1 No programme data shall be hosted, mirrored, processed, cached or backed up outside the territory of Pakistan at any time.

9.2 All production and disaster-recovery environments shall be hosted in a Tier III or higher compliant data centre located within Pakistan, operating under a current ISO/IEC 27001 certification. Backups shall be held at a secondary facility within Pakistan not less than fifty (50) kilometres from the primary site.

9.3 The Contractor shall furnish written evidence of the physical location and hosting region of all primary, replica and backup environments, and shall notify any change not less than thirty (30) days in advance.

AGCC 10. Ownership of data, software and deliverables

Applies to: Additional

10.1 All data generated under this Contract, including patient records, clinical records, prescription records, call recordings and system logs, is and remains the property of the Procuring Agency.

10.2 All reports, documentation, configurations, data dictionaries and custom-developed components produced specifically for this Contract shall vest in the Procuring Agency on creation.

10.3 Where the platform incorporates proprietary software of the Contractor or a third party, the Contractor grants the Procuring Agency a perpetual, irrevocable, non-exclusive, royalty-free licence to use that software for the purposes of the programme, including after expiry or termination.

10.4 The Contractor warrants that the Services and all deliverables do not infringe any third-party intellectual property right, and shall indemnify the Procuring Agency against any claim that they do.

AGCC 11. Continuous data access and escrow

Applies to: Additional

11.1 The Contractor shall expose a documented read API, callable by the Procuring Agency or the National Health Data Centre at any time, covering the full programme dataset.

11.2 A complete bulk export in an open, non-proprietary format shall be delivered quarterly, and on demand within ten (10) working days.

11.3 No export, egress, access or interface fee shall be charged at any time, whether during the contract term or on exit.

11.4 Source code and the current database schema shall be held in escrow with an independent agent, updated at each major release, and releasable to the Procuring Agency on termination, insolvency or material breach.

AGCC 12. Record retention

Applies to: Additional

12.1 The Contractor shall retain records as follows: system and audit logs, one (01) year; call recordings, one (01) year, encrypted at rest; CCTV footage, ninety (90) days; e-Prescription records, five (05) years; clinical records and EMR, for the contract term and handed over in full under AGCC 15, and not deleted.

C. SERVICE DELIVERY AND REGULATORY COMPLIANCE

AGCC 13. Regulatory licences and clinical governance

Applies to: Additional

13.1 The Contractor shall obtain and maintain at its own cost, throughout the contract term, all registrations and licences required to deliver the Services, including registration of Sindh-based facilities with the Sindh Healthcare Commission, registration of facilities in Islamabad Capital Territory with the Islamabad Healthcare Regulatory Authority, and all applicable provincial drug sale licences.

13.2 All clinicians delivering consultations shall hold current registration with the Pakistan Medical & Dental Council. Every e-Prescription shall carry the prescribing clinician's name and registration number.

13.3 Should a telemedicine-specific licensing, certification or platform-accreditation regime be notified during the contract term, the Contractor shall achieve full compliance within ninety (90) days of notification, at its own cost and with no claim for additional payment or extension of time.

13.4 Failure to obtain or maintain any registration or licence required under this Clause shall constitute a material breach.

AGCC 14. Ownership and vesting of Capital Expenditure assets

Applies to: Additional

14.1 All assets procured under the Capital Expenditure component of the Contract Price shall vest in the Procuring Agency upon acceptance, and shall be recorded in an asset register maintained by the Contractor and furnished to the Procuring Agency quarterly.

14.2 The Contractor shall not sell, charge, encumber, remove or dispose of any such asset without the prior written approval of the Procuring Agency.

14.3 The Contractor shall remain responsible for the operation, maintenance, insurance and replacement of those assets throughout the contract term, notwithstanding that they vest in the Procuring Agency.

AGCC 15. Handover, transition and exit

Applies to: Additional

15.1 Not later than ninety (90) days before expiry, and immediately upon any notice of termination, the Contractor shall prepare and submit an exit and transition plan for the approval of the Procuring Agency.

15.2 On expiry or termination the Contractor shall hand over, at no additional cost: all data in an open format; all Capital Expenditure assets vesting under AGCC 14, in working order; all documentation, configurations, credentials and data dictionaries; and all records retained under AGCC 12.

15.3 The Contractor shall provide transition support and continuity of service for a period of up to ninety (90) days after expiry or termination, if required by the Procuring Agency, on the rates applying immediately before that date.

15.4 The Performance Guarantee shall not be released until handover has been completed and formally accepted.

AGCC 16. Interoperability with national systems

Applies to: Additional

16.1 The patient CNIC shall be the immutable identity anchor, with defined fallbacks for patients without CNIC. No proprietary identifier shall be used as the primary key.

16.2 HL7 FHIR R4 shall be the canonical record format. A complete data dictionary shall be delivered within ninety (90) days of go-live.

16.3 The Contractor shall implement bidirectional synchronisation with the national E-UMR within ninety (90) days of written notice that it is operational, including provisioning of all existing platform patients, at the fixed lump sum quoted in the Financial Proposal.

AGCC 17. Biomedical waste

Applies to: Additional

17.1 The Contractor shall hold a contract with a licensed biomedical waste contractor for the duration of this Contract; maintain documented consignment notes for every collection; provide puncture-proof sharps containers at every kiosk and in every field kit; arrange collection not less than weekly; maintain a documented needlestick injury protocol including access to post-exposure prophylaxis; and comply with the Hospital Waste Management Rules 2005.

AGCC 18. Business continuity and disaster recovery

Applies to: Additional

18.1 The Contractor shall maintain a documented business continuity and disaster recovery plan, tested not less than annually, with the results of each test reported to the Procuring Agency.

18.2 Recovery time and recovery point objectives shall be as stated in the Special Conditions of Contract or, failing that, in the Service Level Agreement.

D. GENERAL

AGCC 19. Subcontracting and assignment

Applies to: Additional

19.1 The Contractor shall not subcontract any material part of the Services, nor assign or novate this Contract in whole or in part, without the prior written approval of the Procuring Agency.

19.2 Approval of a sub-contractor shall not relieve the Contractor of any obligation or liability under this Contract.

19.3 Where the Contractor is a Joint Venture or Consortium, its composition shall not change without the prior written approval of the Procuring Agency, and all members shall remain jointly and severally liable throughout.

AGCC 20. Audit and inspection

Applies to: Additional

20.1 The Procuring Agency, its nominee, the Auditor General of Pakistan and any authority having jurisdiction may audit and inspect the Contractor's records, systems, facilities and personnel relating to this Contract, on reasonable notice.

20.2 The Contractor shall retain all records relating to this Contract for not less than five (05) years after expiry or termination, and shall procure equivalent rights against its sub-contractors.

AGCC 21. Indemnity and limitation of liability

Applies to: Additional

21.1 The Contractor shall indemnify the Procuring Agency against all claims, losses and expenses arising from any act or omission of the Contractor, its personnel or sub-contractors in the performance of the Services, including any clinical negligence, data breach or infringement of third-party rights.

21.2 The Contractor's aggregate liability shall not be limited in respect of death or personal injury, clinical negligence, breach of AGCC 6 to AGCC 11, fraud, or wilful misconduct. In all other respects the limitation of liability, if any, shall be as stated in the Special Conditions of Contract.

AGCC 22. Change control

Applies to: Additional

22.1 No change to the Scope of Work, the Service Levels or the Contract Price shall take effect unless recorded in a written change order signed by both Parties and approved by the competent authority.

22.2 Each change order shall state the technical change, its effect on the Service Levels, its effect on price, and its effect on the programme.

AGCC 23. Taxes and duties

Applies to: Additional

23.1 The Contract Price is inclusive of all taxes, duties, levies and charges applicable in Pakistan. The Contractor shall be responsible for their assessment and payment, and shall discharge all withholding and reporting obligations.

23.2 GCC 25 shall apply to any change in the Applicable Law relating to taxes and duties occurring after the date of this Contract.

AGCC 24. Terminology

Applies to: Supplements GCC 1

24.1 References in the Contract Documents to the "Supplier" or the "Service Provider" shall be read as references to the Contractor as defined in GCC 1.

End of Additional General Conditions of Contract.

ADDITIONAL SPECIAL CONDITIONS OF CONTRACT

Two Stage Bidding Procedure — Rule 36(c), Public Procurement Rules 2004

Tender for Hiring of Services for Turnkey Establishment, Integration & Operations of Digital Telemedicine Ecosystem (Pilot Phase) | Ref. F.30-1/2025-IDSRS-NIH

Status of this document

These Additional Special Conditions of Contract supplement the standard Special Conditions of Contract published on EPADS v2.0, and complete the entries left to the Special Conditions by the Additional General Conditions of Contract (AGCC) issued for this procurement.

The standard Special Conditions continue to apply, save where an entry below expressly replaces or amends a specified provision. Where an entry below conflicts with the standard Special Conditions, the entry below shall prevail.

References beginning "GCC" are to the standard General Conditions of Contract on EPADS. References beginning "AGCC" and "ASCC" are to the additional documents issued for this procurement.

A. REPLACEMENTS TO THE STANDARD SPECIAL CONDITIONS

The following replace entries of the standard Special Conditions which were prepared for a different procurement, or which conflict with the Bid Data Sheet.

ASCC Clause No.	GCC / AGCC Ref.	Amendments of, and Supplements to, Clauses in the Conditions of Contract
ASCC 1	GCC 1	**Replaces the Definitions entry in full.** The Procuring Agency is: Project Director, Integrated Disease Surveillance and Response System (IDSRS) Project, National Institute of Health, Islamabad. The Contractor is: [to be completed on award]. The title of the subject procurement is: Tender for Hiring of Services for Turnkey Establishment, Integration, Deployment, Commissioning, Operation, Maintenance and Transfer of a Digital Telemedicine Ecosystem (Pilot Phase), Reference No. F.30-1/2025-IDSRS-NIH.
ASCC 2	GCC 21 AGCC 15.4	**Replaces the Performance Guarantee entry in full.** The Performance Guarantee shall be Seven percent (07%) of the Contract Price. Acceptable form: B Call Deposit Receipt issued by a scheduled bank in Pakistan, in the name of Finance Manager, IDSRS Project, NIH, Islamabad. Validity: for the contract term and for ninety (90) days thereafter. Release: within thirty (30) days of formal acceptance of final handover under AGCC 15, and not before.
ASCC 3	GCC 20 AGCC 4	**Replaces the Liquidated Damages entry in full.** Liquidated damages for delay: 0.10% of the Contract Price for each day by which the Completion Date is later than the Intended Completion Date, subject to a maximum of ten percent (10%) of the Contract Price. Service Level credits: as set out in the Service Level Agreement, deducted from the monthly payable invoice. Aggregate cap: the aggregate of liquidated damages and Service Level credits applied in any month shall not exceed thirty percent (30%) of that month's payable invoice, and the aggregate over the contract term shall not exceed the amount of the Performance Guarantee. Data breach: an incident compromising data security shall be dealt with under AGCC 7 and AGCC 21, and shall not be treated as delay for the purposes of this entry.
ASCC 4	GCC 7	**Completes the Effectiveness entry.** This Contract shall become effective on the date of its signature by both Parties, or on such later date as both Parties may agree in writing, not being later than thirty (30) days from signature.

ASCC Clause No.	GCC / AGCC Ref.	Amendments of, and Supplements to, Clauses in the Conditions of Contract
ASCC 5	GCC 10.2	**Completes the Expiration entry.** The Contract shall remain in force from the Effective Date until completion of 3,600,000 consultations or 30 June 2028, whichever occurs earlier, including a mobilisation and deployment period of three (03) months, unless terminated earlier in accordance with GCC 14.
ASCC 6	GCC 29	**Replaces the Inspections & Tests Requirements entry in full.** This being a procurement of services, inspection and acceptance shall be as follows: (a) Design and architecture review of the platform prior to build; (b) Factory or staging acceptance testing of the platform, including a witnessed load test demonstrating the Architectural Design Capacity; (c) Site acceptance testing of each kiosk, pharmacy outlet, warehouse and call centre position on deployment; (d) Integrated system testing and User Acceptance Testing of the platform, call centre, kiosks, integrations and dashboards prior to Go-Live; (e) Security testing, including vulnerability assessment and penetration testing, prior to Go-Live and annually thereafter; (f) Verification of regulatory licences and registrations required under AGCC 13; and (g) Ongoing performance monitoring against the Service Level Agreement. Acceptance in each case shall be certified by the Procuring Agency or its authorised technical or inspection team.
ASCC 7	GCC 16 (Delivery) AGCC 15	**Replaces the Delivery & Documents entry in full.** Delivery and acceptance documentation shall comprise: invoices; installation, configuration and commissioning records; testing, User Acceptance Testing and security testing reports; software and licence documentation; the asset register maintained under AGCC 14; system credentials and configurations; data dictionary; standard operating procedures and user and technical manuals; backup and disaster recovery documentation; training records; and final handover documents. Certificates of country of origin, packing lists and warranty certificates of the kind applicable to a supply of goods are not required, save in respect of individual items of hardware where the manufacturer issues them as a matter of course.

B. ENTRIES LEFT BLANK BY THE STANDARD CONDITIONS

The standard General Conditions defer the following matters to the Special Conditions, but no entry appears in the standard Special Conditions.

ASCC Clause No.	GCC / AGCC Ref.	Amendments of, and Supplements to, Clauses in the Conditions of Contract
ASCC 8	GCC 29 AGCC 14	**Defect Liability Period.** The Defect Liability Period shall be six (06) months from the date of formal acceptance of each CAPEX deliverable, without prejudice to any longer OEM/manufacturer warranty applicable to the supplied equipment. In respect of service components, the defect liability obligation shall be discharged through the Service Level Agreement for the duration of the contract term. The Defect Liability Period shall be extended for as long as any notified Defect remains uncorrected.
ASCC 9	GCC 5	**Location.** The Services shall be performed at the designated Telemedicine Centres at IHITC, Islamabad and NRIMF, Karachi, and at other approved service-delivery locations within Islamabad Capital Territory and Karachi. The locations of the thirty (30)

ASCC Clause No.	GCC / AGCC Ref.	Amendments of, and Supplements to, Clauses in the Conditions of Contract
		Telemedicine Kiosks shall be identified/designated by the Procuring Agency and communicated to the Contractor in writing.
ASCC 10	GCC 8 GCC 10.1	**Commencement of Services.** The Contractor shall commence the Services within five (05) days of the Effective Date and shall complete mobilisation, deployment, testing, commissioning and achieve Go-Live within three (03) months of the Effective Date.
ASCC 11	GCC 17 AGCC 5	**Insurance - minimum sums insured.** Public Liability: PKR 20,000,000 per occurrence. Professional Indemnity covering clinical services: PKR 50,000,000 in the aggregate per annum. Asset Insurance: Full replacement value of all CAPEX equipment and assets. Motor Vehicle: As required by applicable law, plus third-party liability cover of not less than PKR 5,000,000 per occurrence. All policies shall be maintained throughout the Contract Term and evidence thereof shall be furnished to the Procuring Agency upon request and on each renewal.
ASCC 12	GCC 18	**Actions requiring prior written approval.** In addition to the matters listed at GCC 18.1, the Contractor shall obtain prior written approval before: changing the Medical Director or any key personnel; changing the hosting facility or data centre; appointing or changing any sub-contractor; changing the composition of a Joint Venture or Consortium; disposing of or relocating any asset vesting under AGCC 14; and making any change to the clinical protocols or the programme formulary.
ASCC 13	GCC 19	**Reporting obligations.** The Contractor shall submit: monthly Service Level performance reports; monthly clinical audit reports under the Scope of Work; monthly consultation and payment reconciliation statements; quarterly asset register updates; quarterly bulk data exports under AGCC 11.2; annual business continuity test results under AGCC 18; and incident reports as required under AGCC 7.1(d). Formats shall be approved by the Procuring Agency within thirty (30) days of the Effective Date.
ASCC 14	GCC 23 GCC 24	**Personnel.** Key personnel are: Project Director; Medical Director (holding current PM&DC registration); Technical Lead; Call Centre Operations Manager; Pharmacy and Supply Chain Manager; and Information Security Officer. Key personnel shall not be replaced without the prior written approval of the Procuring Agency, and any replacement shall be of equivalent or superior qualification and experience. The Procuring Agency may require the removal of any person engaged on the Services whose conduct or competence it reasonably considers unsatisfactory.
ASCC 15	GCC 27 GCC 28	**Payment terms.** Currency: Pakistani Rupees. Capital Expenditure: payable as a lump sum against each accepted deliverable, on certification of acceptance under ASCC 6. Operational Expenditure: payable monthly in arrears against verified consultations, in accordance with the payment mechanism and verification procedure prescribed in the Bid Data Sheet. No payment shall be made for unverified, duplicate, unlogged or misclassified records. Payment shall be made within sixty (60) days of receipt of a complete and undisputed invoice. No advance payment shall be made under this Contract.

ASCC Clause No.	GCC / AGCC Ref.	Amendments of, and Supplements to, Clauses in the Conditions of Contract
ASCC 16	GCC 22	**Sustainable procurement.** The Contractor shall comply with the Hospital Waste Management Rules 2005 and the biomedical waste obligations at AGCC 17, and shall apply energy-efficient equipment and responsible disposal practices for all electronic equipment deployed under this Contract.

C. ENTRIES REQUIRED BY THE ADDITIONAL GENERAL CONDITIONS

ASCC Clause No.	GCC / AGCC Ref.	Amendments of, and Supplements to, Clauses in the Conditions of Contract
ASCC 17	AGCC 18.2	**Recovery objectives.** Recovery Time Objective: four (04) hours for the platform and teleconsultation service; twenty-four (24) hours for kiosk and reporting functions. Recovery Point Objective: fifteen (15) minutes for clinical and prescription records; four (04) hours for all other data. The business continuity and disaster recovery plan shall be tested annually and the results reported to the Procuring Agency.
ASCC 18	AGCC 21.2	**Limitation of liability.** Save in respect of death or personal injury, clinical negligence, breach of AGCC 6 to AGCC 11, fraud or wilful misconduct — in respect of which liability is unlimited the Contractor's aggregate liability under this Contract shall not exceed the total Contract Price.
ASCC 19	GCC 14 AGCC 15.3	**Continuity on termination.** The entry in the standard Special Conditions requiring the Contractor to continue providing the Services until alternate arrangements are made is supplemented as follows: that obligation shall continue for a period of up to ninety (90) days from the effective date of termination or expiry, on the rates applying immediately before that date, and shall be performed in accordance with the exit and transition plan approved under AGCC 15.1.
ASCC 20	GCC 1 AGCC 24	**Terminology.** References in the Contract Documents to the "Supplier", the "Service Provider", the "Bidder" (after award) or the "Contractor/Bidder" shall be read as references to the Contractor as defined in GCC 1. References to the "Authority" shall be read as references to the Procuring Agency.

End of Additional Special Conditions of Contract.

Contents

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ANNEXURE–I

SCOPE OF WORK

HIRING OF SERVICES FOR TURNKEY ESTABLISHMENT, INTEGRATION & OPERATIONS OF DIGITAL TELEMEDICINE ECOSYSTEM (PILOT PHASE)

Integrated Disease Surveillance and Response System (IDSRS)

National Institute of Health, Islamabad

Ministry of National Health Services, Regulations & Coordination

1. INTRODUCTION, STATUS AND ORDER OF PRECEDENCE

1.1 This Annexure–I sets out the Scope of Work for the turnkey establishment, integration, deployment, commissioning, operation, maintenance and transfer of a Digital Telemedicine Ecosystem (Pilot Phase) for the Integrated Disease Surveillance and Response System (IDSRS) Project, National Institute of Health (NIH), under the Ministry of National Health Services, Regulations & Coordination (MoNHSR&C).

1.2 This Annexure forms an integral part of the Bidding Documents and shall be read together with the Invitation to Bids, the Instructions to Bidders, the Bid Data Sheet, the Evaluation and Qualification Criteria, the General and Special Conditions of Contract, the Service Level Agreement and all other components of the Bidding Documents.

1.3 Order of precedence. In the event of any conflict or inconsistency between this Annexure and any other component of the Bidding Documents or of the Contract, the Conditions of Contract and the Service Level Agreement shall prevail over this Annexure. This Annexure states technical and operational requirements; it does not create, vary or supplement any payment mechanism, penalty, service credit or liquidated damage, all of which are governed exclusively by the Contract.

1.4 Turnkey responsibility. The Service Provider shall bear full and undivided responsibility for the complete design, development, supply, installation, integration, testing, commissioning, operation, maintenance and transfer of the Digital Telemedicine Ecosystem. The Procuring Agency shall not be responsible for co-ordination between sub-contractors, consortium members or third-party suppliers.

1.5 Commercial model. The procurement is priced on a Capital Expenditure (CAPEX) and Operational Expenditure (OPEX) basis in accordance with the Price Schedule and the Bid Data Sheet. CAPEX items are quoted on a lump-sum basis and are not subject to re-measurement. OPEX is quoted as an all-inclusive per-consultation rate under the three defined service scenarios. Nothing in this Annexure shall be construed as requiring the Service Provider to fund, at its own cost, any item that the Price Schedule provides shall be quoted and paid as CAPEX.

1.6 Contract term. The Contract shall remain in force until completion of 3,600,000 (three million six hundred thousand) consultations or until 30 June 2028, whichever occurs earlier, comprising a mobilisation and deployment period of three (03) months followed by the operational period. Every duration, subscription, licence, warranty and consumable quantity quoted by the Bidder shall be dimensioned to that term.

2. DEFINITIONS AND ABBREVIATIONS

Term	Meaning
BHS	Border Health Services, Ministry of National Health Services, Regulations & Coordination
CNIC	Computerised National Identity Card issued by NADRA
DRAP	Drug Regulatory Authority of Pakistan
EMR	Electronic Medical Record maintained within the telemedicine platform.

Term	Meaning
FHIR	Fast Healthcare Interoperability Resources (HL7 FHIR Release 4)
IDSRS (NHDC)	Integrated Disease Surveillance and Response System, incorporating the National Health Data Centre function, National Institute of Health, Islamabad
IHITC	Islamabad Health and Innovation Technology Centre, Islamabad — primary Telemedicine Centre
NIRMF	The designated Telemedicine Centre at Karachi, as identified in the Bidding Documents
MoNHSR&C	Ministry of National Health Services, Regulations & Coordination
PM&DC	Pakistan Medical & Dental Council, constituted under the Pakistan Medical and Dental Council Act, 2022
Consultation	A completed, system-recorded teleconsultation between a registered patient and a PM&DC-registered medical practitioner, logged with a unique consultation identifier, patient identifier, practitioner identifier, date and time stamps and system-logged doctor contact duration
Telemedicine Health Workforce	The field-based health workers deployed by the Service Provider to deliver doorstep services under this Contract
Data Hub	The National Telemedicine Data Hub established under clause 19.2, being the single canonical store into which every transaction of the service flows
Command Centre	The IDSRS Telemedicine Command Centre established under clause 19.3
BHU	Basic Health Unit — a public primary health care facility, capable of being onboarded as a service and reporting channel under clause 19.5.3
IBS	Indicator-Based Surveillance, as described at clause 19.4.1
EBS	Event-Based Surveillance, as described at clause 19.4.1
Service Commitment Volume	The daily consultation volume the Service Provider is contractually obliged to deliver, as stated at clause 4.1
Architectural Design Capacity	The volume the system must be capable of sustaining without re-architecture, as stated at clause 4.3

3. SCOPE SUMMARY

3.1 The Service Provider shall design, develop, deploy, integrate, commission, operate, maintain and ultimately transfer a Digital Telemedicine Ecosystem comprising the following components:

- a telemedicine platform with patient mobile and web applications, a practitioner portal, an administration portal and an integrated Electronic Medical Record;
- teleconsultation services delivered by PM&DC-registered medical practitioners;
- a call centre established and operated at the designated Telemedicine Centres;
- thirty (30) telemedicine kiosks, deployed and operated as set out at Section 9;
- a field-based Telemedicine Health Workforce providing doorstep services;
- pharmacy, medicine supply, warehousing, cold chain and last-mile delivery;
- rapid point-of-care diagnostics and laboratory referral management;
- media, public awareness and health communication;
- the National Telemedicine Data Hub, the IDSRS Telemedicine Command Centre and the public health surveillance integration required by Section 19;
- ICT infrastructure, hosting, cybersecurity, data management and disaster recovery; and
- training, technical support, operations and maintenance for the contract term.

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3.2 Locations. The Telemedicine Centres shall be established at IHITC, Islamabad and at NIRMF, Karachi. Telemedicine kiosks shall be deployed as set out at clause 9.1. Field operations shall cover Islamabad Capital Territory and Karachi.

3.3 Level of care. The programme shall deliver primary and secondary level health care only. Tertiary, emergency, surgical, obstetric and intensive care services are outside scope and shall be managed by referral in accordance with clause 4.6.

4. SERVICE VOLUME, CAPACITY AND CLINICAL QUALITY

4.1 Service Commitment Volume

4.1.1 The Service Provider shall deliver a minimum of five thousand (5,000) completed consultations per day, seven days a week, across all service channels, from the date of completion of the ramp schedule at clause 4.2 until the end of the contract term. This figure corresponds to the estimated aggregate of 3,600,000 consultations on which the Financial Proposal is evaluated.

4.1.2 Only fully completed and system-recorded consultations shall count towards the Service Commitment Volume. Draft, abandoned, duplicate, cancelled and unverified records shall not be counted.

4.2 Ramp schedule

Period from go-live	Minimum daily consultations	Remarks
Month 1	1,000	Commencement of live operations following successful UAT
Month 2–3	2,500	Progressive activation of kiosks and field workforce
Month 4–6	4,000	Full network operational
Month 7 onwards	**5,000**	Service Commitment Volume sustained for the remainder of the term

4.3 Architectural Design Capacity

4.3.1 Notwithstanding the Service Commitment Volume, the platform, hosting, telephony and supporting infrastructure shall be designed, dimensioned and evidenced to sustain a minimum of fifteen thousand (15,000) consultations per day without re-architecture, redesign or replacement of any core component.

4.3.2 The Bidder shall demonstrate the Architectural Design Capacity by an independent, witnessed load test at User Acceptance Testing, and shall submit the load-test report, the test methodology and the raw result set to the Procuring Agency.

4.3.3 Concurrency shall be dimensioned to the Architectural Design Capacity. The platform shall support a minimum of ten thousand (10,000) concurrent users at launch, shall be scalable to fifty thousand (50,000) concurrent users, and shall auto-scale to three (3) times baseline load without manual intervention and without degradation of the service levels.

4.4 Clinical quality floor

4.4.1 The average system-logged doctor contact time per consultation shall be not less than six (6) minutes, measured over each calendar month across all consultations delivered in that month.

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4.4.2 No consultation shall be recorded as completed where the system-logged doctor contact time is less than three (3) minutes, except where the patient disconnects, in which event the system shall record the disconnection and the reason.

4.4.3 Measurement method. Doctor contact time shall be captured automatically by the platform from the moment the practitioner joins the session to the moment the session terminates, expressed in minutes and seconds, and shall be reported in the monthly service report and made visible to the Procuring Agency in real time on the administration dashboard.

4.4.4 Clinical audit. The Service Provider shall maintain a Medical Quality Assurance function which shall audit a random sample of not less than two per cent (2%) of recorded consultations each month against the approved clinical protocols. The audit methodology, the sampling frame, the audit instrument and the findings shall be reported monthly to the Procuring Agency, together with the corrective action taken in each case of non-conformance. The Procuring Agency or its authorized third-party monitor may re-audit any sample.

4.5 Clinical scope and specialty mix

4.5.1 The programme shall provide primary and secondary care teleconsultation, including general practice, family medicine and such secondary-level specialties as the Service Provider proposes and the Procuring Agency approves.

4.5.2 The Bidder shall set out in its Technical Proposal the proposed specialty mix, the basis on which it has been determined, the practitioner numbers and availability per specialty, the coverage hours per specialty, and the escalation pathway from general practice to secondary-level specialty. The Procuring Agency shall approve the specialty mix prior to go-live and may require it to be revised during the contract term in the light of observed demand.

4.5.3 The Service Provider shall maintain a specialty referral pathway within the platform enabling a general practitioner to escalate a case to a secondary-level specialist, with the full Electronic Medical Record available to the receiving practitioner.

4.6 Referral and exclusions

4.6.1 Where the treating practitioner determines that the presenting condition cannot be safely assessed, managed or prescribed for by teleconsultation, the practitioner shall not prescribe and shall instead refer the patient to the nearest appropriate physical health facility. The platform shall provide a structured referral function which records the reason for referral, identifies the nearest appropriate facility, issues a referral note to the patient, and logs the referral against the patient record.

4.6.2 The following are outside the scope of teleconsultation under this Contract and shall in every case be referred: medical emergencies and suspected emergencies; conditions requiring physical examination for safe diagnosis; obstetric care and labour; surgical intervention; acute mental health crisis; and any condition for which the applicable law or policy of MoNHSR&C requires in-person assessment.

4.6.3 Notifiable disease reporting. Where a consultation gives rise to a suspected or confirmed case of a notifiable condition, or to a case meeting a surveillance case definition notified by IDSRS, the platform shall flag the case automatically and transmit the notification to IDSRS (NHDC) in the format and within the timeframe notified by the Procuring Agency. The Service Provider shall configure the notifiable condition list as directed by IDSRS and shall update it on notification without additional charge.

5. TELEMEDICINE PLATFORM

5.1 General

5.1.1 The Service Provider shall provide a fully functional, production-grade telemedicine platform comprising a patient-facing mobile application for Android and iOS, a patient-facing web application, a practitioner portal, an administration portal, an integrated Electronic Medical Record and an e-prescription module.

5.1.2 All user interfaces shall be available in English and Urdu only. The Service Provider shall ensure complete parity of function between the two languages. Additional languages may be required at the sole discretion of the Procuring Agency in any subsequent phase and the platform shall be built to accommodate them without re-architecture.

5.1.3 All branding, visual identity, application naming, signage, uniforms, vehicle livery and printed material shall carry National Telemedicine Programme branding as approved by MoNHSR&C. No third-party, corporate or vendor branding of any kind shall appear on any patient-facing surface, application, document, garment, structure or vehicle.

5.2 Patient registration and identity verification

5.2.1 Patient registration shall be effected by CNIC verification together with one-time password (OTP) verification of the registered mobile number. No biometric capture device shall be required at the kiosk or in the field for patient identity verification.

5.2.2 The CNIC shall constitute the immutable primary anchor of the patient record. The Service Provider shall not adopt any proprietary identifier as the primary key of the patient record.

5.2.3 Defined fallbacks shall be provided for patients without a CNIC, namely: B-Form or Child Registration Certificate for minors; Proof of Registration or Afghan Citizen Card where applicable; and passport for foreign nationals. Each fallback shall be recorded against the patient record with the identifier type, and shall be capable of being reconciled to a CNIC subsequently without creation of a duplicate record.

5.2.4 The platform shall provide automated duplicate detection and record-merge functionality, with a full audit trail of every merge.

5.3 Patient consent

5.3.1 The Service Provider shall capture explicit, informed patient consent at the point of registration, before any clinical data is recorded. Registration shall not complete without consent being given or expressly declined.

5.3.2 The consent text shall be approved in writing by MoNHSR&C prior to go-live and shall be presented to the patient in both Urdu and English. It shall cover, at a minimum: the collection, storage and processing of personal and health data; the sharing of that data with MoNHSR&C, IDSRS (NHDC) and such other government health information systems as the Procuring Agency may notify; the retention period; the patient's right to withdraw consent; and the consequences of withdrawal.

5.3.3 Each consent shall be stored against the patient record with a timestamp, the version of the consent text accepted, and the channel through which it was given. Consent shall be withdrawable by the patient at any time through the application, the call centre or in person at a kiosk, and every withdrawal shall be logged.

5.4 Practitioner portal and practitioner network

5.4.1 The Service Provider shall maintain an active practitioner network of not fewer than ten thousand (10,000) medical practitioners registered with the Pakistan Medical & Dental Council (PM&DC) and available to the programme.

5.4.2 For the purpose of this clause, an active practitioner means a PM&DC-registered medical practitioner who has completed at least one teleconsultation on the platform during the reporting month.

5.4.3 The practitioner portal shall verify and store the PM&DC registration number of every practitioner, shall block any practitioner whose registration has lapsed or been suspended, and shall re-verify registrations at intervals of not more than six (6) months.

5.4.4 The practitioner portal shall provide the treating practitioner with access to the patient's complete Electronic Medical Record during the consultation, including previous consultations, prescriptions, diagnostic results and referrals.

5.5 Electronic Medical Record

5.5.1 The platform shall incorporate an Electronic Medical Record capturing, at a minimum: patient demographics; the CNIC-anchored unique medical record number; presenting complaint; history; clinical findings; vital signs and point-of-care test results; provisional and final diagnosis coded to ICD-10 or such coding system as IDSRS notifies; prescription; diagnostic orders and results; referrals; and the full consultation audit trail.

5.5.2 The Electronic Medical Record shall be retained in full for the contract term and shall be handed over in full to the Procuring Agency on expiry or termination. No clinical record shall be deleted, archived beyond retrieval, or rendered inaccessible at any time.

5.6 Interoperability and integration with future IDSRS components

5.6.1 The Electronic Medical Record shall be constructed so that it can be integrated with any further component of the Integrated Disease Surveillance and Response System, or any other national health information system notified by MoNHSR&C, without redesign of the record or migration of the underlying data model.

5.6.2 Canonical format. HL7 FHIR Release 4 shall be the canonical record format for all clinical data held on the platform. The Service Provider shall submit a complete data dictionary, mapping every stored data element to its FHIR resource and element, within ninety (90) days of go-live.

5.6.3 Coding. Diagnoses shall be coded to ICD-10, or to such other coding system as IDSRS (NHDC) may notify, and laboratory results to LOINC where a LOINC code exists.

5.6.4 Future integration. Within ninety (90) days of written notice from the Procuring Agency that a further IDSRS component or national health record system is operational, the Service Provider shall implement bidirectional synchronisation with that component, including the automatic provisioning into it of all patients already registered on the telemedicine platform, and the recognition without re-registration of patients already registered on that component.

5.6.5 Pricing of future integration. The Bidder shall quote a **fixed lump sum** for the work described at clause 5.6.4 as a separately identified line item in its Financial Proposal. That sum shall be firm and shall not be subject to escalation, re-negotiation or variation. Where no such sum is quoted, the work shall be deemed included within the quoted CAPEX and shall be performed at no additional cost.

5.6.6 The Service Provider shall publish and maintain documented, versioned and authenticated Application Programming Interfaces for all record classes held on the platform, and shall provide the Procuring Agency with complete API documentation, test credentials and a sandbox environment.

5.7 e-Prescription

5.7.1 Every prescription shall be generated electronically through the platform, shall carry the prescribing practitioner's name and PM&DC registration number, the date and time of issue, the patient identifier, and a unique prescription identifier, and shall be verifiable by the dispensing pharmacy against the platform.

5.7.2 Prescriptions shall be restricted at system level to the formulary defined at clause 10.1. The platform shall not permit generation of a prescription for any item outside that formulary.

5.7.3 The platform shall provide prescribing decision support including, at a minimum, drug–drug interaction checking, allergy checking against the patient record, dose-range checking, and duplicate-therapy checking.

5.8 Complaint management and escalation

5.8.1 The platform shall incorporate a complaint management module accessible to patients through the mobile application, the web application, the call centre and in person at any kiosk.

5.8.2 Every complaint shall be assigned a unique reference, acknowledged to the complainant, tracked to resolution, and closed only with a recorded resolution and the complainant's notification.

5.8.3 Escalation tiers. The module shall implement the following escalation ladder, with automatic escalation on expiry of each tier's response time:

Tier	Owner	Response time	Scope
Tier 1	Service Provider — call centre / kiosk supervisor	24 hours	Routine service complaints
Tier 2	Service Provider — Operations Manager	48 hours	Unresolved Tier 1; repeat complaints
Tier 3	Service Provider — Medical Director / Quality Assurance	72 hours	Clinical complaints; practitioner conduct
Tier 4	Project Director, IDSRS	7 days	Unresolved Tier 3; serious clinical incidents; complaints against the Service Provider
Tier 5	Officer nominated by MoNHSR&C	As directed	Final escalation

5.8.4 Complaints alleging clinical harm shall be escalated immediately to Tier 3 and notified to the Procuring Agency within twenty-four (24) hours, irrespective of the tier at which they were received.

5.8.5 The Procuring Agency shall have real-time read access to the complete complaint register, including open, escalated and closed complaints, and to the complaint analytics dashboard.

6. CALL CENTRE

6.1 The Service Provider shall establish, equip, staff and operate a call centre at the Telemedicine Centres, operating twenty-four (24) hours a day, seven (7) days a week, for the contract term.

6.2 Agent capacity. The Service Provider shall deploy not fewer than two hundred (200) active call centre agents. Each agent shall handle a minimum of twenty-five (25) calls per day, giving an aggregate minimum call-handling capacity of five thousand (5,000) calls per day, consistent with the Service Commitment Volume at clause 4.1.

6.3 For this purpose an active agent means an agent handling live patient calls or teleconsultation support. Administrative, supervisory, technical and non-operational staff shall not be counted towards the figure at clause 6.2.

6.4 Telephony platform capacity. The telephony platform shall be dimensioned to handle not fewer than one thousand eight hundred (1,800) simultaneous inbound sessions, and shall be scalable in line with the Architectural Design Capacity at clause 4.3. Simultaneous session capacity and daily call-handling capacity are distinct requirements and both shall be satisfied.

6.5 The Bidder shall submit with its Technical Proposal a traffic model demonstrating that the proposed agent numbers, shift pattern and telephony capacity meet the service levels, stating the assumed arrival rate, peak factor, average handling time and target grade of service.

6.6 Helpline number and website. A Universal Access Number (UAN) helpline and the programme website shall be obtained from and registered with the relevant authorities. The Procuring Agency shall facilitate the Service Provider in the government processes required for allocation and registration; the Service Provider shall bear the cost and shall be responsible for the application, configuration and operation.

6.7 Call recording. One hundred per cent (100%) of inbound and outbound calls shall be recorded, encrypted at rest, and retained in accordance with the retention schedule at clause 13.7. Recordings shall be searchable by consultation identifier, patient identifier, agent identifier, date and time.

6.8 The call centre shall be equipped with an Automatic Call Distributor, Interactive Voice Response in English and Urdu, Computer Telephony Integration with the platform, quality monitoring, real-time wallboards and a workforce management system.

6.9 All call centre agents shall be trained in the approved triage protocol, in patient confidentiality, in the referral pathway at clause 4.6, and in the complaint escalation ladder at clause 5.8. No agent shall provide clinical advice.

7. TELEMEDICINE CENTRES — SITE ASSESSMENT AND OPERATIONAL READINESS

7.1 Mandatory site visit and assessment

7.1.1 Each Bidder shall, prior to submission of its Stage-I Technical Proposal, undertake a physical visit and detailed assessment of the proposed Telemedicine Centres at IHITC, Islamabad and NIRMF, Karachi, in co-ordination with the Procuring Agency.

7.1.2 The purpose of the site assessment shall be to enable the Bidder to examine the existing premises and determine the physical, technical and operational requirements necessary to make each Centre suitable and ready for deployment and operation of the Digital Telemedicine Ecosystem envisaged under this procurement.

7.1.3 The assessment shall take into account the Bidder's proposed technical solution, system architecture, call-centre and telemedicine operating model, manpower and shift deployment, equipment configuration, connectivity requirements, operational workflows and applicable service requirements.

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7.2 Site-Specific Operational Readiness Plan

7.2.1 Based on the physical site assessment, each Bidder shall submit, as an integral part of its Stage-I Technical Proposal, a separate Site Assessment & Operational Readiness Plan for IHITC, Islamabad and for NIRMF, Karachi.

7.2.2 Each Plan shall clearly identify, specify and quantify the requirements considered necessary for making the respective Centre operationally ready, including, as applicable:

- Space planning and functional layout — functional zoning, room and area utilisation, agent seating, supervisory and monitoring areas, IT, server and network areas, support areas, circulation and workstation arrangements;
- Manpower and workstation planning — number, configuration and placement of workstations and operational positions corresponding to the proposed manpower and shift model;
- Electrical and power requirements — electrical load, distribution, power points, dedicated circuits, earthing, UPS and backup-power requirements;
- ICT, network, connectivity and telephony requirements — LAN and network architecture, structured cabling, internet and bandwidth requirements, redundancy, routers, switches, racks, Wi-Fi, SIP/VoIP and other connectivity requirements;
- Equipment placement requirements — proposed location and connectivity of workstations, servers, network and telephony equipment, monitoring and display systems and other operational equipment;
- HVAC and environmental requirements — cooling, ventilation and other environmental requirements necessary for personnel and ICT equipment;
- Security and access control requirements — physical security, access control, CCTV, restricted technical areas and equipment-security requirements;
- Furniture, fixtures and operational facilities — type, quantity, dimensions and proposed placement of required workstations, desks, chairs, storage and other operational furniture and fixtures;
- Fire, safety and emergency requirements — fire safety, emergency arrangements, occupational safety and other operational safety requirements; and
- Any other site-specific requirement considered necessary for making the respective Centre fully suitable for subsequent deployment and operation of the proposed telemedicine solution.

7.3 Drawings, specifications and quantification

7.3.1 The Site Assessment & Operational Readiness Plans shall not consist merely of general observations or recommendations. Each Bidder shall submit sufficiently detailed and implementable information, including, wherever applicable: floor plans and functional layouts; workstation and seating plans; equipment placement plans; electrical and power layouts and load requirements; ICT, network and connectivity layouts; HVAC requirements; technical specifications; item-wise quantities; and an indicative Bill of Quantities of the works and items required for operational readiness of each Centre.

7.3.2 The submitted Plans shall contain sufficient technical detail to enable the Procuring Agency to review, compare, rationalize and consolidate the requirements proposed by the participating Bidders.

7.4 Review and consolidation by the Procuring Agency

7.4.1 The Site Assessment & Operational Readiness Plans submitted by the Bidders shall be reviewed by the Procuring Agency and its Technical Committee for technical suitability, completeness, operational requirements and compatibility with the overall objectives of the Digital Telemedicine Ecosystem.

7.4.2 The Procuring Agency may review, reconcile, rationalise, standardise and consolidate the requirements, layouts, specifications and quantities proposed by the Bidders for development of a unified Site Readiness and Facility Requirements Plan for IHITC, Islamabad and NIRMF, Karachi.

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7.4.3 Submission of a particular requirement, specification, quantity, layout or Bill of Quantities item by a Bidder shall not, by itself, constitute its acceptance or approval by the Procuring Agency.

7.5 Exclusion of execution of facility works

7.5.1 For the avoidance of doubt, execution of civil works, renovation, refurbishment, electrical works, HVAC works, furnishing and other facility-readiness and upgradation works at IHITC, Islamabad and NIRMF, Karachi shall not form part of the Bidder's scope or quoted price under this procurement. Such works shall be undertaken or arranged separately by the Procuring Agency.

7.5.2 The Bidder's obligation under this component shall be limited to site assessment and submission of its complete, technically adequate and quantified Site Assessment & Operational Readiness Plans as part of the Stage-I Technical Proposal.

7.5.3 Preparation of site assessment reports, functional layouts, architectural drawings, three-dimensional visualisations, technical specifications and Bills of Quantities for the designated Telemedicine Centres forms part of this Scope of Work and shall not be quoted or paid as a separate CAPEX item.

8. TELEMEDICINE KIOSKS

8.1 Number, distribution and siting

8.1.1 The Service Provider shall design, fabricate, supply, install, commission, operate and maintain thirty (30) telemedicine kiosks, distributed as follows:

Location	Number	Placement
Karachi	05	At the five (05) Border Health Services (BHS) dispensaries, over which the Federal Government exercises jurisdiction
Islamabad Capital Territory	25	At sites proposed by the Bidder and approved by the Procuring Agency
Total	**30**	

8.1.2 Site selection proposal. The Bidder shall submit with its Stage-I Technical Proposal a Kiosk Deployment Plan identifying, for every proposed kiosk:

- the precise proposed location, with address, co-ordinates and a site photograph;
- the justification for that location, by reference to population density, catchment need, footfall, distance from the nearest public health facility, accessibility by public transport, and the presence of underserved populations;
- the geographical catchment area the kiosk is intended to serve, expressed in square kilometres and by named locality;
- the estimated catchment population and the estimated daily consultation throughput of that kiosk;
- the availability of mains power, fixed broadband and mobile network coverage at the site;
- the proposed host facility or landowner, and the basis on which access and permission will be secured;
- the operating hours proposed for that kiosk, determined in accordance with clause 8.6; and
- confirmation that the site is accessible to persons with disability.

8.1.3 The Procuring Agency shall approve, vary or reject each proposed site. No kiosk shall be fabricated or installed at a site that has not been approved in writing.

8.1.4 The Kiosk Deployment Plan shall demonstrate that the thirty kiosks, taken together, provide reasonable geographical coverage of the target population and do not cluster without justification.

8.2 Physical specification

Element	Requirement
Structure	Prefabricated, enclosed, standalone modular structure, weatherproof and lockable, suitable for continuous outdoor or indoor installation
Dimensions	Minimum eight (8) feet × eight (8) feet × eight (8) feet internal clear dimension
Accessibility	Wheelchair-accessible ramp with handrail conforming to a maximum gradient of 1:12; clear door width not less than 900 mm; internal turning space
Environmental control	Air conditioning sized to the internal load, mechanical ventilation, and insulation adequate for local climatic extremes
Acoustic treatment	Internal acoustic treatment sufficient to permit a private consultation and to prevent conversation being audible outside the structure
Lighting	Internal LED lighting adequate for clinical observation and for video consultation; external lighting at the entrance

Element	Requirement
Flooring and finishes	Non-slip, impervious, washable flooring and wall finishes suitable for a clinical environment
Electrical	Dedicated distribution board, earthing, residual current protection, and sufficient socket outlets for all installed equipment
Branding	National Telemedicine Programme branding as approved by MoNHSR&C, applied to all external and internal surfaces, signage and fascia. No third-party or vendor branding of any kind
Signage	External signage stating the programme name, operating hours, services available and the UAN helpline number, in English and Urdu
Security	Lockable door, intruder alarm, and closed-circuit television in accordance with clause 8.4
Fire safety	Serviced fire extinguisher appropriate to electrical risk, smoke detector, and displayed evacuation instruction

8.3 Power and backup

8.3.1 Every kiosk shall be provided with backup power sufficient to sustain the continuous operation of all installed equipment — including the display, laptop or workstation, prescription printer, document scanner, closed-circuit television, network equipment, point-of-care and rapid testing devices, lighting and ventilation — for a minimum of two (2) hours from the onset of a mains supply failure.

8.3.2 The Bidder shall submit with its Technical Proposal a Kiosk Power Continuity Plan stating the measured or calculated aggregate connected load per kiosk, the proposed backup technology, the battery or storage capacity, the recharge time, the expected service life, the replacement schedule, and the arrangements for extended or repeated supply interruption. The Bidder is free to propose any technically sound solution; no particular technology is prescribed.

8.3.3 The backup system shall switch over automatically and without interruption to any consultation in progress.

8.3.4 Backup power shall be tested monthly under load and the test result logged and reported.

8.4 Kiosk equipment

8.4.1 Each kiosk shall be equipped in accordance with the Bill of Quantities at Section 20. The following requirements are stated here and shall govern:

Item	Requirement
Display	One (1) thirty-two inch (32") smart television, wall-mounted, with integrated network connectivity. No alternative display size or type is permitted.
Workstation	One (1) laptop or equivalent workstation, Intel Core i5 twelfth generation or equivalent, 8 GB RAM minimum, 256 GB solid state drive minimum, licensed operating system and office productivity suite
Camera	High-definition webcam, 1080p minimum, with integrated or separate noise-cancelling microphone
Audio	Noise-cancelling headset for the operator
Printer	Prescription printer, monochrome laser or equivalent
Scanner	Document scanner capable of scanning CNIC and referral documentation
Connectivity	Twenty (20) Mbps dedicated fixed broadband connection with automatic failover to a 4G/LTE service on a separate carrier. Failover shall be automatic and shall not interrupt a consultation in progress.

Item	Requirement
Backup power	Inverter or uninterruptible power supply rated not less than 1500 VA / 900 W, with a battery bank sized to deliver not less than two (2) hours at the measured kiosk load (indicatively 250–300 W), in accordance with clause 8.3
Closed-circuit television	Two (2) cameras per kiosk — one (1) internal and one (1) external — giving sixty (60) cameras across the network, with network video recorder and ninety (90) day retention
Staff attendance	Biometric attendance terminal for staff attendance recording only. This device shall not be used for patient identity verification, which is governed by clause 5.2.
Furniture	Seating for the patient and one attendant, an examination or consultation surface, a workstation desk, and lockable storage for consumables and records
Clinical waste	Puncture-proof sharps container and colour-coded biohazard waste receptacles in accordance with Section 14
First aid	Stocked first aid kit maintained in date

8.4.2 Where a manufacturer name, model number or catalogue reference appears anywhere in this Annexure or in the Bills of Quantities, it is stated solely to convey the required standard of quality and performance and is in every case to be read as followed by the words "or equivalent". Any product meeting or exceeding the stated specification shall be acceptable.

8.5 Medical devices and rapid diagnostic tests

8.5.1 Each kiosk shall be equipped with the following clinical devices, each of which shall be a device registered with the Drug Regulatory Authority of Pakistan where registration is required: digital blood pressure monitor with adult and large adult cuffs; glucometer with test strips; pulse oximeter; digital thermometer; weighing scale; stadiometer or height measure; and stethoscope.

8.5.2 Rapid diagnostic test panel. Each kiosk and each field kit shall carry, and the Service Provider shall maintain in stock and in date, the complete panel set out below. This panel shall apply uniformly wherever rapid diagnostic testing is referred to in this Annexure or in the Bills of Quantities.

Test	Specification
Dengue NS-1 antigen	Rapid immunochromatographic test
Dengue IgG / IgM antibody	Rapid immunochromatographic test
Dengue Duo (NS-1 with IgG/IgM)	Combined rapid test
Malaria	Rapid antigen test detecting P. falciparum and P. vivax
Hepatitis C (anti-HCV)	Rapid screening test
Hepatitis B surface antigen (HBsAg)	Rapid screening test
Blood group and Rh typing	Anti-A, anti-B and anti-D reagents or equivalent card test
Pregnancy (urine hCG)	Rapid test
Blood glucose	Glucometer test strips, compatible with the supplied glucometer

8.5.3 Every reactive or positive result for Hepatitis B, Hepatitis C, malaria or dengue shall be recorded against the patient record, notified to IDSRS (NHDC) in accordance with clause 4.6.3, and accompanied by a documented referral to a designated confirmatory testing and treatment facility. Point-of-care screening shall not be reported to the patient as a diagnosis.

8.5.4 All rapid test kits shall be DRAP-registered, stored within their labelled temperature range, stock-rotated by expiry, and subject to a documented lot-to-lot quality check. Expired stock shall be removed and disposed of as clinical waste.

8.6 Operating hours

8.6.1 Where a kiosk is installed within a host facility that has its own fixed operating hours — including a shopping mall, a hospital, a dispensary, a government building or a transport terminal — the kiosk shall operate in accordance with the operating hours of that host facility, and the Bidder shall state those hours for each such site in the Kiosk Deployment Plan.

8.6.2 Where a kiosk is installed in a public place having no fixed host operating hours, the kiosk shall operate from 08:00 to 24:00, seven (7) days a week, in two (2) eight-hour shifts — 08:00 to 16:00 and 16:00 to 24:00 — each shift including a meal break, and supported by a defined relief pool to cover weekly rest days, annual leave and sickness.

8.6.3 **Clinical limit on sample collection.** Phlebotomy and the collection of specimens for laboratory analysis shall cease at 20:00 at every kiosk, irrespective of the kiosk's closing time. Specimens collected after that hour cannot reach a laboratory within the stability window for several commonly requested analytes, including potassium, glucose, ammonia and coagulation studies, and the results would be unreliable. Teleconsultation, e-prescription, pharmacy dispensing and rapid point-of-care testing may continue until the kiosk closes.

8.6.4 No kiosk shall be staffed by a single person at any time during its operating hours.

8.7 Kiosk staffing

8.7.1 Each kiosk shall be staffed, during every operating shift, by two (2) persons, namely:

- one (1) phlebotomist, holding a valid diploma or certification in phlebotomy or medical laboratory technology from a recognised institution, with not less than one (1) year of clinical or field experience; and
- one (1) technical support officer, responsible for the operation of the platform, the equipment, connectivity, patient registration and CNIC/OTP verification, teleconsultation facilitation, prescription printing, daily reporting and kiosk upkeep.

8.7.2 The Bidder shall submit a kiosk staffing roster demonstrating that two staff are present in every kiosk during every operating hour, including cover for weekly rest days, leave and sickness, and shall state the total headcount required. For a kiosk operating 08:00 to 24:00 in two shifts, seven days a week, the indicative requirement is 2 staff × 2 shifts = 4 positions per kiosk per day, before relief cover.

8.7.3 All kiosk staff shall wear National Telemedicine Programme uniform and identification as approved by MoNHSR&C. No third-party or vendor branding shall appear on any garment or identification.

8.7.4 The Service Provider shall bear all staffing costs, including salaries, statutory benefits, training, uniforms, identification and management. Curricula vitae of proposed phlebotomy staff shall be submitted with the Technical Proposal.

9. TELEMEDICINE HEALTH WORKFORCE

9.1 The field-based cadre deployed under this Contract shall be designated the Telemedicine Health Workforce. No alternative, informal or proprietary designation shall be used in any document, uniform, identification, vehicle livery or public communication.

9.2 Deployment. The Service Provider shall maintain a minimum of ninety (90) active Telemedicine Health Workforce members on duty at all times, twenty-four (24) hours a day, seven (7) days a week, across Islamabad Capital Territory and Karachi.

9.3 For the avoidance of doubt, the figure of ninety (90) is a concurrency requirement and not a total headcount. The Bidder shall state in its Technical Proposal the total headcount required to sustain ninety active workers at all times, the shift pattern proposed, the relief pool provided for weekly rest days, annual leave and sickness, and shall submit a roster demonstrating continuous compliance. The Service Provider shall comply with all applicable labour legislation in each jurisdiction of deployment.

9.4 Scope of field services. The Telemedicine Health Workforce shall provide, at the patient's residence or other agreed location: patient registration and CNIC/OTP verification; facilitation of teleconsultation on a portable device; measurement and recording of vital signs; rapid point-of-care testing in accordance with clause 8.5.2; specimen collection for laboratory referral; delivery of dispensed medicines; and patient education.

9.5 Field kit. Each worker shall be issued with a field kit in accordance with the Bill of Quantities at Section 20, comprising at a minimum: a tablet or smartphone with the platform application and mobile data; a digital blood pressure monitor; a glucometer with strips; a pulse oximeter; a digital thermometer; a portable weighing scale; the complete rapid diagnostic test panel; phlebotomy consumables; a cold-chain carrier where required; a puncture-proof sharps container; personal protective equipment; and a stocked first aid kit.

9.6 Tracking. Every field visit shall be logged on the platform with a time stamp and geolocation at the point of service delivery, and shall be linked to the corresponding consultation record.

9.7 Vehicles

9.7.1 The Service Provider shall provide each deployed Telemedicine Health Workforce member with a motorcycle. The Bidder may propose either a petrol motorcycle or an electric motorcycle, at its option.

9.7.2 The Bidder shall state in its Technical Proposal which option it has selected and shall justify that selection by reference to total cost of ownership over the contract term, daily range required against the proposed deployment pattern, servicing and spare parts availability in each city of operation, refuelling or recharging arrangements, and resilience to interruption of electricity supply.

9.7.3 Where a petrol motorcycle is proposed, the Bidder shall state the engine displacement, and no reference to charging or battery replacement shall apply.

9.7.4 Where an electric motorcycle is proposed, the Bidder shall state the motor rating in kilowatts, the minimum range per charge, the charging infrastructure to be provided at each operating hub and its electrical load, the spare battery ratio, the battery replacement schedule, and the arrangements for charging during interruption of electricity supply.

9.7.5 All vehicles shall be registered, insured, roadworthy and maintained by the Service Provider at its cost, and shall carry National Telemedicine Programme livery as approved by MoNHSR&C and no other branding.

10. PHARMACY, MEDICINE SUPPLY AND LOGISTICS

10.1 Formulary

10.1.1 Medicines dispensed under this Contract shall be limited to the primary and secondary care levels of the National Essential Medicines List issued by the Drug Regulatory Authority of Pakistan (DRAP), as current at the date of dispensing.

10.1.2 The Service Provider shall configure the platform so that no prescription can be generated for any item outside that formulary. The formulary shall be maintained as a controlled, versioned reference list within the platform and shall be updated within thirty (30) days of any revision notified by DRAP or by the Procuring Agency.

10.1.3 Every medicine supplied shall be registered with DRAP, shall be within its labelled shelf life at the point of dispensing, and shall be procured through a documented and auditable supply chain.

10.1.4 Exclusions. Notwithstanding anything in the formulary, the following shall not be prescribed, dispensed or delivered under this Contract in any circumstances:

- narcotic drugs and psychotropic substances scheduled under the Control of Narcotic Substances Act, 1997, and any medicine whose sale is restricted under Schedule G or equivalent restricted schedule;
- cytotoxic and antineoplastic agents;
- immunosuppressant agents requiring therapeutic drug monitoring;
- biological products and vaccines requiring cold-chain administration under a national programme;
- medicines subject to a pregnancy prevention or restricted distribution programme;
- anticoagulants requiring laboratory monitoring for dose titration; and
- any product not registered with DRAP, including nutraceutical, herbal and food supplement products.

10.1.5 Where the treating practitioner considers that the clinically appropriate treatment lies outside the formulary or the exclusions above, the practitioner shall not prescribe and shall refer the patient to the nearest appropriate physical health facility in accordance with clause 4.6.1.

10.2 Pharmacy network, warehousing and cold chain

10.2.1 The Service Provider shall establish and operate a network of licensed pharmacy locations sufficient to serve the areas of operation, integrated with the platform for e-prescription verification and dispensing.

10.2.2 Every pharmacy location shall hold a valid Drug Sale Licence issued by the competent provincial or Islamabad Capital Territory drug regulatory authority for the location concerned, and shall be registered with every other regulatory authority whose registration is required for its lawful operation.

10.2.3 The Service Provider shall operate warehousing with functional temperature-controlled storage. Every warehouse shall hold the licences and registrations required by DRAP and by the competent provincial or Islamabad Capital Territory authority for the location concerned, and shall be operated in accordance with good distribution practice.

10.2.4 Continuous temperature monitoring with automated alarm and a retained temperature log shall be maintained for every temperature-controlled store and for every cold-chain carrier in transit.

10.2.5 Copies of all licences and registrations under this clause shall be provided to the Procuring Agency before go-live, and any suspension, lapse or variation shall be notified within twenty-four (24) hours.

10.3 Dispensing and delivery

10.3.1 Medicines shall be dispensed only against a valid e-prescription verified against the platform, and only by or under the supervision of a person qualified to dispense under the applicable law.

10.3.2 The patient shall be offered the choice of collection from a pharmacy location or doorstep delivery.

10.3.3 Every dispensing event shall be recorded against the patient record with the item, strength, quantity, batch number, expiry date, dispensing pharmacy, dispenser identity and date and time.

10.3.4 Delivery shall be effected within the timeframe stated in the Service Level Agreement, and proof of delivery shall be captured electronically with time stamp and geolocation.

11. DIAGNOSTICS AND LABORATORY REFERRAL

11.1 Rapid point-of-care testing shall be provided at the kiosks and in the field in accordance with clause 8.5.2.

11.2 Where a laboratory investigation beyond the rapid test panel is clinically indicated, the practitioner shall generate an electronic diagnostic order and the patient shall be referred to a designated laboratory. Results shall be returned electronically to the platform and filed against the patient record, and shall be reviewed and actioned by a practitioner.

11.3 Specimen handling. Every specimen collected shall be labelled at the point of collection with the patient identifier, the date and time of collection and the collector's identity, shall be transported within the temperature range and stability window applicable to the requested analytes, and shall be tracked from collection to receipt at the laboratory with a documented chain of custody.

11.4 The Service Provider shall state in its Technical Proposal the maximum time from collection to laboratory receipt for each collection point, and shall demonstrate that this falls within the stability window for the analytes offered.

12. MEDIA, PUBLIC AWARENESS AND HEALTH COMMUNICATION

12.1 The Service Provider shall design and deliver a public awareness and health communication programme to drive uptake of the service and to deliver approved public health messaging.

12.2 The programme shall include digital, broadcast, print, outdoor and field channels, and shall be delivered in English and Urdu.

12.3 All campaign material, messaging and creative shall be approved in writing by MoNHSR&C before publication, and shall carry National Telemedicine Programme branding as approved by MoNHSR&C. No third-party or vendor branding shall appear in any campaign material.

12.4 The Service Provider shall establish and maintain the programme website. The website domain and the UAN helpline number shall be obtained from and registered with the relevant authorities, the Procuring Agency facilitating the Service Provider in the necessary government processes.

12.5 No clinical claim, treatment claim or endorsement shall be made in any campaign material without the prior written approval of the Procuring Agency.

12.6 The Service Provider shall report campaign reach, engagement and conversion monthly, supported by platform-generated analytics, and shall provide the Procuring Agency with read access to the underlying analytics accounts.

13. ICT INFRASTRUCTURE, HOSTING, CONNECTIVITY AND SECURITY

13.1 Hosting and data residency

13.1.1 All application servers, database servers, storage and supporting infrastructure shall be physically located within Pakistan. The primary installation shall be established at the IHITC site, Islamabad.

13.1.2 A secondary backup installation shall be established at IDSRS (NHDC), National Institute of Health, Islamabad, and shall be maintained in a state permitting restoration of service.

13.1.3 Data storage systems shall be centralised and shall be accessible to the Procuring Agency in accordance with Section 15.

13.1.4 **No cloud hosting of any kind shall be used for any part of the telemedicine solution.** No programme data, whether clinical, personal, operational, transactional, log or backup data, shall at any time be hosted, mirrored, replicated, cached, processed or stored on any public, private, hybrid or third-party cloud service, whether located inside or outside Pakistan. All data shall reside on physical storage systems within Pakistan under the control of the Service Provider at the installations identified above.

13.1.5 The Service Provider shall certify compliance with clause 13.1.4 at go-live and at each quarterly review, and shall permit the Procuring Agency or its authorised third-party monitor to verify compliance by physical and logical inspection at any time without prior notice.

13.1.6 The Bidder shall submit with its Technical Proposal a complete physical and logical architecture diagram identifying every server, storage system, network device and data flow, and the physical location of each.

13.2 Connectivity

13.2.1 The Service Provider shall provide a dedicated data link to IDSRS (NHDC) with a Committed Information Rate (CIR) of not less than one hundred and fifty (150) Mbps, procured from a licensed and reputable Internet Service Provider.

13.2.2 The link shall be provided with a service level agreement from the Internet Service Provider, shall be monitored continuously, and shall be supported by a diverse backup path.

13.2.3 Kiosk connectivity shall be provided in accordance with clause 8.4.1.

13.2.4 All connectivity costs for the contract term shall be borne by the Service Provider and shall be included in the quoted price.

13.3 Cybersecurity

13.3.1 The Service Provider shall deploy a next-generation firewall with advanced threat protection capable of mitigating zero-day attacks, including intrusion prevention, application control, sandboxing or equivalent advanced threat detection, and threat intelligence feed. The firewall shall be supplied with a licence and subscription valid for three (3) years from the date of commissioning.

13.3.2 The Service Provider shall implement, at a minimum: encryption of all data at rest and in transit using current industry-standard algorithms; role-based access control; multi-factor authentication for all administrative and clinical user accounts; centralised logging; endpoint protection; vulnerability management with documented patching cycles; and network segmentation separating clinical, administrative and public-facing zones.

13.3.3 An independent penetration test and vulnerability assessment shall be carried out before go-live and annually thereafter. The report and the remediation plan shall be provided to the Procuring Agency, and all critical and high findings shall be remediated before go-live.

13.3.4 The Service Provider shall notify the Procuring Agency of any actual or suspected data breach, unauthorised access or loss of data within twenty-four (24) hours of becoming aware of it, and shall provide a full written incident report within seventy-two (72) hours.

13.3.5 The Service Provider shall comply with the Prevention of Electronic Crimes Act, 2016 and with all directions issued by the Procuring Agency or by any competent authority in relation to information security.

13.4 Backup and disaster recovery

13.4.1 Automated backup of all programme data shall be taken not less frequently than every six (6) hours, encrypted, and replicated to the secondary installation at IDSRS (NHDC).

13.4.2 The Service Provider shall state and shall achieve a Recovery Point Objective not exceeding six (6) hours and a Recovery Time Objective not exceeding four (4) hours.

13.4.3 A full disaster recovery drill shall be conducted not less than once in each contract year, witnessed by the Procuring Agency, and the result documented and reported.

13.4.4 Restoration from backup shall be tested quarterly and the test result logged.

13.5 Environment and change management

13.5.1 The Service Provider shall maintain separate production, staging and development environments. No development or testing shall be performed against production data.

13.5.2 All changes to the production environment shall be made under a documented change control procedure with prior notification to the Procuring Agency, and emergency changes shall be reported within twenty-four (24) hours.

13.6 Retention schedule

13.6.1 The following retention periods shall apply. This schedule is the single governing statement of retention for the programme and shall override any other retention period stated elsewhere.

Data class	Retention	Notes
System and audit logs	1 year	Tamper-evident, time-stamped, exportable
Call recordings	6 months	Encrypted at rest; searchable by consultation and patient identifier
Closed-circuit television recordings	90 days	Per kiosk and per Telemedicine Centre
Clinical records and Electronic Medical Record	Contract term	Retained in full and handed over in full on expiry or termination; not deleted at any time
e-Prescription records	1 year	Linked to the corresponding consultation and dispensing record

14. BIOMEDICAL WASTE MANAGEMENT

14.1 The Service Provider shall manage all biomedical waste arising from kiosk and field operations in accordance with the Hospital Waste Management Rules, 2005 and all other applicable law.

14.2 The Service Provider shall hold a contract with a licensed biomedical waste contractor. The contractor shall be named in the Technical Proposal and a copy of its licence and of the contract shall be provided to the Procuring Agency before go-live. Any change of contractor shall require the prior written approval of the Procuring Agency.

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14.3 Puncture-proof sharps containers shall be provided at every kiosk and in every field kit, shall be sealed at three-quarters capacity, and shall never be decanted or re-used.

14.4 Colour-coded segregation of infectious, sharps and general waste shall be maintained at every point of generation.

14.5 A defined collection frequency shall be established for every kiosk and every field hub, stated in the Technical Proposal, and shall be not less frequent than weekly.

14.6 Documented consignment notes shall be raised for every collection, recording the point of generation, the quantity, the date, the carrier and the destination treatment facility, and shall be retained and made available to the Procuring Agency on request.

14.7 The Service Provider shall maintain a written needlestick and sharps injury protocol covering immediate first aid, incident reporting, risk assessment, post-exposure prophylaxis, and follow-up, shall train every clinical and field worker in it, and shall report every incident to the Procuring Agency within twenty-four (24) hours.

14.8 All staff performing phlebotomy or handling specimens shall be offered hepatitis B vaccination and the vaccination status shall be recorded.

15. DATA PROTECTION, ACCESS, OWNERSHIP AND HANDOVER

15.1 Data protection obligations

15.1.1 The Service Provider shall treat all patient personal data and health data as confidential and shall process it only for the purposes of this Contract. The obligations in this Section are contractual and binding, and apply irrespective of the state of general data protection legislation in Pakistan from time to time.

15.1.2 The Service Provider shall:

- collect and process only such personal data as is necessary for the delivery of the service;
- process personal data only on the documented instructions of the Procuring Agency;
- not use, sell, licence, share, disclose, publish or exploit any programme data for any commercial, research, marketing, analytical or other purpose whatsoever, whether during or after the contract term, without the prior written approval of MoNHSR&C;
- not transfer any programme data outside Pakistan under any circumstances;
- restrict access to personal data to named individuals who require it for the performance of their duties, maintain a current register of those individuals, and log every access;
- bind every employee, agent, sub-contractor and consortium member to obligations no less onerous than those in this Section, and remain liable for their acts and omissions;
- implement the technical and organisational security measures set out at clause 13.3;
- notify the Procuring Agency of any actual or suspected breach in accordance with clause 13.3.4;
- provide a mechanism by which a patient may request access to, correction of, or withdrawal of consent in respect of, their own record, and act on such a request within thirty (30) days; and
- on expiry or termination, hand over all data in accordance with clause 15.4 and thereafter securely destroy every remaining copy, certifying that destruction in writing.

15.1.3 De-identified or aggregated data derived from programme data remains programme data for the purposes of this Section and shall not be published or shared without the prior written approval of MoNHSR&C.

15.2 Continuous access by the Procuring Agency

15.2.1 The Service Provider shall provide the Procuring Agency, MoNHSR&C and IDSRS (NHDC) with continuous access to programme data throughout the contract term. Access shall not be deferred to the conclusion of the Contract.

15.2.2 Read API. The Service Provider shall provide a documented, versioned, authenticated read Application Programming Interface, callable by the Procuring Agency or IDSRS (NHDC) at any time, exposing all record classes held on the platform in HL7 FHIR Release 4 format.

15.2.3 Scheduled bulk export. The Service Provider shall additionally deliver a complete bulk export of all programme data to IDSRS (NHDC), in an open, non-proprietary, machine-readable format, automatically and without request, once in every calendar quarter throughout the contract term, together with the current data dictionary and schema documentation.

15.2.4 No fees. No export fee, egress fee, access fee, API call charge, interface charge or any similar charge shall be payable by the Procuring Agency at any time, whether during the contract term, on expiry, on termination or thereafter, in respect of access to or extraction of programme data.

15.2.5 Escrow. The Service Provider shall deposit and maintain in escrow, with an escrow agent approved by the Procuring Agency, the source code of all software developed specifically for this programme, the complete database schema, build and deployment documentation, and configuration. The escrow shall be updated at each major release and not less frequently than every six (6) months, and shall be

releasable to the Procuring Agency on expiry or termination of the Contract or on the insolvency or material default of the Service Provider.

15.3 Ownership of assets and data

15.3.1 All data, records, reports, dashboards, consultation logs, configurations, documentation, custom developments and outputs generated under this Contract shall be the exclusive property of the Government of Pakistan, the National Institute of Health and IDSRS. Any pre-existing proprietary software, source code, framework or intellectual property of the Service Provider shall remain its property unless otherwise expressly provided under the Contract.

15.3.2 **Ownership and handover of assets.** All assets, equipment, hardware, software licences (where transferable or perpetual), telemedicine kiosks, call-centre equipment, IT infrastructure and other tangible and intangible assets procured, developed or acquired specifically for the Project and paid for by the Procuring Agency under the Contract shall vest in and remain the property of the Government / Procuring Agency.

15.3.3 Upon expiry or termination of the Contract, the Contractor shall hand over all such assets, along with applicable documentation, credentials, configurations, inventories, warranties, licences and other related records, to the Procuring Agency in proper working condition, subject to normal wear and tear, without any additional cost.

15.4 Handover on expiry or termination

15.4.1 Not less than ninety (90) days before the expiry of the Contract, and immediately on notice of termination, the Service Provider shall deliver to the Procuring Agency a complete export of all programme data in an open, machine-readable format, together with the data dictionary, schema documentation, code books and reference data required to interpret it.

15.4.2 The Service Provider shall provide transition assistance for a period of ninety (90) days from expiry or termination, including support to any incoming service provider, at no additional cost.

15.4.3 The Service Provider shall not withhold, encrypt, degrade, delete or render inaccessible any programme data or asset on account of any dispute, including any dispute as to payment.

16. REGULATORY COMPLIANCE

16.1 Medical practitioners. Every practitioner delivering a consultation under this Contract shall, as a minimum, hold current and valid registration with the Pakistan Medical & Dental Council (PM&DC). The Service Provider shall verify registration before a practitioner is activated on the platform, shall re-verify at intervals of not more than six (6) months, and shall immediately deactivate any practitioner whose registration lapses, is suspended or is cancelled.

16.2 Policy compliance. The Service Provider shall comply with all policies, guidelines, standards, instructions and directions issued by the Ministry of National Health Services, Regulations & Coordination and by any body established under its administrative control, as applicable to telemedicine practice, digital health, health data and the delivery of health services, as in force from time to time and as notified during the contract term. Where any such policy, guideline or licensing requirement is introduced, revised or notified during the contract term, the Service Provider shall achieve compliance within the period specified in the instrument or, where none is specified, within ninety (90) days, at no additional cost.

16.3 Pharmacy and warehousing. Every pharmacy location and every warehouse operated under this Contract shall be registered and licensed with the relevant regulatory authorities in accordance with clause 10.2.

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16.4 Other registrations. The Service Provider shall obtain and maintain all other registrations, licences, permissions and no-objection certificates required under the law of Pakistan for the lawful performance of this Contract in each jurisdiction of operation, and shall provide copies to the Procuring Agency on request.

16.5 Medical devices and diagnostics. Every medical device, diagnostic device and rapid test kit supplied under this Contract shall be registered with DRAP where registration is required.

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17. SERVICE LEVELS — MEASUREMENT AND REPORTING

17.1 **Governing instrument.** Service levels, service credits, deductions and penalties applicable to this Contract are set out in the Service Level Agreement forming part of the Bidding Documents. This Section does not create, vary or supplement any service credit, deduction, penalty or liquidated damage. It states the technical requirements for the measurement, evidencing and reporting of the service levels, and shall be read together with the Service Level Agreement.

17.2 Measurement basis. All service level measurement shall be derived exclusively from system-generated logs, dashboards and automated audit trails. Manual, offline, unsupported, altered or retrospectively entered data shall be invalid for service level and payment purposes. All measurement data shall be tamper-evident, time-stamped and traceable through audit logs.

17.3 Measurement period. Unless the Service Level Agreement provides otherwise, every service level shall be measured over a calendar month.

17.4 Real-time visibility. The Procuring Agency shall have real-time visibility of every service level parameter through the administration dashboard, and shall be able to export the underlying measurement data at any time.

17.5 The Service Provider shall implement the measurement methods set out below for the parameters listed. Where the Service Level Agreement states a threshold, that threshold governs.

Parameter	Definition and measurement period	Measurement method
Platform availability	Percentage of scheduled minutes in the calendar month during which the platform is available for its intended use, excluding maintenance windows notified to and accepted by the Procuring Agency not less than seven (7) days in advance	Independent external synthetic monitoring at intervals of not more than one (1) minute, plus internal application monitoring; both data sets reported
Kiosk availability	Measured per kiosk over the calendar month, as a percentage of that kiosk's scheduled operating hours during which the kiosk is staffed, powered, connected and able to deliver a consultation	Automated heartbeat from the kiosk workstation at intervals of not more than five (5) minutes, correlated with the staffing roster and the power continuity log
Doctor connection time	Elapsed time from the patient joining the consultation queue to the practitioner joining the session, reported as the percentage of consultations connected within five (5) minutes	Platform session logs; reported as a distribution with median, 90th percentile and maximum
Call answer time	Elapsed time from the call entering the queue to the call being answered by an agent, reported as the percentage of calls answered within the threshold in the Service Level Agreement	Automatic Call Distributor logs; reported with grade of service, abandonment rate and average handling time
Mobile application load time	Time from application launch to interactive home screen, measured on a 3G-equivalent connection profile	Synthetic testing on a defined reference device and network profile, executed daily and reported monthly
System transaction response time	Server-side response time for defined transactions, reported as the mean and the 95th percentile	Application performance monitoring across a defined transaction set agreed with the Procuring Agency before go-live
Consultation quality	Average system-logged doctor contact time and clinical audit findings in accordance with clause 4.4	Platform session logs and monthly clinical audit report

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Parameter	Definition and measurement period	Measurement method
Medicine delivery time	Elapsed time from e-prescription generation to recorded proof of delivery or pharmacy collection	Platform logistics logs with electronic proof of delivery, time stamp and geolocation
Complaint resolution	Elapsed time from complaint registration to recorded resolution, by escalation tier under clause 5.8	Complaint module logs; reported by tier with the number open, escalated and closed

17.6 Reporting format. The Service Provider shall submit a monthly Service Level Report within seven (7) days of the end of each calendar month, in a format approved by the Procuring Agency before go-live, stating for each parameter: the threshold; the measured value; the measurement method and data source; every exclusion claimed and its justification; every breach, with root cause and corrective action; and the trend against the preceding three months. The raw measurement data set shall accompany the report.

17.7 Verification. The Procuring Agency, its Technical Committee, its co-opted technical experts and any third-party monitoring, evaluation, validation and inspection firm appointed by it may verify any reported figure against the system records, conduct random inspection and audit, and cross-verify system data at any time. The Service Provider shall provide access, credentials and support for that purpose at no additional cost.

17.8 Where a reported figure is found on verification to be inaccurate, the verified figure shall govern for all contractual purposes.

18. IMPLEMENTATION, DELIVERABLES AND REPORTING

18.1 Implementation plan

18.1.1 The Bidder shall submit with its Stage-I Technical Proposal a complete Implementation Plan covering the three (3) month mobilisation and deployment period and the subsequent operational period, including a work breakdown structure, a dated milestone schedule, resource loading, dependencies, risks and mitigation.

18.1.2 The Implementation Plan shall separately address: platform development and configuration; hosting establishment at IHITC and the secondary installation at IDSRS (NHDC); connectivity; call centre establishment; practitioner network onboarding; kiosk fabrication, site approval, installation and commissioning; Telemedicine Health Workforce recruitment, training and deployment; pharmacy, warehousing and logistics establishment; media and awareness campaign; training; and User Acceptance Testing.

18.2 Deliverables

Ref	Deliverable	Timing
D-1	Inception Report, confirmed Implementation Plan and detailed project schedule	Within 15 days of contract signature
D-2	System architecture (logical and physical), data flow and hosting design; cybersecurity and data protection plan; disaster recovery and business continuity plan	Within 30 days
D-3	Approved Kiosk Deployment Plan with site-by-site justification and catchment analysis (clause 8.1.2)	Within 45 days
D-4	Clinical protocols, triage protocol, referral pathway, specialty mix and escalation matrix, approved by the Procuring Agency	Within 45 days

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Ref	Deliverable	Timing
D-5	Consent text approved by MoNHSR&C, in Urdu and English (clause 5.3)	Within 45 days
D-6	Hosting installation at IHITC and secondary installation at IDSRS (NHDC) commissioned; 150 Mbps CIR link live; next-generation firewall commissioned	Within 60 days
D-6a	IDSRS notifiable disease and public health surveillance module delivered to the practitioner network; training register complete; system-level activation block configured (clause 18.3)	Before go-live, and continuously thereafter for new practitioners
D-7	Penetration test and vulnerability assessment report with remediation evidence	Before go-live
D-8	User Acceptance Testing completed, including witnessed load test evidencing the Architectural Design Capacity (clause 4.3.2)	Before go-live
D-9	Go-live of platform, call centre, first tranche of kiosks and Telemedicine Health Workforce	Within 90 days
D-10	All thirty (30) kiosks installed, commissioned and operational	Within 120 days
D-10a	National Telemedicine Data Hub live and receiving from every channel; IDSRS Telemedicine Command Centre deployed with all nine modules populated; surveillance functions under clause 19.4 operational and configured with IDSRS case definitions and thresholds	Before go-live
D-11	Data dictionary mapping every stored element to HL7 FHIR R4 (clause 5.6.2)	Within 90 days of go-live
D-12	Source code and schema lodged in escrow (clause 15.2.5)	Within 90 days of go-live
D-13	Monthly Service Level Reports and monthly clinical audit reports	Monthly
D-14	Quarterly bulk data export to IDSRS (NHDC) (clause 15.2.3)	Quarterly
D-15	Annual disaster recovery drill report; annual penetration test report	Annually
D-16	Handover of all data, assets, documentation and credentials; transition assistance	On expiry or termination

18.3 Training

18.3.1 The Service Provider shall train all practitioners, call centre agents, kiosk staff and Telemedicine Health Workforce members before deployment, and shall maintain a refresher programme throughout the contract term.

18.3.2 Training shall cover, as applicable to the role: the clinical and triage protocols; the referral pathway; use of the platform and the Electronic Medical Record; patient consent and confidentiality; CNIC and OTP verification; rapid diagnostic testing and quality control; specimen collection, labelling and transport; infection prevention and control; biomedical waste handling and the needlestick protocol; the complaint escalation ladder; and information security.

Notifiable disease and public health surveillance module — delivered by IDSRS

18.3.3 The induction training of every medical practitioner shall include a module on notifiable diseases and public health surveillance which shall be **delivered by IDSRS**. The content, the case definitions, the notification criteria, the reporting timelines and the assessment for that module shall be owned,

prepared and certified by IDSRS, and shall not be substituted, abridged or amended by the Service Provider.

18.3.4 The module shall cover, at a minimum: the national list of notifiable conditions; the surveillance case definitions applied by IDSRS; the clinical recognition of priority conditions under surveillance, including but not limited to dengue, malaria, viral hepatitis, measles, acute flaccid paralysis, typhoid and cholera; the criteria and timelines for notification; the use of the notification function in the platform under clause 4.6.3; specimen requirements for confirmatory testing; the referral pathway for a suspected case; and the practitioner's obligations in an outbreak.

18.3.5 Delivery mechanism. IDSRS shall provide the content and the master trainers. Having regard to the size of the practitioner network under clause 5.4.1, the module shall be delivered at scale through the Service Provider's training platform, and the Service Provider shall additionally make available a train-the-trainer programme for its own clinical trainers, conducted by IDSRS. The Service Provider shall provide the venue, the learning management platform, the scheduling, the administration, the attendance recording and the assessment delivery, and shall bear the cost of practitioner time and attendance. IDSRS shall provide the content and the trainers at no cost to the Service Provider.

18.3.6 Condition of activation. No medical practitioner shall be activated on the platform, and no practitioner shall deliver a consultation under this Contract, until that practitioner has completed the IDSRS module and passed its assessment. The platform shall enforce this at system level by blocking activation until completion is recorded against the practitioner profile.

18.3.7 Records. The Service Provider shall maintain a training register recording, for every practitioner, the date of completion, the version of the module completed and the assessment result, and shall make the register available to IDSRS in real time through the administration portal and in the monthly report.

18.3.8 Refresher and updates. Where IDSRS revises the notifiable condition list, a case definition, a notification timeline or the module content, the Service Provider shall deliver the revised module to every active practitioner within thirty (30) days of notification, at no additional cost, and shall re-record completion. IDSRS may require an additional briefing at any time in response to an outbreak or a public health emergency, and the Service Provider shall deliver it to the practitioner network within the period IDSRS specifies.

18.3.9 The same module, adapted by IDSRS to the role, shall be delivered to call centre agents, kiosk staff and Telemedicine Health Workforce members, so far as it concerns recognition, escalation and referral of a suspected notifiable condition.

Other training

18.3.10 The Service Provider shall additionally train nominated officers of the Procuring Agency in the administration portal, the dashboards, the reporting functions and the read API, and shall provide complete user and administrator documentation.

18.4 Reporting

18.4.1 The Service Provider shall submit monthly operational reports covering consultation volumes by channel and scenario, kiosk-level and field-level activity, practitioner activity, prescription and dispensing volumes, diagnostic volumes, referrals, notifiable condition notifications, complaints by tier, campaign performance, incidents, and service levels.

18.4.2 All reports shall be generated from the platform and shall be reconcilable to the underlying system records. The Procuring Agency shall have direct access to the reporting function and shall not be dependent on the Service Provider to produce any report.

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19. NATIONAL TELEMEDICINE DATA HUB, IDSRS TELEMEDICINE COMMAND CENTRE AND PUBLIC HEALTH SURVEILLANCE INTEGRATION

19.1 The telemedicine service established under this Contract is a component of the Integrated Disease Surveillance and Response System and shall function as an instrument of public health surveillance as well as of clinical service delivery. This Section states the requirements by which that function is delivered.

19.2 National Telemedicine Data Hub

19.2.1 The Service Provider shall establish and operate a single National Telemedicine Data Hub into which every transaction generated by every channel of the service shall flow. The channels are: the call centre; the practitioner network; the telemedicine kiosks; Basic Health Units and other public health facilities where and when notified under clause 19.5; the Telemedicine Health Workforce; and the pharmacy and dispensing network.

19.2.2 The Data Hub shall be the single canonical store of programme data. No channel, application, sub-contractor or consortium member shall maintain a separate authoritative record, and no transaction shall exist in any system that is not reflected in the Data Hub.

19.2.3 The Data Hub shall be located at the primary installation at IHITC, Islamabad, and replicated to the secondary installation at IDSRS (NHDC), in accordance with Section 13. Clause 13.1.4 applies to the Data Hub without exception.

19.2.4 Transactions shall be written to the Data Hub in near real time, and in no case later than five (5) minutes from the completion of the transaction at the originating channel. Where a channel is offline, transactions shall be queued locally and synchronised on restoration, with no loss of data and with the original transaction time preserved.

19.2.5 The Data Hub shall hold, at a minimum: patient records; consultation records; prescription and dispensing records; diagnostic orders and results including point-of-care test results; kiosk activity; field activity with geolocation; call centre activity; referral records; complaint records; and the full audit trail of each.

19.2.6 All data in the Data Hub shall be held in HL7 FHIR Release 4 canonical format in accordance with clause 5.6.2, and shall be accessible to the Procuring Agency through the read API at clause 15.2.2 and the quarterly bulk export at clause 15.2.3.

19.3 IDSRS Telemedicine Command Centre

19.3.1 The Service Provider shall design, build, deploy, populate and maintain an IDSRS Telemedicine Command Centre for the monitoring, analytics and governance of the programme, comprising the software modules at clause 19.3.3 together with the display, workstation and network infrastructure required to operate them at premises nominated by the Procuring Agency.

19.3.2 The Command Centre shall draw exclusively from the National Telemedicine Data Hub, shall present live data, and shall permit drill-down from any aggregate figure to the underlying transaction record. Every view shall be exportable in an open, machine-readable format.

19.3.3 The Command Centre shall provide, at a minimum, the following nine (9) modules:

Module	Minimum content
Real-Time Service Monitoring	Live status of the platform, the call centre, every kiosk, the field workforce and the pharmacy network; consultations in progress; queue depth and waiting times; channel availability; connectivity and power status per kiosk
Consultation Analytics	Consultation volume and completion by channel, scenario, specialty, practitioner, geography, time of day, age and sex; doctor contact duration distribution; referral rate; clinical quality audit results under clause 4.4

Module	Minimum content
Kiosk and BHU Monitoring	Per-site activity, uptime against clause 17.5, staffing compliance against the approved roster, consumable and test-kit stock position, equipment fault status, power and connectivity events, and catchment utilisation against the Kiosk Deployment Plan
Telemedicine Health Workforce Monitoring	Live count of active workers against the ninety (90) required by clause 9.2; deployment map; visits completed, in progress and pending; geolocation-verified service delivery; response times; roster compliance
Pharmacy Monitoring	Prescriptions generated, verified, dispensed and delivered; delivery times against the Service Level Agreement; formulary compliance and rejected out-of-formulary attempts; stock position by item and location; cold-chain temperature excursions; expiry and wastage
Patient Utilisation Analytics	Unique patients, new and repeat; utilisation by geography, age, sex and channel; access equity analysis; repeat-consultation and re-presentation patterns; unmet demand and abandonment
Performance KPIs	Every service level parameter at clause 17.5 against its threshold, with trend, breach history and root cause; progress against the ramp schedule at clause 4.2; cumulative consultations against the contracted 3,600,000
Alerts and Incident Management	Configurable threshold alerts; critical incident register with status and resolution; complaint register and escalation status under clause 5.8; security and data incidents under clause 13.3.4; clinical incidents; automatic notification to nominated officers
Decision Support Reports	Scheduled and ad hoc reporting for programme management and for MoNHSR&C, including a report builder permitting officers of the Procuring Agency to construct and save their own queries without recourse to the Service Provider

19.3.4 Access shall be role-based and shall be granted to such officers of IDSRS, the Procuring Agency and MoNHSR&C as the Procuring Agency nominates. The Service Provider shall provision, vary and revoke access on written instruction within two (2) working days. No charge shall be made for any user account at any time.

19.3.5 The Command Centre shall be available twenty-four (24) hours a day, seven (7) days a week, subject to the maintenance windows notified under clause 17.5.

19.3.6 The Service Provider shall train nominated officers in the operation of every module under clause 18.3.10 and shall provide complete administrator documentation.

19.4 Integration with IDSRS disease surveillance and response

19.4.1 The platform shall support the surveillance functions of IDSRS as set out below. All surveillance outputs shall be generated automatically from the Data Hub and transmitted to IDSRS (NHDC) in the format and at the frequency IDSRS notifies.

Surveillance function	Requirement
Indicator-Based Surveillance	Automated extraction of case counts against the surveillance case definitions notified by IDSRS, disaggregated by condition, geography, facility or channel, date, age and sex, and transmitted on the reporting schedule notified by IDSRS. The condition list and case definitions shall be configurable by IDSRS without recourse to the Service Provider and without charge.
Event-Based Surveillance	Detection of signals from structured and free-text consultation data — including unusual symptom clusters, unexpected presentations, and clusters by locality or time — and referral of those signals to IDSRS for verification. The Service Provider shall state the detection method in its Technical Proposal.
Early Warning Alerts	Configurable threshold and rate-of-change alerting on any monitored condition or syndrome, generating an automatic alert to nominated IDSRS officers within fifteen

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Surveillance function	Requirement
	(15) minutes of the threshold being crossed. Thresholds shall be set and varied by IDSRS.
Disease Trend Monitoring	Syndromic and condition-specific time series with geographic and demographic disaggregation, baseline comparison, and seasonality adjustment, available in the Command Centre and by API.
Outbreak Detection	Statistical aberration detection applied to the consultation and diagnostic data streams, with the algorithm, parameters and sensitivity agreed with IDSRS before go-live and adjustable by IDSRS thereafter. Every signal raised shall be logged with its basis and its disposition.
Response Monitoring	Recording and tracking of the actions taken in response to a signal, alert or confirmed outbreak, including case follow-up, referral outcome, testing undertaken and the status of each action, reportable to IDSRS.

19.4.2 Notifiable condition reporting under clause 4.6.3 and reactive point-of-care results under clause 8.5.3 shall feed these functions automatically.

19.5 Reverse flow — IDSRS to the platform

19.5.1 The platform shall provide a secure, authenticated channel by which IDSRS may transmit instructions and content into the service. IDSRS shall be able to:

- add, amend or withdraw a notifiable condition or a surveillance case definition, taking effect across the platform within twenty-four (24) hours;
- publish a clinical advisory, outbreak alert or screening prompt to the practitioner network, the call centre, kiosk staff and the Telemedicine Health Workforce, with acknowledgement recorded against each recipient;
- activate a screening question set or triage pathway to be presented in every consultation, or in consultations meeting defined criteria, for a defined period;
- vary the alert thresholds and detection parameters at clause 19.4.1; and
- require an additional practitioner briefing under clause 18.3.8.

19.5.2 Outbreak mode. On written notice from the Procuring Agency, the Service Provider shall within twenty-four (24) hours activate an outbreak configuration comprising the screening pathway, the case definition, the reporting frequency and the priority routing that IDSRS specifies, and shall maintain it until stood down. No charge shall be made for activation, operation or stand-down of outbreak mode.

19.5.3 Basic Health Units and other public health facilities. The platform shall be built so that Basic Health Units and other public health facilities can be onboarded as service and reporting channels without redesign. Where and when the Procuring Agency notifies such facilities for inclusion, the Service Provider shall onboard them, provision access, and include their activity in the Data Hub, the Command Centre and the surveillance functions. Any equipment, connectivity or staffing required at such facilities shall be the subject of a separate written agreement between the parties and does not form part of the quoted price under this Contract.

19.6 Integration with the National Health Data Repository

19.6.1 The Service Provider shall deliver a continuous feed from the Data Hub to IDSRS (NHDC) as the National Health Data Repository, comprising patient records, consultation data, prescription data and the derived analytics required to support public health analytics, national health intelligence, and policy and decision support.

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19.6.2 The feed shall be delivered through the read API at clause 15.2.2 and the scheduled bulk export at clause 15.2.3, in HL7 FHIR Release 4 format, with the data dictionary maintained current under clause 5.6.2.

19.6.3 The Service Provider shall not aggregate, derive, model, publish or exploit any analytic product from programme data for any purpose other than the delivery of this Contract and the supply of that product to the Procuring Agency.

19.7 Cross-cutting principles

19.7.1 The Data Hub, the Command Centre and every integration under this Section shall be secure (Section 13), private (Section 15), interoperable (clause 5.6), scalable (clause 4.3) and available twenty-four (24) hours a day, seven (7) days a week.

19.7.2 **Government ownership of data, systems and source code.** All programme data, the National Telemedicine Data Hub, the Command Centre, the surveillance modules, all custom software developed for this programme, the database schema, the configurations, the integration code and all associated documentation shall be the exclusive property of the Government of Pakistan. The Service Provider shall deliver the source code of all such custom development to the Procuring Agency on completion of each major release, and shall in addition maintain it in escrow under clause 15.2.5. Any pre-existing proprietary software, framework or intellectual property of the Service Provider shall remain its property, but the Service Provider shall grant the Procuring Agency a perpetual, irrevocable, royalty-free licence to use, operate, modify and maintain it for the purposes of the programme, and shall identify every such component in its Technical Proposal.

20. BILLS OF QUANTITIES

20.1 Preamble

20.1.1 The Bills of Quantities in this Section identify the items required for the delivery of the service. They shall be read together with this Annexure, the Price Schedule and the Conditions of Contract.

20.1.2 All capital items are quoted on a lump-sum basis in accordance with the Price Schedule and are not subject to re-measurement. The quantities stated are the minimum required; the Bidder shall satisfy itself as to the quantities necessary to deliver the service and shall include everything necessary within its lump-sum price.

20.1.3 Where a manufacturer name, model number or catalogue reference appears in any Bill of Quantities it is stated solely to convey the required standard of quality and performance, is in every case to be read as followed by the words "or equivalent", and any product meeting or exceeding the stated specification shall be acceptable.

20.1.4 All items shall carry National Telemedicine Programme branding as approved by MoNHSR&C where branding is applicable. No third-party or vendor branding shall appear on any item.

20.2 Bill of Quantities — Telemedicine Kiosks (30 kiosks)

#	Item description	Category	Qty	Unit
1	Prefabricated kiosk cabin, 8 ft × 8 ft × 8 ft internal clear, weatherproof, lockable, insulated, acoustically treated, with door and window as specified	Structure	**30**	Unit
2	Wheelchair-accessible ramp with handrail, maximum gradient 1:12	Structure	**30**	Unit
3	Air conditioning unit sized to internal load, with mechanical ventilation	Structure	**30**	Unit
4	Internal and external LED lighting	Structure	**30**	Set
5	Distribution board, earthing, residual current protection and socket outlets	Electrical	**30**	Set
6	Inverter / UPS, minimum 1500 VA / 900 W, with battery bank sized for ≥ 2 hours at measured kiosk load (indicatively 250–300 W)	Electrical	**30**	Unit
7	Smart television, 32 inch, wall-mounted, with network connectivity	IT & AV	**30**	Unit
8	Laptop / workstation, Intel Core i5 12th generation or equivalent, 8 GB RAM, 256 GB SSD, licensed OS and office suite	IT & AV	**30**	Unit
9	High-definition webcam, 1080p, with noise-cancelling microphone	IT & AV	**30**	Unit
10	Noise-cancelling headset	IT & AV	**60**	Unit
11	Prescription printer, monochrome laser or equivalent	IT & AV	**30**	Unit
12	Document scanner	IT & AV	**30**	Unit
13	Router / firewall appliance for kiosk connectivity	IT & AV	**30**	Unit

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#	Item description	Category	Qty	Unit
14	Dedicated fixed broadband, 20 Mbps, with automatic 4G/LTE failover on a separate carrier — for the contract term	Connectivity	**30**	Connection
15	CCTV camera — internal	Security	**30**	Unit
16	CCTV camera — external, weatherproof	Security	**30**	Unit
17	Network video recorder with 90-day retention	Security	**30**	Unit
18	Biometric attendance terminal (staff attendance only)	Security	**30**	Unit
19	Digital blood pressure monitor with adult and large adult cuffs	Medical	**30**	Unit
20	Glucometer with test strips	Medical	**30**	Unit
21	Pulse oximeter	Medical	**30**	Unit
22	Digital thermometer	Medical	**30**	Unit
23	Weighing scale	Medical	**30**	Unit
24	Stadiometer / height measure	Medical	**30**	Unit
25	Stethoscope, dual-head	Medical	**30**	Unit
26	Rapid diagnostic test kits — complete panel per clause 8.5.2 (Dengue NS-1; Dengue IgG/IgM; Dengue Duo; Malaria; anti-HCV; HBsAg; Blood group and Rh; Pregnancy; glucose strips), DRAP-registered, starter stock with monthly reorder	Medical	**30**	Panel set
27	Phlebotomy consumables — needles, holders, vacutainers, tourniquets, alcohol swabs, gauze, gloves	Medical	**30**	Set
28	Patient and attendant seating	Furniture	**90**	Unit
29	Consultation / examination surface and workstation desk	Furniture	**30**	Set
30	Lockable storage cabinet for consumables and records	Furniture	**30**	Unit
31	Puncture-proof sharps container	Waste	**30**	Unit
32	Colour-coded biohazard waste receptacles	Waste	**30**	Set
33	First aid kit, stocked and in date	Safety	**30**	Unit
34	Fire extinguisher suitable for electrical risk, with smoke detector	Safety	**30**	Set
35	External signage and fascia — National Telemedicine Programme branding as approved by MoNHSR&C, in English and Urdu	Branding	**30**	Set
36	Internal branding panels — National Telemedicine Programme branding as approved by MoNHSR&C	Branding	**30**	Set
37	Staff uniform and identification — National Telemedicine Programme branding as approved by MoNHSR&C, 2 sets per staff member	Staffing	**—**	Per roster

#	Item description	Category	Qty	Unit
38	Lab coat — National Telemedicine Programme branding as approved by MoNHSR&C	Staffing	—	Per roster
39	Sanitisation and personal protective equipment consumables	Consumables	**30**	Monthly set
40	Installation, commissioning, testing and site restoration	Services	**30**	Site

20.3 Bill of Quantities — Telemedicine Health Workforce field kit

#	Item description	Qty	Basis
1	Tablet or smartphone with platform application, protective case and mobile data for the contract term	—	Per deployed worker
2	Digital blood pressure monitor with adult and large adult cuffs	—	Per deployed worker
3	Glucometer with test strips	—	Per deployed worker
4	Pulse oximeter	—	Per deployed worker
5	Digital thermometer	—	Per deployed worker
6	Portable weighing scale	—	Per deployed worker
7	Rapid diagnostic test kits — complete panel per clause 8.5.2, DRAP-registered	—	Per deployed worker
8	Phlebotomy consumables and specimen transport containers	—	Per deployed worker
9	Cold-chain carrier with temperature indicator, where cold chain is required	—	Per deployed worker
10	Puncture-proof sharps container	—	Per deployed worker
11	Personal protective equipment and hand hygiene consumables	—	Per deployed worker
12	First aid kit, stocked and in date	—	Per deployed worker
13	Motorcycle — petrol or electric at the Bidder’s option, justified under clause 9.7, registered, insured and maintained, with National Telemedicine Programme livery	—	Per deployed worker
14	Helmet and high-visibility jacket — National Telemedicine Programme branding as approved by MoNHSR&C	—	Per deployed worker
15	Uniform and photographic identification — National Telemedicine Programme branding as approved by MoNHSR&C, 2 sets per worker	—	Per deployed worker
16	Charging infrastructure at each operating hub, where an electric motorcycle is proposed (clause 9.7.4)	—	Per hub

Note: quantities under this Bill are determined by the total headcount required to sustain ninety (90) active Telemedicine Health Workforce members at all times under clause 9.3. The Bidder shall state that headcount and shall price this Bill accordingly.

20.4 Bill of Quantities — Telemedicine Centres and central infrastructure

20.4.1 Quantities for the Telemedicine Centres at IHITC, Islamabad and NIRMF, Karachi shall be determined by the Bidder from its site assessment under Section 7 and shall be submitted as the indicative Bill of Quantities forming part of the Site Assessment & Operational Readiness Plan.

20.4.2 The following central items shall in every case be included and priced:

#	Item description	Basis
1	Application, database and storage servers for the primary installation at IHITC, Islamabad	Lump sum
2	Servers and storage for the secondary backup installation at IDSRS (NHDC)	Lump sum
3	Next-generation firewall with advanced threat protection and zero-day mitigation, with 3-year licence and subscription	Lump sum
4	Network switching, routing, racks, structured cabling and power distribution at both installations	Lump sum
5	Dedicated data link to IDSRS (NHDC), 150 Mbps CIR, from a licensed and reputable ISP, for the contract term	Lump sum
6	Diverse backup path for the IDSRS (NHDC) link	Lump sum
7	Call centre telephony platform, ACD, IVR, CTI, recording and quality monitoring, dimensioned to ≥ 1,800 simultaneous sessions	Lump sum
8	Call centre agent workstations, headsets and furniture for not fewer than 200 active agents	Lump sum
9	Telemedicine platform development, customisation, licensing and deployment	Lump sum
9a	National Telemedicine Data Hub — infrastructure, storage, ingestion and replication (clause 19.2)	Lump sum
9b	IDSRS Telemedicine Command Centre — all nine modules, together with display, workstation and network infrastructure at the nominated premises (clause 19.3)	Lump sum
9c	Public health surveillance modules — IBS, EBS, early warning, trend monitoring, outbreak detection and response monitoring (clause 19.4), and the reverse-flow channel (clause 19.5)	Lump sum
10	System integration and interoperability, including HL7 FHIR R4 conformance and API publication	Lump sum
11	Integration with a future IDSRS component or national health record system — FIXED LUMP SUM, quoted as a separate line in the Financial Proposal (clause 5.6.5)	Lump sum
12	Backup, replication and disaster recovery infrastructure	Lump sum
13	Training and capacity building	Lump sum

— End of Annexure–I —

Past Experience / Contracts

Contracts over *[insert amount]* during the last three years:				
Procuring Agency	Value	Year	Goods/Services Supplied	Country of Destination

Historical Contract Non-Performance, and Pending Litigation and Litigation History

[The following table shall be filled in for the Applicant and for each member of a Joint Venture]

Applicant's Name: *[insert full name]*
Date: *[insert day, month, year]*
Joint Venture Member Name: *[insert full name]*
IFP No. and title: *[insert IFP number and title]*
Page *[insert page number]* of *[insert total number]* pages

☐ Not debarred due to deviation from commitment of Bid Securing Declaration-☐ Not debarred due to non-performance			
Year	**Non-performed portion of contract**	**Contract Identification**	**Total Contract Amount (current value, currency, exchange rate and PKR equivalent)**
[insert year]	*[insert amount and percentage]*	Contract Identification: *[indicate complete contract name/ number, and any other identification]* Name of Procuring Agency: *[insert full name]* Address of Procuring Agency: *[insert street/city/country]* Reason(s) for nonperformance: *[indicate main reason(s)]*	*[insert amount]*
Pending Litigation, in accordance with Section III, Qualification Criteria and Requirements			
☐ Pending litigation in accordance with Section III, Qualification Criteria and Requirements, Sub-Factor 2.3 as indicated below.			

Year of dispute	**Amount in dispute (currency)**	**Contract Identification**	**Total Contract Amount (currency), ~~US$~~ PKR Equivalent (exchange rate)**

[insert year]	*[insert amount]*	Contract Identification: [indicate complete contract name, number, and any other identification] Name of Procuring Agency: *[insert full name]* Address of Procuring Agency: *[insert street/city/country]* Matter in dispute: *[indicate main issues in dispute]* Party who initiated the dispute: *[indicate "Procuring Agency" or "Supplier"]* Status of dispute: *[Indicate if it is being treated by the Adjudicator, under Arbitration or being dealt with by the Judiciary]*	*[insert amount]*

☐ No consistent history of court/arbitral award decisions in accordance with Section III, Qualification Criteria and Requirements, Sub-Factor 2.4.

☐ Consistent history of court/arbitral award decisions in accordance with Section III, Qualification Criteria and Requirements, Sub-Factor 2.4 as indicated below.

Year of award	**Outcome as percentage of Net Worth**	**Contract Identification**	**Total Contract Amount (currency), PKR Equivalent (exchange rate)**
[insert year]	*[insert percentage]*	Contract Identification: [indicate complete contract name, number, and any other identification] Name of Procuring Agency: *[insert full name]* Address of Procuring Agency: *[insert street/city/country]* Matter in dispute: *[indicate main issues in dispute]* Party who initiated the dispute: *[indicate "Procuring Agency" or "Supplier"]* Court/ arbitral award decision: *[Indicate if the award decision was against the Applicant or any member of a joint venture.]y]*	*[insert amount]*

Current Contract Commitments / Works in Progress

Bidders and each member to a JV should provide information on their current commitments on all contracts that have been awarded, or for which a letter of intent or acceptance has been received, or for contracts approaching completion, but for which an unqualified, full completion certificate has yet to be issued.

Current Contract Commitments					
No.	Name of Contract	**Employer's Contact Address, Tel, Fax**	**Value of Outstanding Work [Current Eq. PKR]**	**Estimated Completion Date**	**Average Monthly Invoicing Over Last Six Months [Eq. PKR/month)]**
1					
2					
3					
4					
5					

Average Annual Turnover (Annual Sales Value)

[The following table shall be filled in for the Applicant and for each member of a Joint Venture]

Applicant's Name: *[insert full name]*
Date: *[insert day, month, year]*
Joint Venture Member Name: *[insert full name]*
IFP No. and title: *[insert IFP number and title]*
Page *[insert page number]* of *[insert total number]* pages

Annual Turnover Data			
Year	**Amount** **Currency**	**Exchange rate*** **(If applicable)**	**PKR equivalent**
[indicate calendar year]	*[insert amount and indicate currency]*		
		Average Annual Turnover **	

* Refer ITA for date and source of exchange rate.

** Total PKR equivalent for all years divided by the total number of years. See Section III, Qualification Criteria and Requirements, ITA.