

TERMS OF REFERENCE FOR SUPPLY OF MEDICAL EQUIPMENT AND PROTECTIVE GEARS FOR COVID RESPONSE SUPPORT

1. General Background

Good Neighbors International (GNI) Nepal has been working in Nepal since 2002 with the objective of improving lives of the poor people especially children through education, child protection, and income generating activities, health, WASH, and disaster risk reduction. GNI Nepal has been operating its activities in 19 districts.

2. Activity Description and Rationale

This TOR has been designed in order:

- A. To select appropriate suppliers for supply of Medical Equipment and Protective Gears for COVID response support.
- B. To maintain the quality and timeline of procurement the required materials.

a) Number of supply items: The required Medical Equipment and Protective Gears with specification is given in **Annex I**.

3. Expected Deliverables

Followings deliverables are the expected from the suppliers;

- Supply of Medical Equipment and Protective Gears for COVID response support
- Conduct quality check and physical verification of equipment with a GNI Nepal personnel before dispatching.
- Transportation and delivery of Equipment in excellent condition.
- Provide a brief user manual or oral instructions on using the commodities (if needed) to GNI Nepal head Office.
- Replace the items in case of found any damage (during transportation, handling or delivery, and malfunctioning within one month of delivery date).

4. Duration

- After the signing of the agreement, delivery of the items to targeted area should be completed within maximum 20 days from receiving the official purchase order.
- Delivery of commodities to targeted area should be completed within the agreed time.
- Quantity details will be issued along with purchase order.

5. Budget and Payment procedure

The budget and payment procedure will be as follows:

- The supplier/firm should submit a complete budget with detailed breakdown including applicable taxes at the time of submission sealed Bid. No extra cost is entertained beyond quoted unit price.
- The supplier/firm shall bear all the tariffs, duties and applicable taxes or charges levied at any stage during the execution of the work. Any loss and/or damage of supplied commodity during packaging, transportation, and installation will be the responsibility of supplier/firm, no compensation will be provided by GNI Nepal regarding this loss/damage.

6. Acceptance of Proposal

All rights to accept or reject the proposal without giving any notice and reason shall be reserved with GNI Nepal. If deemed necessary, the supplier/firm shall be asked for modification and presentation of the proposal before approval.

7. Management of the supply

The selected supplier/firm will be responsible to supply the equipment at respective district office and be accountable for the timely delivery of the expected quality and quantity of equipment.

8. Responsibilities of the Supplier/ Firm

The supplier/firm will be responsible to accomplish the task outlined in this ToR and ensure the delivery of items stated above within the agreed budget and timeline.

9. Responsibilities of GNI Nepal

GNI Nepal guided by its policies and practices, will assist the supplier/firm to achieve the objective of this ToR.

10. Confidentiality

During the performance of the assignment or any time after expiry or termination of the agreement, the supplier/firm shall not disclose to any person or otherwise make use of any confidential information which the supplier/firm has obtained or may obtain in the course of the work relating to partner organization/GNI Nepal, the respondents or otherwise.

11. Documents to be submitted

The application shall contain following documents:

A. **Detailed financial proposal:** The proposal should include the price of equipment including tax, transportation cost and any other applicable costs at unit price or separately whichever is feasible. Prices of equipment can be quoted for different qualities/standard of the same item mentioning specifications of each quality.

A complete list of proposed equipment with their clear photographs (colored) should be included with the financial proposal. The Financial proposal can be submitted as per the table attached on **Annex II** along with specification of supply equipment.

B. **Details of the supplier/firm:** The proposal should also include the following details of the firm:

- a) Copy of company/firm registration
- b) A copy of Tax clearance certificate (2076/077)
- c) PAN/VAT registration
- d) Any other relevant documents

12. Procedures for the submission of bid:

Interested and eligible suppliers/ firms are requested to submit the bid courier/hand delivery to Good Neighbors International Nepal Office Address or email to procurement@gninepal.org clearly marking the subject with **“Bid for Supply of Medical Equipment and Protective Gears for COVID Response Support”** till **1st June 2021, 17:00 hrs** (Nepali Time).

For Electronic (email) submission, Financial proposal shall be submitted in PDF format protected with a password. The password shall be sent via email only upon request from procurement dept.

Bid received after the deadline will not be considered and only shortlisted firms/suppliers will be called for further process. Canvassing at any stage of process shall lead to automatic disqualification. The organization reserves all rights to qualify/disqualify application with or without providing any reasons whatsoever. All bids will be treated with the highest confidentiality.

Annex I
List of Items & Specifications

S.N.	Name of Item	Specification	Unit	Total Quantity
1	Ventilators	Details in Annex	Pcs	Few
2	Disinfectant	Hypoclorous Acid 0.003% Electrolyzed Oxygenated Water 99.997% 5 Liter Bottle	Liter	Few
3	Handwashing Liquid	250ml / Liquid type	Bottle	2670
4	KN95 Mask	ISO Certified	Number	500
5	Nebulization Machine	CE Certified, WHO Standard	Number	15
6	Sanitizer	500 ml, Gel Type, Above 70% alcohol disinfection	Bottle	832
7	Surgical Gloves	1 pair per packet Latex sterile surgical gloves (ISO,ISI,CE) Anatomic shape Beaded cuff Textured surface in the grip area.	Pair	18500
8	Surgical Mask	Per packet 50 pcs - 3 Ply with Melt brown Filter Paper - With High Quality nose clip Standard - CE Certified, EN Standard	Packet	832
9	Oxygen Cylinder with Oxygen Gas	WHO Standard 40/50 liter Capacity	Number	15
10	Oxygen Concentrator	Oxygen Concentrator Machine with Nuzzle Cannula and Face Mask, WHO Standard, 10 liter	Set	15

A: Technical Specifications of Ventilator (Quantity-Few)

Technical Specification of adult and pediatric ventilator				
S.N.	Hospital's Proposed Technical Specification	Bidders' Proposed Specification		
	Manufacturer:	Yes	No	Page No. of Datasheet
	Model No:			
	Country of Origin:			
	Made In:			
	Brand:			
	Type/Model			
	General			
1	Must be microprocessor/computer controlled ventilator or late technology			
2	Should be usable for Adult and Pediatric patients			
3	Should work on electrical sources: External AC and internal battery rechargeable battery backup for more than 60 minutes.			
4	The ventilator should be gas driven and capable of running on central air and O2 sources and compressor. Should be supplied with compressor which should be from the same manufacturer and should be mounted on the same cart of ventilator.			
5	Ventilator should be Cart mounted & mobile on four wheels. it should be shipped along with ventilator from same port as ventilator.			
6	Display should be of 15" inch LCD /TFT inbuilt Color touch screen, preferably, Navigate with a Swipe between Past ,Present & Future information (additional Separate / Multiple display will not be acceptable) . The color touch screen should have the facility for tilt & rotate for better viewing.			
7	Should have external interface with RS 232 serial port of VGA for Live LCD projection (shall be used for teaching purpose)			
	OXYGEN SUPPLY			
8	Must have in-built O2 blender with permanent paramagnetic sensor with display for set and delivered O2 concentration			
9	Should provide O2 enrichment @ 40 to 60 psi o2 supply source with alarms for low or high pressure supply			
	MODES OF VENTILATION			
10	Should have Assist Control and SIMV modes, in both pressure and volume modes.			
11	Should have provision of Noninvasive ventilation with leak compensation at all user set pressure values.			
12	Should have additional modes such as Pressure Regulated Volume Control (PRVC), APRV, Volume Support, Bilevel ,Bilevel VG, VS with PS & spontaneous Breathing Trial and any other advance modes specific to manufacturer.			
13	Must have built-in provision for Auxiliary pressure monitoring.			
14	Must have provision for all the following:			

	a. Automatic Tube Compensation for ET tube.			
	b. CPAP (0-40 cm H2O)			
	c. Adjustable Back-up Apnea ventilation			
	d. 100% oxygen for a period of two minutes before disconnection for suctioning or other procedures.			
	SETTING OF VENTILATOR:			
15	Should have the at-least the following range of settings			
	a. Should be able to be programmable for Adult & Pediatric separately on switching on the equipment			
	b. Setting of modes should be user friendly and have volume based and pressure based modes separately, along with provision for noninvasive ventilation			
	c. Settings should be user friendly-com wheel or touch screen based			
	d. Tidal volume from 20 – 2000 ml (in volume Control Mode) Should be upgradable to neonatal with min 2 ml tidal volume.			
	e. Respiratory rate- upto 120 bpm			
	f. PEEP- 0 to 50 Cm H2O			
	g. Fio2- 21 to 100%			
	h. Pressure support- 0 to 50 cmH2O			
	i. Rise time 0 – 2 secs in fraction of 0.1 sec or in %age steps which could be manufacturer specific			
	j. Inspiration time 0.1 to 5 secs			
	k. Apnea time interval setting from backup ventilation when in spontaneous mode			
	l. Flow 0 to 180 L/min or more			
	m. I:E ratio- 4:1 – 1:9.			
	n. Trigger flow and pressure with sensing from 0.5 -8 L/min and - 0.5 to -10 cmH2O as selected by the user			
	DISPLAY			
	Must monitor/display the following set and delivered parameters of ventilator settings:			
	i. Tidal volume- Inspiratory and expiratory			
	ii. Minute volume- Inspiratory and expiratory			
	iii. Peak, mean and plateau pressure			
	iv. PEEP			
16 – A	v. I:E ratio			
	vi. Inspiratory time			
	vii. Rate- total and spontaneous			
	viii. Compliance- static & dynamic			
	ix. Resistance			
	x. Fio2- set and delivered			
	xi. Paux (Auxiliary Pressure)			
B	Must display electrical power source (internal/external) and battery level			

C	At least- 4 user selected scalar graphic (flow, pressure and volume over time) should be displayed simultaneously on the screen with set and delivered parameter mentioned above. Should at least display 2 loops (user selectable pressure volume, flow volume, pressure flow) and facility of superimposing and saving of more than 4 reference loop available. Should display all waveforms and loops simultaneously.			
D	Must have features of adjustable expiratory and Inspiratory hold, occlusion pressure, NIF & Vital capacity Measurement.			
E	Should be able to measure and display PEEPi and trapped volume			
F	Should have facility to take the snapshot of the waveforms and should have provision to analyze the snapshot waveform with the setting and patient parameters during the snapshot.			
17	Must provide at least 72 hours trending and browsing of monitored parameters.			
	ALARMS			
18	Must provide for user adjustable alarms and volume for the following with built in default setting			
	a. Respiratory (high and low)			
	b. Minute volume (high and low)			
	c. Pressure (high and low)			
	d. FiO2 (high and low)			
	e. Tidal Volume (high and low)			
	f. Apnea			
	g. Gas supply failure			
	h. All Alarms must be self-guiding and be present with possible cause and remedy.			
19	Must also have warning alarms of both auditory and visual for the following			
	a. Low O2 pressure			
	b. Patient disconnect			
	c. Check sensor on malfunction for flow and O2 sensor			
	d. Low battery			
	e. AC Disconnect			
20	Should have provision for record of alarm for at least 72 hours or logbook of 1000 events			
21	Must have audible alarms of different tones graded for high priority, immediate priority and priority tones with display of the nature of warning being highlighted on the display.			
22	Alarms of importance like disconnection circuit leak or mechanical failure should be activated within 2-3 secs & should be loud and well audible.			
23	Should have facility to silence alarms for a period of 2 mins.			
	MISCELLANEOUS			
24	Should have facility of screenshot of waveforms for later analysis			
25	The ventilator should have the facility to measure UIP & LIP, inflection point maneuver shall calculate upper and lower inflection points and display on pressure/volume loop by scrolling through the loop.			

26	Should not involve frequent change of flow sensor, O2 sensor or pressure sensor. Paramagnetic O2 sensor.			
27	Details of the following weather the same would be covered under warranty clauses, should be mentioned in the technical description and reflected in the overall cost:			
	a. Flow sensor- autoclavable/ reusable			
	b. O2 sensor should be permanent and paramagnetic and should not require frequent change.			
28	c. Additional expiratory valves, 2 each and Reusable flow sensors, 2 each to be supplied should be autoclavable.			
	Should be provided with all accessories			
	a. NIV mask- 1 kit			
	b. 20 HME filters			
	c. 1 each autoclavable circuit of adults & pediatrics			
29	d. Test lung with each unit			
	e. Air and O2 high pressure hoses with supply line filters 5 meters			
30	Should be compatible with standard disposable ventilator tubing's with separate inspiratory and expiratory limbs connected with wye-connectors, with or without water traps and non-invasive ventilation masks available in market			
31	Ventilator should be able to accept and work on all commonly used brands of disposable ventilator tubing's humidifier assemble disposable or reusable parts			
32	The ventilator should be supplied with humidifier along with its accessories.			
33	Should be provided with inbuilt Electric/ Ultrasonic Nebulizer.			
34	Should conform to the international standards of BOTH European CE and USFDA for ventilator.			
	Ventilator should be upgradable to addition of modules for measuring ETCO2, FRC, Indirect Calorimetry.			
Terms And Conditions				
1	Must have valid CE and ISO 9000/9001 and US FDA Certificate			
2	The supplier must submit the original brochure or e-copy			
3	The Supplier should fill the technical tender form and clearly mention the manufacturer, model no., and country of origin/made in, else technically will be disqualified			
4	The bidder must submit a valid authorization from the manufacture			
5	Should have 1 years complete warranty from date of Installation.			
6	The principle company should be responsible of fulfilling warranty/ guarantee, in case local authorized agent is not able to achieve the same.			
7	Onsite repair & maintenance training and operational training to the Hospital's Biomedical Engineer, Biomedical technicians and Users.			
8	The machine supplied should be brand new with the date of manufacture mentioned and country of origin should be clearly mentioned.			
9	One copy of service & operating manual in English should be provided at the time of installation.			

Annex-II
Financial Proposal

S.N	Items	Unit	Quantity	Unit Rate with VAT	Total Amount in NRs.
1	Ventilators	Pcs	Few		
2	Disinfectant	Liter	Few		
3	Handwashing Liquid	Bottle	2670		
4	KN95 Mask	Number	500		
5	Nebulization Machine	Number	15		
6	Sanitizer	Bottle	832		
7	Surgical Gloves	Pair	18500		
8	Surgical Mask	Packet	832		
9	Oxygen Cylinder with Oxygen Gas	Number	15		
10	Oxygen Concentrator	Set	15		

Maximum Delivery Timeline from the date of Purchase Order:

Transportation: Should be free within Kathmandu Valley.