



कार्यालय मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी
(राष्ट्रीय स्वास्थ्य मिशन बलरामपुर)
जिला बलरामपुर-रा0गंज (छ0ग0)



cmhobalrampur@gmail.com

dpmbalrampur@gmail.com


क्रमांक/रास्वामि/2019/1328

बलरामपुर, दिनांक 04/09/2019

//सूचना//

बलरामपुर जिले में बाईक-एम्ब्यूलेंस की संचालन हेतु रूचि की अभिव्यक्ति (EOI) का प्रकाशन किया गया है। EOI प्राप्त होने की अंतिम तिथि 20/09/2019 अपराह्न 3:00 बजे तक एवं निविदा खोलने की तिथि 20/09/2019 संध्या 05:15 बजे निर्धारित की गई है। निर्धारित समय के पश्चात् EOI स्वीकार नहीं किया जावेगा। रूचि की अभिव्यक्ति की विस्तृत जानकारी बलरामपुर जिले के वेबसाईट www.balrampur.gov.in से प्राप्त किया जा सकता है।

संलग्न - प्रपत्र (EOI)



मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी
जिला बलरामपुर रा0गंज (छ0ग0)

पृ0क्र0/1329/रास्वामि/2019

बलरामपुर, दिनांक 04/09/2019

प्रतिलिपि:

01. कलेक्टर सह अध्यक्ष जिला स्वास्थ्य समिति बलरामपुर, जिला बलरामपुर रा0गंज की ओर सादर सूचनार्थ।
02. जिला जनसंपर्क अधिकारी बलरामपुर, जिला बलरामपुर रा0गंज को सादर सूचनार्थ एवं सूचना प्रकाशन हेतु प्रेषित।
03. जिला सूचना एवं विज्ञान अधिकारी, बलरामपुर जिला बलरामपुर रा0गंज को सूचनार्थ एवं जिले के वेबसाईट www.balrampur.gov.in पर अपलोड करने हेतु प्रेषित।
04. कार्यालयीन प्रति।


मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी
जिला बलरामपुर रा0गंज (छ0ग0)



कार्यालय मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी
(राष्ट्रीय स्वास्थ्य मिशन बलरामपुर)
जिला बलरामपुर-रा0गंज (छ0ग0)



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क्रमांक / रास्वामि / 2019 / 1328

बलरामपुर, दिनांक 04/09/2019

Expression of Interest for implementing Motor Bike Ambulance Project in Balrampur District

The office of the CMHO, Balrampur, Invites Expression of Interest (Eoi) from reputed organizations (NGOs / Medical Institutions / Other Agencies / etc.) for Implementing Motor Bike Ambulance Project at Balrampur.

Proposed Plan:

We are having 04 Motor bike Ambulance at Manoharpur, Sabag, Bhulsikala and Jawahranagar at PHC level. One administrative office setup at Shankargarh for regular monitoring reporting and providing on ground support to field staffs.

With the help of Motorbike Ambulances we may increase the percentage of institutional delivery and other important services like ANC & PNC. Women have EDD in coming week will brought to the PHC/SHC with the help of motorbike ambulance . In case of any complications they will be referred to CHC which had well connectivity from PHC/SHCs.

Key Activities:

The work broadly involves running and managing Motorbike Ambulance to cover hard to reach area at PHC level in Balrampur District. The services of Motorbike ambulance should be 24*7. The project shall focus and target villages where the percentage of Institutional delivery is very poor. Agency is required to provide the technical proposal with respect to the Maximum cost available.

SCOPE OF WORK (Requirement)

2.1	Motor Bike operational cost
2.2	Pilot Salary
2.3	Fuel
2.4	Maintenance (Repairing / flex/ Tyre/ Insurance etc.)
2.5	Pilot Communication Expenses
2.6	Salary Monitoring Officer
2.7	Fuel allowance monitoring officer
2.8	Salary office staff
2.9	Office stationary, Maintenance communication expenses
2.10	Computer With Printer

The NGOs/Medical institutions/Other agencies fulfilling the following criteria may apply for the project:

- The intending organizations should have adequate exposure and expertise in screening and counseling of rural / tribal pregnant women.
- The intending organizations should have prior experience in tribal Health sector.
- The intending organizations with prior experience of running motorbike ambulance in LWE districts for at least three year.
- The intending organizations with prior experience of working in rural areas of Chhattisgarh will be given Priority.
- The organization must send EOI in two different sealed envelopes, 1. Technical Bid – that will contain the Technical documents. 2. Financial Bid- which will containing project cost bid.
- First Technical bid will be opened, if qualified then only financial bid of the applied NGO/Medical institutions/ Agencies will be opened.
- The Committee will have the whole right to accept or reject the EOI on any ground and Committee's decision will be the final one which everyone will have to accept.

The Agencies should meet the following criteria:

- The NGOs/Medical institutions/ Agencies should be a registered entity (Please attach document for proof) functioning for at least 3 years.
- Service centre / regulating office should be localized in Chhattisgarh.
- The NGOs/Medical institutions/ Agencies should have minimum experience of 3 years in the field of Health sector.
- Experience of partnering with government or with reputed organizations such as UNICEF, UNDP etc.
- The intending organizations with prior experience of running motorbike ambulance in LWE districts for at least three year.
- Annual Turnover of last three years should not be less than 2 Crore.
- The agency need to provide following during the period of contract
 1. Qualified and experienced Human Resource for management of project activities
 2. Maintenance of the Motorbike ambulance.
 3. 24 * 7 functional services

The Terms of Reference for the Project will be as Follows:

1. The project will be implemented during the period next one year.
2. The bike ambulance pilot should have sound experience of driving and handling motor bike ambulance.
3. Coordinate with Chief Medical and Health Officer(CMHO) to implement project at the respective villages of Primary Health Centre(PHC).
4. All the records should be well maintained and presented to District Administration time to time for information.
5. Institutional Delivery should ensure by implementing Agency.

The NGOs/Medical institutions/ Agencies should intimate their by submitting the detailed project proposal , along with proof of past experience of organization, Details of Project Staff, detailed implementation plan etc., with respect to the maximum cost available under the project through Registered/Speed post or by Hand to reach CMHO Office, Balrampur by 3:00 PM on 20/09/2019. The Envelope should clearly mention "Project Proposal for implementing Motor Bike Ambulance at CMHO Office, Balrampur " on the Top. The project proposal will be opened on the same day at 05:15 PM Hrs. The agency will also have to appear in person or through authorized representative(s) for a detailed discussion and presentation on their proposal at 11:00 AM Hrs on 20/09/2019 at the following address.


Chief Medical & Health Officer
Balrampur, Chhattisgarh

FORM I: COVERING LETTER

(Company letterhead)

[Date]

To,

Chief Medical & Health Officer
 District Balrampur
 Main road Balrampur (C.G.) 497119

Dear Sir,

Ref: Expression of Interest Notice for implementation of Bike Ambulance for District Balrampur.

Having examined the Expression of Interest (EoI), the receipt of which is hereby duly acknowledged, we, the undersigned, intend to submit a Pre-qualification requirements proposal in response to the Expression of Interest (EoI) for Selection of Service Provider for implementation of Bike Ambulance Project.

We attach here to the response as required by the EoI, which constitutes our proposal. Primary and Secondary contacts for our company are:

	CONTACT
NAME	
TITLE	
COMPANY/NGO/INSTITUTION NAME	
ADDRESS	
MOBILE	
PHONE	
FAX	

We confirm that the information contained in this response or any part thereof, including its exhibits, and other documents and instruments delivered or to be delivered District Health Society (DHS) is true, accurate, verifiable and complete. This response includes all information necessary to ensure that the statements therein do not in whole or in part mislead the department in its short-listing process.

We fully understand and agree to comply that on verification, if any of the information provided here is found to be misleading the short listing process, we are liable to be dismissed from the selection process or termination of the contract during the project, if selected to do so, for providing Service for implementation of Bike Ambulance Project.

We agree for unconditional acceptance of all the terms and conditions set out in the EoI document.

It is hereby confirmed that I/We are entitled to act on behalf of our company/ corporation/ firm/ organization and empowered to sign this document as well as such other documents, which may be required in this connection.

Dated this Day of 2019

(Signature) (In the capacity of)

(Name)

Duly authorized to sign the Tender Response for and on behalf of:

(Name and Address of Company) Seal/Stamp of bidder

Witness Signature:

Witness Name:

Witness Address:

G. Hanjra
 CHIEF MEDICAL & HEALTH OFFICER
 DIST. BALRAMPUR R.GANJ (C.G.)