

Meeting-10th January 2022. -12PM (Minutes of Meeting)

Selection of an Agency to setup Maintenance Management System for Medical Oxygen Generation Plants, Liquid Medical Oxygen (LMO) Storage Tanks, Oxygen Cylinders (D-Type), Medical Gas Piping System (MGPS) and Oxygen Concentrators at select Public Healthcare Facilities across 18 States of India.

A Technical Discussion was conducted for above RFP on 10 January, 22. Objectives of the RFP were outlined followed by Q&A session.

Objectives:

- Troubleshooting training
- Preventive Maintenance
- Strengthen the network of maintenance across the country

Q&A Session

S.No.	Query	Answer
1	Please elaborate on the call centre support required at the hub and spoke level?	<p>A call centre should be multilingual and technical in nature to help with problems on the telephone/video call whenever required. Engineer/technicians shall be able to address the problems related to different brands and make including MGPS.</p> <p>A call centre can be at a single location or multiple locations.</p> <p>Physical intervention at the facility is required for preventive maintenance, troubleshooting if the problem is not resolved on the first call, and troubleshooting training.</p>
2	What happens if our expertise is only focussed on PSA and Oxygen piping & LMO's and not the others?	Vendors are expected to have all expertise as per RFP requirement i.e. internal or acquired.
3	Can we look at Monthly billing instead of quarterly? Cashflow gets massively affected in the latter case?	Billing could be done monthly.
4	Can duration of contract be extended?	It will be for a year as mentioned in the RFP. Future extension purely depends on donor interest.
5	Query was raised regarding the maintenance, after the warranty period	It will depend on the hospital or medical college if they want to renew or go with the third-party option.
6	Quantity of oxygen concentrators should be mentioned in each facility	Every visit would take into account 10 (suggested by the hospital administration) concentrators. In the case of a high number of concentrators at the facility, the same concentrators would

		not be repeated on the next visit and so on.
7	As skills for LMO & PSA maintenance are different. Can we know the number to hire the resources?	The PSA plant number is much higher than the LMO. A vendor can consider the ratio while planning for the resources in a stepwise manner rather than all at once. LMO maintenance is usually taken care by the LMO supplier so may not be required.
8	List of Hospitals / capacities of plant should be mentioned, which oxygen plant is installed and what is the make etc.	Assessment is partially vendor responsibility. PATH will share the details from time to time wherever needed. The vendor must provide support for all the oxygen equipment as requested by the hospital.
9	How about if hospital has CMC with the manufacturing vendors?	The hospital will make a decision on this and suggest which domains related to oxygen equipment require assistance.
10	LMO might not come into vendors maintenance as it may be maintained principal suppliers.	The call for the LMO preventive maintenance support is purely dependent on the hospital. The vendor needs to coordinate with the hospital and get an NOC before proceeding further.