

## Global Case Study of Field Hospitals for COVID-19

### Pre-Proposal queries and replies

**Reference No:** CDRI/02-04001/1/2021-DD\_HR-ADMIN  
**RFP Title:** Global Case Study of Field Hospitals for COVID-19  
**Name of the Organisation:** Coalition for Disaster Resilient Infrastructure

The following table collates the written comments/queries/requests received by CDRI by 4 pm on or before 15 July 2021 from various agencies and replies of CDRI thereon. This document is being published alongside the project RFP.

S. No.	Page No.	Clause	Comments / Query / request from Agency	CDRI Reply / clarification												
1.		<p>Section 2. Objective of the Proposed Study, page 41</p> <p>The objective of this project is to carry out a systematic, in-depth, and comprehensive case study of experiences of COVID field hospitals, including Mega Field Hospitals, in at least six countries to provide a holistic document for designing, deploying, and operating field hospitals in future disaster scenarios. The sample of case studies must be selected to cover all socio-economic typologies across the world, both replicable successes and preventable failures. (page 41-42)</p> <p>Section 4.1.2. Sampling Criteria for Case Study, page 46</p> <p>Many patient care facilities of varying sizes ranging from small to mega FHs have been established around the world as part of COVID response. The case study aims to cover 10 FHs of various sizes/scales, including 6 MFHs set up in different parts of the world, under different geographic and hazard contexts. Further, during sample selection, cases representing a diverse mix of social, economic, and political contexts, along with uniqueness of solutions shall be considered. Additionally, the case studies shall include samples that offer innovative, efficient, and scalable solutions that suitable for adaption to different contexts globally. The following table suggests a sample selection scheme:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Geographical regions</th> <th>Field Hospitals (Total 4)</th> <th>Mega Field Hospitals (Total 6)</th> </tr> </thead> <tbody> <tr> <td>Americas – Argentina, Brazil, Chile, Canada, Peru, USA, Jamaica,</td> <td>At least one case</td> <td>Cover two countries</td> </tr> <tr> <td>European regions: Germany, France, Italy, Netherlands, UK, Turkey.</td> <td>At least one case</td> <td>Cover two countries</td> </tr> <tr> <td>Asia and Australian region: Afghanistan, India, Sri Lanka, Japan, Nepal, Mongolia, Bhutan,</td> <td>At least one case</td> <td>Cover India, and one more country</td> </tr> </tbody> </table>	Geographical regions	Field Hospitals (Total 4)	Mega Field Hospitals (Total 6)	Americas – Argentina, Brazil, Chile, Canada, Peru, USA, Jamaica,	At least one case	Cover two countries	European regions: Germany, France, Italy, Netherlands, UK, Turkey.	At least one case	Cover two countries	Asia and Australian region: Afghanistan, India, Sri Lanka, Japan, Nepal, Mongolia, Bhutan,	At least one case	Cover India, and one more country	<p>1. We understand that the assignment intends to cover 10 FH including 6 MFH across 6 countries in different parts of the world and the selected agency is expected to compile the list. We wish to seek clarity that there might be multiple MFH within the same geography vis-à-vis no MFH in other geographies. In such a case will the multiple MFH from same country or geography be included in the study? Also, since CDRI will decide on the final case studies to be included and consequently the countries will be decided based on the decision, the budget estimates for the selected agency may vary and impact the project economics.</p> <p>2. Page 46 “The research team will compile a comprehensive list of FHs and MFHs, and provide scientific rationales for selecting cases. CDRI shall approve the final list of cases: “This is to be done for all listed countries and nationals or for selected countries only or comprehensive FH and MFH is to be given.</p>	<p>Please refer to Section 4.1.2 Sampling Criteria (page 46) based on which, locations of 10 FH including 6 MFH across 6 countries in different parts of the world shall be proposed by the Agency. CDRI shall review this list for adequate coverage of diversity of demographic, geographic, governance and COVID impact contexts.</p> <p>A comprehensive listing of MFHs across all countries is required. For detailed case study, samples will be selected as per Section 4.1.2.</p> <p><b>Bangladesh</b> is now added to list of CDRI Member Countries in the Table.  <b>Ref. Corrigendum point 06</b></p>
Geographical regions	Field Hospitals (Total 4)	Mega Field Hospitals (Total 6)														
Americas – Argentina, Brazil, Chile, Canada, Peru, USA, Jamaica,	At least one case	Cover two countries														
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		<p>Australia, Fiji, Mauritius, Maldives, <b>Bangladesh</b></p> <p>The research team will compile a comprehensive list of FHs and MFHs and provide scientific rationales for selecting cases. CDRI shall approve the final list of cases.</p> <p>1.3 Field Hospitals (FHs) for COVID-19, page 41 “Typical examples of field hospitals are listed in Table 1 at the end of the document.”</p>	<p>3. The table 1 mentioned as examples of Field Hospitals is not available at the end of the document. Request you to please share the list for reference to the context of field hospitals.</p>	<p>Referred Table is provided in the Corrigendum. <b>Ref. Corrigendum point 09</b></p>
2.		<p>4.1.1. Depth of case study, page 45 Visits to field hospitals to collect direct information and images are encouraged as part of the methodology</p>	<p>1. We wish to seek clarity if the key experts are expected to travel to the selected countries for the research work. We request you to consider that given the ongoing pandemic situation, field visits may not be feasible, so wish to clarify that the primary mode of data collection will be through virtual meetings. Sampling will be done by secondary data or the primary data after visiting the respective countries.</p> <p>2. Owing to the Pandemic times, if there is any litigation regarding the lockdown in any country, how will the process of transfer/staying in the country be?</p> <p>3. In case travel is required, we request you to please accept that all travel related to the project work will be subject to an AGENCY’s latest travel policy and guidelines applicable as on date of expected travel.</p>	<p>For data collection field visits by the Agency’s research team or its local partners are required as part of the assignment. Please <b>Ref. Corrigendum point 07</b> for clarification.</p> <p>Regarding COVID-19 constraints, refer Page 52, 8. Additional Information, point 12 (a) “As this project will be implemented at the time of travel restrictions due to COVID-19, the Agency should account for all restrictions in the proposal”.</p> <p>CDRI has no comment on internal travel policy of the Agency.</p>
3.		<p>Page 42, 3. Deliverables</p>	<p>Pg. 42 deliverables are to be given for all countries or specific country wise separate docs to be prepared</p> <p>Pg. 42 Study Report should be about 300 pages. Is there any limit for annexures?</p> <p>Policy Brief: A single document is required or different for different countries.</p> <p>Handbook: It can have annexures or not as local laws may affect or not.</p>	<p>The Study Report will have separate case studies on different FHs/MFHs. Common findings and recommendations are expected to be compiled into a synthesis report/compendium.</p> <p>There is no limit to Annexures.</p> <p>A single document is required for the Policy Brief .</p> <p>There will be one Handbook and it may contain Annexures if required.</p>
4.		<p>6. Timeline and Payment Schedule, page 48</p> <p>The estimated project duration is nine months</p>	<p>We understand from the ToR that the scope includes selection of case studies (FH/ MFH), evaluation and research on the selected 10 case studies including visits to 6 countries and detailed documentation of all the case studies as study report (300 pages) along with print ready handbook (200 pages) and</p>	<p>As per RFP.</p>

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			policy brief as well. Given the detailed requirements for this assignment and the travel restrictions in place for multiple countries, in our opinion the time frame of 9 months for completing the assignment is on a lower side. The estimated time for completion of all these activities will at least be 12 months (subject to travel restrictions) .	
5.		Page 51, 8. Additional Information. "1. Please note that CDRI may facilitate the process of data collection and meetings with the requisite stakeholders. But the primary responsibility for these will lie with the Agency."	<p>1. As the final list of case studies and countries to be covered will be decided by CDRI, we request CDRI, given its global presence and reach, to facilitate the connects and stakeholder consultations as well in the selected countries.</p> <p>2. There is no mention of the support hand which we will get in the study of the field hospitals.</p> <p>3. Delay may be there in getting the permissions due to covid or travel restrictions due to covid. Will CDRI help in getting the permissions and travel permissions VISA if needed? Will the process of the same be facilitated on a priority basis by the GOI?</p> <p>4. The cost of facilitation/visa/travel/stay etc., will be borne by the consultant?</p>	<p>Regarding extent of support from CDRI, please refer point 1 of section 8. Additional Information (page 51).</p> <p>Additionally, please refer Clause 12.a (page 52) "As this project will be implemented at the time of travel restrictions due to COVID-19, the Agency should account for all restrictions in the proposal".</p> <p>The Agency is responsible for obtaining required permissions and Visas.</p> <p>The Agency is expected to include in their proposal, all costs related to execution of the project, including the cost of visa, travel, stay etc. unless specifically mentioned in the RFP.</p>
6.		7 Staffing requirements, Table – list of key experts, page 50 Health care infrastructure expert – Minimum experience 15 years Case study experts – Minimum experience 15 years	We request you to please relax the criteria for years of relevant work experience to 10 years as these experts will be either PhD or Masters and 15 years of work experience in specific fields identified will limit the potential experts that can be engaged for the assignment	<p>Staffing requirements have been revised.</p> <p><b>Ref. Corrigendum point 08</b></p>
7.		2. Sub criteria for evaluation of qualification and relevant experience, page 21  International experience – 25% 5+ years - 100% 3-5 Years - 75% 1-3 Years - 50% 0 years – 0%	We request you to please clarify whether the international assignments will qualify as scoring criteria, if so, how is the quantification in terms of number of years will be addressed? or is it expected that the key staff should have spent the given number of years internationally?	For the Key staff, experience outside their home country will be considered as - international experience.
8.			<p>Q3) Under "Consultancy Firm's specific experience" (pages 19-20) –</p> <p>a) How does one get 5 points in the first and second sub-sections?</p> <p>b) What about consultancy assignments from Government of India, bilateral organizations or international industry associations?</p>	<p>For questions (a) to (f) a competent Committee will decide points in light of the 'Evaluation Criteria for Technical Bids' and documents submitted by the Agency. Additional information is as follows:</p> <p>(a) The Agency will be awarded 5 points in first and second subsections if all the conditions are fulfilled.</p> <p>(b) The evaluation will focus on the Agency's experience of working with international organizations as clients, and projects executed outside the home country of an organization.</p>

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			<p>c) Are only “projects with value more than USD 100,000 or INR 2 million” to be counted?</p> <p>d) what if the consultancy assignment involved case studies, let’s say in the health sector – would we get 5 points each under the first and second sub-sections?</p> <p>e) In the third sub-section, what if some reports / other knowledge products were produced without any funding, out of personal initiative?</p> <p>f) how do you define “international quality” here?</p>	<p>(c) Yes. Only “projects with value more than USD 100,000 or INR 2 million” to be considered.</p> <p>(d) A Committee will decide points.</p> <p>e) External funding for Knowledge products is not mandatory.</p> <p>f) ‘International quality’ of knowledge products implies their ‘quality of content’ and ‘international outreach’.</p>
9.		<p>Notice inviting tender, Point no 5, page 16 Date &amp; time and address for submission of proposals/bids: Date: 03 August 2021 Time: 23:59 HRS (IST)</p> <p>Proposals must remain valid 90 days after the final submission date. i.e., 31 October 2021.</p> <p>Expected date for commencement of consulting Assignment/job is: 17 August 2021</p>	<p>1. As this is a multi-country assignment and requires identification and co-ordination with multiple key experts and co-ordination with teams/ consortium members in respective countries, we request for the extension of timeline of submission by at least 3 weeks (or more) from the existing timeline to 24th August 2021.</p>	<p>Last date for bid submission is extended to <b>03 September 2021</b>.</p> <p>Proposals must remain valid 90 days after the final submission date. i.e., <b>30 November 2021</b>.</p> <p>Expected date for commencement of consulting Assignment/job is: <b>17 September 2021</b>.</p> <p><b>Ref. Corrigendum point 01</b></p>
10.		Data Sheet II. Sl. No. 16, page 21, Evaluation Criteria for Technical Bids	Regarding the qualifications and relevant experience of Key Staff (page 21), how do you define “international experience”? Can the PhD be in any field? Sometimes, the PhD degree can be from, let’s say the Sociology department, but the dissertation is on health, would that be considered as a PhD in health?	A Committee will evaluate ‘international experience’ and ‘relevance of educational qualification’ of Key Staff based on their CVs and Evaluation Criteria in RFP.
11.		Data Sheet II. Sl. No. 16, page 21, Evaluation Criteria for Technical Bids:	On page 21, does the Team Lead have to be from the Lead Agency? Do we need to have all the experts (listed under points ii to vii) as part of the consortium? Can the Team Lead also be one of the experts / can two kinds of experts be the same person? Will he / she get points for both (for e.g., 10 for being Team Lead and 7 or 4 for being an expert)?	Team Lead must be from the Lead Agency of the Consortium. Other Key Experts may be from any member of the Consortium. One Key expert will be evaluated as only one resource person.
12.		Data Sheet II, Page 22, Sl No. 17 Method of Selection	Are pre-qualification documents (listed on page 17) to be submitted to CDRI along with the technical and financial bid by 3rd August 2021? Do they have to be only of the Lead Agency or of all agencies involved in the consortium?	<p>All the Pre-qualification (PQ) documents pertain to the lead Agency. These shall be submitted in a separate zip file along with the technical and financial bids. All the documents must be password protected.</p> <p>Last date of the bid submission has been revised to 03 September 2021.</p> <p><b>Ref. Corrigendum point 01</b></p>

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13.		Data Sheet II, Page 18, Sl No. 15-17 "Proposals will be submitted via EMAIL to the address as mentioned in the Data Sheet Cl. 5, with subject line: Proposal: "India Fiscal Risk Assessment_ [Agency Name]"	On page 18, it is mentioned that "Proposals will be submitted via EMAIL to the address as mentioned in the Data Sheet Cl. 5, with subject line: Proposal: "India Fiscal Risk Assessment_ [Agency Name]". I was wondering if the title of the assignment – "Global Case Study of Field Hospitals for COVID-19" – needs to be included instead in the subject line?	In this clause, term 'India Fiscal Risk Assessment_ [Agency Name]' is substituted with the term "Global Case Study of Field Hospitals_[Agency Name]".  <b>Ref. Corrigendum point 02</b>
14.		Data Sheet II, Page 22, Sl No. 17 Method of Selection	Could you please elaborate on how the Financial Bids would be scored? Would those who quote a lower study cost get more points? What is the maximum budget limit?	Higher weightage has been given to technical proposal (75%) as compared to the financial proposal (25%). For the evaluation of the financial bids, please refer to the Clause 17 on page 22.  The estimated budget of the project cannot be disclosed.
15.		Data Sheet II, Page 22, Sl No. 17 Method of Selection	On page 22, it is mentioned that the "Location for performance assignment / job" would be "New Delhi, India". What does this mean?	The location is specified as New Delhi as the final outputs will be submitted to CDRI Secretariat, located in New Delhi.
16.		Standard Forms (page 24 onwards)	On Standard Forms (page 24 onwards), should we include the logo of the Lead Agency / of all agencies in the consortium on the top?	The Agency is free to decide the use of logos on the Standard Forms.
17.		Section I, Page 8, Clause 3.3 and 3.4, Eligibility of Association of Agencies	Page 8, clause 3.3 – "Apart from the association/consortium formed before submission of the proposal, the Agency shall not subcontract any portion of Agency's duties under this Agreement without prior written consent of CDRI". What if we later come to know that visit of a consortium member is not possible to a particular country due to Covid restrictions in that country – can we subcontract field work in that particular country to an individual / agency with prior consent of CDRI?	Please refer to clause 3.4 on page no. 8. Additionally, any request for subcontracting field work will be considered by CDRI on a case-by-case basis.
18.		Section 10. Additional Information (page 52), "12. Any other related information is specific to the study/assignment necessary to be furnished to all the bidders.  a. As this project will be implemented at the time of travel restrictions due to COVID-19, the Agency should account for all restrictions in the proposal.  b. The cost of logistics for organizing Workshops/stakeholder consultancy to complete the scope of work will vary based on the mode of workshops (online or in-person). This will depend on the lockdown and social distancing restrictions in place at the time. Thus, the logistics costs of the workshops will be reimbursed <i>as per actual</i> . <b>[Note: Logistics does not include the Agency's staff time, or resource persons, or coordination. For web-based meetings, this does not include the cost of purchase of hardware or software, only services if any.]"</b>	Page 52 12b: This is very subjective especially with ref to sampling pg. 46 as mentioned in point 5 pls clarify	COVID-19 situation permitting, if the agency organizes in-person workshops/events, the logistics cost of the event will be reimbursed by CDRI as per actuals as mentioned in clause 12.b (page 52).

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19.		Section I, Clause 12, Page 12, Earnest Money Deposit	We request the EMD should be taken from successful bidder and a declaration form can be made for the same for submission of EMD.	EMD clause has been deleted from RFP. <b>Ref. Corrigendum point 03</b>
20.		Section 5, Clause 2.7, page 61, General Conditions of Contract	Is there any force Majeure	For Force Majeure, please refer Standard Form of Contract clause 2.7 (page 61) under General Conditions of Contract.