



REQUEST FOR PROPOSALS FOR HIRING OF CONSULTANTS FOR TRANSACTION ADVISORY SERVICES FOR OUTSOURCING OF GOVERNMENT HEALTH FACILITIES IN ISLAMABAD

RESPONSES TO QUERIES DOCUMENT

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This Response to Queries Document (this **Response Document**) is further to the Request for Proposal (consisting of the Request for Proposal issued on **23rd July, 2025**) (the **RFP Document**) in respect of the bidding process relating to hiring a consultancy firm / consortium for Transaction Advisory Services for hiring of Consultants for Transaction Advisory Services for Outsourcing of Government Health Facilities in Islamabad (the **Project**).

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Responses on Queries of Consultants

Following are the answers / clarifications to the questions / queries raised by the interested / potential bidders during the pre-bid meeting held on Wednesday 30th July 2025, and subsequently through email(s), in respect of the Request of Proposals issued by the Ministry in relation to the captioned project.

No.	Query / Clarification	Response
1.	<p>Timeline for Technical Feasibility: On page 45, section VII, the timeline for Technical Feasibility Study is 1 month only. Keeping in view the broad scope of technical work, this timeline seems un-realistic. It is recommended to increase the timeline for this activity while subsequent timelines can be adjusted accordingly.</p>	<p>The concern regarding the one (1) month timeline for the Technical Feasibility Study is duly acknowledged. It is understood that the Consultants would need to undertake a market assessment of the health facilities, including demand analysis, evaluation of the current state of infrastructure, installed equipment and other relevant components.</p> <p>However, it is important to note that the Ministry has already prepared preliminary data of assets and flow of users on the existing facilities. The Ministry is fully committed to providing this data to the Consultants at the outset of the assignment. Furthermore, the Ministry will extend all necessary facilitation, including access to health facilities and other institutional support, to streamline the data collection and feasibility assessment process.</p> <p>In light of the above, the request to extend the timeline for the Technical Feasibility Study is not accepted. It is also pertinent to highlight that adequate time has been allocated for subsequent stages of the assignment. Therefore, the Consultants may optimize and reallocate internal timelines across various stages of the assignment to ensure that the overall project duration of eight (08) months is achieved.</p>
2.	<p>Clarification on Deliverables – Inventory Digitization & Infrastructure Assessment:</p> <p>On page 40, 1. Introduction & 2(c) Objective, it is mentioned that "The consultant is also required to digitize and assess existing inventory and infrastructure of the health facilities.". The above requirement contradicts with the theme of the RFP as digitization is a whole separate task. It this is required to be done; it should be properly reflected in the deliverables and budget to be allocated.</p>	<p>The underlying principle has been revised. The scope of work for the Consultants is to recommending the requirements for recording or digitization of records of the Health Facilities, which will subsequently be implemented by the private partner / operator of the Health Facilities. Accordingly, wherever the term "digitize" appears in the RFP, it should be read as "recommend requirements to digitize."</p>

No.	Query / Clarification	Response
3.	<p>Clarification on Roles: Team Lead MBBS: The Request for Proposal (RFP) specifies an MBBS qualification for the Team Lead position. We observe that numerous large-scale medical facilities and organizations are effectively managed and optimized by professionals holding a variety of qualifications beyond MBBS, who bring extensive experience in strategic healthcare administration.</p> <p>Insisting solely on an MBBS degree may inadvertently limit access to a broader talent pool, potentially excluding highly competent individuals whose expertise could significantly benefit this project. Could you please elaborate on the specific rationale for this exclusive requirement? We propose expanding the eligibility criteria to include other pertinent qualifications, along with demonstrated experience in leading complex healthcare operations.</p>	<p>To broaden the pool of qualified bidders and ensure a more competitive selection process, the criteria is modified. The revised qualification requirement is:</p> <p>Qualification: MBBS along with ‘Masters in Hospital Management / Masters in Public Health / Masters in Hospital Administration’ with 15 years’ experience in Healthcare Management & Strategic Planning, Installation & Commissioning Consultancy, Healthcare Business Development, Public Health Policy & Advisory Roles, Cost Optimization & Productivity Improvement.</p>
4.	<p>Clarification on Roles: Electrical Engineer / Biomedical Engineer To allocate resources effectively, we seek clarification on the role of the Electrical Engineer / Biomedical Engineer in this assignment’s key staff requirement. Both qualifications are representing different fields.</p> <p>If the intention is to ensure the availability of experienced individual for testing the functionality of the lab/medical equipment, an experienced QC expert will be more relevant requirement.</p> <p>We appreciate your time and look forward to your responses to these queries. Thank you for your support.</p>	<p>The revised criterion is:</p> <p>Bachelor's degree in Bio Medical Engineering, registered with relevant authority, with 05 years relevant experience</p>
5.	<p>Section VII – 2: The timeline allocated for Technical Feasibility Study is one month. Given the complexity of data collection and analysis required, would it be possible to extend this period to ensure delivery of comprehensive and high-quality feasibility study?</p>	<p>Please refer to response to the query no. 1.</p>
6.	<p>Section VI – A (ii) and B (a) For Financial Viability Assessment including PPP Options Analysis please clarify whether the analysis should be conducted as a single consolidated report covering both the Blood Center and the associated health facilities (e.g., hospitals), or if separate analyses are required for each entity? Similarly, for Preparation and Submission of Procurement Package, will this be considered as one package or two different packages?</p>	<p>The determination of whether the project will be structured as a single consolidated PPP transaction encompassing both the Blood Center and the associated health facilities or as separate PPP transactions, will be ascertained upon completion of the feasibility study. This decision will be based on the recommendations of the selected Transaction Advisors, in line with technical, operational and financial viability assessments conducted during the study.</p>

No.	Query / Clarification	Response
		<p>It is therefore advised that bidders carry out a preliminary assessment of the health facilities and the Blood Center during the bid preparation stage to form a reasonable understanding of the likely structuring of the transaction(s). Bidders are expected to price-in their proposals keeping in view their professional judgment as to whether the assignment is likely to result in a single consolidated PPP transaction or multiple, separately packaged PPPs. However, the bidders are refrained to mention that their bids are submitted with the assumption of multiple PPP transactions.</p> <p>Upon completion of the feasibility study (Phase 1) as outlined in Section VII (Schedule of Deliverables), in case it is decided to split the Project into multiple PPP procurements (Sub-Projects), the fee structure for the remaining phases (Phase 2 and Phase 3, collectively referred to as the "Remaining Phases") will be adjusted without impacting the total quoted fee. The distribution of the fee for the Remaining Phases across the Sub-Projects may be:</p> <ul style="list-style-type: none"> ▪ Evenly divided among the Sub-Projects, or ▪ Proportionally allocated based on the number of health facilities being outsourced under each Sub-Project, or ▪ Mutually agreed upon between the Ministry and the Consultants at the initiation of the Remaining Phases <p>With this provision, the Consultant's fee for the Remaining Phases may be disbursed based on the achievement of milestones specific to each Sub-Project, independently of the completion of the same milestone in other Sub-Project(s).</p> <p>It is reiterated that the total fee of the Remaining Phases will not be increased in any case.</p>
7.	<p>Section III – 21.1 (7b): Please clarify whether this role specifically requires a Biomedical Engineer, or if an Electrical Engineer with relevant healthcare or medical equipment experience would also be considered acceptable for this assignment?</p>	<p>Please refer to response to the query no. 4.</p>

No.	Query / Clarification	Response
8.	<p>Section III – 21.1 (7c):</p> <p>The educational qualification requirement for Financial Analyst is Master’s degree in Economics or Finance or MBA Finance. It is requested that professional qualifications such as CA, ACCA, or CFA should also be considered acceptable for meeting the educational requirements.</p>	<p>The revised criteria is:</p> <p>Master’s degree in Economics, Finance / MBA Finance / ACCA / CA / CFA / Masters in Finance with 10 years’ experience in financial advisory of project finance / infrastructure finance transactions</p>
9.	<p>Section VI – 2(c) and A(i)(j)</p> <p>In the context of digitizing and assessing the existing inventory and infrastructure of Health Facilities, please clarify the scope and expectations for this task.</p> <p>Does this include creating a digital inventory management system, developing software for asset tracking, or simply compiling an electronic database of existing equipment, furniture, IT assets, etc.? Additionally, are there any preferred platforms, tools, or standards to be followed for this digitization process?</p>	<p>Please refer to response to the query no. 2.</p>
10.	<p>Section III - 17.7 and 17.9:</p> <p>It is requested that the proposal submission deadline be extended by two weeks, from 12th August 2025, to allow adequate time for the consultants to prepare and finalize a comprehensive proposal.</p>	<p>Note that the bid submission deadline is revised to Monday 18th August 2025. Time for submission and opening of bids is the same.</p>
11.	<p>Section VIII: List of Health Facilities</p> <p>Self-initiated feedback by the Ministry</p>	<p>The Ministry has amended the list of Health Facilities which are to be covered by the Consultants for providing transaction advisory services. The revised Section VIII i.e. the list of Health Facilities is attached at Annex-A of this document.</p>

Annexure – A

Section VIII – List of Health Facilities

1. Regional Blood Center Islamabad
2. Isolation Hospital and Infections Treatment Center (IHITC)
3. Cancer Hospital PIMS
4. Jinnah Hospital (Polyclinic PGMI)-II at G11/3 Islamabad
5. 200 Beds Accident & Emergency Centre, PIMS
6. King Salman bin Abdul Aziz Al Saud Hospital, Tarlai, Islamabad
7. Community Health Hospitals (06)
 - Bari Imam
 - G-13
 - Shah Allah Ditta
 - Rawat
 - Tarnol
 - Kirpa
 - Bhadana Kalan
 - Bari Imam, Islamabad
8. Mother & Child Health Hospitals (01)
 - Badhana Kalan (I-14)
 - Gohra Shahan
9. Rural Health Center (03)
 - Tarlai
 - Sihala
 - Bhara Kahu
10. Basic Health Units (13)
 - BHU Bhukkar
 - BHU Sohan
 - BHU Gokina

- BHU Gagri
- BHU Jhang Syedan
- BHU Phulgran
- BHU Shahdara
- BHU Pind Begwal
- BHU Bhimber Tarar
- BHU Jagiot
- BHU Chirah
- BHU Tumair
- BHU Golra Sharif
- Newly Constructed 4 BHUs

11. Dispensaries (01)

- Model Town Humak

