

# Corrigendum-5

Tender Document No.: NIHFW/CHI/IHIP/Tender/2017

## Development and Implementation of Integrated Health Information Platform (IHIP)

3<sup>rd</sup> March, 2017

**This Corrigendum shall now be a part of Tender issued on 03.01.2017 by Centre for Health Informatics.**

1. On page no. 34, section 6.1, **“General Scope of Work”**, following clause is added as point no. 10:-

“10. In case of requirement for any additional system software licenses, the Service Provider shall procure and implement the same along with the operation and maintenance services from the OEM during the entire period of the contract.”

2. On Page no. 35, section 6.2.1 Hospital Information System (HIS), following clause is added after clause no. 20

“21. Following modules needs to be provided by the bidder:-

- Patient Registration Services (OP Registrations, Emergency Registrations, IP Registrations)
- Patient Enquiry
- Billing
- Admission Discharge & Transfer & Nursing Management
- OPD Service Area, Order Management
- IPD Services
- Investigation & Labs
- OT & Anesthesia
- Blood Bank
- MIS/MRD
- EMR
- User Management
- Alert Management
- Inventory & Pharmacy
- Diet Kitchen
- BMED
- Transport
- Laundry
- BMW
- CSSD
- Employee Personnel Details/Duty Roster

3. On Page 52, Section 6.4.11, **“Disaster Recovery and Business Continuity”**, clause 3 and 4 are replaced with following clauses:-

“ **3.** The Successful Bidder shall document, define and provide a test Business Continuity Plan annually as mentioned in the Section 8.2.4.1 Performance Measurement, sub section Disaster Recovery Site Availability (Application Only) for IHIP application.

**4.** The Service Provider shall conduct DR drill for two days at an interval of every six months of operation wherein the Primary DC has to be de-activated and complete

operations shall be carried out from the DR Site. However, during the change from DC to DRC or vice-versa (regular planned changes), there should not be any data loss.”

4. On Page 52, Section 6.4.11, “Disaster Recovery and Business Continuity”, following clause is added after point no. 6:-

“7. The proposed solution should have capability to run on DR system in active-active mode with zero latency therefore, the proposed solution should be sized for active-active cluster design”

5. On page no. 54, section 6.4.17.2, **Data Encryption (Protection of Patient Data Regarding HIV/AIDS, Behavioral Health, Children, Etc.)**, following para is added after the existing para:-

“Encryption solution should be dedicated FIPS certified tempered proof key management to protect the application, database; full database, file and virtual images. In addition to this, the proposed solution should support AES 256, RSA 2048 and centrally managed symmetric and asymmetric keys, secret data and X.509 certificates along with associated policies. The proposed solution should have dedicated centralized key management system to achieve granular access, authorization and separation of duties. The security system should have audit log facility and error log management by separate audit role. The log entries should include WHEN, WHO, WHAT and results of logging. Apart from that the audit log entries should be ensured against any truncation, modification, deletion, addition of critical events like tempering, decommissioning, Zeroization. The encryption system should also support random generation and secure transport mode to mitigate data theft risk.”

6. On page no. 54, section 6.4.18, Compute Requirement :-

“The Successful bidder will provide all required compute necessary to run the IHIP for a period of 5 years” is replaced with “The successful bidder will assess all required compute infrastructure to run IHIP system for a period of 5 years”

7. On page no. 54, section 6.4.18, Compute Requirement :-

“In Proposal, bidder has to give details of compute provisioned in this project along with costing in year wise manner in the prescribed format (Annexure-4)” is replaced with “In Proposal, bidder has to give details of compute infrastructure (servers (Physical/virtual), Storage, RAM, OS and Virtualization License, database licenses, Security, Antivirus & HIPS etc.) assessed in this project in year wise manner in the prescribed format (Annexure-3)”

8. On Page no. 57, section, 6.5.12, “**Transition and Exit Management**” is replaced with following clause:-

“

1. The bidder shall provide a Transition and Exit Management Plan along with the SRS Document.

2. At the end of the contract period or during the contract period, if the bidder is found to flout the SLA norms and the Ministry invokes the Termination Clause, the bidder shall do proper transition as laid down in the Exit Management Plan to the other agency identified or selected for providing services related to Bidder’s scope of work. The bidder needs to ensure a smooth transition to new agency/vendor.

3. The bidder shall properly document all risks during transition stage and mitigation measures should be planned in advance so as to ensure smooth transition without any service disruption.

4. The transition plan along with period shall be mutually agreed between bidder and CHI and/or its designated agency when the situation occurs. Bidder shall be released from the project once successful transition is done meeting the parameters defined for successful transition.”
9. On Page 61, Section 8.1, “**Payment Terms**”, the clause “However, Payment of the Bills would be payable, on receipt of advice/confirmation for satisfactory delivery/installation/re-installation, live running and service report from the concerned sites and nodal officers appointed for the purpose where the software will have been delivered.” is replaced with  
 “However, Payment of the Bills would be payable, on receipt of advice/confirmation for satisfactory delivery/installation/re-installation, live running, **successful completion of milestone** and service report from the concerned sites and nodal officers appointed for the purpose where the software will be implemented.”
10. On Page no. 62, section 8.2.1, “**General Conditions of SLA**”, following points is added after point no. 11:-  
 “12. The Automated tool to measure the SLA should include the following modules / functionality:
1. Service Level Management and Reporting
  2. End-User Response Time Monitoring
  3. Application Performance and Transaction Management System
  4. Network Management
  5. Infrastructure (Server, Storage) Management and Monitoring
  6. Asset Management (auto-discovery of assets, including movement)
11. On page no. 64, the table given in section 8.2.3.1, “**Penalties for Delayed Implementation**” is replaced with following table:-

Delay	Penalty
Up to 1 Week	Grace Period. No penalty
1 – 2 Weeks	1% of Milestone Payment
2 – 3 Weeks	2% of Milestone Payment
3 – 4 Weeks	3% of Milestone Payment
4 – 5 Weeks	5% of Milestone Payment
5 – 6 weeks	7% of Milestone Payment
>6 weeks	10% of Milestone Payment and option to terminate the contract.

12. On Page 65 and 66, Section 8.2.4.1 “**Performance Measurement**” clause under sub section “**Disaster Recovery Site Availability (Application Only)**” is replaced with the following clause :-

Type of Infrastructure	Measurement	Minimum Service level	Minimum Tools
Disaster Recovery (DR) Site Availability (Application Only)	In case, any of the critical Applications such as Portals, HIE, HIS, EMPI, Registries (Facility, Health Worker etc.), Shared Health Record, Terminology Services, security service, Consent Management etc. are down due to any failure of systems and or environment, the same should be made live within 15 minutes from DR site without any data loss.  In case of non-critical applications such as Analytical Engine, reporting tools, EMS, APM etc. are down due to any failure of systems and or environment, the same should be made live within 2 Hours from DR site without any data loss.	100%	CHI will measure this through periodic audits based on logs to be provided by Bidder or through independent Third Party Audit Report

13. On page no. 66, section 8.2.5, “**Penalties**”, following clause is added after Point no. 8:-

“9. In case of service breakdown due to reasons attributable to or failure on part of customer, hospital such as network failure, the SI will not be made responsible for such a failure to meet any Service Level in accordance with the RFP.”

14. On Page 68, Section 9, “**Acceptance Testing and Go Live**”, clause no. 1, following line is now the part of this clause:-

“The IHIP solution will be load tested by the reputed Load/Stress Testing Tools. This is required for limited time in order to load test the application”