

Date: 19 March 2019

## Clarification Note No. 1

**RFP/SMM/10/2019 – Provision of the Electronic Medical Records System for the OSCE Special Monitoring Mission to Ukraine.**

*All grammar and spelling of the authors have been left unedited*

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### **WITH REF TO: LOGISTICS AND TIMING**

*The system should be installed in the additionally assigned to the authorized medical personnel computers with access ONLY granted to these personnel. PC will be located in the Kyiv HO medical Section, Donetsk, Kramatorsk, Mariupol, Luhansk and Sievierodonetsk.*

**B1Q1: Is there a possibility that all 10/6 PC's will be in Kiev at the same time / at the commencement of the project , with its dedicated / lan printer?**

*Answer: If there is such a need we can have the PCs in Kiev. However any software installation on corporate computing devices are done via SCCM.*

**B1Q2: Donetsk - government and / or non-government controlled areas) Please confirm which city / town exactly**

*Answer: NGCA*

**B1Q3: Kramatorsk non-government controlled area – confirmed?**

*Answer: GCA*

**B1Q4: Luhansk government and / or non-government controlled areas) Please confirm which city / town exactly.**

*Answer: NGCA. Luhansk city*

**B1Q5: Sievierodonetsk non-government controlled area – confirmed?**

*Answer: GCA*

**B1Q6: “The time for the installation and trial usage would be 2 weeks starting from the date of the purchase.” Is this in Kiev HO or at each site?**

*Answer: The trial needs to be run at each site and the HQ and the feedback to be provided to the OSCE Head of Medical Unit.*

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**B1Q7: To ensure TRIAL USAGE ( User acceptance testing ) goes smoothly , each PC needs to be activated at each site , and each medical officer need to be trained at each site – prior to START of TRIAL PERIOD - correct?**

*Answer: The training and installation can take place either at the site or in HQ, the training and installation of the software can be done either at the sites or from HQ using remote installation program.*

*The comment on B1Q1 needs to be considered here as well.*

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**WITH REF TO: FINANCIAL BID - PRICING FORMAT**

3.1 *First year post-sales maintenance and support (service desk, country visits after installation etc.) - 12 Months*

3.2 *Second year post-sales maintenance and support (service desk, country visits after installation etc.) - 12 Months*

**B1Q8: Country Visit clarification – does country visit mean CITY Visit?**

**Answer:** Country visit can be to the HQ and a VTC can be organized for all the different hubs.

**B1Q9: Do you request pricing / solution to include at least.....EITHER OR ALL OF THE FOLLOWING**

- 1 city service visit per month or
- 1 city service visit per year or

**Answer:** We can consider 3 variants: monthly, bi annually and annual, and pick the best option. It can be HQ visit with VTC's or city visits as well.

- when there is a Mission Critical software failure and requires on-site support?

**Answer:** *From ICT point of view there is no need for frequent visits. For mission critical failures the vendor should be available for consultation (if anything can be solved by ICT locally) and if necessary to be able to travel to Kiev.*

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**B2Q10:** It is mentioned that the system must comply with HIPPA and GDPR standards, which involve sufficient fines in case of noncompliance. Considering this, please specify from which stage of the system supply, it must meet all requirements and is there any time for system adjustment before the requirements entry into force. Please clarify/specify more details how/to which extend/if this requirement will be used applicable to this Contract.

**Answer:** *Due to the organization's nature OSCE is not mandated to comply with HIPPA and/or GDPR. However, SMM (OSCE) is looking for software that can be considered to be in compliance with those regulations.*

**B2Q11:** It is mentioned the system must save the data in the cache in the absence of the Internet, however this requirement contradicts with the other mentioned security requirement: the storage of all data on the server. Please clarify what information should be stored in cache? What is required cache volume? What should happen with the cache information after the connection to the Internet/Server?

**Answer:** *The requirement to store all data on the server means "not in the cloud". We do not exclude the possibility to store temporary data on corporate mobile devices until the data is synchronized with the server.*

**B2Q12:** Any shelf-line product system could not fully comply with all requirements, so please clarify which time will be allowed for system minor adjustments/revisions.

**Answer:** *We understand that limitation and would like to see your offer on how much time do you need to deliver all requirements. However the core functionality and security controls shall be in place from the very beginning. After synchronization data on mobile devices shall be cleansed.*

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**WITH REF TO: ANNEX C “Terms of Reference”**

**Purpose**

Providing medical support to the mission members SMM Medical Section authorized personnel should be able:

- to track the movement of the patient in case of the evacuation

**B2Q13: Please provide more information referring this issue. The tracking has to be on-line or off-line. Is the tracking history of change?**

**Answer:** The tracking has to be online and updated dynamically with vital changes and diagnosis. The evacuation can be tracked and monitored by the Head of the Medical Unit who can give access and generate a dynamic report for the Med Evac handover team.

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**WITH REF TO: ANNEX C “Terms of Reference”**

**Purpose**

Providing medical support to the mission members SMM Medical Section authorized personnel should be able:

- to keep all related to the particular person medical information in one file, including certified sick leave documents

**B2Q14: Person medical information could be kept only in the file or in the part of database.**

**Answer:** It should be the part of a database makes is easy if we need to get a history of visits/illness/injuries.

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**WITH REF TO: ANNEX C “Terms of Reference”**

**In addition to the sections EMR software also must be able:**

- to write PCRs on a mobile device that does not have internet access and cache the record on that device until connection to the internet is re-established.

**B2Q15: What information should be cached? This requirement “to write PCRs on a mobile device/tablet PC that does not have internet access...” contradicts with the requirement of security “The data must be kept on the separate dedicated only to medical data server” (“Security” of the ANNEX C)**

**Answer:** For the sake of ease and saving precious time all the information logged in by the medic should be cached on the mobile device/tablet PC, that does not have internet access because while doing a Med Evac or a hospital run most of the time you don’t have internet access. All our devices are ICT compliant and when we get our new tablets those will be ICT compliant as well.

*The comment on B2Q11 needs to be considered here as well.*

**WITH REF TO: ANNEX C “Terms of Reference”**

**In addition to the sections EMR software also must be able to:**

- Comprehensive data reporting: weekly, monthly, annually etc; trends and type counts; automated report generation on a schedule (so AI creating and sending a report on a predetermined schedule); geographic reporting based on zones or regions.

**B2Q16: Is it possible to use the tools of MS SQL Server?**

**Answer:** *SMM does not use MS SQL Server as its standard database. However it is possible to consider MS SQL Server as underlying database for your system.*

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**WITH REF TO: ANNEX C “Terms of Reference”**

**In addition to the sections EMR software also must be able:**

- to document prehospital, clinic visits, as well as, critical care evacuations.

**B2Q17: More information required. When the information need to be loaded to the system? During the critical care evacuations of after it?**

**Answer:** Any and all information logging should be done by the medic during critical care evacs, which will be monitored by the Head of the medical unit and flagged by him/her to the secondary medical provider or the medic in charge of the evacuation.

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**WITH REF TO: ANNEX C “Terms of Reference”**

**In addition to the sections EMR software also  
MUST have comprehensive on-boarding;**

**B2Q18: Please specify this requirement, what exactly does it mean?**

**Answer:** Ukraine health sector is still used to the pen and paper approach while taking history, writing tests, diagnosis treatment etc.  
National Medical officers don't have any experience with EMRS and they need on boarding and proper training/support.  
TO specify what exactly on boarding means : On-boarding is the process by which new employees become integrated into a new company(in this case using the new software). The on boarding process has a significant impact on how quickly employees become productive, how confident they are with using the software, and consequently, how well the team performs.

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**WITH REF TO: ANNEX C “Terms of Reference”**

**In addition to the sections EMR software also must be able to:**

- CQI (continuous quality improvement), report auditing and feedback mechanisms with providers.

**B2Q19: Please specify the meaning of the provider in this case.**

**Answer:** Provider is the software company itself. Feedback in this case is if there are any tweaks, improvements changes.

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**WITH REF TO: ANNEX C “Terms of Reference”**

**In addition to the sections EMR software also must be able to:**

- PTK, TTK and MASCAL bag inventories.

**B2Q20: Please give more information referring this part. Does it mean the connection of the software and medical equipment? If not, please specify what is required.**

**Answer:** PTK (Personal Trauma Kit) TTK (Team Trauma Kit) MASCAL(Mas casualty bags), each of these bags contains a specific set of items which are medical in nature and most of these items have an expiry date. We need to inventory the bags, tag their location and order supplies before the items expire. It should come as a part and parcel of the software.

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**WITH REF TO: ANNEX C “Terms of Reference”**

**In addition to the sections EMR software also must be able to:**

- Ability to track medical training and activities (CPR, trauma care, etc) and run reports on it

**B2Q21: Please give more information (specify the requirements) referring the tracking.**

**Answer:** All the trainings given/provided to the Mission Members should be tracked from the same software. Eg: CPR, AED, First Aid and other trainings need to be refreshed over a certain period of time. We should be able to track which MM has his training in date and which MM’s training expired. With this we can send out a notification the hub medic and the MM to initiate the refresher trainings.

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**WITH REF TO: ANNEX C “Terms of Reference”**

### **Security**

The software must compile with the OSCE IT security rules and fully protect the confidentiality of the medical records.

**B2Q22: Please give us the link on the OSCE IT security rules for studying.**

**Answer:** *Access to organization’s internal policies will be granted once the contract is signed. If there are specific concerns whether some aspects of the software will be in compliance to information security policy additional questions are welcome.*