KING FAISAL HOSPITAL RWANDA

Patient Centered Care

KING FAISAL HOSPITAL RWANDA

Updated Procurement Policies & Procedures Manual – January 2026

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LIST OF ABBREVIATIONS

Abbreviation	Description
BOQ:	Bill of Quantities
CB:	Competitive Bidding
DCEO:	Deputy Chief Executive Officer for non-Medical Services
CEO	Chief Executive Officer
CV:	Curriculum Vitae
CV:	Curriculum Vitae
EOI:	Expression of Interest
EoI:	Expressions of Interest
GRN:	Goods Receipt Note
ICB:	International Competitive Bidding
ICT:	Information Communication Technology
IFB:	Invitation for Bids
ITB:	Instructions to Bidders
ITC:	Information to Consultants
HTB:	Hospital Tender Board
ITT:	Invitation to tender
KRAs:	Key Results Areas
LOI:	Letter of Invitation
NCB:	National Competitive Bidding
NGOs:	Non-Governmental Organizations
OCB:	Open Competitive Bidding
PE:	Procuring Entity
PO:	Purchase Order
PP:	Public Procurement
PPE:	Property, Plant, and Equipment
RFP:	Request for Proposal
RPPA:	Rwanda Public Procurement Authority
RWF:	Rwanda Francs
SBDs:	Standard Bidding Documents
SIGs:	Special Interest Groups
SLA:	Service Level Agreement
SOW:	Scope of Works
TD:	Tender Document
TN:	Tender Notice
ToR:	Terms of Reference
VfM:	Value for Money

DEFINITION OF TERMS AND PHRASES

Terms	Definition:
Conflict of interest:	A situation in which a person is in a position to derive personal benefit from actions or decisions made in their official capacity.
Consulting Services:	Activities requiring external technical and professional expertise beyond King Faisal Hospital internal capacity, such as advisory and review services, research, web and other design, management and related services, and technical or special studies provided by firms/ companies.
Day:	Means calendar day.
Due diligence:	The process of performing background checks of King Faisal Hospital's suppliers and ensuring the suppliers are of good standing.
Ethical conduct:	Ethical conduct refers to the conduct of individuals and consultants in line with organizational and moral principles and applies to all aspects of business conduct.
General Services:	Services such as repair and maintenance of equipment/furniture transport services, media advertisements, services, and other similar service.
Goods:	All items, supplies, materials, equipment and furniture, computer, IT and telecommunications equipment; software, office supplies; goods and equipment needed in the project implementation (e.g., Printed materials, and other similar equipment and materials. Or Tangible products that do not need specialization to deliver. These include but are not limited to stationery; supplies; computer equipment etc.
Hospital Tender Board (HTB):	A committee appointed by the DCEO in charge of evaluation of tenders and recommendation for procurement tenders' award;
Non-consulting services:	Services which are not consulting services in nature. These include but are not limited to: cleaning services; security services; conferencing and catering services; vehicle maintenance, etc.
Pre-qualification documents:	Means documents issued by the procurement expert that set out the terms and conditions of the pre-qualification proceedings;
Prequalification:	The process of shortlisting suppliers per category based on

Terms	Definition
	King Faisal Hospital's procurement needs or the procedure set out in this Manual to identify, prior to solicitation, suppliers or contractors that are qualified;
Pre-selection documents:	Means documents issued by the procurement expert setting out the terms and conditions of the pre-selection proceedings;
Pre-selection:	Means the procedure set out in this manual to identify, prior to solicitation, a limited number of suppliers or contractors that best meet the qualification criteria for the procurement concerned;
Procurement Method:	This refers to the process followed when acquiring goods, services or works.
Procurement Planning:	A decision-making process on defining the strategy for carrying out a procurement i.e., identification of goods, services or works to be procured, reasons for procuring, when and how to procure. The strategy arrived at is documented as a procurement plan.
Procurement:	Means the acquisition of goods, construction or services by King Faisal Hospital.
Proposal:	Means the Technical Proposal and the Financial Proposal.
Request for Proposal (RFP):	Means the document to be prepared by the King Faisal Hospital for the selection of consultants, based on the Standard Request for Proposals.
Services:	Intellectual and non-intellectual services not covered under goods and works.
Specialized services:	These are procurements that are complex in nature and require a high level of expertise and qualification. These include but are not limited to information system development, strategy development etc.
Standard Request for Proposal (SRFP):	Tender documents used to solicit proposals from bidders. These are mainly used for procurement of consulting services and specialized goods procurements.
Standard Request for Quotations (SRFQ):	Tender documents used to solicit quotations from bidders. These are mainly used for procurement of goods, works, and non-consulting services.
Supplier:	This refers to the bidder of Goods and provider of service(s).
Terms of Reference:	These are requirements that apply to a service contract which accurately define the characteristics of the service required with regard to the purpose for which it is

Terms	Definition
	intended and sets out conformity assessment procedures prescribed by a contracting authority.
Thresholds:	The minimum and maximum approval levels.
Works:	Construction services.

CHAPTER 1: GENERAL PROVISIONS

1.0 Introduction

King Faisal Hospital is a multi-specialty quaternary Hospital with a mandate to provide specialized health care in East and Central Africa. For the last 22 years, King Faisal Hospital has concentrated on clinical excellence, efficiency, and quality in health service delivery. In an effort to avail the best medical care, it has assembled some of the finest medical talents, including physicians, surgeons, nursing professionals, and technicians, enriched with international experience. Some available specialties include Neurosurgery, Cardio-thoracic surgery, Orthopedic Surgery, Cardiology, Nephrology, Pediatrics and its subspecialties, Radiology& Imaging, Pathology, and other medical subspecialties.

Among the primary drivers of change, the hospital intends to harness its human capital, modern technology, and research capacity to improve patients' expectations and risk mitigation strategies. King Faisal Hospital also intends to better its corporate communication, rewards, and recognition, staff participation in designing processes and systems, and many other aspects of the work environment that contribute to a patient-centered culture.

1.1 Purpose and Objectives

The purpose of this updated Manual is to guide King Faisal Hospital staff, especially those undertaking the Procurement Function, of the required policies which shall be observed in carrying out procurement of goods, works and services.

a) **Goods:** All items, supplies, materials, equipment and furniture, computer, IT and telecommunications equipment; software, office supplies; goods and clinical/hospital supplies as well as related equipment e.g., printed materials, office stationery and clinical consumables, hospital beds to specialized equipment like CT scans and MRI machines or related equipment.

b) **Services:** Intellectual and non-intellectual services not covered under goods and works. These can be consultancy services and non-consultancy services

- Non-consultancy Services: Services such as repair and maintenance of equipment/furniture transport services, media advertisements, services, and other similar service.
- **Consultancy Services:** refers to activities or services of an intellectual or of immaterial nature. It refers to services which require professional skills in the execution of assignments with non-physical output, such as advisory, review services, research studies, web and other design, management and related services, and technical or special studies provided by individual consultants, consulting firms and other specialists.

c) **Works:** means all work associated with the construction, reconstruction, demolition, repair or renovation of a building, structure or works, such as site preparation, excavation, erection, building, installation of equipment or materials, decoration and finishing, as well as services incidental to works such as drilling, mapping, satellite photography, seismic investigations and similar services provided pursuant to the procurement contract, if the value of those related services does not exceed that of the works itself.

The aim of this updated Procurement Procedures Manual (PPM) leads to provide straight forward with a guidance to be followed when conducting procurement using internal, public, and developmental partner funds. The procedures designed have to be simple to use and understandable by breaking the overall procurement process down into a series of steps. This procedure manual aims to ensure that King Faisal Hospital procurement processes are carried out in the most efficient, effective and ethical manner.

The purpose of this updated manual is to assist King Faisal Hospital to;

- Provide information on the policies, principles, and approaches which should be observed in carrying out procurement of goods, services (including consultancy services) and works; and
- Provide fundamental guidance on international best practices and standards in conducting procurement of goods, services, and works.

1.2 Basis for updating the manual

This manual, was updated on the basis of the existing manual as compared to the current trends in procurement, the inauguration of Law no: 031/22 of 22/11/2022, governing public procurement and Ministerial order determining the award of tenders in State owned companies and other institutions, as well as emerging gaps identified audit process and recommended by the BoD.

1.3 Policy Manual Maintenance and Amendments

The Board establishes and can modify, all procurement policies and procedures. DCEO, directly manages and administers the procurement affairs of King Faisal Hospital; makes recommendations for change in policies to the Board and communicates approved changes to staff. The procurement policy and procedures manual may be regularly updated as specified by the Board.

DCEO provides oversight on the execution of this updated Procurement Procedure Manual, in accordance with the policies and decisions of the Board of Directors and/or its committees. He/she may delegate this authority unless expressly prohibited by the Board. The Procurement Unit, reporting to the DCEO, is responsible for clarifying any matters in this manual related to procurement policy and procedures and for responding to any related inquiries from King Faisal Hospital staff.

1.4 Procurement Overview and Scope

Procurement is the overall process of acquiring goods, civil works and services *(consultancy and non-consultancy services)* which includes all activities from the identification of needs, selection and solicitation of sources, preparation and award of a contract, and all phases of contract administration through the end of a services' contract or the useful life of an asset.

1.4.1 The scope of the policy guidelines

This Updated Procurement procedure manual shall apply to all King Faisal Hospital procurement processes and activities. The principles and processes outlined in this policy and procedures manual apply to:

a. Procurement of works, including hospital wards, general construction
b. Procurement of goods (including drugs, consumables and capital equipment).
c. Procurement of professional consultancy services;
d. Procurement of other services such as printing, equipment maintenance, vehicle rental and cleaning; and
e. Grants related procurements that are initiated by King Faisal Hospital and which King Faisal Hospital has overall control and responsibility e.g., Consultancy services to support research related projects.

1.5 Compliance to Development partner's Guidelines

Whilst King Faisal Hospital has ensured that this manual is aligned with procurement leading practices, where applicable, DCEO shall ensure compliance with development partner's requirements in its procurement activities. King Faisal Hospital has put in place a mechanism to monitor compliance with donor agreement requirements and provisions of this manual. All development partner's funded procurements, the development partner shall be consulted or informed in writing periodically about procurement planning, tender evaluation, contract signing, cancellation or termination and contract execution in addition to their specific requirements.

1.5.1 Special Cooperation Arrangements

For shared projects or development partner funded or project funded by regional or international organization in cooperation with King Faisal Hospital, procurement is required to follow the procurement rules of the development partner or funding agency, those rules shall prevail over the procedures in this manual to the extent that there is no conflict and King Faisal Hospital shall cooperate with funding organization or agency to meet their procurement requirements, provided that the regulations and rules of those organizations are the ones to be applied to concerned procurement.

However, the procedures in this manual shall continue to apply in all areas where they are consistent with the rules of the development partner. Where any approval or "no objection" is required from a donor or funding agency, the Deputy Chief Executive Officer's approval, and any other applicable approvals specified in this manual, shall be obtained, prior to obtaining donor approval.

King Faisal Hospital may, as appropriate, enter into agreements for such purposes. Such cooperation may include carrying out common procurement actions together or the organization entering into a contract relying on a procurement decision of the organization to carry out procurement activities on behalf of King Faisal Hospital, and vice versa.

King Faisal Hospital may, to the extent authorized by the DCEO, cooperate with a government, non-governmental organization, development partners or other international organization in respect of procurement activities and, as appropriate, enter into agreements for such purposes.

1.6 General Procurement Principles

King Faisal Hospital is committed to maximizing the impact of funds spent to procure goods, works, and services. Value for money (VfM) is the effective, efficient, and economic use of resources, which requires the evaluation of relevant costs and benefits, along with an assessment of risks, and of non-price attributes and/or life cycle costs, as appropriate. Price alone may not necessarily represent VfM.

Below are eight (8) principles that guide King Faisal Hospital in achieving value for money in the entire procurement process. These principles underlie proficient procurement and govern implementation of this manual:

(1) Transparency

(2) Competition

(3) Economy

(4) Professionalism

(5) Fairness and inclusiveness

(6) Efficiency and Sustainability

(7) Value for money and fast work

(8) Accountability

1.6.1 Implementing documents and formats

King Faisal Hospital shall establish formats, templates, standards solicitation documents for the use in the implementation of this Manual. They shall comprise at least the following:

1) Annual Procurement Plan;
2) Purchase Requisition Form;
3) Invitation to Tender;
4) Tender Receipt Form;
5) Request for Quotation (RFQ)
6) Request for Proposal (RFP)
7) Standard Pre-qualification Document; and
8) Evaluation Report Template.

1.7 Communications in Procurement

a) Any document, notification, decision or other information generated in the course of procurement shall be in a form that provides a record of the content of the information and that is accessible to be usable for subsequent reference.
b) Verbal solicitation and communication of information between suppliers, contractors or consultants and King Faisal Hospital referred to this Manual may be made by means that do not provide a record of the content of the information, on the condition that immediately thereafter confirmation of the communication is given to the recipient of the communication in a form that provides a record of the content of the information and that is accessible so as to be usable for subsequent reference.
c) King Faisal Hospital shall put in place suitable measures to secure the authenticity, integrity and confidentiality of the procurement information.

1.8 Documentary record of procurement proceedings

At the end of each procurement proceedings, the Procuring department shall keep file and or electronic records of all procurement proceedings made within

King Faisal Hospital each financial year and copies of all procurement records. Information to maintain shall cover information identifying consultants, suppliers or contractors, date of the contract award, brief description of the subject matter of the procurement, the value of the contract, and the detailed records of the procurement proceedings including reasons and circumstances of use of less competitive method if used; summary of any requests for clarification of the pre-qualification or pre-selection documents, if any, or of the solicitation documents and the responses thereto, as well as a summary of any modifications to those documents; information about complaint and standstill period and information on contract management.

1.9 Procurement Manual Review

This Manual shall be regularly reviewed, and when necessary to take account of changes in national policies and legislations, changes in King Faisal Hospital's policies or to allow implementation of new mission or commitment towards partners, unless a change is triggered through audit recommendations or reorganization within King Faisal Hospital necessitating radical changes in procurement processes. When revisions to the manual are made, the replaced sections of the manual shall be repealed.

2.0 Use of electronic system in procurement

King Faisal Hospital, shall ensure that all procurement processes, are done through electronic procurement system or request for non-objection from the Ministry in charge of Procurement for off-line tenders

CHAPTER 2: PROCUREMENT ORGANISATION, ROLES AND RESPONSIBILITIES

2.1 Who does what?

The section describes the institutional framework of the procurement system, explaining the different roles and responsibilities of each player involved in the procurement process. The main players involved in procurement process are the following:

Board of Directors;

CEO & DCEO;

Hospital Tender Board;

Procurement Unit & User department as well as Bidders and Providers

For accountability purposes, all players shall be accountable for their actions and/or inactions by complying with the procedures laid out in this manual. Good procurement procedures hold its practitioners responsible for enforcing and obeying the rules. It makes them subject to challenge and to sanction, if appropriate, for neglecting or bending those procedures.

2.2 Duties and responsibilities of the Board of Directors

The Board of Directors of King Faisal Hospital Rwanda shall be responsible for approving the annual procurement plans, the Procurement manual and their revisions. It also approves contracts with value exceeding Rwf 4 Billion, Rwf 2 Billion, Rwf 300 Million, Rwf 150 Million respectively for works, goods, Consultancy services by Companies, and Consultancy Services by Individuals. For medications and consumables, the Board will approve contracts exceeding Rwf 3 Billion.

2.3 Duties and responsibilities of the DCEO

The DCEO shall be responsible of the procurement management and compliance for all aspects of procurement for King Faisal Hospital. The DCEO, shall have the following responsibilities in respect to the procurement management:

a) To ensure that the procurement activities comply with these manual and other legal instruments and requirement of the Government Owned Companies applicable to King Faisal Hospital.
b) To ensure adherence to the King Faisal Hospital policies as well as procurement reporting and other instructions applicable to their areas of responsibility.
c) To ensure the integrity of information, for both internal and external purposes; and
d) To ensure that the internal control structures are operating effectively and are constantly monitored; to appoint all members of the Hospital Tender Board.
e) To appoint and dismiss members of the Hospital Tender Board.
f) To approve solicitation documents.
g) To approve the procurement evaluation reports and contract award.

h) To sign the contract.
i) To appoint a contract/project manager.
j) To provide overall management of the contract.

Before signing a contract or before any other decision with legal implications in the procurement process, the DCEO, shall first seek for legal opinion on the matter from the Legal advisor. As the Chief Budget Manager of King Faisal Hospital, the DCEO shall be the ultimate authorizing officer of procurements involving significant thresholds. From time to time, the DCEO, shall update the Board of Directors on the status of the prevailing procurements and seek approval whenever deviation from the previous method of procurement is involved.

2.4 Procurement Unit / Staff

The Procurement Unit / Staff shall have the overall responsibility of providing oversight and playing an advisory role in procurement operations. Specifically, the procurement unit shall have the following responsibilities:

a) Coordinate development of the annual procurement plan.
b) The Procurement Staff shall be responsible for the implementation of the procurement plan, processes and activities in a coordinated manner while also ensuring compliance with company objectives.
c) Receive the procurement requisition and supporting documents from user departments or originating department.
d) Verify the current availability of sufficient funds in the budget heading and that the requirement is defined in the Annual Procurement Plan.
e) Ensure that the specifications for goods or terms of reference for services are suitable for the need and are of an appropriate quality.
f) Ensure the specifications are detailed, precise and generic without reference to the trademarks or products of a specific supplier; brand names shall only be used if essential in which case a full justification must be given, or the words "or equivalent" added.
g) Determine the procurement method to be used; if an alternative method to that which would normally be used is recommended, prepare a full justification.
h) Prepare the draft solicitation and contract documents to ensure that all necessary conditions are incorporated in accordance with the appropriate Standard Solicitation documents.
i) Create employee awareness and training programs concerning any new procurement policies before they are rolled out and procurement risks mitigation strategies.
j) Prepare the advertisement or invitation to bidders or request for expression of interest and make arrangements for the sale of the solicitation documents.

k) Receipt and safe keeping of bids and other procurement records.
l) Organize evaluation and serve the Hospital Tender Board for this purpose.
m) Seek approvals for award recommendations from competent authorities and prepare notification of contract award.
n) Pro-actively manage and develop the bidder base in collaboration with the user units as well as identifying and managing any supply risks or value add opportunities.
o) Ensuring adequate contract execution in collaboration with the user department.
p) Procurement unit may outsource any of the above activities to a consultant(s) in the execution of its roles and responsibilities. However, the Unit shall maintain the overall responsibility for such outsourced activities.
q) Perform any other activity implied by this updated manual.

2.5 Hospital Tender Board (HTB)

King Faisal Hospital shall be required to put in place a Hospital Tender Board comprising of seven members. The appointments shall be for two years renewable only once. More than half (1/2) of the members shall not be allowed to be on the committee for two consecutive terms of office. Such a committee shall be appointed by the DCEO in consultation with the Hospital Chief Executive Officer

The DCEO may change one member or the entire committee if there are relevant reasons to do so. Depending on the volume of tenders in the procuring entity, the Chief Budget Manager may appoint more than one public tender committee upon authorization by the Board of directors of the procuring entity.

In case a tender requires expertise that is not available within the procuring entity, the Board of directors may establish an ad hoc public tender committee upon request of the Chief Budget Manager of the procuring entity.

2.5.1 Appointment of the Hospital Tender Board

The HTB should have a Chairperson, Vice Chairperson and a Secretary. The Procurement Director is a permanent member of the HTB and acts as its secretary. Tender Board can be comprised of more than one Procurement staff but should not constitute the majority.

2.5.2 The Hospital Tender Board committee term of office and replacement of members

King Faisal Hospital Rwanda shall be required to put in place a Hospital Tender Board comprising of seven members. The appointment shall be for two years renewable only once. More than half (1/2) of the members shall not be allowed to be on the committee for two consecutive terms of office. Such a committee shall be appointed by the DCEO in consultation with the Hospital Chief Executive Officer.

After an interval of one term of office, a former member of the HTB committee may again be appointed to the committee

The Chairperson of the HTB coordinates the whole process of the evaluation of bids and must act with impartiality and transparency. Members of the HTB taking decisions in relation to the evaluation of bids are jointly liable for the consequences that may arise from the decisions taken by the committee.

For evaluations that include panelists who are not King Faisal Hospital staff, these panelists should not form the majority of the membership of the HTB. These outsourced Specialists shall provide technical support in bid evaluation but shall not assume management roles. They shall perform an advisory role, but the ultimate decision of the procurement shall be made by the HTB with their guidance. The HTB makes a report on the bid evaluation comprising of the evaluation process and comparison of bids. The report shall be signed by all members of the HTB present.

2.5.3 The following officials shall not be allowed to be members of the HTB.

The following officials are not allowed to be members of the HTB committee:

i. The chief executive officer and his/her assistants and Advisors
ii. The Deputy Chief Executive Officer and his/her assistants and Advisors
iii. Finance division
iv. The Internal Auditor;
v. The Legal Advisor;
vi. The logistics officers
vii. Pharmacy Directorate

2.5.4 Duties and responsibilities of the HTB

The Hospital tender board shall be appointed by senior management in consultation with the Head of procurement unit. HTB shall be the central organ in procurement proceedings with the following responsibilities:

- Review, approval as well as amendment of bid documents before or after publication
- Opening of bids;
- Evaluating the bids;
- Making award recommendation and decision,
- Approval of amendments to existing contracts
- Approval of contract renewals

2.5.5 Meetings of the HTB, invitation and decision making

a) The invitation to attend HTB meetings shall be prepared by the secretary of the HTB and sent through email or other appropriate means to all the members. The invitation shall clearly specify the venue, agenda, and time of the meeting. Meeting intervals shall vary depending on the nature of business and it shall be imperative to keep records of meetings.

b) The quorum of the HTB shall be two-thirds (2/3) of the total number of members. Unless in the case of official absence, delegation of powers by a member of the HTB shall not be acceptable.

c) The decisions of the HTB shall be made by consensus, but where consensus is not reached then the majority decision shall prevail.

d) In case a member of the HTB does not vote for the decision taken, his or her opinion is clarified in the evaluation report which he or she must also sign.

e) The recommendation made by the HTB is submitted to the DCEO for approval. The latter may request, in writing, the HTB to make corrections or adjustments to the evaluation report if any, and he or she takes a final decision on the report before signing the contract.

2.5.6 Allowances for the Hospital Tender Committee

King Faisal Hospital Management shall determine and give the Hospital Tender Board members a monthly allowance, net of taxes, whose amount shall be approved by the Board of Directors. At the end of every fiscal year, the procurement unit shall prepare and present a report to Human Resources office, as justification for the next fiscal year HTB basis of allowance.

2.6 User Departments or Units

The User Departments / Units shall consist of individual functional units within King Faisal Hospital; who shall require the goods, services or works in order for them to undertake their operational duties. User Units / Departments shall have the following responsibilities:

a) Procurement planning - ensure they adequately define, justify and budget for their procurement needs, taking into account King Faisal Hospital's policy requirements;
b) Alignment of needs with the organizational objectives and compliance to relevant legal and donor obligations relating to the goods, services or works to be purchased, e.g., environmental/health and safety legislation;
c) Prepare detailed terms of references and technical specifications for goods, services, and works;
d) Initiating procurement by raising purchase requisitions and forwarding them to the procurement unit;
e) Provide technical expertise and input to support the bid assessment or evaluation processes with appropriate recommendations;
f) Supervise and monitor contract implementation as well as approval of deliverables and update the Head of Procurement / Procurement Team in a timely manner on any contract implementation challenges;
g) Participate in the verification of goods delivered, services consumed, works executed and bidder performance evaluation; and
h) Approve and follow up on payment of invoices to suppliers, contractors or consultants in respect of the services performed or goods purchased if in conformity with the terms of supply.
i) User units shall not directly deal with bidders or potential bidders during the procurement process without the full consent and involvement of the Head of Procurement / Procurement Team.
j) Conducting markets survey to determine the estimate prices before submitting requisitions to Procurement Unit for tender process.

2.7 Finance Department / Unit

The Finance Unit shall manage the budgeting process, ensuring that items to be procured are budgeted for. The Finance department or unit shall also:

a) Review purchase requisitions to ensure availability of funds for the items to be procured;
b) Receive and undertake payment processing for all bidder invoices and/or payment requests related to supply of goods or provision of services or works;

c) Monitor procurement spending to ensure compliance with the annual budget.

2.8 Bidders and Providers

Bidders and Providers are an essential part of any procurement system and this manual was drafted with the objective of giving bidders fair opportunities to participate in King Faisal Hospital procurement activities, as well as obtaining value for money in the use of public funds.

King Faisal Hospital shall operate a bidder register, recording which companies provide works, goods or supplies and services and their performance record. This shall be a source of reference while developing a shortlist of bidders.

CHAPTER 3: PRE-PROCUREMENT ACTIVITIES

3.1 Introduction

Procurement is not a one-off activity that can be conducted in a random way. In order to have an efficient and effective procurement process, specific steps need to be followed. In that way the organization shall buy the items needed based on actual organizational needs through a transparent process. All stages / steps of the procurement cycle need to be addressed and have processes linked to them. This enables the procurement team to be efficient in their work and ensures that everyone is working to the same standard.

3.2 Procurement Planning

Procurement Planning;

- User Department Procurement Plans;
- Tracking and communication of the Procurement Plan;
- Revision of the procurement plan

Bidder Registration and Management;

- Prequalification
- Shortlisting of EOIs

Bidder Assessment Procedure

- Key performance evaluation indicators
- Bidder's performance measures
- Other Compliance Requirements

Sound planning and coordination of procurement is an important aspect of an economic and efficient procurement function. King Faisal Hospital shall integrate procurement planning into their annual budgetary expenditure framework. All approved User Departments budgets should be supported by procurement plans. Refer to Appendix 1 for the annual procurement plan template.

The procurement plan shall ensure that all User departments procurement requirements are defined, assessed for budgetary allocation, and as appropriate included in the consolidated procurement plan for the DCEO's approval or for subsequent revision if the need arises. The User departments shall plan all its procurement needs in a rational manner and in particular shall:

a) Avoid emergency or single source procurement wherever possible;

b) Aggregate its requirements wherever possible, to obtain value for money and reduce procurement costs;
c) Make use of framework contracts whenever appropriate to provide an efficient, cost-effective, and flexible means of procuring services, supplies or works that are required continuously or repeatedly over a set period of time; and
d) Not split or fragment procurement requirements to override approval requirements.

3.2.1 User Department Procurement Plans

The process shall commence with a needs assessment exercise which is to be performed by each unit. The procurement plan shall cover a period of one (1) financial year. The outcome of the needs assessment exercise shall be an approved unit's procurement plan. The User Unit's procurement planning process shall follow the following procedure:

i. The Head of Procurement shall email all Heads of Departments/Units at King Faisal Hospital informing them of the need to commence the procurement planning exercise by 15 April every year. The email shall communicate the following: Template to use when populating the unit's procurement plan; and the Deadline to submit the first duly filled unit procurement plan to the Procurement Unit for review. All User Units shall be required to submit their procurement plans by 15 May every year.
ii. The User Units shall submit the draft unitary procurement plans together with the preliminary terms of reference and/or specifications in the case of goods.
iii. The Procurement Unit shall review the draft unitary procurement plans for completeness, accuracy, and compliance with this manual.
iv. Where comments are received from the Head of Procurement, the Head of the User Unit, or their designee, shall address these comments and submit the final procurement plan for the unit within a week to procurement for review and consolidation.
v. The procurement unit shall present the revised procurement plans to DCEO for final approval by 1st July every year.

3.2.2 Tracking and communication of the Procurement Plan

The final approved procurement plan shall be managed by the Procurement Unit. However, each User Unit shall be in charge of tracking and implementing their procurement plan throughout the financial year. A final and approved procurement plan, shall be published on the KFH's website.

3.2.3 Revision of the procurement plan

The procurement plan shall be subject to revision in the second and third quarter of the year. To revise the procurement plan, the following steps can be taken:

a) Conduct a needs assessment: A needs assessment should be carried out to identify the King Faisal Hospital's current and future procurement requirements. This assessment shall help to identify areas where the procurement plan needs to be updated or revised.
b) Review the current procurement plan: The current or existing procurement plan shall be reviewed to identify areas that require revision. This review should consider the procurement categories, procurement thresholds, and procurement methods used in the current plan.
c) Consult stakeholders: Consultation with stakeholders such as user department, donor agencies, and suppliers should be conducted to obtain feedback on the current procurement plan and identify areas that require revision.
d) Develop a revised procurement plan: Based on the needs assessment, review of the current plan, and stakeholder feedback, a revised procurement plan should be developed. The plan shall clearly outline the procurement categories, thresholds, and methods to be used.
e) Obtain approval: The revised procurement plan shall be submitted for approval to the DCEO.
f) Communicate the revised plan: Once the plan is approved, it should be communicated to all stakeholders to ensure they are aware of the changes and can adjust their procurement strategies accordingly.
g) Monitor and evaluate the revised plan: Regular monitoring and evaluation of the revised procurement plan should be conducted to ensure it is achieving its objectives and to identify any areas that require further revision.
h) Obtain approval and supporting document for an extra tender done after revision.

3.3 Market Survey / Research

When determining what to buy, estimating costs, and before developing selection and award criteria in a procurement procedure, it is helpful for the buyer(s) to know and understand the market. Market survey analysis is to be carried out on a need basis and shall be initiated by the Head of beneficiary department. The Procurement Unit shall refer to the results of the market survey to determine the need to prequalify suitable bidders and define market approach. HTB substantially provide further guidance of the market survey received from the user department

3.4 Bidder Registration and Management

King Faisal Hospital shall refer on the available company or bidder's categorization from the RPPA's or any other suitable data base. The categorization of procurement needs shall form the basis of bidder base gaps analysis and trigger the development of expressions of interest (EOIs) request or request for prequalification.

3.4.1 Prequalification

All suppliers and individual consultants for routine procurements shall be pre-qualified to ensure that they have the resources, capacity and reach to supply the goods, services or works for which they are to be contracted. Prequalification is not a form of selective bidding.

Prequalification of bidders shall be performed every two years to ensure King Faisal Hospital continuously derives value from its bidders. In addition, the Procurement Unit should seek additional prospective bidders on an on-going basis for prequalification to ensure maintenance of an optimal base of bidders and servicing of emerging organizational needs.

The User unit may also request with justification, addition of more bidders/consultants on an on-going basis. The Procurement Unit shall review the request and supporting documentation and add them to the prequalified list. On an annual basis, the Procurement Unit shall prepare a report of the additional bidders prequalified for submission to the HTB.

3.4.1.1 Prequalification Criteria

The prequalification criteria, which shall be specified in the prequalification document, shall be based entirely upon the financial and technical capability of prospective bidders to perform the particular contract satisfactorily, taking into account the bidders':

a. Availability of statutory documents (company registration certificate, RSSB clearance, Tax clearance);
b. Past experience on similar goods / works / services. For new entrants, this shall not apply
c. Capabilities with respect to personnel, equipment, and facilities (where applicable);
d. Qualifications based on financial capacity; and
e. Compliance with King Faisal Hospital and partner eligibility requirements.

3.4.1.2 List of prequalified of bidders

The Procurement Unit shall maintain the database of all bidders, consultants, individual consultants prequalified by King Faisal Hospital. On a regular basis, the Procurement Unit shall publish the requirements for prequalification based on the emerging hospital's needs.

Of importance to note is that prequalification of King Faisal Hospital ex-staff, retirees and their spouses'/ family members before a two-year break in service from the date of agreed separation is strongly prohibited. In the event of any exceptional circumstances, approval MUST be sought from the DCEO.

3.4.2 Shortlisting of EOIs

King Faisal Hospital shall call for expressions of interest by publishing a notice on website and online tender portal in order to establish a short list of bidders. A tender for consulting services whose value does not exceed Fifty million Rwandan francs (50,000,000 FRW) is awarded without calling for the expression of interest.

King Faisal Hospital shall establish a shortlist comprised of bidders with capacity to perform the required consultancy services. The short list must have as many consultants as possible but not less than three (3). Consultant may be individual or a firm. EOI may be addressed to either individual consultants or firms, but not both under the same tender.

A tender whose value is above fifty million Rwandan francs (50,000,000 FRW) is awarded by calling for expression of interest. For national tenders, the expression of interest is done within fourteen (14) days from the date of calling for EOI. For international tenders, expression of interest is done within twenty-one (21) days from the date of the call for expression of interest. The notice of expression of interest must be done online and set out the following:

- the name and address of King Faisal Hospital;
- a brief description of consultancy services to be provided;
- the qualification necessary to be invited to submit a bid;
- indication of time for submission of the documents related to the expression of interest

The evaluation of EOIs shall be categorized as below based on the technical capabilities of the bidders. In the table below, columns C and D represent an example of a scoring scale system. Refer to Appendix 2 for the notice of expression of interest template.

Table 1: Evaluation Matrix

A: Evaluated criteria or sub criteria	B. Supporting evidence	C. Example scoring scale system	D. Example For a subcategory with a total score of 10 points
Excellent	Requirements submitted and supported by excellent evidence of ability to support and exceed contract requirements	100%	10
Good	Requirements submitted and supported by good evidence of ability to support and exceed contract requirements	90%	9
Satisfactory	Requirements submitted and supported by satisfactory evidence of the ability to support contract requirements	70%	7
Poor	Requirements submitted and supported by marginally acceptable or weak evidence of ability to support contract requirements (Clarification may be required)	40%	4
Very poor	Requirements submitted but not supported by evidence to demonstrate the ability to comply with contract requirements	10%	1
No submission	Information has not been submitted or is unacceptable	0%	

Only bidders who shall attain a rating of satisfactory and above shall be prequalified or shortlisted.

3.4.2.1 Procedures for Prequalification or EOI

The prequalification process shall follow the following procedures:

Step 1: Development and publication of a general procurement notice

Every three years in January, the procurement team shall circulate the categorization list to all Heads of Departments for their review. The Heads of Departments shall have two weeks to review the categorization of goods and services to ensure their needs have been included.

The User Units shall develop the preliminary specifications, terms of references, statement of works or supplies specifications to facilitate development of the EOI documents. Prior to publishing the general procurement notice, the procurement team and selected User Units representatives shall develop prequalification evaluation criteria and share these with the individuals selected to participate in the Hospital Tender Board (HTB).

For individual consultants, King Faisal Hospital shall publish a list of required technical experts and invite the potential candidates to submit their detailed curriculum vitae highlighting their general qualification (education and professional), registration status with applicable professional bodies, relevant prior experience and indicative daily/hourly rates.

All bidders shall be required to submit their EOIs through the procurement email account or the mode of submission documented in the EOI. The bidders shall be required to indicate the category of goods, services or works that they would like to be prequalified for. All EOIs received through any other unapproved channels shall automatically be disqualified.

Step 2: Receipt and Evaluation of Expressions of Interest

Within fourteen (14) calendar days, the Head of Procurement or their designee shall halt receipt of any more EOIs and commence the evaluation process. The Procurement Unit shall categorize all EOIs based on the preapproved categorization matrix and assign evaluation panels for each category. The HTB shall be developed in line with guidelines provided under section 2.5 of this manual.

Step 3: Shortlisting

The HTB and Procurement unit shall shortlist a minimum three (3) bidders and a maximum of ten (10) bidders per category, depending on the category and bidders available to meet the specific category needs. One bidder may be shortlisted for more than one category; however, the bidder has to present prequalification application for each interested category.

All bidders shortlisted must go through King Faisal Hospital's due diligence process to ensure they are of good ethical standing and comply with various laws, regulations and donor guidelines. The Procurement Unit shall consolidate all shortlisted bidders and present the proposed list of prequalified bidders to the HTB for review and approval.

Step 4: Review and Approval of Prequalified List
The HTB shall review and approve the proposed list of prequalified suppliers. The Head of Procurement shall share the final and approved list of prequalified bidders with all King Faisal Hospital Users.

3.5 Bidder Assessment Procedure

King Faisal Hospital shall strategically plan for and manage, all interactions with providers that supply goods and works, non-consulting services and consultancy services in order to establish joint and mutually beneficial relationships and maximize the value of those interactions.

To achieve this, King Faisal Hospital shall develop a Bidder Relationship Management (VRM) plan that identifies the hospital's strategic suppliers and the means by which King Faisal Hospital can manage and evaluate their performance and engage with them to realize further value and savings.

3.5.1 Key performance evaluation indicators

a. Performance evaluation and measurement shall focus on establishing to what extent the user unit(s) are satisfied with the services provided by the bidders.
b. This evaluation shall take into account the quality of delivery and deliverables by the bidder, adherence to the contractual timelines and provision of after-sales services where applicable.
c. The evaluation should highlight the different factors that may be causing problems and subsequently focus on seeking and offering solutions to the identified problems in order to continuously improve performance.

3.5.2 Bidder's performance measures

The bidder's actual performance should be evaluated to establish their capability against performance indicators covered in the Service Level Agreement (SLA). The performance indicators against which the supplier's performance should be measured include:

i. Cost - This includes price and other costs;
ii. Quality - Conformance with the set specifications, attainment of service levels, quality improvement initiatives;
iii. Delivery - The timely performance of activities in the planned schedule within the agreed timeframes; and
iv. Service - Responsiveness to queries, provision of maintenance and servicing services, etc.

v. Responsiveness – the ability to service current and emerging Rwanda King Faisal Hospital needs.

3.5.3 Other Compliance Requirements

During the execution of the procurement contract, the successful bidder and his or her staff comply with the following:

i. laws and regulations in force;
ii. the tender or procurement documents;
iii. Operational instructions of the supervising official.

If the successful bidder realizes that the operational instructions, he or she received are contrary to the provisions of the procurement contract, he or she presents his or her grievances in writing to the DCEO within seven (7) days from the date of receiving such instructions. King Faisal Hospital shall not be held responsible or prosecuted for any breach of any laws and regulations by the successful bidder or his or her staff.

CHAPTER 4: PROCUREMENT METHODS

4.1 Introduction

Procurement methods are the procedures used by King Faisal Hospital to acquire goods or supplies, services and works. These methods can be competitive and non-competitive. There's a preference for using competitive methods of procurement given that they tend to promote transparency, economy and efficiency, and limit favoritism.

4.1.1 Criteria for Selecting a Procurement Methods

The procurement method is dependent upon several factors, including, but not limited to: -

a. Estimated value of good, works or service being procured;
b. The circumstances pertaining to the procurement
c. Type and complexity of goods or supplies, works or service being procured;
d. Current market structure; and
e. Appropriate method advised by the market analysis.

Depending on the complexity and nature of the requirement and the value of the supplies/works/ services to be procured, the following procurement methods shall be used: -

a) Open Competitive Bidding;
b) Prequalification;
c) Restricted tendering;
d) Request for quotations;
e) Single-source;
f) Procurement or direct contracting;
g) Simplified methods;
h) Force account;
i) Community participation;
j) Two-stage tendering;
k) Reverse auctioning;
l) Turnkey;
m) Competitive dialogue;
n) Design-and-build;
o) Pre-financing.
p) Participation of Member or Subsidiary Entity

4.1.2 Open Competitive Bidding

Open competitive bidding is a procurement method which is open to participation on equal terms by all providers through advertisement of the procurement opportunity. Open bidding can be open international competitive bidding or domestic / national competitive bidding.

Open competitive bidding is intended to provide all eligible bidders adequate and timely notification of King Faisal Hospital's requirements and to provide them with equal and fair opportunity to compete. All interested bidders can submit tenders and all tenders must be considered without any prior selection process. The selection and evaluation are carried out after the bids have been submitted by interested bidders.

This approach can be used for goods, works and services where suitable bidders have not been identified and prequalified; and or when there is need to open competition. Since tendering is open to all interested candidates, including ones from across geographies, this method promotes competition, resulting in better value for money to King Faisal Hospital.

4.1.2.1 Use of National Competitive Bidding

1. **The procurement is of high value** and must be openly competed among all eligible **national bidders**.
2. **Goods, services, or works** required can **reasonably be supplied by national bidders** (i.e., there's enough capacity and competition within Rwanda).
3. The estimated value of the procurement exceeds the threshold for request for quotations or restricted bidding, but does not necessarily require international competition.

Note: In case of using open national competitive bidding, foreign bidders are allowed to bid under the terms and conditions that apply to national bidders

4.1.2.2 International Competitive Bidding

International Open Competitive Bidding (IOCB) is used in below circumstances:

- when the procurement requirements cannot be met satisfactorily through national competition alone, especially in terms of quality, availability, capacity, or price;
- It is a method designed to ensure maximum competition, transparency, and value for money on procurements that may attract bidders beyond national borders;
- The procurement requires specialized goods, services, or works that are not available or adequately provided by local suppliers;

- The procuring entity is using external funding that requires international competition as a condition

4.1.3 Restricted Bidding

Restricted bidding is the procurement method where bids are obtained by direct invitation from prospective providers without open advertising. It is used to obtain competition and value for money and where circumstances do not justify open bidding.

Restricted procurement method limits both the mode of advertising and an invitation to bid. This method follows a process where only pre-selected tenderers may submit offers. King Faisal Hospital shall pre-qualify a minimum of three bidders and a maximum of six bidders per category of procurement, however, special conditions shall be considered where the market cannot provide a minimum of six bidders per category or the goods and/or services are only issued by an original equipment manufacturing (OEM) or proprietary conditions exist. Restricted tendering narrows or limits competition to a shortlist of pre-qualified bidders.

The process shall conform with the following procedures:

a) The invitation to bid shall be addressed to a limited number of potential bidders without advertising the opportunity in a bid notice
b) The selection of bidders shall be in accordance with the procedure prescribed in this manual
c) A public bid opening shall be held

4.1.4 Request for Quotations / Proposals

A Request for Quotation (RFQ) sourcing method that invites a minimum of three (3) prequalified bidders to submit their quotations detailing their approach to fulfilling King Faisal Hospital specifications and their commercial terms and conditions. In compliance with effective competition, the Procurement Unit shall assess responsiveness (whether the offer complies with the requirements, i.e., specifications, delivery terms, King Faisal Hospital terms, and conditions), and qualification (whether the bidder satisfies basic eligibility criteria) of the bidders, upon which an award is made to the lowest-priced acceptable offer. RFQ shall be used to procure goods, selected non-consulting services, and non-specialized works. Refer to Appendix 4 for RFQ template.

This method which compares price quotations obtained from at least three providers. It is used to obtain competition and value for money where circumstances do not justify open bidding. The process shall conform with the following procedures:

a) There is insufficient time for an open or restricted bidding procedure such as in an emergency situation
b) The estimated value of the procurement does not exceed the threshold stated
c) The invitation to bid shall be addressed to a limited number of potential bidders without advertising the opportunity in a bid notice
d) The selection of bidders shall be in accordance with the procedure prescribed in this manual
e) A public bid opening shall be held

4.1.5 Direct Purchasing

Direct purchasing is a simple direct method used for very low value procurement requirements and the circumstances do not justify competition. The procurement method shall be used where the estimated value of the procurement does not exceed the established threshold

4.1.6 Single Sourcing

Single sourcing is a method of procurement where the source of supply is known and is the only one reasonably available in the circumstances. It is used where circumstances do not justify competition and it is for expenditure higher than direct purchasing. This method can be used for extension work in construction and services contract compatibility and/or continuity.

This method shall be used under exceptional circumstances. It should only be based on proper and solid justification from the user department. When using single sourcing, King Faisal Hospital staff shall ensure that it would not be feasible to apply a competitive bidding process and that proper and concrete justification exists. In any project or program utilizing a single sourcing of direct contract, the following must be established:

a. An analysis of the case, including an assessment of needs, quality assurance, and best value for money;
b. A proper justification for single sourcing; and
c. Terms of reference for the services and specifications of the goods.

Single Sourcing Justification

King Faisal Hospital encourages all staff to perform competitive bids for all procurement activities, however, certain circumstances, cited below allow single sourcing. Single sourcing shall only be used when explicit approval is sought from the DCEO. This approval shall be sought using the single source approval form based on the following conditions.

- There is insufficient time for any other procedure such as in an emergency situation
- The works, services or supplies are available from only one provider
- an existing contract could be extended for additional works, services or supplies of a similar nature and no advantage could be obtained by further competition, if the prices on the extended contract are reasonable
- additional works, services or supplies are required to be compatible with existing supplies, works or services and it is advantageous or necessary to purchase the additional works, services or supplies from the original supplier, provided the prices on the additional contract are reasonable;
- Value of the new works, services or supplies shall not exceed 20% of the value for non-medical supplies and equipment, and 50% for medical supplies, equipment and consumables
- Original or existing contract shall have been awarded through a competitive procurement process

4.1.7 Simplified method

King Faisal Hospital shall use simplified method on tenders not exceeding established threshold. It may be a national open or restricted tendering, in which the preparation of bids is easy, and the technical specifications are not complex.

When such method is used, a shorter tender document and short period between tender publication and the deadline for submission of bids are used

However, the period cannot be less than eight working days for national open tendering or five working days for national restricted tendering.

4.1.8 Force account

King Faisal hospital may use force account if:

a) quantity of works to be carried out cannot be defined in advance
b) construction works are small and scattered and are in remote locations or are in locations whose access is difficult so that qualified construction firms are unlikely to bid at reasonable price;
c) construction works are required to be carried out without disrupting other ongoing operations;
d) there are emergencies needing attention;
e) King Faisal Hospital is to complete works delayed by the successful bidder after the written warnings did not yield any tangible results;

4.1.9 Community participation

- King Faisal Hospital beneficiary community may participate in the execution of works. This method may be used when it is established that the community participation may contribute to the economy, create employment and enhance community members' involvement in the activities of which they are beneficiaries.

- King Faisal Hospital senior management, shall determine circumstance and a threshold for use of community participation

4.1.10 Two stage tendering

(1) King Faisal Hospital may engage in procurement by means of two-stage tendering when –

- it is not feasible for the procuring entity to formulate detailed and clear specifications for the needed goods, non-consultancy services or works in order to obtain the most satisfactory solution to its procurement needs
- a tender is complex, and the procuring entity has not enough knowledge in the area, or it is a tender relating to high technological development
- Tendering proceedings have been engaged in but no bids were submitted or all bids were rejected or when the procuring entity finds that engaging in new tendering proceedings would unlikely result in a procurement contract.
- During the first stage tendering, the procuring entity prepares the tender document requesting for bids relating to the technical, quality or other characteristics of needed goods or supplies, works, consultancy and non-consultancy services, as well as to contractual terms and conditions of supply, and, where relevant, the professional and technical competence of the bidders.
- Bidders are invited to submit their initial bid based on their proposals relating to the technical aspect, without a tender price. The procuring entity may hold technical discussion with bidders who submitted responsive bids. The procuring entity retains at least three bidders whose proposals are substantially responsive in order to make adjustments on the tender document.
- In the second stage, bidders whose bids have been accepted by the procuring entity are invited to submit final bids with prices based only on the technical specifications of the adjusted tender document.
- In preparing technical specifications in a tender document, the Hospital tender board may modify any aspect originally set forth in the initial tender document. Such modifications or additions are communicated to bidders in the invitation to submit final bids.

- A bidder not wishing to submit a final bid may withdraw from the tendering proceedings without seizing any bid security that it may have been required to provide. The final bids must be evaluated and compared in order to ascertain the successful bidder
- The provisions generally applicable to tendering proceedings apply to two-stage tendering.

(2) Guidance on technical discussion during the two- stage tendering

- First, King Faisal Hospital tender board, shall organize a technical discussion with all interested bidders
- after invitation by the HTB, any bidder whose bid was substantially responsive must personally attend the meeting or send a representative;
- elements from each of the substantially responsive bids which are useful in adjusting the tender document shall be highlighted;
- An element from the bid must be of general nature and not favor anyhow the bid from which it was taken.

4.1.11 Reverse auctioning

Reverse auction method is used in the procurement of standard goods or non-consultancy services for which specifications can be determined with precision, where price or quantity is the only determinant and where there exist a significant number of potential bidders. This method is suitable for procurement of most of the hospital consumables and or standardized medical supplies

- Procedure for reverse auctioning
  a) In reverse auction, King Faisal Hospital shall put up a request for required goods during a scheduled time period and bidders shall then place bids for the price they are willing to be paid for the needed supplies or non-consultancy services. At the end of the auction, KFH shall select and award the tender to the bidder with the lowest price. More specifically, this shall done through the following procedure:
     - KFH advertises a request for required goods or non-consultancy services with clear specifications;
     - bidders shall then place bids for the price they are willing to be paid for the supplies or non-consultancy services within a prescribed period which does not exceed 10 days;
     - prices of bidders within the prescribed time shall be visible to other bidders without revealing the bidder's identity;

- bidders are allowed to revise their prices before expiration of the prescribed time but shall not revise their bids upwards within the prescribed time;
- At the end of the auction, KFH shall select and award the tender to the bidder with the lowest price at the bid submission deadline.
- Without prejudice to other relevant provisions, KFH shall seize the participation fees in case the successful bidder refuse to sign the contract.

4.1.12 Turn-key

- KFH shall use turnkey when the project at hand, has a high level of complexity and there is a well-defined scope of work and KFH does not have the means or capability to handle the project management services but needs getting the works on time under a fixed budget.
- Under Turnkey procedure, KFH shall describe the needs but it is the duty of the contractor to design, procure, construct or install and ensure the project management aspect of the required needs or works until the final acceptance.
- The rules related to supervision of works apply.

4.1.13 Competitive dialogue

a) King Faisal Hospital shall use Competitive dialogue in particularly complex procurement processes where a number of solutions that satisfy the hospital's requirements may be possible, and the detailed technical and commercial arrangements to support those solutions require discussion and development between the parties. Competitive dialogue is conducted through open competition or restricted tendering. A tender is considered particularly complex if, King Faisal Hospital is not objectively able to adequately define the technical or performance specifications and scope to satisfy its requirements and or adequately specify the legal and or financial arrangements of the procurement.

b) Procedure for use of competitive dialogue

- King Faisal hospital, shall solicit proposals or first- stage bids in response to broad output specifications through an open competitive bidding process, following which a short-list from at least three of the initial proposals is created;
- King Faisal shall thereafter conduct a round of negotiations or dialogues directly with shortlisted bidders. Negotiations or dialogues are used to work

out details of technical requirements, terms and conditions of the contract for further enhancing the competitive negotiated aspects;

- During the dialogue, the procuring entity must treat all bidders equally and ensure that the solutions proposed or other information received in the dialogue is kept confidential unless the bidder agrees to disclosure.
- Final bids are requested from the shortlisted bidders after the specifications have been formalized and the evaluation is performed with pre-established criteria
- The process of dialogue undertaken by each participating bidder is recorded and minutes are signed by attendants on both sides.

4.1.14 Design and build

This method shall be used:

- when KFH is uncertain that its own design, if any, is the best solution or does not have the capability and or resources to design in-house, and hiring of specialized design consultant has been considered and found to be not justifiable;
- when there is a need to reduce the time needed to hire a design consultant and for the preparation of engineering design to launch the bidding process for the procurement of works;
- when there is a requirement of single point of responsibility where both the design and the construction are to be performed by the contractor;
- when the contractor may bring creative solutions which optimize the design.

Procedure for use of design and build:

- KFH shall perform front- end tasks by providing adequate technical and contractual information to bidders;
- KFH shall provide an adequately detailed description of the project outcome to enable bidders to fully understand the contract's scope, cost, the nature and extent of the main project risks
- KFH shall provide hydrological baseline, investigations, geotechnical, environmental and social impact information, permits and consents that have been obtained or are needed;
- KFH shall specify performance, functional or basic structural requirements and terms of contractual conditions;

- Bidders shall submit the bids including details on both design and its execution.

4.1.15 Pre-financing

- King Faisal may use Pre-financing in circumstance where it is deemed that it does not have funds or enough funds for the desired goods, works or services;
- Under pre-financing contract, the tender document shall specify that the contractor shall finance fully or partially goods, works or services;
- The contract also indicates the expected payments modalities and related timelines. In this case, the successful bidder pre-finances using its own funds or may seek external financing
- When using this method KFH shall first seeks the authorization from the Minister in charge of public procurement before including it in the public procurement plan.
- Again, KFH, shall also request for the authorization from the minister in charge of public procurement before signing the contract.

4.1.16 Participation of member or subsidiary entity

- This is particularly important when it's extremely necessary that internal hospital departments carry out the necessary services. Authorization to use this method, shall be sought from the Ministry in charge of procurement.

Note: Other procurement methods KFH R may apply

Ad hoc Purchase Requests on some occasions when shall be used under the following conditions:

- A doctor may consider it necessary to prescribe for a particular patient a new drug which is not on the drug formulary or lack of the medicine in the hospital at the time. To respect clinical judgment and satisfy patients' needs, the hospital shall accept these ad hoc requests. Thus, the pharmacist in-charge and procurement staff may resort to various means to procure the drugs required, including direct purchases from "drug retailers;

KFH, R may acquire supplies from any source outside the country in situations:

- Where supplies or services in local market have prices found to be much higher than the one prevailing on international market or if the supplies or services in local market do not meet the required standards in the health sector.

- However, the approval to source outside the country shall be done by the DCEO in consultation with the CEO and Board of Directors; such decision shall be supported by local and international market assessment reports.
- The DCEO in consultation with the CEO shall from time to time appoint a team of KFH, K staff to conduct a market survey for items in need both on local and international market with the purpose of diversification of sources of supply and building business networks.

4.2 Procurement Timeframe

The procurement timeframe varies depending on various factors such as the complexity of the procurement process, the size of the project, the nature of the goods or services being procured. Therefore, at King Faisal Hospital a typical procurement process specifically considering bidding, evaluation and contract notification and award period and its estimated timeframe. The following are the key timelines or performance indicators for the various procurement/sourcing process activities.

Table 2: Minimum tendering Timeframe (working days)

Method of Procurement	Bidding period	Evaluation period	Contract award period
Open Domestic Bidding	15-21	21	14
Open International Bidding	30-45	21	14
Restricted Domestic Bidding	7	7	5
Restricted International Bidding	14	7	5
Simplified method (open)	8	5	5
Simplified (Restricted)	5	5	5
Request for Quotation	3	1	N/A
Single Source	1	1	N/A
Direct Purchasing	N/A	N/A	N/A

4.3 Procurement Thresholds

4.3.1 Thresholds for supplies, works & non-consultancy services

- Up to 1,000,000 Rwf for Direct purchasing;
- >1,000,000Rwf, ≤5,000,000 Rwf, does not require HTB approval, and use RFQ (Medical and Non-medical) to be approved by Head of Procurement and CFO
- > 5,000,000 Rwf up to ≤25,000,000 Rwf-RFQ for non-medical shall be approved by HTB
- >5,000,000 Rwf up to ≤50,000,000 Rfw-RFQ for medical drugs, equipment and consumables, shall be approved by HTB.

  In case the RFQ exceed the above threshold, this will be approved by the DCEO.

The estimated value of the goods or supplies, works or services is usually the key factor in deciding which procurement procedure to use and thresholds for the use of each procurement procedure as determined in this manual.

4.3.2 Thresholds for Consultancy Services

a) For Procurement from consultancy firms:
   1. Publication of a notice inviting expression of interest and developing a shortlist shall be used if the estimated value of the consultancy services exceeds Rwf 50,000,000 (fifty million)
   2. Short listing without publication of expression of interest shall be used if the estimated value of the consultancy services does not exceed Rwf 50,000,000 (fifty million).

b) Procurement of individual consultant:
   1. Publication of a notice inviting expression of interest and developing a shortlist shall be used if the estimated value of the consultancy services exceeds Rwf 30,000,000 (Thirty million).
   2. Short listing without publication of expression of interest shall be used if the estimated value of the consultancy services does not exceed Rwf 30,000,000 (Below Thirty million)
   3. Head hunting shall be based on other reasons and not the threshold above

4.3.3 Thresholds for Use of International Competitive Bidding

- ✓ A tender for works where the estimated value exceeds FRW 3,000,000,000;
- ✓ A tender for goods and non- consultancy services where estimated value exceeds FRW 1,000,000,000;
- ✓ A tender for consulting services where estimated value exceeds FRW 300,000,000

CHAPTER 5: SOURCING METHOD AND BIDDING PROCESS

The sourcing process enables identification of suitable suppliers and can also provide valuable information about products and specifications. The bidding process shall only commence only when purchase requisition form has been approved.

5.1 Purchase Requisitions

King Faisal Hospital User Units shall initiate the procurement process through a purchase requisition (PR) form, refer to Appendix 3 a purchase requisition is an internal control document used by users to initiate procurement and seek budgetary approvals. The PR document should not be used as a purchase order or issued to a bidder.

The users requiring services, goods or works shall submit a duly filled and approved purchase requisition form to the Procurement Unit. The purchase requisition form should include the following:

a. A detailed description of goods, civil works or services sought;
b. The quantity of inputs to be procured;
c. Unit of measure;
d. Required delivery/engagement date;
e. Delivery location or location of goods, civil works/services;
f. Estimated price or cost;
g. Any additional information (i.e., standardization, the preferred method of shipment);
h. Budget line or cost center; and
i. Proposed evaluation criteria.

5.2 Procedures for Purchase Requisition

Purchase requisitions are usually created by user department within King Faisal Hospital who need to purchase goods or services for their department. The requisition shall then be sent to the procurement department, which shall review and approve the request before initiating the purchasing process. It typically includes information such as the item or service requested, the quantity needed, the desired delivery date, the cost, and any other pertinent details.

The use of purchase requisitions shall help to ensure that purchases are made in a controlled and organized manner, with appropriate approvals and oversight. It also helps to streamline the procurement process by providing a clear record of what has been requested and approved.

5.2.1 Procedures for raising purchase requisitions

a) The User Unit initiates procurement by completing a purchase requisition (PR) form.
b) The User Unit ensures all attachments as prescribed in the PR form are attached and approved.
c) The PR is then submitted to the head of the user unit for approval. The head of the User Unit confirms the accuracy of procurement needs before approval.
d) The PR form is submitted to finance to confirm the availability of funds in line with the approved User Unit budget.
e) The PR is then submitted to the Head of Procurement for final review prior to an invitation for solicitation.

5.3 User Needs Identification

The detailed specifications/Scope of Work shall cover the characteristics of the fundamental needs of King Faisal Hospital in respect of the goods/services/works concerned. A specification shall contain a complete, precise and unambiguous description of the user needs. Specifications or the description of physical or functional characteristics of goods, services, and works must provide all relevant attributes and evaluation criteria required.

Depending on the complexity of the requirements, the respective Head of the User Unit in consultation with the Head of Procurement may constitute a multi-disciplinary team that shall provide input into the user need definition or development of specification. The input may also be sought from other subject matter experts, grants management team, project management teams, finance, and operations personnel and any other relevant stakeholders depending on the nature of the requirement.

5.4 Specification Development

Specifications of goods or supplies, works, consultancy services or non-consultancy services clearly define the expected results with objectivity and neutrality. Specification of statement of requirement shall lay out a concise description of each product and the quantity required together with any technical specification unique to that procurement need.

Specifications of goods or supplies, works, consultancy services or non-consultancy services shall not refer to a particular brand, trade name, its design type and specific origin or producer unless there is no other sufficiently precise way of describing the characteristics of the goods, works or consultancy services to be provided. In that case the words such as "or equivalent" are added on. Sufficient space shall be provided in the solicitation document so that the supplier can enter all relevant information including the name of original manufacturer, shelf life and delivery period.

5.4.1 Goods or Supplies

Specifications may be stated as a hybrid or combination of the following types:

i. Unit-specific requirements: Focuses on the quantity of the product required.
ii. Performance requirements: Defines the task to be performed in conjunction with various design attributes (i.e., environmental impact, reliability). This ideal specification is built around a description of what is to be achieved rather than a fixed description of how it should be done. To assure the quality, a reference to the concerned product standards (i.e., ISO) and environmental requirements (i.e., Energy Star, Eco-label), should be made.
iii. Design requirements: Defines exact details of a good (i.e., the physical attributes, materials to be used, power input and output, the manufacturing processes required, or in the case of a service, the working methods to be used). Due to its uniqueness, design specifications may limit competition because of differences in engineering practices.
iv. Brand or Trade name requirements: In drafting any of the aforementioned specifications, the use of brand names or similar references must be avoided. If it is necessary to cite a brand name, the words "or equivalent" shall be included (e.g., Dell® Desktop Computer or equivalent). The term "or equivalent" means that the desired product is of comparable quality and/or capable of performing the intended purpose.
v. Sample requirements: This shall be a requirement for small value items where the final goods have to be comparable to the pre-approved specifications. The samples shall remain part of the delivery and maintained by King Faisal Hospital.

5.4.2 Works

The Statement of Works (SOW) should provide sufficient details identifying the location, nature of works required and any complexities involved. The term 'works generally includes all types of civil, mechanical, electrical, or other engineering services (other than consulting services) as well as the supply of construction materials and equipment.

The User Unit should state the expected construction period and time in weeks or months, or where alternative time schedules are permitted, the range of acceptable construction periods. In addition, the user unit should provide additional information on the topography, geotechnical conditions, and access to the site, transportation, and communications facilities, project layout, services to be provided by King Faisal Hospital, a method of measurement and payment of completed civil works.

5.4.3 Services

The Terms of Reference (TOR), on the other hand, should define the scope of work required, respective responsibilities of the Consultant and services to be provided. Adequate and clear TOR are imperative for an understanding of the assignment, which minimizes any risk of ambiguities during the preparation of solicitation documents, negotiations, and execution of services.

TOR should include:

i. Background information on the assignment;
ii. Objectives of the assignment;
iii. The scope of work, consistent with the budget;
iv. Deliverables (i.e., output) that must be submitted for approval; Period of performance and the review/approval time required;
v. Profile of key experts required for the assignment (in case of firms)
vi. Selection criteria, qualifications, and performance or other standards the consultant must fulfill;
vii. Type of contract i.e., fixed or variable
viii. Provisions for monitoring and evaluation of performance; and
ix. If applicable, a detailed list of all inputs and services which shall be provided to the contractor/consultant by King Faisal Hospital in order to perform the contract.

5.5 Bidding Process

King Faisal Hospital has a documented bidding process to follow and remain effective. All bidding stages shall be followed, and this shall enable Procurement Unit to be efficient in their work and ensures that everyone is working on the same standards. The process includes preparation of bid solicitation document, advertising, and issuance of RFQ / RFP, evaluation of bids, award and managed contract.

5.5.1 Preparation of Bid Solicitation Document

This is a bidding document or any other documents inviting bidders to participate in procurement proceedings; and includes documents inviting potential bidders to pre-qualify and standard bidding documents. All bid solicitation documents falling under the category of open competitive bidding and limited invitation for bids shall comprise of the following:

a) Invitation for Bids (IFB)
b) Instruction to bidders (ITB)
c) Bid data sheet
d) Evaluation Methodology and Criteria
e) Bidding Forms

f) Statement of Requirement
g) General Conditions of Contract
h) Special Conditions of Contract
i) Bid submission, closing and opening (location, date and time)

5.5.2 The custodian of the tender document and sales

The Head of procurement shall delegate the procurement staff in charge of custodian of the designed tender document. Bidders, shall solicit the tender document by acquiring it for a non-refundable fee of 10,000 Rfw

5.5.3 Advertising

The advertising period shall start on the date the bid notice is first published. Bidding period shall begin to run from the last date of publication of the advert.

5.5.4 Issuance of RFQs

Upon determination of the procurement method to employ, the Procurement Unit shall issue solicitation documents to the pre-qualified bidders. The solicitation documents contain all information necessary to prepare a bid, proposal or quotation that should provide the best value for the required inputs. The details of the solicitation documents shall vary according to the nature, complexity, and value of the requirements.

While drafting the solicitation documents, the user department and Head of Procurement should consider the following scenarios for the required inputs:

a. Grouping of similar items: Similar items should always be grouped, whether or not a bid requests such grouping. This may include grouping of event needs, where King Faisal Hospital requests the bidders to provide bids for consolidated services, e.g., venue, travel logistics such as airport transfers, accommodation, catering, entertainment etc. In the case where required inputs are dissimilar or mutually exclusive, it is advisable to separate the items into individual invitations or lots.
b. Changes in quantity: Where the exact quantity required is not known in advance, an estimated quantity may be indicated on the invitation. The estimate, however, must be accompanied with a provision that King Faisal Hospital reserves the right to increase or decrease the indicated quantity by a specified percent.

To ensure economy and efficiency, the Procurement/Requisitioning Units should evaluate proposals among a minimum of three responsive (where the offer complies with the requirements; specifications, delivery terms, King Faisal Hospital terms, and conditions) and qualified (where the supplier satisfies basic eligibility criteria) offers received in accordance to the Two Envelope System, upon which award is made to the proposal that is most responsive to the specified requirements, including price and other factors.

5.5.5 Determining the Evaluation Criteria

Evaluation criteria must be clearly stated in the solicitation documents how contracts shall be awarded (e.g., to the lowest priced, most technically acceptable offer, to the lowest priced substantially compliant offer or to the offer scoring highest overall), and which criteria shall be applied in the evaluation to determine compliance or technical rating to allocate points.

Evaluation is the process of assessing and comparing offers in accordance with the evaluation methodology stated in the solicitation documents aimed at determining which offer best complies with the defined evaluation criteria, and thus, represents the best value for King Faisal Hospital.

Clear and specific evaluation criteria shall be defined during the user need definition. The evaluation process shall be based on the established evaluation criteria. The evaluation criteria to be used shall be stated in the solicitation document and the evaluation shall be conducted in accordance with these criteria without amendments or additions to the criteria.

The evaluation of proposals is always subject to a high degree of subjectivity. In order to reduce this subjectivity and ensure a transparent and successful evaluation process, it is critical to identify the proposal evaluation criteria and sub-criteria and how much weight each shall have prior to the release of the bidding document. No new criteria may be introduced and used to evaluate bids or be used as justification for the selection of a bidder if the criteria were not a requirement at the time of solicitation. The solicitation documents must include the evaluation criteria. Evaluation criteria are divided into three categories:

a. Administrative requirement (or criteria);
b. Technical requirement; and
c. Financial requirement.

5.5.5.1 Administrative/Mandatory requirements

Submitted offers shall be reviewed to determine compliance with any administrative/ mandatory requirements included in the solicitation documents. Examples of administrative/ mandatory requirements may include, but are not limited to, the following:

a) Submission of offers within the stipulated deadline;

b) Required bid securities;
c) Statement of offer validity;
d) Approval by authorized personnel and/or power of attorney;
e) Required company documentation, including documentation regarding the company's legal status and registration, tax, social security and non-bankruptcy compliance certificates, and audited financial statements; and
f) Any other general administrative requirements, such as mode of submission / receipt, record of bid receipt forms, and security requirements.

5.5.5.2 Technical requirements

The Technical evaluation criteria shall depend on the nature and the complexity of the procurement activity. Technical criteria shall cover two general areas:

a. Criteria related to bidders' capacities and capabilities such as:
   - Previous experience in similar projects;
   - Experience in a particular region, geographies or the country;
   - Manufacturing capacity (goods) and competencies and capabilities (for services and works); and
   - Delivery time within certain parameters, in particular, in cases of emergency; procurement where delivery (for goods) or completion period (for services and works) is critical.

b. Criteria related to the goods, services, and works to be delivered such as:
   - Responsiveness of bids/offers to specifications, TOR or SOW;
   - Appropriateness of the proposed approach/ methodology and work-plan;
   - Ability to provide after-sales services and/or technical support; and
   - Certification of compliance with national and international quality standards (e.g., ISO).
   - Depending on the selected approach, technical criteria shall be evaluated based on a compliance/non-compliance (pass/fail) or weighted scoring system.

c. The requested technical references of similar tenders executed are the certificates of good completion (Company or personnel), and their related contracts. The HTB is responsible to carry out due diligence for the provided documents when and where necessary.

5.5.5.3 Financial requirements

This shall entail a comparison of the proposed cost by the bidders who meet the mandatory requirements and have attained the minimum required technical scores.

However, the weight that price carries in the selection of a bidder shall depend on the selected evaluation criteria.

5.6 Submission and Receipt of Offers/Bids

5.6.1 Submission of Offers

It is the responsibility of bidders to ensure that offers are submitted by the specified submission date and time, and properly signed by authorized signatories. To ensure practicality and avoid receipt of late offers, it is recommended that the specified deadline date permits acceptance up until the close of business. If offers are delivered by hand, bidders should obtain an acknowledgment of receipt from the Procurement Unit as a record of the date and time of delivery. Quotations, bids or proposals presented after the designated date and time should not be received and were received via courier, they should be returned unopened and accompanied with an explanatory letter indicating the date and time of receipt.

5.6.2 Receipt of offers

In the case of an RFQ, the Procurement Unit may receive offers directly, either by physical mail, fax or electronic mail (email), where effective internal controls permit such acceptance. Further, a proposal or bid can be received manually, through email or through the implemented online platform. Where offers are to be submitted by email, bidders should forward their tenders to the designated email address. Any bids or proposals inadvertently opened prior to the due date must be brought to the attention of the DCEO and the Head of Procurement immediately for further action.

The Procurement Unit shall prepare a report of all bids received, indicating the name of the bidder and time of bid submission. The report shall also include all bids that were disqualified due to late submission. The report should be prepared using the provided bid receipt report template for review and sign-off by Head of Procurement.

5.6.3 Modification and withdrawal of offers

At any time before the deadline of the submission of proposals and/or quotations, King Faisal Hospital may for any reason, whether at its own initiative or in response to a clarification requested by an invited firm or bidder, amend the request for bids. Any amendment shall be issued in writing through an addendum. Addenda shall be sent by electronic mail to all invited bidders and shall be binding on them.

King Faisal Hospital may at its discretion extend the deadline for the submission of proposals, if deemed necessary, to allow bidders reasonable time to take the amendment into account. A bidder reserves the right to withdraw and resubmit a proposal provided the tender period has not yet expired. However, multiple bids are not allowed from the same bidder for the same item.

5.6.4 Late and Unsolicited Offers

All invitations to bidders to bid, through EOIs, RFQs, and RFPs shall include a set deadline for submission of bids. All bids received after the submission deadline shall automatically be disqualified and recorded as non-responsive to administrative requirements of the bid.

Bidders are also encouraged to continuously submit their company profiles, showcasing their expertise, experience, value proposition, legal registration and compliance status, directors and senior management among others. This allows King Faisal Hospital to understand the availability of various expertise and suppliers in their operating markets. These submissions shall be recorded as unsolicited offers and shall not be evaluated for purposes of award or scoring. The Procurement Unit shall maintain a record of these submissions for future reference where such business needs materialize.

5.6.5 Rejection of offers

King Faisal Hospital reserves the right to accept offers submitted by bidders. All offers not submitted in line with the instructions provided and requirements specified in the bidding documents shall be rejected and returned unopened if manually submitted.

Reasons for rejection of offers include:

a) Non-compliance with requirements: If an offer does not meet the requirements set forth in the solicitation document, it can be rejected. This could be due to a failure to submit required documents or information, or because the offer does not meet the technical or performance specifications required.
b) Late submission: Offers that are submitted after the deadline specified in the solicitation document are generally rejected.
c) Non-responsiveness: If an offer does not respond to the solicitation document in a meaningful way, it may be rejected. This could include failing to address all required items or not providing a complete proposal.
d) Conflict of interest: If a potential contractor has a conflict of interest that would prevent them from performing the work impartially, their offer may be rejected.
e) Insufficient budget: If the budget for the project is insufficient to cover the cost of the offers received, it may be necessary to reject some or all of the offers.
f) Lack of funding: If funding for the project is not available or is uncertain, the procurement process may be cancelled, and all offers may be rejected.

King Faisal Hospital shall follow established procedures and guidelines when rejecting offers, and to provide clear and specific reasons for the rejection to ensure transparency and fairness in the process.

Communicating a rejection of offer to the supplier.

When communicating the rejection of offers, it is important to be clear, concise, and transparent. Here are some key steps to follow when communicating the rejection of offers:

a) Provide a clear reason for the rejection: It is important to clearly communicate the specific reason why an offer was rejected. This could include *non-compliance with requirements, late submission, non-responsiveness, conflict of interest, insufficient budget, or lack of funding*.
b) Explain the decision-making process: Provide an overview of the evaluation and decision-making process that was used to evaluate the offers. This can help to reassure unsuccessful bidders that the process was fair and transparent.
c) Provide feedback: If possible, provide feedback to unsuccessful bidders to help them understand why their offer was rejected and how they can improve future proposals.
d) Follow established procedures: Make sure that the rejection is communicated in accordance with established procedures and guidelines, and that all necessary documentation and notifications are provided.
e) Maintain confidentiality: While it is important to be transparent about the reasons for the rejection, it is also important to maintain confidentiality and protect sensitive information, such as financial details or proprietary information.
f) Be professional and respectful: Maintain a professional and respectful tone in all communications and avoid any language or actions that could be perceived as biased or discriminatory.

5.6.6 Opening and Recording of Bids

All bids or proposals submitted manually should be time/date stamped upon receipt and placed in a locked/secure location, such as a cabinet or safe until the bid opening time and date. Access to the location shall be restricted to the person duly authorized by the Head of the Procurement Unit.

(1) When a tender is to be awarded using non- electronic procedures, the opening committee is comprised of members of HTB. In case of Hospital Tender Board members absence, at least three members including a representative of Hospital Tender Board, a Procurement staff (Non member of HTB) and End User representative can carry out the opening process. The opening of bids is in a public session not later than one hour after the deadline for submission of bids.

(2) Bidders or their representatives may attend the opening session. On each

opened bid the following are read out loudly and recorded in the minutes reserved for the opening session.

a. Names of the bidder and other details related to Bidder's identity;

b. The bid price including the discounts, if any;

c. A bid security if it is required.

Before the opening of bids, a bidder or his or her representative may request the HTB committee to read out any other information that the bidder may wish to be read out but which does not prejudice other bidders' interests. Each person who participates in the opening session initials on each or some key pages of the original bid. A members of the Hospital tender committee who participates in the opening session also sign on the opening report.

Where the User Unit is finance or procurement, an independent unit shall be nominated to witness the bid opening process.

Access to the electronic platform where bids are received should be restricted until the submission due date. Exceptions should be considered on a case-by-case basis. The Procurement Unit should ensure that effective internal controls are in place to secure offers received via email including password protection of financial bids and restricting access to the email account.

5.7 Bid Evaluation

The HTB shall conduct the administrative, technical and financial evaluation of bidder responses/offers in line with the evaluation criteria specified in the RFP / RFQ prepared under the definition of needs criteria in section 5.5.4 No other criteria shall be introduced during bid evaluation. The evaluation methodology and criteria shall be part of the solicitation documents.

5.7.1 Bids validity period

The tender document determines the bid validity period. This period shall range from 60 days to 120 days, from the date of bids opening, and this shall depend on the type of the tender and preferred procurement method. The Hospital tender board shall make sure that all received bids are evaluated before the bids validity period expires. Where necessary the Hospital tender board shall request for extension of bids validity but this shall not exceed 60 days and it must be accepted by all bidders.

5.7.2 Bid security

a. ***When is it used***

All tender proceedings conducted under open and restricted tendering process are subject to a bid security.

b. **When is it released**

The procuring entity may return the bid security within seven (7) days from the date on which:

1° the tender awarding process is cancelled;

2°the procuring entity realizes that no successful bidder is obtained;

3° the procurement contract is signed.

c. **Amount of bid security**

1. For tenders of works, goods or supplies, consultancy services and non-consultancy services requiring a bid security, the procuring entity determines its form and amount.

The amount of the bid security may be a percentage of the tender estimated budget as follows:

2% of the value of the tender whose estimated budget is less than FRW 100,000,000;
From 1.5% to 2% of the value of the tender whose estimated budget is from FRW 100,000,000 to FRW 500,000, 000;

From 1% and 1.5 % of the value of the tender whose estimated budget is from FRW 500,000,000 to FRW 1,000,000,000;

From 0.1% to 1% of the value of the tender whose estimated budget is above to FRW 1,000,000,000.
2 The bid security for a bid of a joint venture is submitted in the name of that joint venture.

The Procurement Unit is responsible to carry out the confirmation of bid securities from the given Financial insurance (Bank or Insurance Company)

5.7.3 Evaluation for Complex Consultancy Services

In the case of complex solutions (Management Information Systems or highly technical IT solutions) or highly specialized services such as specialized medical research and development project, the HTB shall conduct the technical evaluation in accordance with the stated criteria with modifications as deemed appropriate.

The team members shall individually score the different technical elements of the proposed solution/services. The individual scores shall be collated by the procurement lead. The team shall convene to discuss any variations in the scores and observations made during the evaluation. Bidders that do not meet the pre-established minimum score shall be eliminated at this stage.

At any stage during the evaluation process, the HTB through the Head of Procurement may seek clarification from the bidder in writing, on any unclear elements, if this shall be necessary for the appropriate assessment or scoring and correct ranking. However, this shall not include amendment of the proposed services/solutions. Bidders may also be invited to make presentations related to their proposal if required to help enhance understanding of their responses.

Criteria for evaluation of consultancy services
The criteria, sub-criteria and point system for the evaluation of full technical proposals are:

a) General experience of the firm in the field: 5 to 15 points;
b) Relevant experience in similar services: 10 to 20 points;
c) Quality of the methodology proposed: 20 to 30 points;
d) Qualifications and experience of the key personnel: 40 to 60 points;
e) Transfer of knowledge or technology: 0 to 10 points (where applicable);
f) Participation of Nationals: 5 to 10 points (where required).

Total points for the four criteria: 100 points
The minimum technical score St required to pass is: *(70 to 90%)*
The formula for determining the financial scores is the following: *Sf = 100 x Fm / F, in which Sf is the financial score, Fm is the lowest price and F the price of the proposal under consideration.*

The weights given to the technical and Financial Proposals are:

- T=_________ [*Normally between 0.7 and 0.9*], and
- P=_________ [Normally between 0.1 and 0.3]

5.7.4 Evaluation of Individual Consultants
The individual consultants shall be evaluated using the following three sub-criteria, as relevant to the task:

- General qualifications: (general education, training, and experience): [20%]
- Adequacy for the Assignment: (experience in the sector/similar assignments): [70%]

- Relevant experience in the region: (working level fluency in local language(s)/knowledge of local culture or administrative system, government organization, etc.): [10%]
- Total weight: 100%

The individual with the highest technical score should be selected for financial negotiations.

5.7.5 Financial Requirements

Financial evaluation is the process of comparing offers to the financial criteria defined in the solicitation documents. This shall entail a comparison of the proposed cost for the bidders who meet the mandatory requirements and have attained the minimum technical scores. The weight that financial proposal carries in the selection of a bidder shall depend on the importance of the item being procured and the procurement type. When evaluating goods, price comparison should be done based on lifecycle price/cost, including transportation, setup, and maintenance costs and insurance, where applicable.

In defining the program's needs, all relevant cost components should be identified. This allows for a financial evaluation based on the total cost of ownership (including consultants costs, equipment acquisition cost, installation, commissioning, training, special packaging, etc.). All these price components must be identified up front and should be included in the program requirements.

Finally, in order to facilitate the comparison and financial evaluation process, it is important to request a breakdown of the financial information. This is particularly essential in the case of proposals.

In the case of quotations for the supply of goods, the lowest price serves as the overriding measure upon which to award a contract from among the suppliers that meet the minimum specifications required, unless the offer is rejected for a specific reason (e.g., the bidder fails to quote on the product requested or fails to deliver the quote within the specified time frame). This, however, does not apply to works and services.

In the case of specialized consultancy services, technical scores serve as the overriding measure upon which to award a contract among those bidders found to be technically compliant/ responsive to the requirements, unless the offer is rejected for a specific reason (e.g., the bidder failed to bid on the product, civil works or services requested or failed to deliver the bid within the specified time frame).

The following additional consideration shall be made during financial evaluation:

i. Conversion to a common currency: The Procurement Unit shall specify bidding currency in the ITB documents. However, circumstances may arise where bidders submit their bids in a different currency. In order to convert bids to a single currency for evaluation purposes, the HTB shall use the Local Central Bank or equivalent Exchange Rates applicable on the day of the bid closure.

ii. Correction of arithmetic errors: The HTB should carefully review offers to identify potential arithmetic errors and to ensure consistency of quantities and prices. Quantities and price specifications should be the same as those prescribed in the ITB documents. The total price per line item should be the result of multiplying the quantity by the unitary price. In cases of discrepancy, the unitary price shall prevail in the recalculation. Unit price spelled out in words shall prevail over numeric prices in cases of discrepancy or arithmetical errors.

The HTB shall correct all arithmetic errors and inform the affected bidder of changes, if applicable. A bidder must accept such arithmetic corrections or the bid in question shall be rejected.

5.7.6 Evaluation Report

An evaluation report documenting the evaluation process shall be prepared by the Procurement Unit. The evaluation report shall include the names of the HTB members and must be signed by all staff involved in the evaluation process.

An evaluation report shall be prepared for each evaluation. All members of the HTB shall sign the evaluation report. Where a bid is submitted using the one stage-one envelope bid submission method, a combined evaluation report shall be prepared. The evaluation report should be accompanied by the following documents:

i. Bid opening report;
ii. Bid documents evaluated;
iii. Bid prices and currency conversions (if applicable);
iv. Correction of arithmetic errors
v. Signed off individual technical evaluation scoring sheet;
vi. Summary of the evaluation process (signed by all technical evaluation reviewers);
vii. Clarifications requested (if applicable);
viii. Any rejection, and proper justification for the rejection of bids;
ix. Identification of the best offer;
x. Non-disclosure agreements for external consultants involved in the evaluation process (if applicable); and
xi. Background checks of the top bidder, including affirmative checks stating that the bidder is not debarred by King Faisal Hospital and or appearing on the sanction lists as provided in this manual.

A combined technical and financial evaluation report shall contain recommendations on:

- the best evaluated bidder and the evaluated price;
- whether the recommended bidder should be subject to post-qualification;
- whether negotiations should be held with the recommended bidder;
- the price of the proposed contract, subject to any changes following negotiations;

5.7.7 Clarification from Bidders during evaluation

In principle, offers are evaluated based on the information submitted by the bidder. However, in some cases, the HTB shall require clarification from bidders after offers have been submitted. The objectives of these clarifications are to explain some aspects of the offer. Under no circumstances should they delete, add or modify the original offer.

Any clarifications or communication with bidders after they submit the bid should be in writing and responded to within 5 days. Clarifications requested by the HTB should contribute to fully understanding the offer. The most suitable way of requesting clarifications is through written correspondence, and a deadline should be provided when communicating with bidders. All such correspondence should be coordinated by the procurement unit and recorded in the procurement file.

5.7.8 Deviation from the procurement requirement

In some circumstances, offers may deviate from requirements or criteria stipulated in the bidding documents. Deviations may be "major / significant" or "minor / non-significant".

Major / significant deviations:

- Affect the scope and quality of the contract;
- Limit King Faisal Hospital rights or bidders' obligations; and
- Unfairly impact the competitive position of other bidders.

A bid that is "substantially responsive" but has minor commercial or technical deviations should be retained for a more detailed evaluation and should not be rejected. For example, a bid offering goods with minor deviations from the technical specifications which do not affect the suitability of the goods for the intended use should not be rejected. The minor deviations are unlikely to have a negative impact on the project implementation.

5.7.9 Due Diligence of Recommended Bidder/Consultant

All evaluated bidders shall go through a due diligence screening process to ensure they comply with King Faisal Hospital bidder requirements such as legal registration and status, development partner and government guideline requires, good financial standing and ethical practices.

King Faisal Hospital shall conduct a due diligence assessment on the substantially responsive and bidders in order to ascertain the authenticity of the information provided in their bids; the level of satisfaction/ quality of work performed for previous clients; litigation record; industry and business reputation; financial solvency and any other reason as shall be determined by King Faisal Hospital. A combination of desktop due diligence (including reference checks), site visits or expanded due diligence (conducted by an external service provider) should be conducted.

Site visits or expanded due diligence should be conducted on a need basis or as predetermined based on:

i. The nature and the complexity of King Faisal Hospital procurement needs.
ii. Eligibility requirements; including donor requirements.
iii. Overall risk rating of the bidder and profile following the desktop due diligence.

During the site visit the HTB team (procurement, finance and user unit) shall reaffirm or assess information predetermined at desktop due diligence level. Alternatively, the expanded due diligence can be carried out by an independent third party (paid for by King Faisal Hospital) before being considered for approval. The due diligence assessment shall be documented and inform decision making for supplier prequalification and or contract award where the prequalification process is conducted concurrently with the sourcing process.

5.7.10 Cancellation of Bid

King Faisal Hospital may decide to cancel the bid procedure at any stage subject to the existence of a proper justification. Some possible reasons for cancellation include:

a. The bidding procedure has been unsuccessful, i.e., no qualitatively or financially worthwhile tender has been received or there is no or poor response;
b. The economic or technical data of the project has been fundamentally altered.
c. Exceptional circumstances or force majeure render normal performance of the contract impossible;
d. It is determined that the services/goods/works are no longer needed or would not aid in the attainment of intended organization objectives;
e. The lowest responsive offer significantly exceeds King Faisal Hospital's estimation and the financial resources available; and

f. There have been irregularities in the procedure, in particular, where these have prevented fair competition.

In the event of cancellation of a bid, bidders must be notified of the cancellation by the Head of Procurement or his delegate. Such bidders shall not be entitled to any compensation. For manual submissions, where the tender procedure is canceled before the envelopes are opened, the unopened and sealed envelopes must be returned to the respective bidders.

All King Faisal Hospital staff must be aware that cancellation undermines the hospital's credibility and its position in the market. King Faisal Hospital should make proper use of tools such as procurement planning, market surveys or stakeholder management, in order to avoid as much as possible, the need for cancellation of any bidding process.

5.7.11 Procedures for evaluation of bids

Upon receipt and opening of offers, the evaluation process shall commence and be conducted according to the evaluation criteria and method defined in the solicitation documents. Under no circumstances may a new or revised evaluation criterion be introduced during the evaluation of offers, nor the method of evaluation be changed. These regulations ensure transparency and fairness during the evaluation process. The evaluation process includes the following steps:

a. Establishment of an evaluation team;
b. Preliminary evaluation (to be undertaken by the Procurement Unit. This process evaluates bidding documents to ensure all mandatory requirements are included and a report presented to the HTB C for concurrence;
c. Technical evaluation (in case of two-envelope evaluation, this requires completion of the technical evaluation report and the opening of financial offers);
d. DCEO and/or the approving authority shall adjudicate the bids for the provision of goods, services, and works based on recommendations made by the HTB in line with the approval mandates;
e. Financial evaluation;
f. Negotiations; and
g. Preparation of overall evaluation report including the selection of the bidder.

The Procuring Unit and HTB cannot negotiate with the bidders during the evaluation stage. This would lead to a modification of the initial conditions set out in the bidding document (e.g., a significant change in the scope of the project or the contract price).

5.8 Notification of tender award

The bidder whose proposal or offer attains the highest score in accordance with the evaluation criteria in the solicitation document is selected for award, subject to satisfactory conclusion of negotiations. King Faisal Hospital notifies the successful bidder of its selection and at the same time inform all other bidders of the decision. In the absence of a claim by any other bidder within four (4) days from the date of that notice, the procurement contract with the successful bidder is signed by both parties.

5.9 Complaints, Appeal or Review Procedure

5.9.1The Right to Appeal or Review

A prospective bidder or actual bidder may, at any stage of the procurement proceedings and in accordance with this manual, apply for a review or appeal of any conduct in the procurement proceedings with respect to this manual or any other procurement regulations. The appeal will be addressed to King Faisal Hospital Deputy Chief Executive Officer (DCEO).

5.9.2 Appeal or Request for Review

A request for review is admissible only if the complainant has submitted it to King Faisal Hospital within seven (7) days from the occurrence of the reason for such a request for review. The appeal or request for review shall be acceptable if it explains a specific act of omission or commission contravening the procurement requirements as laid in this manual or other procurement regulations. The complainant or appeal shall show the injustice committed against him/her resulting from the contested decision and the appeal shall be done in writing.

The request for review shall include the following:

a) The organ to which the review is addressed;
b) Identification of the complainant: names address and telephone number;
c) Decision against which the review is requested;
d) Date on which the decision was taken and when the complainant became aware of it;
e) Signature or thumb print of the applicant;
f) Copy of trading license and company registration certificate.

Upon receiving the request for review, the DCEO shall suspend the procurement proceedings and issues the response within seven (7) calendar days, a written decision explaining the reasons on which the decision is based when the request for review is considered not to be founded, or indicating the corrective measures to be taken if the request for review is founded.

If the DCEO fails to issue a decision within seven (7) calendar days from receipt of the complaint, an additional period of 4 calendar days will be added and communicated to the Complainant.

However, the review by the DCEO shall not apply for the tender which is not awarded in open competition.

The DCEO shall wait for seven (7) calendar days from the date on which the bidder who requested for review received the decision on such a review before proceeding with the tender or contract awarding process. If the DCEO considers the request for review founded, the DCEO will recommend the re-evaluation.

In case the complaint is not founded or inadmissible, the Complainant will be communicated about the review results, and the DCEO will therefore recommend to proceed with the tender process.

5.10 Contract Negotiations and Award

Negotiations are discussions or "exchanges" with a potential bidder(s), prior to the award of a contract in either a competitive or sole source situation with the intent of allowing the potential bidder(s) to provide their best financial proposal(s). In principle, this is to ensure the best value for money is attained but without compromising the principle of fair and equal treatment of bidders.

The Head of Procurement is responsible for coordinating all negotiations for the tenders that are subjected for negotiation, and discuss, finalize certain details of the contract, prior to its conclusion. The number of negotiation committee members shall depend on the value and complexity of the procurement but does not fall below 3 members.

5.10.1 Contract Negotiation Committee

Contract negotiation committee is comprising of a representative of the End User and Procurement Unit. The Legal Advisor may also be part of the negotiation team when it is judged needed by the DCEO (Chief Budget Manager), specifically on complex contracts.

The negotiation of contract should **take place after provisional notification of tender award.** Negotiation will be done with successful bidders in accordance with HTB evaluation ranking.

In case of the negotiation process failure at the 3rd ranked bidder, the Procurement Unit will proceed to the re tender.

The final notification and contract award should reflect the negotiation results.

5.11 Receipt of Goods, Works, and Services

5.11.1 Receipt of Goods

a. King Faisal Hospital shall appoint a receiving committee depending on the nature of supplies. This will defer from medical and non-medical supplies. A member of the user department, shall always be part of this committee
b. When goods are delivered to King Faisal Hospital offices, a delivery note should accompany the deliveries.
c. Deliveries should be forwarded to the Requisitioning or Beneficiary Unit for ratification of goods delivered. The recipient should initial the delivery note as evidence of acceptance of goods delivered.
d. The receiving committee, together with supplier shall perform an inspection of delivered good and or consumables in accordance with pre-determined technical specifications
e. If in apparently good condition, a Goods Receipt Note should be raised or the delivery note may be signed to acknowledge receipt and inspection.
f. If signs of tampering are visible, the level of damage should be assessed.
g. In case the goods need to be returned, the Unit shall make a note on the delivery note stating the reason for decline e.g., "cases broken", "contents lacking", and "cartons opened with the sign of pilferage".

Where possible, packages should be weighed to determine differences between declared and actual weights, documenting any discrepancies in the delivery notes.

5.11.2 Receipt of works

a. After contracting, the User Unit shall engage the bidder for the delivery of the contracted works.
b. The User Unit shall ensure that the works are provided in line with the contract terms.
c. The User Unit shall monitor progress to ensure there are no deviations from the proposed deliverables.
d. Where deviations are noted, the User Unit shall engage the bidder to develop mitigating measures and ensure timely delivery of works as per the specifications.
e. Where the deviations are not addressed by the mitigation measures and the bidder fails to deliver as per the BOQ, King Faisal Hospital may consider disengaging the bidder.
f. Upon successful completion of the contracted works and submission of a project closure report by the bidder, King Faisal Hospital shall issue the bidder with a works receipt note. The project closure report which shall be used by King Faisal Hospital management to:

iv. Review and assess the success of the project against the bill of quantities;
v. Confirm outstanding issues, limitations and recommendations; and
vi. Identify all the tasks and activities completed before issuance of work receipt note.

5.11.3 Receipt of services

a. After contracting, the User Unit shall engage the service provider for the delivery of the contracted services.
b. The User Unit shall ensure that the service is provided in line with the contract terms.
c. The User Unit shall monitor progress to ensure there are no deviations from the proposed deliverable timelines.
d. Where deviations are noted, the User Unit shall engage the bidder to develop mitigating measures and ensure timely delivery of services.
e. The User Unit shall send the final deliverables and the specific contract as proof of service delivery.

5.11.4 Invoice Handling

a. All bidders' invoices shall be sent to the finance department. Upon receipt, invoices are sent directly to the User Unit for verification and comparison against the PO/contract (prices, quantities, service deliverables, extensions or additions).
b. The User Unit acknowledges receipt of goods and/or services through a Goods Receipt Note or Service/Works Receipt Note/approval of reports.
c. Anomalies with the agreed terms and conditions are brought to the attention of the Head of Procurement for appropriate action.
d. The Head of User Unit approves the GRN (Goods Received Note) and acknowledges the invoice
e. The approved invoice and GRN are then forwarded to Director of Finance for a final check and approval before payment is made.
f. Procurement or and Finance Unit maintains an up-to-date record of orders placed but not yet fulfilled, to ensure that the supplies are timely delivered.

CHAPTER 6: CONTRACT AWARD AND ADMINISTRATION

6.1 The Basis of Contract Award

King Faisal Hospital shall not engage bidders or service providers to commence supply of goods, provision of services or execution of works without a duly approved contract. The objective is to ensure that there is a binding legal agreement between King Faisal Hospital and the bidders that clearly spells out the obligations of either party. User Units and Procurement Unit shall award contracts within the period of the offer's validity, to the bidder that meets the prescribed requirements and whose bid has been determined to:

- Be substantially responsive to the solicitation documents, and
- Offer the best value for money, where applicable.

Where price is the sole determinant in making an award, the contract is awarded to the lowest evaluated offer, where all technical criteria are met. The term "lowest evaluated offer" comprises, where possible, the costs of additional components, such as life cycle costing (i.e., running and maintenance costs) amongst other qualified and responsive competent offers. However, in the case of proposals, a contract is awarded to either:

- A bidder, who obtains the highest cumulative score of both the technical and financial proposals combined; or
- A bidder who attains the highest technical score where the financial proposal is not an evaluation criterion.

6.2 Performance security

6.2.1 Submission of performance security

i) The procuring entity requests the successful bidder to submit a performance security before signing a contract depending on the value of the contract, nature activities to be carried out and associated risks

ii) The performance security does not generate interest and is determined in accordance with the form provided for in the tender document.

iii) When the contract execution period is extended or its value is increased, the contractor extend the validity period of the performance security and increase its amount accordingly.

iii) The updated procurement manual determines further modalities for applying the Performance security stated under paragraph (1) of this Article on different thresholds, depending on the nature and value of the tender.

iv) For a framework agreement, the procuring entity requires the performance security per each purchase order exceeding value determined by the procurement manual of the procuring entity.

vi) For national tenders, the performance security is provided within 10 days from the submission date of the invitation letter to sign the contract.

vii) For international tenders, the performance security is provided within 15 days from the submission date of the invitation letter to sign the contract.

6.2.2 Amount and period for submission of performance security

i) The contract is signed after the procuring entity has received the performance security when required

ii) Where applicable, the performance security value cannot be less than 5% or more than 10% of the procurement contract value

The amount of the performance security may be a percentage of the contract value as follows:

(a) 5% of the value of the contract whose value exceed FRW 500,000,000;

(b) 6% of the contract price whose value between FRW 100,000,000 FRW to FRW 500,000,000;

(c) 7% of the contract price whose value is between FRW 50,000,000 to FRW 100,000,000;

(d) 10% per cent of the contract price whose value is between FRW 20,000,000 to FRW 50,000,000.

(e) For framework contracts, the performance security will be requested based on the total estimated contract amount.

(f) The performance security is not requested in cases of justified emergencies specifically for procurement of medications, consumables and laboratory reagents

6.2.3 Non-requirement of a performance security for tender

1) The performance security is not required for the following tenders:

a) Any tender for consultancy services

b) A tender whose amount does not exceed Twenty (20) million Rwandan Francs for non-medical

2) For the case stated under paragraph (1), the successful bidder shall only submit the performance securing declaration.

King Faisal Hospital, deserves the right to confirm the authenticity and validity of the provided performance security

6.3 General Provisions

Contracts executed shall clearly define:

a. The nature of the goods, civil works and/or services being procured;
b. The quantity being provided;
c. Contractual or unit price;
d. Duration of the contract;
e. Conditions to be fulfilled, including applicable King Faisal Hospital general terms and conditions;
f. Terms of delivery and payment;
g. Name and address of the supplier;
h. Tax rates and amounts;
i. The rights and obligations of Rwanda King Faisal Hospital and of the supplier; and
j. Performance clause;
k. Termination clause

Modifications and/or additions to King Faisal Hospital General Terms and Conditions are prohibited. However, if required and expressly approved by Legal advisor and DCEO, special conditions appropriate to the nature and location of the assignment may be supplemented to the standard Terms and Conditions. Where performance security is required to ensure performance during the warranty period, a contract should be signed only upon receipt of the performance security in the form of a bank guarantee or performance bond.

6.4 Types of Contracts

The following types of contracts are referred to under this manual:

6.4.1 Purchase Orders (POs)

All procurement costs incurred by King Faisal Hospital Rwanda must be supported by a Purchase Order (PO) and must contain stipulated provisions in section 8.2 (General Provisions). However, services contracts or framework agreement, one off contracts may be used in place of a purchase order where the amount payable and terms of reference are clearly stipulated in the contract and are not subject to change.

Goods, un-repetitive and low-value non-consulting services shall be contracted through purchase orders. All POs should have unique identifying system numbers (PO number) for reference. Local purchase orders (LPOs) shall be valid for a period of 60 calendar days after the final approval date. Bidders shall be required to deliver the goods or services within the 60-day period.

For international purchases, POs shall be valid for a period of 90 calendar days after the final approval date. Bidders shall be required to deliver within the 90-day period. If the bidder is not able to deliver within the set timelines, extensions shall be given if the bidder reports the deadline constraints through written communication and the extension is approved by the Head of the User and Procurement Unit.

6.4.2 Framework Agreements

Framework contract is used where there is a need to have specialized services "on call" and the extent and timing of the requirement cannot be defined in advance; or for requirements which are needed repeatedly or continuously over a period of time and having the requirement available on a "call off" basis would reduce procurement costs or reduce lead times. Examples of goods and services to be procured through framework agreements include but are not limited to office supplies, hospital consumables and conference services, cleaning services, maintenance services, catering services, security services, editorial, and proofreading services, office supplies etc. Multiple framework agreements could be executed for one procurement category and purchases done through call-off purchase orders on a rotational basis, where applicable.

Bidders offering repetitive goods and non-consulting services to King Faisal Hospital shall be prequalified every three years and engaged through framework agreements. The framework agreements shall define standard rates per activity and the bidder shall retain these rates for one year after signing the framework agreement. The framework agreements shall be valid for one-year renewable twice subject to satisfactory performance and budget availability. Bidders with framework agreements shall only be engaged for the category of goods, works and non-consulting services they were prequalified for.

The procedure for procurement under framework is as follows:

i. The User Unit initiates procurement by completing a purchase requisition (PR) form.
ii. The PR form is then submitted to the head of the User Unit for approval. The head of the User Unit confirms the accuracy of procurement needs before approval.
iii. The PR form is submitted to finance to confirm the availability of funds in line with the approved User Unit budget.

iv. The PR is then submitted to the Head of Procurement for final review prior to issuing a PO to the bidder for supply. The PO shall be approved as per the defined mandate.

All stock items and commonly/repetitively required goods and non-consulting services shall be procured through framework agreements/contracts. The main objective of framework contracting is to save on transaction processing time, consolidation to save on cost and also obtain the best Value for Money through cutting down on the transactional costs of the routine services or products.

Framework agreements shall not be used for specialized or complex consulting services. Depending on the nature of the required items/services, framework agreements can be entered into with more than one provider for the same item to ensure competitive procurement and call off orders shall be issued on a rotational basis to avoid bias procurement. Framework contracts shall be for a period of one year renewable twice, however, bidder performance shall be done annually and King Faisal Hospital may terminate or suspend a framework agreement if the performance of the bidder is not satisfactory.

6.4.3 Consultancy Contracts

The consultancy agreement shall be used for consulting services. These include but are not limited to: audit services, legal services, project management services, training and capacity building, advocacy and policy development etc.

Consultancy contracts are categorized as below:

- Lump sum (fixed);
- Time-based (variable); and
- Retainer fee.

6.4.3.1 Lump sum contracts

Lump-sum contracts shall be used mainly for assignments in which the scope and length of the services and the required output of the consultant are precisely specified and for these reasons, the consultant can generally control the scope of work and duration of services.

Under a lump sum contract, King Faisal Hospital agrees to pay the consultant a fixed sum of money for certain services or works of specified technical characteristics, such as study report, project design, and tender document, to be delivered within a specified deadline, the quality of which can usually be readily assessed. Remuneration is fixed for the life of the contract, and no physical or price contingencies are normally provided. Payments shall be made in accordance with a contractually agreed upon schedule at the delivery of agreed-upon deliverables.

If payments are to be made against a schedule of the percentage of work completed, then, as a minimum, a progress report and supporting evidence that the work has been completed should be submitted.

Lump sum contracts shall be used:

- In relatively simple and clearly defined assignments such as planning and feasibility studies, environmental studies, detailed design of infrastructures, preparation of databases, and surveys.
- In cases of sophisticated and clear-cut assignments in which external factors generally do not influence (delay or substantially change) the outcome of the advice or study being provided.

The lump-sum contract is easy for King Faisal Hospital to administer and requires little minimal supervision, as no matching of inputs to payments is required.

6.4.3.2 Time-Based Contracts

Under this type of contract, the consultant provides services on a time basis according to quality specifications, and the consultant's remuneration is based on:

- Agreed upon unit rates for consultant staff multiplied by the actual time spent by the staff in executing the assignment; and
- Reimbursable expenses using actual expenses and/or agreed on unit prices.

Time-based contracts transfer cost risk to King Faisal Hospital. They require a system to monitor and control assignment progress and costs because consulting firms have incentives to put more resources on the job, including more senior resources.

Time-based contracts should be assigned time-based project work plan and milestones to ensure the time spent on the assignment is accounted for. The Heads of the User Units should approve the consultant's timesheets to mitigate the risk of consultants charging unproductive hours to King Faisal Hospital.

Time-based contracts are recommended when:

a) The nature and scope of the services are such that the TOR cannot be established with sufficient precision, as may be the case for complex or unusual assignments that are difficult to define, such as management of complex institutions or studies on new approaches;
b) A consultant is seconded to King Faisal Hospital as an employee or on a capacity building engagement for a specified period of time;
c) The duration and quantity of services depends on variables that are beyond the control of the consultants, or the services are related to activities by third parties—for instance, supervision of implementation assignments; and
d) The output required of the consultants is difficult to assess, such as for technical assistance, institutional development, or emergency situations, in

which King Faisal Hospital needs, assistance may evolve during execution of the assignment.

This type of contract requires King Faisal Hospital to closely supervise consultants and to be involved in the daily execution of the assignment. King Faisal Hospital management is usually aware of who is working on the job and the nature of each expert's task. While monitoring time-based contracts, King Faisal Hospital shall use a systematic approach to ensure that both parties are fulfilling their obligations as per the terms of the contract. Here are some steps that can be taken to monitor time-based contracts:

a) Establish clear milestones (KPI) and deadlines: Ensure that the contract clearly defines the timeline and milestones for each deliverable or service. This includes start and end dates, specific deadlines for each deliverable, and any other relevant milestones or key performance indicators (KPIs).
b) Create a tracking system: Establish a tracking system that allows you to monitor progress and milestones as they are met. This could be a simple spreadsheet or a more sophisticated project management tool.
c) Regular check-ins: Schedule regular check-ins with the other party to review progress and discuss any potential issues or concerns. This helps to keep both parties accountable and on track.
d) Document everything: King Faisal hospital shall keep detailed records of all communications, including emails, phone calls, and meetings. This documentation can be used to resolve any disputes that may arise later on between both parties.
e) Escalation process: Establish an escalation process for any issues that cannot be resolved through regular communications. This could involve escalating the issue to a higher authority such as DCEO or involving a mediator.

By following these steps, you can effectively monitor time-based contracts and ensure that both parties are fulfilling their obligations as per the terms of the contract.

6.4.3.3 Retainer fee contracts

This type of contract shall often be adopted to remunerate financial, management or legal advisers who assist King Faisal Hospital in its operations. In such cases, consultants shall be required to quote a retainer and/or a success fee in some cases. Procurement for retainer fee contracts involves identifying and selecting service providers who shall provide services to an organization for a set period of time at an agreed-upon fee. The following are the steps that can be taken to conduct procurement for retainer fee contracts:

a) Define the Scope of Services: The first step is to define the scope of the services required. This involves identifying the specific services required, the period for which they shall be required, and any other relevant details.
b) Identify Potential Service Provider: Once the scope of services has been defined, the next step is to identify potential service providers or consultants who can provide these services. This can be done through a search of industry directories, referrals, or through a request for proposal (RFP).
c) Prepare and issue an RFP: If an RFP is used, it should outline the scope of services required, the expected outcomes or deliverables, and the evaluation criteria. It may also include the retainer fee that the service provider is expected to charge for the services.
d) Evaluate Proposals: Once the RFP has been issued, the proposals received from potential service providers should be evaluated based on the evaluation criteria outlined in the RFP. This can include factors such as experience, qualifications, and pricing.
e) Negotiate a Contract: After the evaluation process, negotiations can begin with the selected service provider or consultant. This should involve agreeing on the ToR or scope of services, the retainer fee, the payment terms, and any other relevant details.
f) Sign the Contract: Once the negotiations are complete, the contract can be signed by both parties, and the supplier can begin providing the services.
g) Manage the Contract: Finally, the contract should be managed throughout its duration to ensure that the supplier is meeting the agreed-upon requirements and that payments are made in a timely manner.

6.4.4 Performance Clause

Provisions for liquidated damages or similar provisions, generally established at one percent of the total contract amount per week, shall be included in the conditions of the contract when foreseeable delays and delays within the control of the bidder result in extra cost or loss of revenue or loss of other benefits to King Faisal Hospital. Such a provision provides a claim of right to remedies, deducting a fixed percentage for each day or week of delay as compensation for losses sustained in the case of non-performance or late performance. The performance clause should be included in all King Faisal Hospital contracts.

6.4.5 Contract Amendments

Once a contract has been awarded and signed, the User Unit, in consultation with the Head of Procurement, is permitted to amend provisions in one of the following situations:

- Extension of the validity period; or

- Addenda to the contract i.e., in furtherance to the execution of an original contract, additionally related goods, civil works or services are to be rendered by the same entity. An amendment to the contract should not exceed 20% of the initial contract value.

Contract extensions shall not be done for unrelated goods, civil works or services. All amendments must be requested by the Head of the User Unit citing the revised contract provision(s), the original provision(s) and the affected specifications, statement of works or TOR. Further, all amendments should be submitted for review through the DCEO and/or the HTB depending on the size of the contract.

6.4.6 Procedures for contract amendments

The User Unit shall initiate all contract amendments. The Head of the User Unit shall communicate to the Head of Procurement the intention to amend an existing contract. The procedures shall be as below based on the type of amendment:

1. Contract timeline extensions
    - The Head of User Unit shall justify the request for contract amendment, supporting the reason for the amendment, provided by the supplier/contractor
    - The Procurement shall assess the rational of such request for contract amendment and invite the HTB for further analysis and approval. Inadequately supported request, thoroughly analyzed by HTB, shall be subjected to relevant penalties
    - Where necessary, KFHR, shall invite the concerned contractor for substantial contract management practices
    - HTB shall assess the reasonableness of time extension in accordance with the progress of supplies, works or services

6.5 Advance Payments

Except where the normal commercial practice or the interests of King Faisal Hospital so require, no contract or purchase order shall be made on behalf of King Faisal Hospital requiring an advance payment(s) for goods or the performance of contractual services. If an advance payment is agreed to, all reasons thereof shall be documented. Advance payment, in all cases, should not exceed 20 percent of the total contract amount and the suppliers shall be required to obtain and submit an advance payment guarantee of an equivalent amount.

Examples of activities that may justify an advance payment are:

- Mobilization costs (civil works);

- Start-up costs (services); or
- Design costs.

The reasons for any exceptions shall be documented and handled appropriately. In the case of progress payments, the DCEO may, where appropriate (i.e., in the interest of King Faisal Hospital), authorize such payments. Progress payments, however, should be linked to the successful completion of requested deliverables. To recover an advance payment, progress payments and the final payment shall be subject to a percentage deduction equal to the percentage that advance payment represents over the total price of the contract.

6.6 Breach and Termination of Contract

6.6.1 Breach of contract

Suppliers and or contractors are liable for any material breach of their contractual obligations. A material breach is defined as when King Faisal Hospital is deprived of significant value reasonably expected from the contract. If a supplier materially breaches an obligation(s), the Procurement Unit should provide written notice to the supplier, with a copy to the DCEO, allowing the bidder a commercially reasonable period of time to cure the defect. In the event that the bidder fails to cure the alleged breach, the Procurement Unit must inform the DCEO for further actions

6.6.2 Cancellation and Termination of contract

A contract can be cancelled or terminated when;

- There is a material breach of the entire contract, and the breach has not been cured or waived; or
- The agreement allows cancellation for the breach.

King Faisal Hospital or the bidder may terminate the services contracted or suspend its operation by giving up to 30 days' notice in writing to the other at any time.

For medications and consumables, a suitable purchasing process (RFQ, simplified,..) may be initiated in case of Supplier delays or failure to deliver, without waiting for termination to happen.

For non-medical products, a shorter purchasing process may also be conducted after termination with the failed Supplier/Contractor to avoid shortage, while waiting for an open tender process to be completed.

Termination process or suspension under this clause shall be without prejudice to any rights that may have accrued for either party before termination or suspension and all sums due to either party shall become payable when termination or suspension takes effect.

However, termination of a contract is not a recommended course of action. If the procuring entity still wishes to seek termination, the Procurement Unit should contact the Legal advisor and the DCEO for guidance and approval.

a) Procedures for Contract Termination
   i. The Head of the User department / unit, in consultation with the Head of Procurement and the Head of Legal, shall communicate the intention to terminate any active contract or relationship with a bidder;
   ii. The Legal advisor shall assess the provisions and reasons for termination in the signed contract;
   iii. The Legal advisor shall advise the Head of User Unit and Head of Procurement the termination options available. All King Faisal Hospital contracts should have a termination clause allowing either party to terminate a contract through written notice and communication;

Note: The Head of User Unit shall send the termination notice and communication to the bidder's communication channels stated in the contract.

6.7 Dispute Resolution

Any contractual dispute, shall on the first instance be resolved amicably. The second level of dispute resolution shall be through a mediator agreed upon by both parties, beyond this the dispute will be referred to the competent courts of law.

6.7.1 Debarment of contractors

The debarment of defaulting contractors, shall be done in accordance with the law governing public procurement in Rwanda

CHAPTER 7: MONITORING, CONTROL AND ACCOUNTABILITY ASSESSMENT

7.1 Monitoring Mechanism

A monitoring mechanism for the implementation of this updated manual is essential to ensure that King Faisal Hospital is following its procurement policies and procedures while procuring goods, works and services.

7.2 Policy statement and objectives

Monitoring is an assessment of execution of procurement related activities by the Procurement Unit in relation to agreed/expected timelines/schedules and delivery of the procured goods, works and services. It is an integral part of good procurement function management.

King Faisal Hospital shall implement procurement monitoring and evaluation mechanisms to objectively assess performance for the defined key results areas (KRAs) against the identified performance indicators derived from the procurement objectives. Its main objective shall be to provide continuous feedback on the performance of the Procurement Unit and to identify actual or potential challenges as early as possible to facilitate timely mitigation within procurement processes.

The performance indicator targets form the basis for determining the efficiency and effectiveness of the Procurement Unit and the overall contribution towards the achievement of King Faisal Hospital's strategic objectives. The Head of Procurement is in charge of monitoring performance against the set KPI's and reporting on a monthly and quarterly basis:

a. User satisfaction (availability, lead-time, quality, cost, etc.).
b. Continuity of supply.
c. Flexibility and speed to respond rapidly to market changes.
d. Assessing corporate strategic options through analysis of supply costs, risks, and opportunities.
e. Total quality management and cost optimization.
f. Procurement risk management.
g. Compliance with legal and regulatory requirements.

7.3 Turn-around times in procurement

Turn-around time in procurement refers to the amount of time it takes for a procurement process to be completed, from the identification of a need for a product or service to the delivery of the purchased product or service. This time can vary depending on the complexity of the procurement process and the policies and procedures in place within an organization. To improve turn-around times in procurement, King Faisal hospital shall implement strategies such as streamlining processes, leveraging technology to automate tasks, and establishing clear communication channels between procurement teams and other stakeholders. By reducing the time, it takes to complete procurement processes, King Faisal hospital shall be able to improve their efficiency, reduce costs, and increase customer satisfaction.

7.3.1 Procurement Planning Timelines

Every year, the Procurement Unit shall initiate the procurement planning process. In order to ensure efficiency in the planning process, King Faisal Hospital internal stakeholders shall adhere to the following timelines:

Table 4: Procurement Planning Timelines

S/N	Action	Responsible person	Timeline
1.	Initiate the procurement planning process	Head of Procurement	15th April Every Year
2.	Prepare and submit duly filled unit procurement plans to the Head of Procurement	Heads of User Unit	15th May
3.	Review of procurement plans, discussion with the respective units and submission to the DCEO	Head of Procurement	15th June
4.	Review and Approval by BOD	BOD	30th June

7.4 Timelines for Prequalification of Bidders

Prequalification of bidders shall be done every three years or as and when needed and shall adhere to the following timelines:

Table 5: Timelines for Pre-qualification

S/N	Action	Responsible person	Timeline (Working Days)
1.	Development a prequalification document *(ToR / specification, evaluation)*	Procurement Unit	14 days after procurement plans approval
2.	Submission of advert and final prequalification document to the Director of Operation for approval	Head of Procurement	1 day
3.	Publication of advert and prequalification document in	Head of	14 days

S/N.	Action	Responsible person	Timeline (Working Days)
	the selected media and Receipt of suppliers' prequalification bids or EOIs.	Procurement	
4.	Opening of EOIs or prequalification bids	HTB and User unit/ department	As indicated in the advert (1 hour after submission deadline)
5.	Evaluation of bids (prequalification), approval of evaluation report and notification to bidders	Procurement Unit and HTB	Within two weeks from the submission deadline
6.	Standstill period (opportunity for unsuccessful bidder to appeal)	Procurement Unit and HTB	Within 7 after notification to bidders
7.	Updating the database of prequalified bidders	Procurement Unit	Within 20 days after 7 days of standstill in case of no appeal

7.5 Other Performance Indicators

7.5.1 Cost savings

Where possible, the Procurement Unit shall engage bidders in cost-saving negotiations after completion of the bid's evaluation process as per the authorization thresholds/ approval matrix and ranking of bidders. This opportunity shall be given to the highest technically ranked candidate(s). Further, the Procurement Unit should ensure that quality is not compromised in pursuit of cost savings. The following parameters may be applied in assessing cost savings:

a) Off-budget savings: Difference between the negotiated price and the budgeted baseline for an item. Procurement calculates off-budget savings as the difference between the negotiated price and the budgeted baseline.
b) Cost reduction: This is the difference between the negotiated price and the baseline price paid the previous year.
c) Cost avoidance: Whilst maintaining quality, procurement in collaboration with User Units should minimize incremental cost on continuing supplies. Cost avoidance should be estimated by obtaining the difference between the proposed increase and the negotiated price.

7.5.2 User satisfaction and bidder performance evaluation

Annually, the Procurement Unit shall conduct user satisfaction and bidder performance evaluations under the framework agreement. Users shall have an opportunity to provide feedback on bidder performance and highlight areas of improvement. However, Users are encouraged to provide continuous feedback to ensure any complaints are resolved as soon as possible.

7.5.3 Tracking of procurement internal audit findings

The Head of Procurement shall track all procurement internal audit findings on a quarterly basis and based on implementation dates indicated in the internal audit report. Findings that cannot be closed by the indicated implementation dates shall be discussed with the Head of Internal Audit and DCEO for remediation.

7.5.4 Single sourcing and competitive bidding

The Procurement Unit shall track instances of single-sourced procurements on a quarterly basis and share this report with the Head of Procurement. Instances of single sourcing that are not covered by the justifications in this policy, section 6.1.3, should be reported to the DCEO to avoid abuse of the single sourcing procurement method.

7.5.5 Continuous monitoring of PO

Quarterly, the Procurement Unit shall review the list of long outstanding purchase orders. Local POs shall be valid for 60 days after the date of issuance and International POs shall be valid for 90 days after the date of issuance. POs dated above the validity period shall be circulated to the User Units for justification and POs without justification shall be closed.

The Head of Procurement shall also review the list of long outstanding POs and approve closure of long outstanding POs without justifications. King Faisal hospital shall not delete POs from the procurement system.

7.5.6 Management of Bidder Master File

Annually, the Procurement Unit shall review the bidder master file to ensure all necessary details are recorded, there are no duplicate bidder details and initiate deactivation of any inactive bidders. Bidders shall be deemed inactive if they have not been engaged for a period of two years and above. Rwanda King Faisal hospital shall not delete bidders from its bidder master file.

7.6 Post Review and Audit

King Faisal Hospital's Hospital Tender Board shall be mindful that all procurement proceedings are subjected to post review and audit (internal or external), specifically, the post review done, will be done by any delegated team by management or BOD/shareholder. Internal audit will be conducted by Internal auditor, while external audits shall be conducted by the Office of the auditor general for State Finances as well as chief internal auditor general.

7.7 Filing, Referencing and Data Retention

In order to facilitate proper monitoring and control of the procurement process, it is the responsibility of the Head of Procurement, Procurement Unit and Finance Unit to ensure that all procurement documentation relating to all procurement transactions are properly filed. This should be done in a chronological order to facilitate audit trail.

The following documentation is to be kept in a file or in electronic format for every transaction as applicable:

a) Requisition notes;
b) Solicitation documents (RFQ/RFP);
c) Bids (tenders, quotations, proposals);
d) Evaluation process documentation (including single sourcing);
e) Supply contracts (purchase orders, service contracts, consultancy contracts);
f) Goods received notes/goods returned notes;
g) Invoices;
h) Payments vouchers; and
i) Other relevant documentation.

All procurement and procurement related records shall be maintained for a period of 10 years after completion of each transaction or as specified by any applicable laws of the land where King Faisal Hospital operates, whichever is higher.

7.7.1 Document filing techniques

There are many techniques for filing documents, and the most appropriate method shall depend on the specific needs of the individual or organization. Here are some common documents filing techniques:

1. Chronological filing: This method involves organizing documents in order of their creation or receipt date. It is ideal for organizations that deal with time-sensitive documents, such as accounting or billing records.
2. Numeric filing: This method involves assigning a unique number to each document and organizing them in numerical order. It is ideal for organizations that deal with large volumes of similar documents, such as invoices or purchase orders.
3. Color-coded filing: This method involves using color-coded labels or folders to categorize documents. It is ideal for organizations that deal with a variety of document types and need to quickly identify specific documents.

4. Digital filing: This method involves using digital document management software to store and organize documents electronically. It is ideal for organizations that want to reduce paper waste and improve document accessibility.

When deciding on a filing technique, consider factors such as the volume of documents, the types of documents, and the needs of King Faisal Hospital. It is also important to establish a consistent filing system and train procurement employees on how to use it effectively.

7.8 Consequences of not adhering to the policy

The consequences of not adhering to this manual can be significant, both for the organization and for the individuals involved. Here are some potential consequences:

a) Legal consequences: If the procurement policy is required by law or regulation, non-compliance could result in legal penalties or fines.
b) Reputational damage: Failure to follow procurement policy can damage the reputation of the organization, as it could be seen as unethical or even corrupt.
c) Wasted resources: Not adhering to procurement policy can lead to inefficient use of resources including time, as contracts may be awarded to less qualified bidders, or at higher prices than necessary.
d) Increased costs: By not following procurement policy, an organization could end up paying more than necessary for goods or services.
e) Loss of confidence: Failure to follow procurement policy can lead to a loss of confidence by stakeholders, including customers, suppliers, and shareholders.
f) Employee discipline: Employees who do not adhere to procurement policies can face disciplinary action, up to and including contract termination.

Overall, it is essential for organizations to take procurement policies seriously and ensure that they are followed rigorously to avoid negative consequences.

7.9 Approving Authorities

The approving authorities shall comprise of designated persons and/or committees; whose main role shall be to review, approve, reject or recommend alternative courses of actions to specific procurement decisions at various stages of the procurement process. The approvers shall execute their roles in line with the approval limits or procurement threshold as shall be established and approved King Faisal Hospital's Management and the Board of Directors. Approving authorities except for the Board that function as committees shall have appropriate terms of reference approved by the DCEO to guide their appointment, composition, tenure, quorum, and their roles and responsibilities.

Note:

1. All activities to be requisitioned shall be on an approved procurement plan.
2. Activities missing from the approved plan shall require the approval of the DCEO.
3. This approval matrix does not apply to subsidiary entities or joint procurements with external partners.

7.10 Reporting Requirements

The Head of Procurement shall report to the DCEO and the Management on the following key result areas as defined below:

Table 8: Reporting Matrix

S/N	Key results area	Reporting Frequency
1.	Execution of procurement plans including procurement outside approved procurement plans	Monthly
2.	Tracking of procurement internal audit findings	Quarterly
3.	Procurement progress report	Monthly
9.	Annual procurement report	Yearly

CHAPTER 8: PROCUREMENT RISK MANAGEMENT

8.1 Risk definition

Risk is the possibility that an event shall occur and adversely/ favorably affect King Faisal Hospital's ability to achieve its objectives.

8.2 Policy statement and objectives

Risk management is a process effected by the Board, Management and other personnel designed to identify potential events that may affect the organization and manage risk to be within its tolerance, to provide reasonable assurance regarding the achievement of the organization's strategic objectives.

King Faisal Hospital shall integrate effective risk management in its procurement processes by putting in place appropriate measures to detect and prevent procurement risks through monitoring and controlling procurement operational activities.

The objective of risk management is to proactively identify, assess, measure and manage all existing and emerging procurement risks. This shall also enable King Faisal Hospital to respond to incidences quickly and increase stakeholders' confidence in the procurement process by establishing transparency and accountability of the process.

A number of procurement risks must be taken into consideration when defining procurement strategies. These can be clustered in three main groups:

a) *Environmental risk:* Risks associated with the political environment, natural disaster or delivery infrastructure. These may have an overall impact on the execution of procurement activities and procurement spend;
b) *Program risk:* including but not limited to the risk of procuring from a specific market, the complexity of the procurement management, or the risk associated with the nature of the goods, services or works to be acquired, among others; and
c) *Implementation risk or risks associated with the deployment of procured goods* e.g., lack of integration of the system procured for contract management and the ERP system.

8.3 Procedures for Procurement Risk Management

Procurement risk management shall be managed by the Head of Procurement. The Procurement Unit shall proactively pursue procurement risk management by undertaking at a minimum the following measures:

a. Identify a risk champion in liaison with the Head of Procurement who shall coordinate the risk management initiatives in procurement;

b. Quarterly and on a continuous basis, conduct risk assessments within the procurement operations to identify any risks, establish their likelihood /impact and implement mitigation strategies/controls;
c. Developing and updating the risk registers for the procurement processes;
d. Carry out comprehensive due diligence on bidders in collaboration with the User Unit before entering into a business relationship with them;
e. Establish clear Key Performance Indicators (KPIs) which shall be regularly measured, monitored and audited. The KPIs should relate to measures of the ethical and quality standard, code of conduct, internal controls, and overall operational practices;
f. Adequately segregate duties within the procurement unit;
g. Recruit the right Procurement Staff who are competent, of good ethical
h. standing and regularly review their performance;
i. Develop an incident response plan to allow for quick response to risks within the unit;
j. Implement continuous monitoring tools, including the use of data analysis to detect any form of anomalies that could occur within procurement; and
k. Perform post review and audit of procurement activities in liaison with internal and external auditors on a regular basis.

An important point emphasized is that simply identifying and assessing risks is not sufficient. To reduce risks to an acceptable level, mitigating measures must be identified that are effective in reducing the risk, and these measures must be implemented.

a) To ensure that the measures are implemented, progress of implementation of the measures needs to be monitored and managed.
b) To enable the monitoring and management of mitigation measures, mitigation actions should be documented in a risk assessment document.

Procurement risk management is not a one-time exercise. Following the initial risk assessment, risks may change or new risks may become apparent. The risk assessment should be updated in response to changed conditions, or new information on risks, and at key points in the procurement process to ensure that risks are effectively managed.

8.4 Other provisions on Risk Management

Other provisions on risk management are provided under the "Risk Management Policy" that provides details on policy statement, scope of the policy, risk management philosophy, risk appetite, risk management strategies, and roles and responsibilities.

CHAPTER 9: PROCUREMENT CODE OF ETHICS

9.1 Introduction

The procurement code of ethics is an important chapter that governs the conduct of King Faisal Hospital staff involved in the procurement process at King Faisal Hospital. The Chapter outlines a set of principles and guidelines that stakeholder and actors must adhere to when conducting procurement activities.

Procurement activities shall adhere to the highest professional, ethical, moral and legal standards. Procurement activities must be conducted in the manner above reproach with complete impartiality and with no preferential treatment. This shall require the highest degree of trust and an impeccable standard of conduct.

Since King Faisal Hospital's funds are entrusted to it by its donors and the public at large, it is imperative that all transactions committing King Faisal Hospital are carried out with the highest degree of public trust and to international best standards.

King Faisal Hospital procurement process must allow bidders to compete for King Faisal Hospital's business on a fair, equal and transparent basis. Staff associated with the procurement unit and other staff involved in the procurement process are therefore responsible for protecting the integrity of the procurement process and maintaining fairness in Kigali Hospital's treatment of all bidders.

9.2 General principle

With respect to procurement matters, King Faisal Hospital employees, officers, and appointees, or any other person participating in a procurement process, shall comply with all applicable ethics and conflict of interest requirements which shall include the following:

a) They shall not use the procurement process to secure special privileges or exemptions for themselves or others because of their positions;
b) They shall not knowingly receive gifts or loans that tend to influence the discharge of their official duties. However, they may accept occasional non-pecuniary gifts valued at less than Rwf 10,000, publicly presented awards, or bona fide loans or any other contributions, unless authorized to accept those by King Faisal Hospital's Senior Management;
c) They shall not receive or agree to receive compensation for assisting another in a transaction with the King Faisal Hospital unless they file a disclosure of information with their supervisors and others who rely on their representations during the transaction;
d) When their personal interests and investments conflict with King Faisal Hospital missions, the conflict must be disclosed as soon as possible to the Senior Management.

Case of doubt on the way to behave in situations that are likely to affect perception of supervisors or third person's perception on King Faisal Hospital staff integrity in procurement processes, the concerned staff shall seek advice or assistance from senior colleagues or supervisors.

9.3 Compliance with this updated Manual and Staff Rules

Compliance with this Manual and other King Faisal Hospital Manuals shall be the basis of sound business conduct. Although a detailed knowledge of all applicable laws is not expected, procurement team shall take reasonable care to acquaint themselves with the main requirements of the procurement job, King Faisal Hospital partners and subsidiaries requirements regarding ethics in procurement.

Unlawful acts shall not be acceptable whatever the justification be. Good motives shall not be excuse for committing illegal acts as the procurement business require high level of integrity. When performing their duties, procurement staff shall avoid to:

a) Act in a manner preventing the client from getting benefits of free and open competition;
b) Enter into business arrangements that might prevent the effective operation of fair competition;
c) Engage in deceptive financial practices, such as bribery, double billing or other improper financial practices;
d) Engage in misrepresentation of facts in order to influence a procurement process or the execution of a contract to the loss of the client.

In performing their duties, procurement professionals shall abstain from any conduct which could be interpreted as bribery or act of corruption.

9.4 Compliance with contractual obligations

Contractual agreements are considered to be fully binding. It is not acceptable to coerce/arm-twist a contractor or supplier to avoid compliance with the provisions of a contract. The same principle applies, of course, should the reverse situation occur.

9.5 Abuse of office

Procurement practitioners and collaborators shall not use their positions within King Faisal Hospital for personal gain, nor should they use King Faisal Hospital or its partner's funds or assets for unauthorized or improper purposes. In particular they shall not use their positions to exert improper influence over contractors or suppliers, consultants. The offer, payment, solicitation and acceptance of bribes in any form shall not be tolerable under any circumstances.

9.6 Confidentiality

All King Faisal Hospital staff should protect the integrity of the procurement process while maintaining fairness in the treatment of all potential bidders of services, goods, and works. They shall be fully accountable for their actions.

The following guidelines should be adhered to:

a. Any confidential information about King Faisal Hospital's affairs shall not be disclosed to unauthorized persons (inside or outside King Faisal Hospital) or used or appear to be used for the benefit of self or others;

b. King Faisal Hospital staff should not enter into discussion or correspondence with a bidder after bid submission and during the bid evaluation process until the award of the contract is announced;

c. Staff and King Faisal Hospital consultants shall not allow bidders to access information on any specific procurement before such information is available to the public at large. This includes procurement planning data, budgets, pre-qualification, evaluation results and such other privileged information. Where this information is made available to the public at large, correspondence shall be managed by the Head of Procurement; and

d. All bidders' technical and financial information is proprietary and should be held in confidence by King Faisal Hospital staff (and consultants) and should only be disclosed to authorize individuals.

9.6.1 Professional Secrecy

During or after procurement proceedings, no employee of King Faisal Hospital, member of the Board of Directors or member of HTB or IRC may disclose the following:

a) information relating to a procurement whose disclosure is likely to impede the respect of this manual or jeopardize public interest;

b) information relating to a procurement whose disclosure would prejudice a bidder's legitimate commercial interest or inhibit fair competition;

c) information relating to the evaluation, comparison of bids or clarification on tenders;

d) the content of bids.

However, the following acts shall not be considered as the disclosure of information:

a) the disclosure of information to the signatory of procurement contracts;

b) the disclosure of information for the respect for this manual and other Laws;

c) the disclosure of information for the purpose of an appeal, a procurement audit or for any other reasons provided for by this manual;

d) the disclosure of information pursuant to a court decision.

9.7 Conflict of Interest

King Faisal Hospital should proactively avoid any real or perceived conflict between personal, professional, or business interests and the interests of King Faisal Hospital, in all procurement actions taken. Conflicts of interest arise when officials involved in the procurement process have a personal interest in the outcome of the decisions, they are making because of some benefit they, their families or associates may derive from the decision. For the purposes of this Manual 'Conflict of Interest' is defined as any situation where:

a) A member of staff has a financial interest in bidder(s) responding to King Faisal Hospital's solicitation. Financial interest means anything of monetary value, including but not limited to:
   - An interest in a business consisting of any stock, stock option, or similar ownership interest in such business, but excluding any interest arising solely by reason of investment in such business by a mutual, pension, or other institutional investment funds over which the staff member does not exercise control; or
   - Receipt of, or the right or expectation to receive any income in one or more of the following forms: a consulting fee, honoraria, salary, allowance, forbearance, forgiveness, interest in real or personal property, dividend, royalty derived from the licensing of technology or other processes or products, rent, and capital gain.

b) A member of staff has personal or professional interests with direct or indirect influence in a bidder responding to King Faisal Hospital's solicitation. Personal or professional interests include but not limited to:
   - Any organization, or enterprise over which the staff member, alone or together with an immediate family member *(i.e., employee's spouse or domestic partner, and dependent children)*, exercises a controlling interest; or
   - Holds any executive position or membership on the bidder's board regardless of compensation; or
   - Holds any position that includes responsibilities for a significant segment of the bidder's operation or management of a business.

c) Staff members demonstrate perceived or actual bias in the award of bids, contracts or any appointment of bidders and or delivery of goods and services on behalf of King Faisal Hospital and have interests in any other activity which could potentially conflict with hospital's interests in the award of bids, contracts or any appointment of bidders; or

9.7.1 Procedure for handling possible conflict of interest

a. All King Faisal Hospital staff shall be required to complete a declaration to confirm presence or absence of potential conflicts of interest, relationships with bidders and their professional independence.
b. All King Faisal Hospital staff associated with the procurement process must fill out the conflict of interest and disclosure provided in this Manual for every procurement transaction. Any conflict of interest should immediately be brought to the attention of the Head of Procurement and DCEO for review and mitigation.
c. The Head of Procurement shall review all reported conflicts and assess their impact on King Faisal Hospital's procurement process. All cases with medium and high impact to King Faisal Hospital's procurement process shall be reported to the DCEO for review.
d. All bidders with high levels of conflicts with King Faisal Hospital staff shall be debarred from participating in King Faisal Hospital procurement processes until such conflicts are satisfactorily resolved and approved by the DCEO.

9.7.2 Consequences for non-disclosure of conflict of interest

Any King Faisal Hospital staff that participates in the procurement process and fails to disclose the conflict of interest and subsequently contravenes the conflict-of-interest clause of this manual shall be subjected to King Faisal Hospital's disciplinary measures as stipulated in the HR procedure manual. Non-compliance incidences shall be dealt with on a case-by-case basis based on the level of severity of the offense.

9.8 Fraud and Corruption

King Faisal Hospital strives to observe the highest ethical standards throughout the procurement process. Procurement is a key area where King Faisal Hospital, as a public service organization, interacts financially with the private sector. As such, it is a prime area for potential fraudulent and corrupt practices. The potential damage relating to fraudulent and corrupt practices extends well beyond financial losses and may pose serious threats to the ability of King Faisal Hospital achieving its operational objectives. Moreover, there is a serious risk that the very credibility of King Faisal Hospital, as a trusted, efficient and effective partner shall be at stake.

Particular attention must be paid to King Faisal Hospital's procurement in emergency or crisis settings. In emergency situations, the pressure to achieve rapid results may expose the organization to the risk of having fraudulent or corrupt operations. There are several areas of fraud and corruption risk in procurement:

a. Gifts and benefits;

b. Consistency and continuity of process;
c. Communication with bidders;
d. Conditions of offer and deadlines;
e. Invitation to offer documentation;
f. Briefing and debriefing sessions;
g. Contract management;
h. Documentation;
i. Conflict of interest; and
j. Bidder probity.

Constant vigilance is needed, with emphasis on certain principles. The fundamental principles are:

a) Reinforcing ethical behavior as King Faisal Hospital staff, particularly in procurement areas, as directed by King Faisal Hospital policies and procedures;
b) Ensuring adequate procurement planning;
c) Ensuring adequate separation of duties;
d) Acting in a transparent manner during procurement processes, such as posting in advance procurement solicitations on King Faisal Hospital website and in other relevant websites, newspapers and trade journals;
e) Adequate supervision: Managers must personally engage in a regular spot check of procurement transactions, including the regular review of the files, specification of goods and terms of references for services;
f) Preparing quarterly and annual reports on procurement activities, paying particular attention to the number of waivers regardless of the amount involved, the cumulative number of contracts per bidder, and non-duplication of bidder entries, and
g) Reporting instances of fraud and corruption in a timely and accurate manner.

9.9 Bidder Code of Conduct

King Faisal hospital shall aim to promote and seek alignment with all its bidders on ethics and sustainability-related issues. The purpose shall be to establish sustainable and ethical practices that must be performed, and those preferred to be upheld by King Faisal Hospital bidders with respect to critical areas of ethical procurement, when supplying King Faisal Hospital with goods, services and/or works.

Bidders supplying King Faisal Hospital with goods, services and or works shall comply with the standards set out in each of the following areas of the bidder's operations. Procurement unit shall regularly review compliance with these standards:

a) Compliance with all laws and regulations of their domicile countries and international laws, regulations, and standards.
b) Conduct of business operations in accordance with high ethical standards; and
c) Compliance with King Faisal Hospital Business Code of Ethics.

For corporates/entities, this is also aimed at building valued relationships with bidders and managing social and environmental impacts that shall contribute to King Faisal Hospital and its bidders making a positive impact on the communities in which they operate.

9.10 Awareness of code of ethics

Although it is commendable and good practice for organizations to have a code of ethics that alone is not enough to ensure the practices are maintained and prioritized. In order to maintain and prioritize the good conduct that is outlined in this manual, King Faisal Hospital need to undertake the following.

a) Review and update the code of conduct: Ensuring that this manual and code of ethics is current and relevant. The Head of Procurement should have the responsibility of keeping the manual and code up to date. Responsible for gathering any information regarding changes and collating feedback or concerns from the staff.
b) Induct, train and refresh employees: Ensure that the code of ethics is among the areas to be covered during the induction of new staff, it is a good practice to obtain a signature from new employee to show that they have read and intend to conform to the code of ethics. It is important to train and refresh staff involved in procurement on this manual and code of ethics policy.
c) Lead by example: members of Senior Management, IRC and HTB should be seen following the code of ethics and behaving in the correct way. Leading by example shows individuals how things should be done and also encourages reciprocal behavior. If a manager opts to ignore the code and conducts themselves in an unethical way, staff may see this as acceptable and possibly follow the model their managers set.
d) Communicate: effective communication of the code to all staff involved in procurement and give them opportunity to listen and receive information back is important to ensure it is maintained.
e) Take action if required: individuals with authority should always be reactive. If the situation occurs that breaches the code of ethics action must be taken to rectify it. Failure to react or take action gives a message that the breach is acceptable and shall undermine the work carried out to promote good ethical behavior.

f) Prioritize people before profit: to ensure that ethical practices are prioritized, King Faisal Hospital should understand the importance of its employees. The individuals within the organization be looked after before focusing on how much money can be made. If the people are cared for, understand what is required of them and what is not allowed, the level of motivation is likely to be higher. A happy workforce shall produce more effective results that an unhappy on

9.11 Related Provisions on Code of Ethics

Other detailed provisions on the code of ethics are provided under the "Code of Ethics Manual" including:

a) Operation definitions
b) Staff and other parties
c) Obligation of Executive Committee
d) Contravention of the Code or Violation of code of ethics
e) Complaints Handling Framework and Process

Done at Kigali,on..............................

Frederic NGIRABACU

Deputy Chief Executive Officer

King Faisal Hospital, Rwanda

Theogene MANIRAGABA

Chairperson of Finance & Audit Committee

King Faisal Hospital, Rwanda

Thierry KALISA

Chairperson Board of Directors

King Faisal Hospital, Rwanda

APPENDICES

Appendix 1: Annual Procurement Plan Template

Appendix 2: Notice of Expression of Interest (EOI)

Appendix 3. Purchase Requisition Form

Appendix 4: Standard Pre-Qualification Document

Appendix 5. Record of Bid Receipt Form

Appendix 6. Bid Opening Form

Appendix 7: Evaluation Report of Expression of Interest (EOI)

Appendix 8: Evaluation Report of Request for Quotation (RFQ)

Appendix 9: Evaluation Report of Request for Proposal (RFP)

Appendix 10: Letter of Appointment to the HTB

Appendix 1: Annual Procurement Plan Template

King Faisal Hospital Annual Procurement Plan from July XXX - JUNE XXX

S/N°	Type of Tender	Title of tender	Estimated cost in Rwf	Source of Funds	Tendering method (OCB, RFQ, SS, QCBS, etc.)	Planned tender document preparation date	Planned Publication date	Planned Bid opening date	Planned Provisional Notification date	Planned Contract signing date	Recruitment of the supervising firm (Yes/No)	Planned Contract Mgt start date	Planned Contract closure date
1.	Goods												
2.	Non-consultancy												
3.	Works												
4.	Consultancy Services												

Prepared by:

Signature: ______________________________

Name: ______________________________

Procurement Staff

Date: ______________________________

Verified by:

Signature: ______________________________

Name: ______________________________

Head of Procurement

Date: ______________________________

Approved by:

Name: ______________________________

Signature: ______________________________

Chief Executive Officer   Date:

____

Appendix 2: Purchase Requisition Form

Part 1: Request by User Department

Procurement Reference Number	
Supplies / Works / Services:	
Financial Year:	
Sequence Number:	
Particulars of Procurement	
Subject of Procurement / Title:	
Procurement Plan Reference:	
Location for Delivery:	
Date Required:	

Details relating to the Procurement

Item Nº.	Description (Attach specification, ToR or scope of work)	Quantity	Unit of measure	Estimated unit cost	Market price of the procurement

(1) Request for Procurement by
(Member of user department)

Name:
____

Title: ___________________________

Signature & Date:
____

(2) Confirmation of Request by
(Head of User department)

Name:
____

Title: ___________________________

Signature & Date:
____

(3) Confirmation of Funding and Approval of Procurement by
(Chief Executive Officer)

Name: ___________________________

Title: ____

Signature & Date: ____________________________________ (Official Stamp)

Appendix 3: Notice of Expression of Interest

Title: Notice of Expression of Interest for Provision of {Insert description of Consultancy Services} - {Insert Procurement Reference number}

1. King Faisal Hospital has allocated/received funds *[if received state source]* to be used for the acquisition of the consultancy services described below.
2. The Entity now invites eligible consultants to submit sealed expressions of interest for *[summarize scope of the assignment and provide a brief description of the required consultancy services]*.
3. Interested consultants should provide information demonstrating that they are eligible and possess the required qualifications to perform the services supported with relevant documentation.
4. The short-listing criteria shall include: *[Insert shortlisting criteria]*
5. Consultants may associate with other firms in the form of a joint venture to enhance their qualifications. The form of association, where applicable, should be indicated in the Expression of Interest.
6. Preference schemes shall apply when evaluating Request for Proposals from the shortlisted consultants.
7. Interested eligible consultants may obtain further information at the address given below from *[insert office hours]*.
8. Sealed Expressions of Interest must be delivered to the address below at or *before [insert time and date]*. *[Insert name of office] [Insert postal address and/or street address]* Tel: *[Insert telephone contact]* and E-mail: *[Insert email contact]*
9. The notice of expression of interest is available at King Faisal Hospital's website at ....[insert website address].
10. The planned Procurement schedule (Subject to changes) is as follows:

Activity	Date
a) Publication of Notice of Expression of Interest	Expected date of notice of expression of interest
b) Closing date for receipt of Expression of Interest	Within 10 working days from the date of publication of notice if notice is published in Rwanda and within 15 working days if the notice is published internationally
c) Evaluation of Expressions of Interest	Within 15 working days from closing date
d) Display of shortlist	Within 5 working days from approval of shortlist by the Contracts Committee

Name: ____

Position of Authorized Official:

____

Signature: ________________________________ Date:

____

Appendix 4: Standard Pre-Qualification Document

PRE-QUALIFICATION OF SUPPLIERS, & NON-CONSULTANCY SERVICE PROVIDERS FOR SUPPLY OF GOODS, AND NON-CONSULTANCY SERVICES FOR THE PERIOD XX/XX
Tender Ref. Number: [insert reference number] e.g., RIC/PQ/2023/2026

Invitation for Prequalification

1. King Faisal Hospital invites applications from interested, eligible, and capable firms for Tenders/prequalification/registration as suppliers, non-consultancy service providers, in the following groups / categories and sub-categories:
   a. Supply and delivery of Office Stationery, Refreshments, Furniture, IT Equipment, Printing & Promotional Materials
   b. Maintenance service of IT Equipment & Computer and Accessories
   c. Provision of Events Management, Hotel Service, Vehicle Maintenance & Car Rental Services
   d. Etc.

2. Pre-qualification shall be conducted through the procedures specified in King Faisal Hospital Procurement Policy and Procedure Manual, 2023, and is open to all Applicants as defined in the manual.

3. Interested applicants may obtain further information from and inspect the pre-qualification documents at the [*Insert the physical and postal address of King Faisal Hospital*] from [*start and end of working hours*] on Mondays to Fridays inclusive except on public holidays.

4. All applications one original plus [*insert the number of copies required*], properly filled in, and enclosed in plain envelopes must be delivered to the address [*insert physical address, room number, floor, building/plot*] at or before [*insert time and date*].

5. Applications shall be opened promptly thereafter in public and in the presence of Applicants' representatives who choose to attend in the opening at the [*insert the physical address of the place for tender opening*] at [*insert time and date*].

6. Late applications, portion of applications, electronic applications, and applications not received, applications not opened and not read out in public at the tender opening ceremony shall not be accepted for evaluation irrespective of the circumstances.

____

[*Insert the name of the DCEO*]
Chief Executive Officer

Appendix 8: Evaluation Report of Request for Quotation (RFQ)

1. Title of tender:

   ____

2. Tender Reference Number:

   ____

3. Client: ____

4. Brief description of the tender *(background, list of deliverables)*:

   ____

   ____

   ____

5. Estimated Budget inclusive of taxes *(specify the currency)*:

   ____

6. Source of funds:

   ____

7. Details of RFQ

   a) RFQ was issued to XX *(indicate number)* bidders. Here listed below:

      a. *Company name* *Email address*

      b.

      c.

      d.

      e.

      f.

   b) Tender invitation date:

      ____

   c) Tender closing date:

      ____

   d) Means of submission of quotations *(physical or online/electronic)*:

      ____

   e) Tender validity period:

      ____

8. Bids Received

a) Number of bids/quotations received: ______________________________

b) Summary of bid opening:
We received quotations from __________ different *firms / consultants*.

S/N	Bidder	Address *(Physical address, email & contact)*	Country of registration
1.			
2.			
3.			
4.			

9. Preliminary evaluation *(compliance with administrative requirements)*

S/N	Criteria of Administrative Conformity	Firm 1 (PC, PNC or NP)	Firm 2 (PC, PNC or NP)
1.	Original or a certified copy of the tax clearance certificate		
2.	Original or a certified copy of the Social Security certificate		
3.	Copy of Trading License		
4.	Bid submission form and price schedules well printed and properly organized and signed and initialed on each page		
5.	Detailed description of the essential technical and performance characteristics of the goods to be supplied establishing conformity to technical specifications provided		
6.	A detailed price schedule as specified in Annexes		
7.	Catalogues of equipment to be supplied		
8.	3 references of similar tenders proven by certificates of good completion		
9.	Written confirmation authorizing the signatory of the Bid to commit the Bidder (not required if the signatory is the Managing Director/head of the company)		
	Acceptance For Detailed Technical		

Particulars of the Pre-qualification

Group/ Category Code	Category of Goods, Non-Consultancy Services
Group A	Supply and delivery of Office Stationery, Refreshments, Furniture, IT Equipment, Printing & Promotional Materials
Category Code No	Category Description
RIC/PQ/A/1/2023/2026	Supply and Delivery of Office Stationery
RIC/PQ/A/2/2023/2026	Supply and Delivery of Office Refreshments
RIC/PQ/A/3/2023/2026	Supply and Delivery of Office Furniture & Fittings
RIC/PQ/A/4/2023/2026	Supply and Delivery of IT Equipment
Group B	Maintenance service of IT Equipment & Computer and Accessories.
RIC/PQ/B/1/2023/2026	Supply and Maintenance of Printers, Scanner, Photocopier.
RIC/PQ/B/1/2023/2026	Supply and Maintenance of Computers, Computer Accessories, Servers, Storage, and Meeting Audio-Visual Equipment.
Group C	Provision of Events Management, Hotel Service, Vehicle Maintenance & Car Rental Services
RIC/PQ/C/1/2023/2026	Events Management Services
RIC/PQ/C/2/2023/2026	Hotels (Conference facilities & Accommodation)
RIC/PQ/C/3/2023/2026	Vehicle Maintenance and Repair Services
RIC/PQ/C/4/2023/2026	Provision of Car Rental Services
RIC/PQ/C/5/2023/2026	Provision of Outside Catering Services

1.0 General Introduction

1.1 About King Faisal Hospital *(use like 2 to 3 paragraphs)*

2.0 Pre-Qualification Instructions

2.1 Important Notes to Bidders

a) The purpose of this document is to assist King Faisal Hospital in the identification and evaluation of potential suppliers/bidders and to establish / update their current register of suppliers for various goods, works and services. Applicants are invited to quote/ tender for the categories competitively.

b) This pre-qualification document does not amount to any contractual obligation on the part of King Faisal Hospital, and King Faisal Hospital is not obliged to invite any tenders or quotations from any or all candidates that have expressed interest by responding to this invitation.

c) Bidders or suppliers are strongly advised to provide all information requested in the form. Evaluation and qualification shall be based on the extent of information and attachments provided by the applicant.

d) King Faisal Hospital reserves the right to verify information provided herein without reverting to the participants.

e) King Faisal Hospital reserves the right to accept or reject any application with prior communication done by email. The prequalification process applies to both the existing and potential new suppliers.

2.2 Invitation to Bidders

Suitable bidders who have been registered under the laws of Rwanda in providing similar goods and services are invited to submit their prequalification documents to the Hospital Tender Board. Bids shall be submitted in complete lots singly or in combination. The prospective applicants are required to furnish King Faisal Hospital with all the necessary information for pre-qualification.

2.3 Pre-qualification documents

The form must be completed, and all supporting documentation (in soft copy) attached in the order of the evaluation criteria. Incomplete documentation shall lead to automatic disqualification. Please note that financial proposals are not supposed to be submitted at this prequalification.

2.4 Submission of Pre-Qualification Documents

A soft copy (PDF) of the completed pre-qualification documents and other requested information shall be submitted electronically to the email given by the procuring unit not later than the dates and time that shall be indicated in this document. Please indicate the item applied for as follows: *group / category No. and category name.*

2.5 Questions and Clarifications

Questions and clarifications that may arise from the pre-qualification process should be directed to the email given by the procuring unit

2.6 Amendment of Pre-Qualification Documents

At any time prior to the deadline for submission of Pre-Qualification Documents, King Faisal Hospital may amend the tender document by issuing an addendum. Any addendum issued shall be part of the tender document and shall be communicated in writing via the King Faisal hospital website. To give prospective bidders reasonable time in which to take an addendum into account in preparing their Pre-Qualification Documents, King Faisal Hospital may, at its discretion, extend the deadline for the submission of Pre-Qualification Documents; in which case all rights and obligations of King Faisal Hospital and bidders previously subject to the deadline shall thereafter be subject to the deadline as extended.

2.7 Late bids

King Faisal hospital shall not consider any bid that arrives after the deadline for submission of bids. Any bid received by King Faisal Hospital after the deadline for submission of bids shall be declared late, rejected, and returned unopened to the Bidder.

2.8 Additional Information

King Faisal Hospital's Hospital Tender Board (HTB) reserves the right to request submission of additional information from prospective bidders. Requests for quotations shall be made available only to those suppliers whose qualifications are accepted by King Faisal Hospital and after scoring a minimum of 75% in the evaluation exercise.

2.9 Disclaimer

King Faisal Hospital reserves the right to determine the structure of the process, number of prequalified bidders or consultants, and the right to cancel the prequalification process, the right to change the timeliness for prequalification at any time without prior notice and without liability to compensate and/or reimburse any party. King Faisal Hospital shall use the provided information with utmost confidentiality and only for the purpose of this prequalification.

Done at Kigali (Date and Stamp): ______________________________

Appendix 5: Record of Bid Receipt Form

Title of the tender: ______________________________ Tender Ref. No. ______________

Closing Date: ______________ Closing Time: ______________

Method of Bid Receipt (Receipt in Person / Electronic submission): ______________

List of submitted Bidders

S/N	Bidder Name	Date of Receipt	Time of Receipt	Telephone	Signature	Comments
1.						
2.						
3.						
4.						
5.						

Important note:

1. *The bids detailed above were received before the date and time of the deadline*. No further bids were received after the deadline.*
2. *To be signed by the members of the procurement unit the bid closing and a representative from the HTB witnessing*

Name: ______________________ Name: ______________________

Position: ____________________________

Date & Signature:

____

Position: ____________________________

Date & Signature:

____

Appendix 6: Bid Opening Form

Title of the tender: ______________________________

Bid Opening Date: ____________________ Bid Opening Time: ____________

S/N	Bidder Name	Bidder Representative	Bid Price		Bid Security (if applicable)	Administrative Requirements	
			Tax Exc.	Tax Inc.		RRA	RSSB

Observations (if any):

____

____

____

____

Members of HTB present

S/N	Name	Signature
1.		
2.		
3.		
4.		
5.		

Done at Kigali (Date and Stamp): ______________________________

Appendix 7: Evaluation Report of Expression of Interest (EOI)

1. Title of tender:
   ____
2. Tender Reference Number:
   ____
3. Client: ____
4. Brief description of the procurement [summarize background, objective, scope of the assignment and provide a brief description of the required consultancy services]
   ____
   ____
   ____
5. Details of Invitation to Tender
   a) Tender invitation method:
   ____
   b) Tender invitation date:
   ____
   c) Tender closing date:
   ____
   d) Means of submission of quotations (physical or online/electronic):
   ____
   e) Tender validity period:
   ____
6. Bids Received
   a) Number of bids/quotations received:
   ____
   b) Summary of bid opening:
   We received and expression of interests from ___________ different *firms / consultants*.

S/N	Bidder	Address *(Physical address, email &*	Country of

		contact)	registration
1.			
2.			
3.			

7. Compliance with mandatory requirements

Administrative Requirements	Score (Pass or Fail)
1. Copy of certificate of registration or incorporation from RDB	
2. Copy a of valid Tax Clearance Certificate from the RRA	
3.	
4.	
5.	

Observation:

____

____

____

8. Technical Evaluation.

	Technical Evaluation Criteria *(as per the solicitation document)*	Name of the Bidder	
		[Firm 1] Score *(Pass/Fail)*	[Firm 2] Score *(Pass/Fail)*
1.	Detailed company profile highlighting the physical office location and contact information details		
2.	Reference letters or certificate of good completion from previous reputable clients in past two years		
3.			
4.			
5.			
6.			
	Bidder qualified (Pass or Fail):		

Observation *[strengths and weaknesses of the bidders as highlighted by the HTB]*.

Summary of Evaluation Results

The following report outlines the performance of each bidder. The proposals were evaluated and points were awarded by consensus as a team. All the xxx firms/Individual consultant that responded were taken through the detailed evaluation as per the evaluation criteria as highlighted above.

Reference is made to the Procurement Policy and Procedure Manual, Section 5.3.1.3 Evaluation of EOIs and Expression of Interest Document. The evaluation of EOIs shall be categorized as below based on the technical capabilities of the bidders and only bidders who shall attain a rating of satisfactory and above shall be prequalified or shortlisted.

9. Disqualified Firms

The following *[number of bidders]* bidders did not qualify in the evaluation because they did not pass in some of the criteria as set above. Comments per bidder related to the technical issues and areas of weaknesses are listed here below.

S/N	Name of Firm / Consultant	General Observations or Findings
1.		
2.		
3.		

10. Qualified Firms

The HTB confirms that the following xxxx firms met the requirements as required in the Expression of Interest. The HTB approval is therefore sought for the following firms.

Rank	Firm	Status (Pass or Fail)	General Observations or Findings

11. Conclusion and Recommendation

We, the HTB, recommends to King Faisal Hospital that the following firms be shortlisted and be requested to submit their best technical and financial proposals for the *[title of the assignment]* as they were the best technically qualified consultants to carry out the assignment as follow:

S/N	Firm	Full Address and Country of Origin

12. Conflict of Interest Declaration

We, the members of HTB declare that we have no real or apparent conflict of interest in assessing the expression of interest / bids submitted by the firms above. We further confirm that we have had no previous dealings of a personal nature with the said entities.

13. Members of HTB

Name	Title	Organization	Signature
	Chairperson		
	Vice Chairperson		
	Procurement Officer, Secretary		
	Member		
	Member		

Done at Kigali (Date and Stamp): ______________________________

S/N	Criteria of Administrative Conformity	Firm 1 (PC, PNC or NP)	Firm 2 (PC, PNC or NP)
	Examination (Yes or No)		

Key words used: PC: Provided Conform, PNC: Provided Not Conform, and NP: Not Provided

Observation and recommendation on the preliminary: ______________________________

____

____

10. Comparison of prices and adherence to the technical specification

Bidders	Item	Unit	Quantity	Unit Price	Total Price with VAT (Rwf)
Bidder 1					
				Total (All taxes inclusive)	XXXXXX
Bidder 2					
				Total (All taxes inclusive)	XXXXXX

Observation:

____

____

Summary of Evaluation Results (Bidder rankings)

____

____

____

11. Conclusion and Recommendation

We, the HTB, recommends to King Faisal Hospital that the following firms be shortlisted and be requested to submit their best technical and financial proposals for the *[title of the assignment]* as they were the best technically qualified consultants to carry out the assignment as follow:

S/N	Firm	Full Address and Country of Origin

12. Conflict of Interest Declaration

We, the members of HTB declare that we have no real or apparent conflict of interest in assessing the expression of interest / bids submitted by the firms above. We further confirm that we have had no previous dealings of a personal nature with the said entities.

13. Members of HTB

Name	Title	Organization	Signature
	Chairperson		
	Vice Chairperson		
	Procurement Officer, Secretary		
	Member		
	Member		

Done at Kigali *(Date and Stamp)*: ______________________________

Appendix 9: Evaluation Report of Request for Proposal (RFP)

1. Title of tender:
   ____

2. Tender Reference Number:
   ____

3. Client: ____

4. Brief description of the tender *(background, purpose and objectives of the assignment, list of deliverables)*:
   ____
   ____
   ____

5. Estimated Budget inclusive of taxes *(specify the currency)*:
   ____

6. Source of funds:
   ____

7. Details of RFQ

   a) RFQ was issued to XX *(indicate number)* bidders. Here listed below:

      i. *Company name* *Email address*

      ii.

      iii.

      iv.

      v.

      vi.

   b) Tender invitation date:
      ____

   c) Tender closing date:
      ____

   d) Means of submission of quotations *(physical or online/electronic)*:
      ____

   e) Tender validity period:
      ____

8. Bids Received

a) Number of bids/quotations received: ____________________________

b) Summary of bid opening:

We received quotations from __________ different *firms / consultants.*

S/N	Bidder	Address *(Physical address, email & contact)*	Country of registration
1.			
2.			
3.			

9. Preliminary evaluation *(compliance with administrative requirements)*

S/N	Criteria of Administrative Conformity	Firm 1 (PC, PNC or NP)	Firm 2 (PC, PNC or NP)
1.	Original or a certified copy of the tax clearance certificate		
2.	Original or a certified copy of the RSSB certificate		
3.	Copy of Trading License		
4.	A signed bid submission form		
5.	Technical proposal with detailed description of methodology and workplan		
6.	A financial proposal with detailed price schedule as specified in the RFP		
7.	3 references of similar tenders proven by certificates of good completion		
8.	Detailed CV of a technical expert who shall carry out the assignment.		
9.	Written confirmation authorizing the signatory of the Bid to commit the Bidder (not required if the signatory is the Managing Director/head of the company)		
	Acceptance For Detailed Technical Examination (Yes or No)		

Key words used: PC: Provided Conform, PNC: Provided Not Conform, and NP: Not Provided

Observation and recommendation on the preliminary:

10. Detailed Technical Evaluation

Consultant	Evaluation criteria (as per the RFP)	Pass Mark (Points)	Score (Points)
Consultant / Bidder 1	General experience of the firm in the field	5 to 15 points	
	Relevant experience in similar services	10 to 20 points	
	Quality of the methodology proposed	20 to 30 points	
	Qualifications and experience of the key personnel	40 to 60 points	
	Transfer of knowledge or technology *(where required)*	0 to 10 points	
	Participation of nationals *(where required)*.	5 to 10 points	
	Total Technical Score (All taxes inclusive)		XXXXXX
Consultant / Bidder 1	General experience of the firm in the field	5 to 15 points	
	Relevant experience in similar services	10 to 20 points	
	Quality of the methodology proposed	20 to 30 points	
	Qualifications and experience of the key personnel	40 to 60 points	
	Transfer of knowledge or technology *(where required)*	0 to 10 points	
	Participation of nationals *(where required)*.	5 to 10 points	
	Total Technical Score (All taxes inclusive)		XXXXXX

11. Comparison of prices and adherence to the technical specification

	Bidder / Consultant	Amount before Tax (All taxes inclusive)	Amount after Tax (All taxes Exclusive)
1.			
2.			
3.			
4.			

12. Financial Bids After Arithmetic Verification

		Before Verification		After Verification	
		Firm 1	Firm 2	Firm 1	Firm 2
Price component	Currency	Amount	Amount	Amount	Amount
Remuneration	Rwf	xxxx	xxxxx	xxxxx	xxxxxxx
Reimbursables	Rwf	xxxxx	xxxxx	xxxxx	xxxxxx
Miscellaneous Expenses	Rwf	x	xxxxx	x	xxxxx
Total without taxes	Rwf	XXXX	XXXX	XXXX	XXXX
Taxes (15%)				XX	XX
Total with taxes				XXXX	XXXX

Observation: ____

____

Reference is made to the Procurement Policy and Procedure Manual, Section 7.7.1.3 Bid Evaluation and RFP Document. Selection of consultants using the Quality Cost-Based selection method. The overall score shall be obtained by adding the technical and financial scores.

The following formula shall be used:
Combined scores: $S = (TS \times Tw\%) + (FS \times FW\%)$ where:
S = Final score; TS=Technical Score, FS= Financial Score
Tw = Weight of technical score percentage 75%
Fw = Weight of financial score percentage 25%
$Tw + Fw = 1$

The financial score of each bidder is determined as follow:
$FS = (LF \times 100)/Fi$; LF= the lowest proposal, Fi= the proposal to be evaluated.

13. Conclusion and Recommendation

In the view of the above, the Hospital Tender Board (HTB) recommends to the Rwanda King Faisal Hospitalet award the *[title of the tender]* to [name of the successful] for a total amount of [amount in words] (amount in figures) indicate currency including all taxes inclusive. This award is subject to negotiation.

14. Conflict of Interest Declaration

We, the members of HTB declare that we have no real or apparent conflict of interest in assessing the expression of interest / bids submitted by the firms above. We further confirm that we have had no previous dealings of a personal nature with the said entities.

15. Members of HTB

Name	Title	Organisation	Signature
	Chairperson		
	Member		
	Procurement Officer, Secretary		
	Member		
	Member		

Done at Kigali *(Date and Stamp)*: ______________________________

Appendix 10: Letter of Appointment to the HTB

Our Ref N0. *RIC/LOA/HTB/01/2023*

Date:

[Name of person appointed to HTB]
[Position on the HTB - Chairperson/Member/Secretary]
[Current Full Time Title / Position]

Subject: Appointment to Hospital Tender Board (HTB)

I confirm your appointment as the *[Chairperson /Member/Secretary]* of the Hospital Tender Board for King Faisal Hospital following the approval of your nomination by the Chief Executive Officer.

The terms of reference for this appointment shall be in accordance with the King Faisal Hospital Procurement Policy and Procedure Manual, 2024, Code of Ethic Policy, 2024 and other internal policies and procedures. If you accept this appointment, please sign this letter in the space availed below and return the copy to the undersigned. The term of this appointment shall be three years effective from ______________________________

______________________________ *[Signature and Date]*

[Name]
Chief Executive Officer

<u>Acceptance</u>

I accept the appointment: ____
Signature: ________________________ Date: ________________________

c.c.

- Head of Procurement

- Line Manager / Immediate Supervisor [i]