REQUEST FOR PROPOSAL (RFP)

All interested	DATE: July 19, 2021
	REFERENCE: 495-2021-UNDP-UKR-RFP-RPP

Dear Sir / Madam:

We kindly request you to submit your Proposal for **The establishment of a comprehensive and integral system of telemedicine services with coverage of all levels of medical care health care facilities of Donetsk oblast to ensure equal access for all residents of Donetsk oblast to specialized and highly specialized medical care, through remote communication via specialized secure information transmission channels, and significantly reducing the risks of infection transmission, taking into consideration the COVID-19 pandemic**.

Please be guided by the form attached hereto as Annex 2, in preparing your Proposal.

Proposals may be submitted on or before **11:59 PM (Kyiv Time, GMT +3) Sunday, August 01, 2021** via email to the address below:

<div align="center">

United Nations Development Programme
tenders.ua@undp.org
Procurement Unit

</div>

Your Proposal must be expressed in **English or Ukrainian or Russian**, and valid for a minimum period of **90 days.**

In the course of preparing your Proposal, it shall remain your responsibility to ensure that it reaches the address above on or before the deadline. Proposals that are received by UNDP after the deadline indicated above, for whatever reason, shall not be considered for evaluation. If you are submitting your Proposal by email, kindly ensure that they are signed and in the .pdf format, and free from any virus or corrupted files.

NB. The Offeror shall create 2 archive files (*.zip format only!): one should include *technical proposal***, another one should include** *financial proposal* **and be encrypted with password. Both files should be attached to the email letter.**

During evaluation process only technically compliant companies will be officially asked by UNDP procurement unit via email to provide password to archive with financial proposal. Please do not include the password either to email letter or technical proposal and disclose before official request.

Messages should **not exceed 20 MB in size**. Offers larger than 20 MB should be split into several messages and each message subject should indicate "part x of y" besides the marking mentioned in the announcement and the solicitation documents. Messages larger than 20 Mb may not be delivered. *All electronic submissions are confirmed by an automatic reply*.

The Offeror shall mark the email letter/s:
Subject of the message should include: **"495-2021-UNDP-UKR-RFP-RPP"** and: **"The establishment of a comprehensive and integral system of telemedicine services with coverage of all levels of medical care health care facilities of Donetsk oblast".**

Body of the message should include: **Name of the offeror**

Archive files should be marked as: **Technical proposal** and **Financial proposal**

Services proposed shall be reviewed and evaluated based on completeness and compliance of the Proposal and responsiveness with the requirements of the RFP and all other annexes providing details of UNDP requirements.

A two-stage procedure is utilized in evaluating proposals, with evaluation of the technical proposal being completed prior to any price proposal being opened and compared. The price proposals will be opened only for submissions that passed the minimum technical score of 70% (or 490 points) of the obtainable score of 700 points in the evaluation of technical proposals.

Any discrepancy between the unit price and the total price shall be re-computed by UNDP, and the unit price shall prevail, and the total price shall be corrected. If the Service Provider does not accept the final price based on UNDP's re-computation and correction of errors, its Proposal will be rejected.

No price variation due to escalation, inflation, fluctuation in exchange rates, or any other market factors shall be accepted by UNDP after it has received the Proposal. At the time of Award of Contract or Purchase Order, UNDP reserves the right to vary (increase or decrease) the quantity of services and/or goods, by up to a maximum twenty-five per cent (25%) of the total offer, without any change in the unit price or other terms and conditions.

Any Contract or Purchase Order that will be issued as a result of this RFP shall be subject to the General Terms and Conditions attached hereto. The mere act of submission of a Proposal implies that the Service Provider accepts without question the General Terms and Conditions of UNDP.

Please be advised that UNDP is not bound to accept any Proposal, nor award a contract or Purchase Order, nor be responsible for any costs associated with a Service Providers preparation and submission of a Proposal, regardless of the outcome or the manner of conducting the selection process.

UNDP's vendor protest procedure is intended to afford an opportunity to appeal for persons or firms not awarded a Purchase Order or Contract in a competitive procurement process. In the event that you believe you have not been fairly treated, you can find detailed information about vendor protest procedures in the following link:
http://www.undp.org/content/undp/en/home/operations/procurement/business/protest-and-sanctions.html

UNDP encourages every prospective Service Provider to prevent and avoid conflicts of interest, by disclosing to UNDP if you, or any of your affiliates or personnel, were involved in the preparation of the requirements, design, cost estimates, and other information used in this RFP.

UNDP implements a zero tolerance on fraud and other proscribed practices, and is committed to preventing, identifying, and addressing all such acts and practices against UNDP, as well as third parties involved in UNDP activities. UNDP expects its Service Providers to adhere to the UN Supplier Code of Conduct found in this link :
https://www.un.org/Depts/ptd/sites/www.un.org.Depts.ptd/files/files/attachment/page/pdf/unscc/conduct_english.pdf

Thank you and we look forward to receiving your Proposal.

Sincerely yours,

Ms. Agnes Kochan,
Operations Manager
UNDP Ukraine

July 19, 2021

Annex 1

Description of Requirements

Context of the Requirement	The establishment of a comprehensive and integral system of telemedicine services with coverage of all levels of medical care health care facilities of Donetsk oblast to ensure equal access for all residents of Donetsk oblast to specialized and highly specialized medical care, through remote communication via specialized secure information transmission channels, and significantly reducing the risks of infection transmission, taking into consideration the COVID-19 pandemic
Brief Description of the Required Services	Proceeding from Decree №681 of 19.10.2015 of the Ministry of Health of Ukraine, registered with the Ministry of Justice of Ukraine on November 09, 2015. for №1400 / 27845 "On approval of regulations on the use of telemedicine in health care", Decrees of the Department of Health of the Donetsk Oblast State Administration dated July 15, 2019 №594 "On the introduction of telemedicine in health care facilities of the Donetsk region" and on September 23, 2019 №742 "On approval of the list of the first stage health facilities of connection to the telemedicine platform", creation of a comprehensive system of telemedicine services with coverage of all levels of medical care health care facilities of Donetsk oblast enables accomplishment of the goals: 1. Improvement of the availability of secondary and specialized health care through the provision of local services and increase in the coverage of primary health care through the inclusion of the remote areas. 2. Promotion of the continuity between primary, secondary, and tertiary health care. 3. The solution to the lack of diagnostic equipment at primary and secondary levels of health care. 4. Installation of an efficient frame on the patients' routs. 5. Running of an effective check-up campaign with the screening of non-communicable diseases. 6. Removal of the overall burden on medical facilities that are holding the line in the fight against COVID-19. Therefore, UNDP is looking to contract an experienced organization, the institution with appropriate capabilities, capacity, and specialists who will be able to provide high-quality and duly performed tasks set out in this document.
List and Description of Expected Outputs to be Delivered	The establishment of a comprehensive and integral system of telemedicine services with coverage of all levels of medical care health care facilities of Donetsk oblast to ensure equal access for all residents of Donetsk oblast to specialized and highly specialized medical care, through remote communication via specialized secure information transmission channels, and significantly reducing the risks of infection transmission, taking into consideration the COVID-19 pandemic. The main tasks of telemedicine services are: • providing medical care to the patient when distance is a critical factor in its provision; • preservation of medical secrecy and confidentiality, the integrity of medical information about the patient's health; • creation of a single medical space;

	• promoting the quality of care and optimizing the processes of organization and management of health care; • formation of systemic approaches to the introduction and development of telemedicine in the health care system.
Person to Supervise the Work/Performance of the Service Provider	Programme Coordinator (Local Governance and Decentralization Reform), UN RPP
Frequency of Reporting	According to TOR attached
Progress Reporting Requirements	According to TOR attached
Location of work	According to TOR attached
Expected duration of work	According to TOR attached
Target start date	August 2021
Latest completion date	October 2021
Travels Expected	According to TOR attached
Special Security Requirements	N/A
Facilities to be Provided by UNDP (i.e., must be excluded from Price Proposal)	According to TOR attached
Implementation Schedule indicating breakdown and timing of activities/sub-activities	☒ Required ☐ Not Required
Names and curriculum vitae of individuals who will be involved in completing the services	☒ Required ☐ Not Required
Currency of Proposal	☒ United States Dollars (USD) ☐ Euro ☒ UAH
Value Added Tax on Price Proposal	☐ must be inclusive of VAT and other applicable indirect taxes ☒ must be exclusive of VAT and other applicable indirect taxes

Validity Period of Proposals *(Counting for the last day of submission of quotes)*	☐ 60 days ☒ 90 days ☐ 120 days In exceptional circumstances, UNDP may request the Proposer to extend the validity of the Proposal beyond what has been initially indicated in this RFP. The Proposal shall then confirm the extension in writing, without any modification whatsoever on the Proposal.
Partial Quotes	☒ Not permitted ☐ Permitted
A pre-proposal conference will be held on:	Pre-Bidding Conference will be held on the 26th of July 2021 at 11 am via Skype. Interested bidders are required to register for Pre-Bidding Conference by submitting their company name, list of attending representatives and their contact information as well as Skype ID (for bidders willing to participating via Skype Conference) at the following e-mail: **procurement.rpp.ua@undp.org** Attn: Procurement Unit Subject:**495-2021-UNDP-UKR-RFP-RPP** – Pre-Bidding Conference Registration
Payment Terms	The schedule of payments for the services will be agreed with the Contractor before the start of the assignment. Payments will be linked to deliverables and executed upon submission of Interim and Completion reports. A preliminary schedule is provided below. UNDP will pay the negotiated amount in 3 tranches as per delivery of outputs listed. Below is a description of the % of the total budget will be paid after receipt of the following deliverables: Delivery of Output 1 – 30% of the agreed payment Delivery of Output 2 – 60% of the agreed payment Delivery of Output 3 – 10% of the agreed payment UNDP shall pay the negotiated contract fees for the services within 30 days after the services have been delivered and approved in parts according with the above payments schedule. The payments will be processed upon the full completion and acceptance of contractual obligations whereupon the UNDP representative signs the certification of acceptance.
Person(s) to review/inspect/ approve outputs/complete d services and authorize the disbursement of payment	Programme Coordinator (Local Governance and Decentralization Reform), UN RPP
Type of Contract to be Signed	☐ Purchase Order ☐ Institutional Contract ☒ Contract for Professional Services ☐ Long-Term Agreement ☐ Other Type of Contract

Criteria for Contract Award	☐ Lowest Price Quote among technically responsive offers
	☒ Highest Combined Score (based on the 70% technical offer and 30% price weight distribution)
	☒ Full acceptance of the UNDP Contract General Terms and Conditions (GTC). This is a mandatory criterion and cannot be deleted regardless of the nature of services required. Non-acceptance of the GTC may be grounds for the rejection of the Proposal.
Criteria for the Assessment of Proposal	**Technical Proposal (70%)** ☒ Experience of the firm/organization submitting the proposal – 30% ☒ Brief description of the assignment implementation 35% ☒ Personnel 35% **Financial Proposal (30%)** To be computed as a ratio of the Proposal's offer to the lowest price among the proposals received by UNDP.
UNDP will award the contract to:	☒ One and only one Service Provider ☐ One or more Service Providers, depending on the following factors
Contract General Terms and Conditions	☒ **General Terms and Conditions for contracts (goods and/or services)** ☐ General Terms and Conditions for de minimis contracts (services only, less than $50,000) Applicable Terms and Conditions are available at: http://www.undp.org/content/undp/en/home/procurement/business/how-we-buy.html **Non-acceptance of the terms of the General Terms and Conditions (GTC) shall be grounds for disqualification from this procurement process**
Annexes to this RFP	☒ Form for Submission of Proposal (Annex 2) ☒ Detailed ToR and Evaluation Criteria (Annex 3) ☒ Model Contract for Goods and/or Services (Annex 4) ☐ Others
Contact Person for Inquiries (Written inquiries only)	*UNDP procurement Unit* *UNDP Ukraine* **procurement.rpp.ua@undp.org** , Any delay in UNDP's response shall be not used as a reason for extending the deadline for submission, unless UNDP determines that such an extension is necessary and communicates a new deadline to the Proposers.
Documents to be submitted in proposal	☒ Dully filled in and Signed Form for Submission of Proposal (Annex 2); ☒ Copies of Latest Business Registration Certificate (Copies of State/Tax registration documents) and other Certificates (if any); ☒ A letter of interest/offer, which outlines previous experience in implementing similar projects and competitive advantages of the applicant company; ☒ At least 2 (two) examples of similar products successfully implemented and launched (to be provided in organization's profile or in a separate document; links are acceptable);

	☒At least 2 (two) reference letters from previous clients/customers/partners reflecting the nature of the implemented projects, their results, and the role of the applicant; ☒A Letter of Conformity to the requirements of Annex 1 (ToR) ☒CVs of all the project team members (Team Lead/Project Manager and all other engaged Experts), including information mentioned in the EXPERIENCE AND QUALIFICATION REQUIREMENTS section (references and relevant information should be provided); ☒A proposed work plan with detailed list of key activities and vision of the establishment of a comprehensive and integral system of telemedicine services with coverage of all levels of medical care health care facilities of Donetsk oblast ☒ **Financial proposal (Please do not provide password unless requested and don't include password to letter with technical proposal part).**
Other Information *[pls. specify]*	**Administrative Requirements:** Submitted offers will be reviewed on "Pass" or "Fail" basis to determine compliance with the below formal criteria/ requirement/s: - Offers must be submitted within the stipulated deadline - Offers must meet required Offer Validity - Offers have been signed by the proper authority - Offers include requested company/organization documentation as mentioned above in « Documents to be submitted in proposal» Section - Offers must comply with general administrative requirements **Experience and Qualification Requirements** *For the Company:* - A company with a valid registration (for Ukrainian companies – the company should be registered in the territory controlled by the government of Ukraine). - At least 3 (three) years of experience in the development of software; - At least 2 (two) examples of similar products successfully implemented and launched (to be provided in organization's profile or in a separate document; links are acceptable); - Confirmed experience in development and implementation of software solutions in the capacities of healthcare facilities and/or government institutions of Ukraine would be considered as an asset; - The Contractor must have a team of at least 5 (five) professionals with the following roles and required qualifications: *Team Leader/Project Manager:* - At least a Bachelor's (or equivalent) degree in Economics, Social Sciences, Management, - Psychology, PR, Communications, Engineering, Electronic devices, systems and complexes or another relevant related field; - Minimum 3 (three) years of experience in project management and team management; - Experience in implementation of software solutions projects (at least 2 projects);

	- Experience in implementation of software solutions in the capacities of healthcare facilities and/or government institutions of Ukraine would be considered as a strong advantage; - Excellent knowledge of Ukrainian and Russian is required; knowledge of English on the working level is an asset. ***Software Engineer/Developer:*** - Bachelor's degree or higher in Economics, Finance, Mathematics, Social Sciences, Computer Studies, Management, PR, Communications, Engineering, Electronic devices, systems and complexes or another related field; - Experience in development of software solutions implemented in the capacities of healthcare facilities and/or government institutions of Ukraine (at least 2 software solutions); - Engagement in development of at least one telemedicine software solution is required; - Excellent knowledge of Ukrainian and Russian is required. Knowledge of English would be considered as an asset. ***Senior Software Engineer/Leading developer:*** - Master's degree or higher in Economics, Finance, Mathematics, Social Sciences, Computer Studies, Management, PR, Communications, Engineering, Electronic devices, systems and complexes or another related field; - Experience in development of software solutions implemented in the capacities of healthcare facilities and/or government institutions of Ukraine (at least 2 software solutions); - Engagement in development of at least one telemedicine software solution is required; - Excellent knowledge of Ukrainian and Russian. Knowledge of English would be considered as an asset. ***System Administrator/Information Security Specialist:*** - Bachelor's degree or higher in Economics, Finance, Mathematics, Social Sciences, Computer Studies, Management, PR, Communications, Engineering, Electronic devices, systems and complexes or another related field; - Experience in information security in software solutions projects implemented in the capacities of healthcare facilities and/or government institutions of Ukraine (at least 2 projects); - Engagement in at least one telemedicine project implementation would be considered as an asset; - Excellent knowledge of Ukrainian and Russian. Knowledge of English would be considered as an asset. ***Software Engineer/Testing Specialist:*** - Bachelor's degree or higher in Economics, Finance, Mathematics, Social Sciences, Computer Studies, Management, PR, Communications, Engineering, Electronic devices, systems and complexes or another related field;

	- Experience in software solutions testing in projects implemented in the capacities of healthcare facilities and/or government institutions of Ukraine (at least 2 projects); - Engagement in at least one telemedicine project implementation would be considered as an asset; - Excellent knowledge of Ukrainian and Russian. Knowledge of English would be considered as an asset. Other information is available on http://procurement-notices.undp.org; For the information, please contact procurement.rpp.ua@undp.org

Annex 2

FORM FOR SUBMITTING SERVICE PROVIDER'S PROPOSAL[1]

(This Form must be submitted only using the Service Provider's Official Letterhead/Stationery[2])

[insert: *Location*]
[insert: *Date*]

To: [*insert: Name and Address of UNDP focal point*]

Dear Sir/Madam:

We, the undersigned, hereby offer to render the following services to UNDP in conformity with the requirements defined in the 495-2021-UNDP-UKR-RFP-RPP, and all of its attachments, as well as the provisions of the UNDP General Contract Terms and Conditions:

A.   **Qualifications of the Service Provider**

> *The Service Provider must describe and explain how and why they are the best entity that can deliver the requirements of UNDP by indicating the following:*
> *• Business Licenses – Registration Papers, Tax Payment Certification, etc.*
> *• A letter of interest/offer, which outlines previous experience in implementing similar projects and competitive advantages of the applicant company.*
> *• At least 2 (two) examples of similar products successfully implemented and launched (to be provided in organization's profile or in a separate document; links are acceptable).*
> *• At least 2 (two) reference letters from previous clients/customers/partners reflecting the nature of the implemented projects, their results, and the role of the applicant*
> *• A Letter of Conformity to the ToR Annex 1 requirement.*
> *• Written Self-Declaration that the company is not in the UN Security Council 1267/1989 List, UN Procurement Division List or Other UN Ineligibility List.*

BRIEF COMPANY PROFILE	
The Service Provider must describe and explain how and why they are the best entity that can deliver the requirements of UNDP by indicating the following:	
Full registration name	
Year of foundation	

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[1] *This serves as a guide to the Service Provider in preparing the Proposal.*

[2] *Official Letterhead/Stationery must indicate contact details – addresses, email, phone and fax numbers – for verification purposes*

Legal status	If Consortium, please provide written confirmation from each member
Legal address	
Actual address	
Bank information	
VAT payer status	
Contact person name	
Contact person email	
Contact person phone	
Company/Organization's core activities	
Profile – describing the nature of business, field of expertise, licenses, certifications, accreditations (If any);	Please indicate here
Business Licenses – Registration Papers, Tax Payment Certification, etc	EDRPOU, ID tax number Copies of State registration and Tax registration should be attached
Track Record performed	Please indicate here the List of clients for similar services as those required by UNDP, indicating description of contract scope, contract duration, contract value, contact references; Brief description of previous products developed by the company (list);
Certificates and Accreditation	Please indicate here applicable including Quality Certificates, Patent Registrations, Environmental Sustainability Certificates, etc.
Please provide contact details of at least 2 previous partners for reference	Please attach the signed reference letters *if any.*
Company is not in the UN Security Council 1267/1989 List, UN Procurement Division List or Other UN Ineligibility List.	Yes/No (Please choose)
Other relevant information	

B.   **Proposed Methodology for the Completion of Services**

> *The Service Provider must describe how it will address/deliver the demands of the RFP; providing a detailed description of the essential performance characteristics, reporting conditions and quality assurance mechanisms that will be put in place, while demonstrating that the proposed methodology will be appropriate to the local conditions and context of the work including:*
> - *Proposed work plan with detailed list of key activities and vision of the establishment of a comprehensive and integral system of telemedicine services with coverage of all levels of medical care health care facilities of Donetsk oblast*

C.   **Qualifications of Key Personnel**

> *If required by the RFP, the Service Provider must provide:*
> *• CVs of all the project team members (Team Lead/Project Manager and all the engaged Experts), including information mentioned in the EXPERIENCE AND QUALIFICATION REQUIREMENTS section (references and relevant information should be provided).*

D.   **Financial Proposal**

The Proposer is required to prepare the Financial Proposal separately from the rest of the RFP as indicated in the Instruction to Proposers.

The Financial Proposal must provide a detailed cost breakdown. Provide separate figures for each functional grouping or category.

Any estimates for cost-reimbursable items, such as travel and out-of-pocket expenses, should be listed separately.

In case of an equipment component to the service provider, the Price Schedule should include figures for both purchase and lease/rent options. UNDP reserves the option to lease/rent outright the equipment through the Contractor.

The format shown on the following pages is suggested for use as a guide in preparing the Financial Proposal. The format includes specific expenditures, which may or may not be required or applicable but are indicated to serve as examples.

Cost Breakdown per Deliverable*

The key steps and a description of the results that must be obtained in the specified time frames are listed above. The Contractor is invited to assess the complexity of work on the implementation by each of these stages and offer the customer the preferred percentage of the agreement's total proposed value.

Taking into account that purchase of services will be carried out within the project of international technical assistance Your price offers / invoices for payment must be presented without VAT.

No.	Activities / Costs	Percentage of Price (Weight for payment)	Price, excluding VAT, *please indicate the currency*
1	**Deliverable 1:** Surveying the software implementation facility, coordination of all issues with the Beneficiary and the preparation of results of the respective assessment. Action plan for all activities of the assignment is elaborated and presented.		
2	**Deliverable 2:** Installation of the comprehensive and integral system of telemedicine services. Licenses for Medical Information System, establishing a comprehensive and integral system of telemedicine services are provided to the Customer.		
3	**Deliverable 3:** Conducting a training session for the staff of the medical facilities on the operation of the comprehensive and integral system of telemedicine services.		
	Total, excluding VAT, *please indicate the currency*	**100%**	

This breakdown per deliverables shall be the basis of the payment tranches

Cost Breakdown by Cost Component

The Proposers are requested to provide the cost breakdown for the above given prices for each deliverable based on the following format. UNDP shall use the cost breakdown for the price reasonability assessment purposes as well as the calculation of price in the event that both parties have agreed to add new deliverables to the scope of Services.

№	Activity/Costs	Unit	Number	Cost per unit, excl. VAT, *indicate the currency*	Amount, excl. VAT, *indicate the currency*
1	**Personnel**				
1.1	Team Leader	month			
1.2	Software Engineer/Developer				
1.3	Senior Software Engineer/Leading developer				
1.4	System Administrator/Information Security Specialist				
1.5	Software Engineer/Testing Specialist				
1.6	Other staff (as required)				
2	**Cost of implementation/ maintenance**				
2.1	Telemedicine Software License	unit			

2.2	System warranty maintenance	Month	12		
3	**Administration Costs (if necessary)**				
3.1	Communication (Internet/Phone/etc.)				
3.2	Other (if any - to define clearly activities/costs)				
4	**Travel and Lodging**				
4.1	Travel costs				
4.2	Accommodation				
4.3	Daily Allowance				
5	**Staff training sessions**				
5.1	...				
5.2	...				
	Total *(please indicate currency)*				

[Name and Signature of the Service Provider's Authorized Representative]
[Designation]

[Date]

** Dear partners!

The United Nations Office in Ukraine would like to inform you that the purchase of goods and services announced in the tender will be carried out within the project of international technical assistance.

According to the provisions of the Tax Code of Ukraine (paragraph 197.11), an exemption from VAT is provided for operations that are financed through material and technical assistance.

The procedure for obtaining the right to exemption from taxation for operations that are made within international technical assistance projects is regulated by the Decree of the Cabinet of Ministers of Ukraine No.153 dated February 15, 2002.

According to this procedure, the price of the contract is determined "without VAT" and the tax invoice is drawn up in accordance with paragraph 2 of Order No. 1307. In the left part of this invoice, the corresponding mark "X" should be made and the type of reason 12 should be indicated. At the same time in the column "Recipient" (buyer) the name of the legal entity (UN Office in Ukraine) should be indicated, and in the column "Individual tax number of the beneficiary" (buyer) should be indicated conventional TIN (taxpayer reg. No.) "200000000000".

Based on the above stated, we request that you prepare your bid proposals / invoices for payment without VAT taking into account the provisions of the Ukrainian legislation stated in the above mentioned normative acts.

If you have any additional questions, please contact the offices of the State Fiscal Service of Ukraine at the place of registration of your company for additional advice within the Article 52 of the Tax Code of Ukraine.

Annex 3

TERMS OF REFERENCE

Project Title: UN Recovery and Peacebuilding Programme of the Local Governance and Decentralization Reform Component.

Description of the Assignment: The establishment of a comprehensive and integral system of telemedicine services with coverage of all levels of medical care health care facilities of Donetsk oblast to ensure equal access for all residents of Donetsk oblast to specialized and highly specialized medical care, through remote communication via specialized secure information transmission channels, and significantly reducing the risks of infection transmission, taking into consideration the COVID-19 pandemic.

Expected Places of Travel: Ukraine, government-controlled areas of Donetsk and Luhansk oblasts.
Name and position of Immediate Supervisor: Kateryna Ostrovska, Health Governance Specialist (Local Governance and Decentralization Reform).
Name and Position of Senior Manager: Olena Ruditch, Programme Coordinator (Local Governance and Decentralization Reform).
Starting Date of the Assignment: August 2021.
Duration of the Assignment: 10 weeks.

1. BACKGROUND

The ongoing conflict in eastern Ukraine has had a direct and highly negative impact on social cohesion, resilience, livelihoods, community security, and the rule of law. Recognizing the need to urgently address reconstruction, economic recovery, and peacebuilding needs in areas affected both directly and indirectly by the conflict, in late 2014 the Government of Ukraine requested technical assistance and financial support from the international community to assess priority recovery needs. In late 2014, the United Nations (UN), the World Bank (WB), and the European Union (EU) conducted a Recovery and Peacebuilding Assessment, which was endorsed by the Cabinet of Ministers in mid-2015.

The United Nations Development Programme (UNDP) has been active and present in eastern Ukraine for the past decade, prior to the conflict, with a focus on community development, civil society development, and environmental protection. Work on addressing the specific conflict-related development challenges discussed above built on this earlier engagement, established partnerships, and started in 2015 through the Recovery and Peacebuilding Programme (RPP). The RPP is a multi-donor funded framework programme formulated and led by the UNDP in collaboration with the Government of Ukraine and in cooperation with a number of partnering UN agencies (UN Entity for Gender Equality and the Empowerment of Women (UN Women), the Food and Agricultural Organization of the United Nations (FAO), and the United Nations Population Fund (UNFPA)).

The RPP was designed to respond to, and mitigate, the causes and effects of the conflict. It is based on findings of the Recovery and Peacebuilding Assessment (RPA) and is aligned to the State Target Programme for Recovery as well as to the two oblast development strategies up to 2020. It takes into account the opportunities that have arisen from the Minsk Protocol of September 2014 and the renewal of its cease-fire provisions (the latest cease-fire having been agreed in March 2018) and is also fully adjusted to the humanitarian-development nexus. It is an integral component of the UNDP Country Programme and is therefore fully aligned with the United Nations Partnership Framework (UNPF). It is closely interlinked with the Democratic Governance and Reform Programme, operating nationally and in all of Ukraine's regions, and is consistent with the SDGs, in particular SDG 16 (Peace, Justice and Strong institutions).

The Programme's interventions are grouped under the following key Programme components, which reflect the region's priority needs:

Component 1: Economic Recovery and Restoration of Critical Infrastructure
Component 2: Local Governance and Decentralization Reform
Component 3: Community Security and Social Cohesion.

The United Nations Recovery and Peacebuilding Programme (UN RPP) is being implemented by four United Nations agencies: the United Nations Development Programme (UNDP), the UN Entity for Gender Equality and the Empowerment of Women (UN Women), the United Nations Population Fund (UNFPA) and the Food and Agriculture Organization of the United Nations (FAO).

Twelve international partners support the Programme: the European Union (EU), the European Investment Bank (EIB), the U.S. Embassy in Ukraine, and the governments of Canada, Denmark, Germany, Japan, the Netherlands, Norway, Poland, Sweden & Switzerland.

In October 2018, four UN agencies (UNDP, UN Women, FAO and the UNFPA) have countersigned a new joint project document, funded by the EU. The overall objective of the project is to restore effective governance and promote reconciliation in the crisis-affected communities of Donetsk and Luhansk oblasts of Ukraine, thereby enhancing the credibility and legitimacy of local governments in the government-controlled areas. It will contribute to peace build and prevent further escalation of conflict in Ukraine through effective and accountable decentralization, gender-responsive recovery planning and equal access to services, as well as enhanced community security and social cohesion.

This endeavor will be achieved through the pursuit of the following specific objectives:

1. To enhance local capacity for gender-responsive decentralization and administrative reforms to improve governance, local development, and the delivery of services.
2. To stimulate employment and economic growth by assisting to Micro, Small, and Medium Enterprise (MSME) development through demand-driven business development services and professional skills training.
3. To enhance social cohesion and reconciliation through promotion of civic initiatives.
4. To support sector reforms and structural adjustments in health, education, and critical public infrastructure to mitigate direct impacts of the conflict.
5. To support the implementation of the Early Recovery Programme in cooperation with the European Investment Bank.

The main goal of the fourth objective is to build capacity at the local level during gender-responsive healthcare reforms.

On 19 of October 2017, Ukraine's Parliament approved draft law No. 6327 "On state financial guarantees for the provision of medical services and medicines," which gave a start to important and long-awaited health reform in Ukraine. The implementation of the reform at the level of specialized and highly specialized medical care began on April 1, 2020. Throughout its putting into practice, the authorities faced several political, economic, and technical problems, aggravated due to the backdrop of the coronavirus pandemic that came to Ukraine. In connection to the abovementioned, the deployment, continuity, and permanence of the results of the reform remain threatened. Medical assistance is still in high demand within the considered territories of action of UNDP in the East of Ukraine, with the sound lack of interoperability between the primary medical care, namely family doctors, and the secondary and tertiary medical care, presented by profile specialists.

Under the present circumstances prevention, early detection of non-communicable diseases, which are the main causes of premature deaths in Donetsk and Luhansk oblasts, shortening of the path of the healthcare services consumers to specialized care in the meaning of both a distance and a timeframe are the state of necessity.

Proceeding from Decree №681 of 19.10.2015 of the Ministry of Health of Ukraine, registered with the Ministry of Justice of Ukraine on November 09, 2015. for №1400 / 27845 "On approval of regulations on the use of telemedicine in health care", Decrees of the Department of Health of the Donetsk Oblast State Administration dated July 15, 2019 №594 "On the introduction of telemedicine in health care facilities of the Donetsk region" and on September 23, 2019 №742 "On approval of the list of the first stage health facilities of connection to the telemedicine platform", creation of a comprehensive system of telemedicine services with coverage of all levels of medical care health care facilities of Donetsk oblast enables accomplishment of the goals:

1. Improvement of the availability of secondary and specialized health care through the provision of local services and increase in the coverage of primary health care through the inclusion of the remote areas.
2. Promotion of the continuity between primary, secondary, and tertiary health care.
3. The solution to the lack of diagnostic equipment at primary and secondary levels of health care.
4. Installation of an efficient frame on the patients' routs.
5. Running of an effective check-up campaign with the screening of non-communicable diseases.
6. Removal of the overall burden on medical facilities that are holding the line in the fight against COVID-19.

Therefore, UNDP is looking to contract an experienced organization, the institution with appropriate capabilities, capacity, and specialists who will be able to provide high-quality and duly performed tasks set out in this document.

2. OBJECTIVES OF THE ASSIGNMENT

The establishment of a comprehensive and integral system of telemedicine services with coverage of all levels of medical care health care facilities of Donetsk oblast to ensure equal access for all residents of Donetsk oblast to specialized and highly specialized medical care, through remote communication via specialized secure information transmission channels, and significantly reducing the risks of infection transmission, taking into consideration the COVID-19 pandemic.

The main tasks of telemedicine services are:

- providing medical care to the patient when distance is a critical factor in its provision;

- preservation of medical secrecy and confidentiality, the integrity of medical information about the patient's health;

- creation of a single medical space;

- promoting the quality of care and optimizing the processes of organization and management of health care;

- formation of systemic approaches to the introduction and development of telemedicine in the health care system.

Table 1. List of objects

No.	Name of the healthcare facility in Donetsk oblast	Number of workplaces
1	Municipal non-profit Enterprise "Oblast Intensive Care Hospital"	15

	Center for telemedicine	
	including:	
1.2	Municipal non-profit Enterprise "Oblast Clinical Traumatology Hospital"	3
1.3	Municipal non-profit Enterprise "Oblast Perinatal Center of Kramatorsk"	2
2	Municipal non-profit Enterprise "Sloviansk Oblast Children's Hospital"	2
3	Municipal non-profit Enterprise "Kramatorsk Regional Territorial Medical Association" (Oblast Center for Cardiovascular Surgery)	2
4	Municipal non-profit Enterprise "Bakhmut Multi-profile Hospital of Intensive Treatment"	2
5	Municipal non-profit Enterprise "Velyka Novosilka Central Rayon Hospital"	2
6	Municipal non-profit Enterprise "Volnovakha Central Rayon Hospital"	2
7	Municipal non-profit Enterprise "City Hospital №3" of Kramatorsk City Council	2
8	Municipal non-profit Enterprise "Multi-profile Hospital of Intensive Treatment" of Kostiantynivka City Council	2
9	Municipal non-profit Enterprise "Mariupol City Hospital №1" of Mariupol City Council	2
10	Municipal non-profit Enterprise "Mariupol City Hospital №4 named after I.K. Matsuk"	2
11	Municipal non-profit Enterprise "Pokrovsk Clinical Hospital of Intensive Treatment" of Pokrovsk City Council	2
12	Municipal non-profit Enterprise "Dobropillia Hospital of Intensive Treatment"	2
13	Municipal non-profit Enterprise "Kurahovo City Hospital"	2
14	Municipal non-profit Enterprise "Selidovo Central City Hospital" of Selidovo City Council	2
15	Municipal non-profit Enterprise "Sloviansk Clinical City Hospital"	2
16	Municipal non-profit Enterprise "Toretsk Central City Hospital"	2
17	Municipal non-profit Enterprise "Avdiivka Central City Hospital"	2
18	Municipal non-profit Enterprise "Bakhmut Center of primary medical care"	3
19	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Bakhmut City Council	3
20	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Soledar City Council	2
21	Municipal non-profit Enterprise "Toretsk Center of Primary Medical Care"	3
22	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Zvanivka Village Council	2
23	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Vuhledar City Council	2
24	Municipal non-profit Enterprise "Velyka Novosilka Center of Primary Medical and Sanitary Care" of Velyka Novosilka Settlement Council	3
25	Municipal non-profit Enterprise "Volnovakha Rayon Center of Primary Medical and Sanitary Care" of Volnovakha City Council	3

26	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" №1" of Kramatorsk City Council	3
27	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" №2" of Kramatorsk City Council	2
28	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Kostiantynivka City Council	3
29	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Lyman City Council	3
30	Municipal non-profit Enterprise "Sloviansk Center of Primary Medical and Sanitary Care" of Sloviansk City Council	3
31	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Druzhkivka City Council	3
32	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Illinivka Village Council of Kostiantynivka Rayon of Donetsk oblast	3
33	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Sloviansk Rayon Council of Donetsk oblast	3
34	Municipal non-profit Enterprise "Oleksandrivka Rayon Center of Primary Medical and Sanitary Care" of Oleksandrivka Rayon Council of Donetsk oblast	3
35	Municipal non-profit Enterprise "Mariupol Center of Primary Medical and Sanitary Care №1" of Mariupol City Council	3
36	Municipal non-profit Enterprise "Mariupol Center of Primary Medical and Sanitary Care №2" of Mariupol City Council	3
37	Municipal non-profit Enterprise "Mariupol Center of Primary Medical and Sanitary Care №3" of Mariupol City Council	3
38	Municipal non-profit Enterprise "Mariupol Center of Primary Medical and Sanitary Care №4" of Mariupol City Council	3
39	Municipal non-profit Enterprise "Mariupol Center of Primary Medical and Sanitary Care №5" of Mariupol City Council	3
40	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Nikolske Rayon Council of Donetsk oblast	3
41	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Manhush Rayon	3
42	Municipal non-profit Enterprise "Myrnohrad Center of Primary Medical and Sanitary Care"	3
43	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Novohrodivka City Council	3
44	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Pokrovsk City Council of Donetsk oblast	3
45	Municipal non-profit Enterprise "Dobropillia Center of Primary Medical and Sanitary Care" of Dobropillia City Council	3
46	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Selidovo City Council	3
47	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Kryviy Rih Village Council	2
48	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Mariinka Rayon Council	3

49	Municipal non-profit Enterprise "Pokrovsk Rayon Center of Primary Medical and Sanitary Care" of Hrodivka Settlement Council of Pokrovsk Rayon of Donetsk oblast	2
50	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Ocheretyne Settlement Territorial Hromada	2
51	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Shahivka Village Council	1
52	Municipal non-profit Enterprise "Center of Primary Medical and Sanitary Care" of Bilozerka City Council	1
	Total	137

3. SCOPE OF WORK

As a result of the establishment of a comprehensive and integral system of telemedicine services via the installation and running of the Medical Information System, it is planned to achieve the following tasks:

- scheduled telemedicine consultations within the established system of healthcare facilities of the primary, secondary, and tertiary level of medical care in Donetsk oblast, mentioned in the list of objects with the possibility of the further deployment of the network;
- ensuring the emergency and urgent consultations;
- enabling interactions between all existing mobile diagnostic complexes and telemedicine devices in Donetsk oblast;
- compliance of the system with the current standards of protection and transmission of information;
- provision of secure multi-channel video/audio conferencing via built-in chat and system event logging.

To achieve these outputs, the Contractor shall provide the following services:
- Surveying the software implementation facility, coordination of all issues with the Beneficiary;
- Installation of the System on the Beneficiary's server hardware (or another location);
- Customization (configuration) of the System based on survey results;
- Putting the System into operation and it's beta testing;
- Troubleshooting on the results of beta testing;
- Launching the System into operation;
- Training (instruction) of system users;
- Ensuring the one-year licenses for Medical Information System, establishing a comprehensive and integral system of telemedicine services.

Table 2. Technical (quality) requirements to the Medical Information System, establishing a comprehensive and integral system of telemedicine services

№	Technical (quality) requirements to the Medical Information System, establishing a comprehensive and integral system of telemedicine services
1.	**GENERAL REQUIREMENTS**

1.1	**System construction principles**
1.1.1	Ability to scale hardware and software as the load increases.
1.1.2	One-time input and multiple uses of primary information.
1.1.3	Ability to log all facts of access to information and its modification (create, edit, delete).
1.2	**System architecture requirements**
1.2.1	The system architecture should be client-server, three-tier (database level, application server level, client level), must support remote operation via the Internet.
1.2.2	The database server is a relational database server that contains all the data of the System.
1.2.3	The application server is a server that can be used as an application server for client software. It is used to interact with the database server.
1.2.4	The architecture of the System should be scalable, i.e., it should be possible by adding for example additional database servers and/or application servers without changing the system code.
1.2.5	The system must have available capabilities and mechanisms for installing updates (new features, releases, bug fixes, security updates, implementation of legal requirements, etc.).
1.2.6	If necessary, the system should be able to interact with external information systems. The system must support the ability to export/import data to related information systems (for example, using data files in .xml, .csv, .xlsx, or interface tables) and be able to exchange data with related information systems using standardized information exchange protocols.
1.3	**Requirements for information protection in the System**
1.3.1	The system should provide access to its data only to authorized users.
1.3.2	The System must restrict access to information following the rights configured in the System.
1.3.3	The system must log all user actions to change information. Information about the relevant actions should be detailed (with fixing the indicators of which attributes were changed to others).
1.3.4	The system must record all user actions to access personal data so that it is possible for each person whose data was accessed to obtain a detailed report on who and when viewed this information.
1.3.5	The system must have built-in mechanisms for using electronic digital keys of certified centers for the ability to sign data.
1.3.6	The algorithm defined in DSTU 4145-2002 should be used for the formation and verification of the electronic digital signature.
1.3.7	The key distribution protocol according to item 8.3 of DSTU ISO/IEC 15946 should be used for the calculation of session keys.
1.3.8	The level of data security in the system should be such as to enable the construction of a Comprehensive Information Security System (hereinafter CISS) for the System.
1.3.9	The system should be able to encrypt data stored at the central level using encryption libraries that have passed the appropriate certification of the State Special Service, which will ensure the construction of CISS without purchasing additional software/hardware.
1.3.10	Algorithms defined in DSTU 28147: 2009 should be used to encrypt information. The algorithm defined by DSTU 34.311-95 should be used to calculate the hash function.
1.4	**Automated workstations requirements**

1.4.1	Workstation - Customer Physician Main tasks: formation of requests for telemedicine consultation, registration of patients, addition to the request for telemedicine consultation of various medical and diagnostic information, interaction with the mobile diagnostic complex, interaction with stationary radiological diagnostic devices, communication with the consultant doctor via video/audio communication.
1.4.2	Workstation - Consulting Physician Main tasks: Processing requests for telemedicine counseling and forming consultant's conclusions.
1.4.3	Workstation - Patient Main tasks: registration on the Portal registration, recording for a telemedicine consultation, viewing the results of telemedicine consultations, communication of the patient with the doctor via video/audio communication.
1.4.4	Workstation – Moderator Main tasks: management of providers and recipients of telemedicine services.
1.4.5	Workstation - Administrator Main tasks: System administration and debugging.
1.4.6	The system should provide the ability to create new and modify existing automated workstations depending on customer needs.
1.4.7	The system should allow the creation of user roles by configuring various access rights to interfaces, functions (rights to create, edit, view, print reports, and forms, etc.), without additional programming.
1.4.8	The system must be able to configure individual roles and access rights for an individual user or group of users.
1.5	**Requirements for ergonomics and technical aesthetics**
1.5.1	Users should interact with the software using a visual graphical user interface (GUI). The system interface should be clear and convenient, should not be overloaded with graphic elements, and should provide a fast display of screen forms.
1.5.2	Navigation elements must be made in a user-friendly format. Means of editing information must comply with the provisions on the use of function keys, operation modes, search, use of the window system. Data input and output of the System, acceptance of control commands, display of their results must be performed in an interactive mode. The interface must meet modern requirements and provide easy access to the main functions and operations of the System.
1.5.3	The interface should be focused on the use of a "mouse" type manipulator, i.e. the system should be controlled by a set of OSD menus, buttons, icons, etc. elements. Keyboard input mode should be used mainly when filling and/or editing text and numeric fields of screen forms.
1.5.4	All labels, as well as messages to the user (except system messages), must be in Ukrainian.
1.5.5	The system must ensure the correct handling of emergencies caused by incorrect user actions, incorrect format, or invalid input values. In these cases, the system must notify the user with an appropriate message and then return to the operating state preceding the incorrect (invalid) command or incorrect data input.

1.5.6	Screen forms must meet the requirements of unification: - All screen forms of the user interface must be made in a single graphic design, with the same location of the main controls and navigation; - Use the same icons, buttons, and other controls and navigation to indicate the same type of operation. The terms used to denote standard operations (creating a new record, editing an existing one), as well as the sequence of user actions to perform them must be unified; - The external behavior of typical interface elements (reaction to hovering the mouse pointer, pressing a button, etc.) must be implemented in the same way for the same type of elements.
1.6	**Documentation requirements**
1.6.1	Documentation must be written in Ukrainian and submitted electronically.
1.6.2	The end-user documentation should include a description of each function of the System, as well as the steps that the System user must follow to use this function. End-user documentation consists of: - User manual.
1.6.3	The description of the main functions of the System must be provided with video instructions.
2.	**FUNCTIONAL REQUIREMENTS**
2.1	**System logical structure requirements:**
2.1.1	The system must provide access to different groups of its functions according to user rights.
2.1.2	The system should include the following subsystems (modules): - Management of providers and recipients of telemedicine services - Registration and accounting of patients - Telemedicine counseling - Electronic medical card - Medical Imaging Subsystem (PACS) - Interaction with the mobile diagnostic complex - Interaction with stationary radiological diagnostic devices - Video/audio communication - Key performance indicators - Patient portal - System Setting - System Administration
2.2.	**Requirements for the subsystem "Management of providers and recipients of telemedicine services"** The subsystem should automate the management of providers and recipients of telemedicine services, in particular, the following functions:
2.2.1	Setting up a list of medical facilities and consultants who can provide telemedicine consultations by specialization;
2.2.2	Management of consultants' work schedules and patient service;
2.2.3	Search for free consultants in the System;
2.2.4	Accounting for telemedicine consultations.
2.3.	**Requirements for the subsystem "Registration and accounting of patients"** The subsystem should automate the work of registration and accounting of patients, in particular, the following functions:
2.3.1	Identification of the patient in an unambiguous way, after which medical records are attached to this patient;

2.3.2	Ability to create, edit, delete "Patient Registration Card";
2.3.3	Accounting for patient contact information, including addresses, telephone numbers, and demographic data such as date of birth, time of birth, gender, and other information stored and maintained to uniquely identify patients;
2.3.4	Display of key patient identifiers on all patient source data;
2.3.5	Execution by users of various requests to search for cards according to the key details of the patient's card;
2.3.6.	Patient registration by different categories of accounting.
2.4.	**Requirements for the subsystem "Telemedicine consulting"** The module is designed for synchronous and asynchronous telemedicine consultation of patients and doctors, exchange of medical data with a medical facility of the highest level of medical care, and should provide the following functions:
2.4.1	Formation of a request for telemedicine consultation following the form of primary accounting documentation № 001/tm "Request for telemedicine consultation", approved by the order of the Ministry of Health of Ukraine dated October 19, 2015, № 681;
2.4.2	Ensuring the addition of various medical and diagnostic information to the request for telemedicine consultation in different ways: - adding information by scanning paper documents; - adding information using the subsystem "Electronic Medical Card"; - adding information using the medical imaging subsystem (PACS); - adding information from mobile software and hardware systems for telemetry and telemedicine consulting.
2.4.3	Ability to communicate during telemedicine consultation via video/audio communication;
2.4.4	Accounting of telemedicine consultations is kept in the journal of accounting of telemedicine consultations in accordance with the form of primary accounting documentation № 003/tm "Journal of accounting of telemedicine consultations";
2.4.5	Formation of an opinion by the form of primary accounting documentation № 002 / tm "Medical consult", approved by the order of the Ministry of Health of Ukraine dated October 19, 2015, № 681;
2.4.6	Ensuring clear formulation of questions to consultants with the help of formalized requests for consultation, answers of doctors-consultants by means of formalized conclusions;
2.5.7	Ability to depersonalize the data sent to the consultant.
2.6.	**Requirements for the subsystem "Electronic medical card"** The subsystem should provide input and review the patient medical information, fixation of an interaction between the doctor and the patient, tracking of the course of a patient's disease, formation of various documentation based on EMC, in particular:
2.6.1	Maintaining an **electronic medical card** (EMC), which includes inpatient and outpatient patient records, the results of instrumental and laboratory tests, letters of appointment, etc.;
2.6.2	EMC must contain: 1) **General information about the patient,** in particular: - Unique code (identifier) of the patient - Full Name - Demographics - Contacts

	- The main patient documents (according to the requirements of the regulations of the Ministry of Health in the provision of medical care) - Registration of belonging of the patient to Contingents groups, (according to requirements of regulatory documents of the Ministry of Health at the rendering of medical care) - The main "signal" indicators (according to the requirements of regulatory documents of the Ministry of Health) - Additional (optional) parameters - Attributes of registration of the declaration chronology between the patient and family doctors 2) **Medical patient data,** in particular: - patient immunization - patient diagnoses - laboratory tests - diagnostic tests - prescribed drugs - referral for research - referral for treatment - postponed surgery - pregnancy and childbirth - allergic reactions list - results of inpatient treatment and discharge epicrisis - additional factors that affect the patient's health - sick leaves - other medical records
2.6.3	Setting up convenient templates for medical documents for doctors of any specialty. (See section 2.13 Requirements for the Setting System Subsystem;
2.6.4	Security of access to EMC, taking into account the access users rights to medical information approved by the medical institution;
2.6.5	Review of the patient's EMC and quick search for the necessary information in large volumes of medical documentation;
2.6.6	Formation of various extracts based on EMC, such as certificates, epicrisis, their printing and storage of these documents' copies;
2.6.7	Review of the patient's medical data: diagnoses, prescriptions, etc.;
2.6.8	Ability to attach various documents to the EMC.
2.7.	**Requirements for the Medical Imaging Subsystem (PACS)** The subsystem must configure and organize the transfer of medical images to the image archive and perform the following functions:
2.7.1	Work with the operational database of medical images;
2.7.2	Automation of the process of archiving, search and access to medical images;
2.7.3	Receiving and processing data in DICOM format from radiological devices;
2.7.4	Support for access to external and local PACS server.
2.8.	**Requirements for the subsystem "Interaction with the mobile diagnostic complex"** The subsystem "Interaction with the mobile diagnostic complex" should provide integration with mobile software and hardware systems for telemetry and telemedicine consulting should ensure:

2.8.1	Transfer from mobile software and hardware complexes for telemetry and telemedicine consultation to the System in the card of telemedicine consultation of results of the patient's examination;
2.8.2	Collection of telemetry data to assess and monitor the patient's condition to obtain information about his health, as well as control of physiological parameters of the human body by remote measurement, collection, and transmission of information on performance and physiological parameters of the patient;

2.8.2	Obtaining telemetry data conducted by means of the following types of diagnostic devices:
	        - electrocardiograph;
	        - spirograph;
	        - glucometer/cholesterometer;
	        - thermometer;
	        - pulse oximeter;
	        - blood pressure tonometer;
	        - stethoscope;

2.8.3	Review of the results of examinations by mobile telemedicine complexes systems with the use of the visualization systems corresponding to the executed research;
2.8.4	Accounting for mobile examination;
2.8.5	Keeping a general journal of mobile examination;
2.8.6	Maintaining a personalized archive of diagnostic results from portable diagnostic systems.
2.9.	**Requirements for the subsystem "Interaction with stationary radiological diagnostic devices"** The subsystem "Interaction with stationary radiological diagnostic devices that support the DICOM format" must provide:
2.9.1	Ability to deploy a local PACS-server at the point of receiving telemedicine services;
2.9.2	Integration of the local PACS-server in the point of receiving telemedicine services with the telemedicine system;
2.9.2	Creating a card of instrumental examination;
2.9.3	Link the results to the Instrumental Examination card after conducting the examination and publishing them on a PACS server;
2.9.4	Ability to input examination data (CT, MRI, ultrasound, etc.) and images directly from medical equipment, edit and include them in patient's documents.
2.10.	**Video/Audio Communication Module Requirements** The module "Video/audio communication" should provide video/audio conference (including multi-channel with sufficient technical resources):
2.10.1	Conducting video/audio conferences (including multi-channel if there are sufficient technical resources);
2.10.2	Setting the technical parameters of the video/audio communication;
2.10.3	Logging of video/audio conferencing system events;
2.10.4	Integration of video/audio conferencing system with electronic telemedicine consultation card;
2.10.5	Ability to block the user's ability to receive audio/video communication.
2.11.	**Requirements for the subsystem "Key performance indicators"** The subsystem provides the formation of summary information on the main indicators of the System and its display in a convenient form:

2.11.1	Analysis of service activity;
2.11.2	Data entry control;
2.11.3	Visual accounting of workload and services provided;
2.11.4	Audit of work with medical documents.
2.12	**Requirements for the module "Patient Portal"**
	The subsystem must provide the functions of the patient's account through a web-application:
2.12.1	Patient registration on the Portal;
2.12.2	Registration for a telemedicine consultation;
2.12.3	Providing access to the patient and reviewing the results of telemedicine consultations;
2.12.4	Physician-patient communication via video/audio communication.
2.13	**Requirements for the System Setting subsystem**
	This section lists the requirements that should allow users of the System to make changes to the data and functions of the System without contacting the developer:
2.13.1	The ability for users to fill in the data classifiers used for the fields of electronic cards of the System, with the type "Select from the list";
2.13.2	Ability to create additional fields for entering information on existing cards, the following types: - text - number - date, time - text with text templates - attached files.
2.13.3	Ability to create additional types of simple cards in the System, linked to patient cards, so that users of the System can edit, delete and view new types of cards;
2.13.4	Ability to create additional types of simple cards in the System so that System users can edit, delete and view the new type of cards in the list;
2.13.5	Possibility to set specific logic for additional cards: - checks of the values entered in the fields; - automatic filling of some fields based on others;
2.13.6	Ability to create additional classifiers (for use in additional card fields);
2.13.7	Ability to create additional reports and to use in them all the data entered into the System, including additional fields and cards;
2.13.8	Ability to configure appropriate text templates for the text fields of the System, for which the description states that they allow the selection of text from templates;
2.13.9	Settings for e-cards the ability to attach files, adjust the maximum file size that can be attached to this card, and the name of the field that will be displayed to the user;
2.13.10	Setting the rules of the numbering of electronic cards for which the description is given that they have numbers that are automatically generated for each card separately: - number template - specify prefixes and suffixes of numbers, separate for each entity in which they are registered, or the same for all institutions; - indicator from which to start numbering at the start of the system; - in case of deleting a card with an automatically assigned number, automatically keep records; of missed numbers and allow them to be reused.
2.14	**Requirements for the subsystem "System Administration"**

2.14.1	The system must allow the following actions to work with the information of system users: - create/delete user, edit his data; - block the user's access to the System.
2.14.2	The system must allow the following actions to work with user passwords: - creating a primary password; - password change.
2.14.3	The system should allow the creation of user roles, combining different access rights to the functions of the System (rights to edit, view certain cards of the System, perform certain functions, print reports and forms);
2.14.4	The system must allow you to manage access rights to its functions by assigning roles to specific users (the same user can have multiple roles);
2.14.5	The system should allow users to be divided according to the institutions in which they work, and accordingly, give each user the right to access only the data of his institution;
2.14.6	The System should allow the System Administrator to view the following logs: - history log on user login, data viewing, reporting, user logging; - log of errors and unforeseen program stops; - log of creating / editing / deleting electronic cards.
2.14.7	The system must allow the user to be identified by an electronic digital key.
3	**RELIABILITY REQUIREMENTS**
3.1	The system must ensure uninterrupted operation of subsystems, with planned technical breaks within the regulated procedures defined by the Customer;
3.2	The resilience of the System to failures should be ensured by a set of technical and methodological measures, including redundancy of hardware and software, use of uninterruptible power supplies, organization of backup components of the System; backing up information;
3.3	It should be possible to back up a database of medical information with a frequency that meets the customer's reliability requirements.
4	**SYSTEM SUPPLY CONDITIONS AND OTHER REQUIREMENTS**
4.1	Transfer of software products on information/digital mediums;
4.2	Installing the software (server-side telemedicine systems and customer crypto-product) in the information and telecommunication systems with built CISS;
4.3	Software warranty support for 12 months from the date of its transfer.

The compliance of the system with the listed requirements should be confirmed by 100% of positive answers to the Checklist questions in Annex 1 (Letter of Conformity should be provided at the Proposal submission stage).

The System must comply with the requirements of the following applicable regulatory documents:

- Constitution of Ukraine;
- Law of Ukraine "On Social Services";
- Law of Ukraine "On Citizens' Appeals";
- Law of Ukraine "On Information";
- Law of Ukraine "On Personal Data Protection";
- Law of Ukraine "On Electronic Documents and Electronic Document Management";
- Law of Ukraine "On Electronic Digital Signature";
- Law of Ukraine "On Access to Public Information";

- Law of Ukraine "On Information Protection in Information and Telecommunication Systems";
- National Security and Defence Council of Ukraine On Threats to the State's Cybersecurity and Urgent Measures for their Neutralization" dated December 29, 2016;
- Order #681 of MOH "Procedure for the organization of medical care at the primary, secondary (specialized), tertiary (highly specialized) levels with the use of telemedicine" dated 19 of October 2015;
- DK 010-98 "State Classifier of Management Documentation";
- DSTU 4163–2003 "Unified System of Organizational and Administrative Documentation. Requirements for Paperwork".
- DSTU 2394 - 94 «Information and Documentation. Terms and Definitions".

4. DELIVERABLES

The Contractor shall provide software implementation services in the following stages:

Stage 1. Surveying the software implementation facility, coordination of all issues with the Beneficiary and the preparation of results of the respective assessment. Action plan for all activities of the assignment is considered and approved by UNDP.

Stage 2. Installation of the comprehensive and integral system of telemedicine services

- Install the comprehensive and integral system of telemedicine services for its operational use on the Customer`s Servers and give the access rights to the Beneficiary and users (Department of Health of Donetsk Oblast State Administration and healthcare facilities of Donetsk oblast, mentioned in the list of objects). All necessary technical documents, Warranty, and other relevant certificates must be provided by the Contractor on the delivery date.
- The System must be installed in full compliance with applicable national standards and regulations.
- The system must be tested and adapted to the conditions of the Beneficiary's work.
- One-year licenses for Medical Information System, establishing a comprehensive and integral system of telemedicine services must come into force.

*Addons made to the software and other additional services provided during the testing phase should not change the cost of the software.

Stage 3. Conducting a training session for the staff of the medical facilities on the operation of the comprehensive and integral system of telemedicine services.

- Ensure technical staff training for the operation of the comprehensive and integral system of telemedicine services.
- The contractor must develop and conduct training for all representatives of the healthcare facilities of Donetsk oblast who would be willing to study the operation on the comprehensive and integral system of telemedicine services (at least 2 hours with the practical aspects of using, online).

This training should contribute to achieving the following objectives:

- to get information about how the telemedicine system works;

- to learn how to use it;

- expand knowledge on how to maintain and operate a newly established comprehensive and integral system of telemedicine services;

- to raise users' awareness of the management of electronic documents in general;

- to develop practical skills necessary for users to work with the comprehensive and integral system of telemedicine services;

- to analyze particular errors and their effects that arise during the exploitation of the comprehensive and integral system of telemedicine services;

- to have a clear understanding of a level of automation, full use of functionality, and high-quality information and services provided.

Table3. Deliverables timeline

Deliverable #	Task description	Deadline
1	Stage 1. Surveying the software implementation facility, coordination of all issues with the Beneficiary and the preparation of results of the respective assessment. Action plan for all activities of the assignment is considered and approved by UNDP.	2 weeks from the beginning of the contract
2	Stage 2. Installation of the comprehensive and integral system of telemedicine services. Licenses for Medical Information System, establishing a comprehensive and integral system of telemedicine services are provided to the Customer. The system is installed and tested. Stage 2 progress report is submitted and approved by UN RPP Specialist.	6 weeks from the beginning of the contract
3	Stage 3. Conducting a training session for the staff of the medical facilities on the operation of the comprehensive and integral system of telemedicine services. The final report is submitted and approved by the UN RPP Specialist.	10 weeks from the beginning of the contract

5. MONITORING AND REPORTING REQUIREMENTS

The Contractor will directly report to the UN RPP Health Governance Specialist on a weekly or any other agreed basis. The Contractor will participate in the Project meetings (by ZOOM) and will share work progress.

The Contractor should adhere to the system of monitoring, evaluation, and quality control implemented by the UNDP and provide the necessary information, reports, and statistics according to the present schedule or as soon as possible (within a reasonable time).

All reports UNRPP shall be transmitted electronically (Formats of: * .docx, * .xlsx, * .pptx, * .pdf) on

electronic source or in the form of electronic communication. The reports should be written in Ukrainian.

6. **ACCEPTANCE OF WORK**

The comprehensive and integral system of telemedicine services is considered accepted after the Programme has checked and approved the Contractor's work completion report. The fact of acceptance must be confirmed by the signing of the relevant acts by authorized representatives of the Parties.

The software of the comprehensive and integral system of telemedicine services is supplied electronically via the Internet, and will be stored and operating on the server of the beneficiary.

The implementation and configuration of the software of the comprehensive and integral system of telemedicine services will be performed by the Contractor in separate stages according to the calendar plan agreed by the Parties in compliance with the technical requirements.

During the Assignment, the Contractor shall provide the Beneficiary with comprehensive and relevant documentation for the benefit of the Department of Health of Donetsk Oblast State Administration, which the latter may need for effective use and maintenance of the system, i.e., a description of the implemented comprehensive and integral system of telemedicine services, user manual.

Contractor shall provide at the request of Beneficiary:

1) Document confirming the Contractor's rights to use of software, which must be transferred to the Beneficiary as part of the comprehensive and integral system of telemedicine services. Such document can be a certificate of copyright issued by an authority, a contract on the creation and transfer of an intellectual property object, an agreement on the transfer of copyright, an agreement on the distribution of rights to an intellectual property object, a license agreement.
2) Names, phone numbers, and email addresses of the authors (developers) of the software must be transferred to the Beneficiary as part of the comprehensive and integral system of telemedicine services.
3) A license or other document confirming the Beneficiary's right to use intellectual property objects transferred to the Beneficiary by the Contractor as part of the comprehensive and integral system of telemedicine services.

7. **REQUIREMENTS FOR THE SYSTEM WARRANTY MAINTENANCE**

The Contractor shall provide quality assurance in the form of warranty maintenance (technical support) within twelve (12) months from the date of signing the final act of acceptance of the services rendered including technical support, troubleshooting, software failure recovery, advisory support provided as well during the configuration of software subsystems in the Beneficiary's divisions opened within the warranty period.

Warranty technical maintenance does not provide additional financial costs for the UNDP and the Beneficiary. The period of warranty maintenance means the period starting since the completion of services provided under the Contract, during which the Contractor shall provide other services for the operation of the implemented software to eliminate identified technical errors (defects), resolve emergencies (faults and failures) due to incidents occurred with the Beneficiary's software. The warranty maintenance will include:

- Organizing a "hotline" by phone and e-mail to receive and process the information on incidents (technical errors, defects) and emergencies in the system operation on working days from 9 a.m. to 6 p.m;

- Analyzing and classifying the information on incidents (technical errors, defects) and emergencies in the system operation; development of proposals on terms and ways of their elimination with the responsible employee of the software implementation facility;
- If necessary, making changes to the System to eliminate identified technical errors (defects) and providing the Beneficiary's with system updates according to the requirements of these Terms of Reference;
- If necessary, replacing low-quality software supplied by the Contractor (including its non-compliance with the requirements of these Terms of Reference).

Warranty maintenance will include the following services:

a) Clarifications on:

- General approaches to the software installation;

- General approaches to the software administration;

- General approaches to user experience with the software.

b) Advisory support:

- General recommendations on software configuration;

- Services for checking the correctness of filling in software settings.

c) Individual consultations of the technical support analyst on filling the installed software with the following information:

- Setting up the process of providing services;

- Description and filling in manuals and software classifiers (general recommendations).

d) Remote software administration, in case of problems with its functioning, if these problems could not be solved by consulting a technical support engineer (remote access must be provided by the Beneficiary's representative responsible, therefore); the Contractor's duties do not include the system and third-party software administration;

e) Individual consultations with the Beneficiary's specialists to finalize a solution that does not allow changing the operation mode of the System as a whole.

During the entire period of technical support, the Contractor shall consider the Beneficiary's comments to the System (under the requirements set out in this document) and take measures to eliminate software errors or settings entered during the execution of the Contract and occurred due to the poor quality of services provided by the Contractor.

If there are failures in the software operating within the warranty period, the Contractor shall eliminate the errors specified by the Beneficiary within 10 (ten) days and restore its operability, if technically possible, within 24 (twenty-four) hours from the moment following the system error.

8. EXPERIENCE AND QUALIFICATION REQUIREMENTS

Experience and Qualifications Requirements
1. A company with a valid registration (for Ukrainian companies – the company should be registered in the territory controlled by the government of Ukraine)
2. At least 3 (three) years of experience in the development of software.

3.   At least 2 (two) examples of similar products successfully implemented and launched (to be provided in organization's profile or in a separate document; links are acceptable);

4.   Confirmed experience in development and implementation of software solutions in the capacities of healthcare facilities and/or government institutions of Ukraine would be considered as an asset;

5.   The Contractor must have a team of at least 5 (five) professionals with the following roles and required qualifications:

Team Leader/Project Manager:

- At least a Bachelor's (or equivalent) degree in Economics, Social Sciences, Management, Psychology, PR, Communications, Engineering, Electronic devices, systems and complexes or another relevant related field;

- Minimum 3 (three) years of experience in project management and team management;

- Experience in implementation of software solutions projects (at least 2 projects);

- Experience in implementation of software solutions in the capacities of healthcare facilities and/or government institutions of Ukraine would be considered as a strong advantage;

- Excellent knowledge of Ukrainian and Russian is required; knowledge of English on the working level is an asset.

Software Engineer/Developer :

- Bachelor's degree or higher in Economics, Finance, Mathematics, Social Sciences, Computer Studies, Management, PR, Communications, Engineering, Electronic devices, systems and complexes or another related field;

- Experience in development of software solutions implemented in the capacities of healthcare facilities and/or government institutions of Ukraine (at least 2 software solutions);

- Engagement in development of at least one telemedicine software solution is required;

- Excellent knowledge of Ukrainian and Russian is required. Knowledge of English would be considered as an asset.

Senior Software Engineer/Leading developer:

- Master's degree or higher in Economics, Finance, Mathematics, Social Sciences, Computer Studies, Management, PR, Communications, Engineering, Electronic devices, systems and complexes or another related field;

- Experience in development of software solutions implemented in the capacities of healthcare facilities and/or government institutions of Ukraine (at least 2 software solutions);

- Engagement in development of at least one telemedicine software solution is required;

- Excellent knowledge of Ukrainian and Russian. Knowledge of English would be considered as an asset.

System Administrator/Information Security Specialist:

- Bachelor's degree or higher in Economics, Finance, Mathematics, Social Sciences, Computer Studies, Management, PR, Communications, Engineering, Electronic devices, systems and complexes or another related field;

- Experience in information security in software solutions projects implemented in the capacities of healthcare facilities and/or government institutions of Ukraine (at least 2 projects);

- Engagement in at least one telemedicine project implementation would be considered as an asset;

- Excellent knowledge of Ukrainian and Russian. Knowledge of English would be considered as an asset.

Software Engineer/Testing Specialist:

- Bachelor's degree or higher in Economics, Finance, Mathematics, Social Sciences, Computer Studies, Management, PR, Communications, Engineering, Electronic devices, systems and complexes or another related field;

- Experience in software solutions testing in projects implemented in the capacities of healthcare facilities and/or government institutions of Ukraine (at least 2 projects);

- Engagement in at least one telemedicine project implementation would be considered as an asset;

- Excellent knowledge of Ukrainian and Russian. Knowledge of English would be considered as an asset.

9. DOCUMENTS TO BE SUBMITTED WITH THE OFFER

☒	Copy of Latest Business Registration Certificate
☒	A letter of interest/offer, which describes company's profile (date of creation, size, number of staff/consultants, description of key staff) and outlines previous experience in implementing similar projects and competitive advantages of the applicant company.
☒	At least 2 (two) examples of similar products successfully implemented and launched (to be provided in organization's profile or in a separate document; links are acceptable)
☒	At least 2 (two) reference letters from previous clients/customers/partners reflecting the nature of the implemented projects, their results, and the role of the applicant
☒	A Letter of Conformity to the Annex 1 requirement
☒	CVs of all the project team members (Team Lead/Project Manager and all the engaged Experts), including information mentioned in the EXPERIENCE AND QUALIFICATION REQUIREMENTS section (references and relevant information should be provided).
☒	A proposed work plan with detailed list of key activities and vision of the establishment of a comprehensive and integral system of telemedicine services with coverage of all levels of medical care health care facilities of Donetsk oblast
☒	Financial Proposal

10. EVALUATION CRITERIA AND EVALUATION METHOD

Evaluation and comparison of proposals

A two-stage procedure is utilized in evaluating the proposals, with the evaluation of the technical proposal being completed prior to any price proposal being opened and compared. The price proposals will be opened only for submissions that passed the minimum technical score of 70% (or 490 points) of the obtainable score of 700 points in the evaluation of the technical proposals.

In the First Stage, the technical proposal is evaluated based on its responsiveness to the Terms of Reference (TOR) and as per below Evaluation Criteria. In the Second Stage, the price proposals of all offerors, who have attained a minimum 70% score in the technical evaluation, will be reviewed. Overall evaluation will be completed in accordance with the cumulative analysis scheme, under which the technical and financial aspects will have pre-assigned weights of 70% and 30% of the overall score respectively. The lowest cost financial proposal (out of technically compliant) will be selected as a baseline and allocated the maximum number of points obtainable for the financial part (i.e. 490). All other financial proposals will receive a number of points inversely proportional to their quoted price; e.g. 490 points x lowest price / quoted price.

The winning proposal will be the one with the highest number of points after the points obtained in both technical and financial evaluations, respectively, are added up. The contract will be devoted to the bidder that submitted the winning proposal.

	Summary of Technical Proposal Evaluation Forms	Score Weight	Maximum score	Company / Organization			
1	Experience of the firm/organization submitting the proposal	30%	210				
2	Brief description of the assignment implementation	35%	245				
3	Personnel	35%	245				
	Total Score	100%	700				
	Notes						

Technical evaluation forms are provided at the next pages. The maximal points obtainable as per each criterion indicate the relative importance or score weight in general evaluation process.

Technical Evaluation Forms:
 Form 1. Experience of the firm / organization submitting the proposal
 Form 2. Brief description of the assignment implementation
 Form 3. Personnel

Evaluation of the Technical Proposal Form 1	Maximum score	Company/other organization		
		A	B	C
The experience of the company/organization submitting the proposal				
1.1 Experience in the development of software. (90 points – more than 5 years, 80 points – 4-5 years, 75 points – 3 years)	90			

1.2	Examples of similar products successfully implemented and launched (at least 2 examples). (90 points – 5 and more examples; 80 points – 3-4 examples, 77 points – 2 examples)	90			
1.3	Confirmed experience in development and implementation of software solutions in the capacities of healthcare facilities and/or government institutions of Ukraine. (Availability of such an experience – 30 points; No experience – 0 points)	30			
	Total score on Form 1	210			

Evaluation of the Technical Proposal Form 2		Maximum score	Company/other organization		
			A	B	C
Brief description of the assignment implementation with an indication approach to the performance of each stage.					
2.1	Does the submitted technical offer sufficiently meet the objective and scope of work? The Technical Proposal generally meets the objectives and scope of work – 92 points; The Technical Proposal corresponds well to the task, but workload overstated/understated – 105 points; The Technical Proposal is logical and details the algorithm of the task which is corresponding to the volume of work - 120 points	120			
2.2	How well developed, reasonable and reliable is the proposed work plan? The description of the working plan was developed with an incomplete understanding of the purpose of assignment and compliance with the tasks – 87 points; Work plan includes main components required as per Terms of Reference, but the lack of details demonstrates overall approach –100 points; Work plan is detailed and includes necessary stages required to meet all goals and fulfill the tasks as per Terms of Reference – 125 points	125			
	Total score on Form 2	245			

Evaluation of the Technical Proposal Form 3		Maximum score	Company/other organization		
			A	B	C
Personnel					
	Team leader/Project Manager				
3.1	At least a Bachelor's (or equivalent) degree in Economics, Social Sciences, Management, Psychology, PR, Communications, Engineering, Electronic devices, systems and complexes or another related field (17 points – Bachelor's Degree; 18 points – Master's degree; 20 points – Ph.D.)	20			
3.2	Experience in project management and team management (16 points – at least 3 years; 18 points – 4-7 years; 20 points – 8 years and more).	20			
3.3	Experience in implementation of software solutions projects (26 points – at least 2 projects; 28 points – 3-6 projects; 30 points – 7 projects and more).	30			
3.4	Experience in implementation of software solutions in the capacities of healthcare facilities and/or government institutions of Ukraine (15 points - Availability of such an experience; 0 points – no such experience)	15			
3.5	Excellent knowledge of Ukrainian and Russian is required; knowledge of English on the working level is an asset 5 points - Excellent knowledge of Ukrainian and Russian and at least working knowledge of English; Excellent knowledge of Ukrainian and Russian – 3 points.	5			
	Interim score by criteria 3.1-3.5	90			
	Software Engineer/Developer				
3.6	At least a Bachelor's (or equivalent) degree in Economics, Finance, Mathematics, Social Sciences, Computer Studies, Management, PR,	10		400	

	Communications, Engineering, Electronic devices, systems and complexes or another related field: (7 points – Bachelor's Degree; 8 points – Master's degree; 10 points – Ph.D)				
3.7	Experience in development of software solutions implemented in the capacities of healthcare facilities and/or government institutions of Ukraine (10 points – at least 2 projects; 12 points – 3-6 projects; 13 points – 7 projects and more).	13			
3.8	Engagement in development of at least one telemedicine software solution. (12 points - engagement in development of more than 2 telemedicine projects; 11 points – engagement in implementation of 2 telemedicine projects; 10 points – engagement in at least one telemedicine project implementation)	12			
3.9	Excellent knowledge of Ukrainian and Russian (fluent in Ukrainian and Russian - 3 points, fluent in Ukrainian, Russian and at least working knowledge of English – 5 points)	5			
	Interim score by criteria 3.6 – 3.9	40			
	Senior Software Engineer/Leading developer				
3.10	Educational and qualification level - Master's degree or higher in Economics, Finance, Mathematics, Social Sciences, Computer Studies, Management, PR, Communications, Engineering, Electronic devices, systems and complexes or another related field: (8 points – Master's degree; 10 points – Ph.D)	10			
3.11	Experience in development of software solutions implemented in the capacities of healthcare facilities and/or government institutions of Ukraine (9 points – at least 2 projects; 11 points – 3-6 projects; 13 points – 7 projects and more).	13		440	
3.12	Engagement in development of at least one telemedicine software solution. (12 points - engagement in development of more than 2 telemedicine projects; 10 points – engagement in implementation of 2 telemedicine projects; 9 points –	12			

	engagement in at least one telemedicine project implementation)				
3.13	Excellent knowledge of Ukrainian and Russian (fluent in Ukrainian and Russian - 3 points, fluent in Ukrainian, Russian and at least working knowledge of English – 5 points)	5			
	Interim score by criteria 3.10 – 3.13	40			
	System Administrator/Information Security Specialist				
3.14	Educational and qualification level - Bachelor's degree or higher in Economics, Finance, Mathematics, Social Sciences, Computer Studies, Management, PR, Communications, Engineering, Electronic devices, systems and complexes or another related field: (7 points – Bachelor's Degree; 9 points – Master's degree; 10 points – Ph. D.)	10			
3.15	Experience in information security in software solutions projects implemented in the capacities of healthcare facilities and/or government institutions of Ukraine (9 points – at least 2 projects; 11 points – 3-6 projects; 13 points – 7 projects and more).	13			
3.16	Engagement in at least one telemedicine project implementation (12 points - engagement in implementation of at least 1 telemedicine project; 0 points – no such an experience).	12			
3.17	Excellent knowledge of Ukrainian and Russian (fluent in Ukrainian and Russian - 3 points, fluent in Ukrainian, Russian and at least working knowledge of English – 5 points)	5			
	Interim score by criteria 3.14 – 3.17	40			
	Software Engineer/Testing Specialist				
3.18	Educational and qualification level - Bachelor's degree or higher in Economics, Finance, Mathematics, Social Sciences, Computer Studies, Management, PR, Communications, Engineering, Electronic devices, systems and complexes or another related field: (7 points – Bachelor's Degree; 9 points – Master's degree; 10 points – Ph.D.)	10			

3.19	Experience in software solutions testing in projects implemented in the capacities of healthcare facilities and/or government institutions of Ukraine (9 points – at least 2 projects; 11 points – 3-6 projects; 13 points – 7 projects and more).	13			
3.20	Engagement in at least one telemedicine project implementation (7 points - engagement in implementation of at least 1 telemedicine project; 0 points – no such an experience).	7			
3.21	Excellent knowledge of Ukrainian and Russian (fluent in Ukrainian and Russian - 3 points, fluent in Ukrainian, Russian and at least working knowledge of English – 5 points)	5			
	Interim score by criteria 3.18- 3.21	35			
	Total score on Form 3	245			

11. PAYMENT SCHEDULE

Payments will be linked to deliverables and made upon completion of the above stages and submission of respective reports. Payments will be made according to the following schedule:

- Delivery of Output 1 and submission of the initial report – 30%
- Delivery of Output 2 and submission of the interim report – 60%
- Delivery of Output 3 and submission of the final report – 10%

The payment is made by UNDP within 30 (thirty) calendar days from the date of respective deliverable acceptance by UNDP and submission of originals of the invoice, act of acceptance, and a tax invoice (if applicable).

12. FINANCIAL PROPOSAL

Bidders shall submit their proposals according to the form given below. All costs associated with the provision of services must be included in the proposal (e.g., travel costs, business trips, staff salaries, accommodation, etc.). The price offer of the bidder to be awarded the Contract is fixed and cannot be revised during its execution.

Taking into account that the purchase of services will be carried out within the project of international technical assistance, price offers/invoices for payment must be presented without VAT.

A. **Cost breakdown per deliverables**

No.	Activities / Costs	Percentage of Price (Weight for payment)	Price, excluding VAT, *please indicate the currency*
1	Deliverable 1: Surveying the software implementation facility, coordination of all issues with the Beneficiary and the preparation of results of the respective assessment. Action plan for all activities of the assignment is elaborated and presented.		
2	Deliverable 2: Installation of the comprehensive and integral system of telemedicine services. Licenses for Medical Information System, establishing a comprehensive and integral system of telemedicine services are provided to the Customer.		
3	Deliverable 3: Conducting a training session for the staff of the medical facilities on the operation of the comprehensive and integral system of telemedicine services.		
	Total, excluding VAT, *please indicate the currency*	**100%**	

B. **Cost breakdown by Cost Component**

The Proposers are requested to provide the cost breakdown for the above-given prices for each deliverable based on the following format. UNDP shall use the cost breakdown for price reasonability assessment purposes as well as for calculating the price in the event that both parties have agreed to add new deliverables to the scope of Services.

№	Activity/Costs	Unit	Number	Cost per unit, excl. VAT, *indicate the currency*	Amount, excl. VAT, *indicate the currency*
1	**Personnel**				
1.1	Team Leader	month			
1.2	Software Engineer/Developer				
1.3	Senior Software Engineer/Leading developer				

1.4	System Administrator/Information Security Specialist				
1.5	Software Engineer/Testing Specialist				
1.6	Other staff (as required)				
2	**Cost of implementation/ maintenance**				
2.1	Telemedicine Software License	unit			
2.2	System warranty maintenance	Month	12		
3	**Administration Costs (if necessary)**				
3.1	Communication (Internet/Phone/etc.)				
3.2	Other (if any - to define clearly activities/costs)				
4	**Travel and Lodging**				
4.1	Travel costs				
4.2	Accommodation				
4.3	Daily Allowance				
5	**Staff training sessions**				
5.1	…				
5.2	…				
	Total *(please indicate currency)*				

Annex 1 to Terms of Reference

№	Technical (quality) requirements to the Medical Information System, establishing a comprehensive and integral system of telemedicine services	Compliance with the requirements (Yes / No) Indicator
1.	**GENERAL REQUIREMENTS**	
1.1	**System construction principles**	
1.1.1	Ability to scale hardware and software as the load increases.	
1.1.2	One-time input and multiple uses of primary information.	
1.1.3	Ability to log all facts of access to information and its modification (create, edit, delete).	
1.2	**System architecture requirements**	
1.2.1	The system architecture should be client-server, three-tier (database level, application server level, client level), must support remote operation via the Internet.	
1.2.2	The database server is a relational database server that contains all the data of the System.	
1.2.3	The application server is a server that can be used as an application server for client software. It is used to interact with the database server.	
1.2.4	The architecture of the System should be scalable, i.e., it should be possible by adding for example additional database servers and/or application servers without changing the system code.	
1.2.5	The system must have available capabilities and mechanisms for installing updates (new features, releases, bug fixes, security updates, implementation of legal requirements, etc.).	
1.2.6	If necessary, the system should be able to interact with external information systems. The system must support the ability to export/import data to related information systems (for example, using data files in .xml, .csv, .xlsx, or interface tables) and be able to exchange data with related information systems using standardized information exchange protocols.	
1.3	**Requirements for information protection in the System**	
1.3.1	The system should provide access to its data only to authorized users.	
1.3.2	The System must restrict access to information following the rights configured in the System.	
1.3.3	The system must log all user actions to change information. Information about the relevant actions should be detailed (with fixing the indicators of which attributes were changed to others).	
1.3.4	The system must record all user actions to access personal data so that it is possible for each person whose data was accessed to obtain a detailed report on who and when viewed this information.	
1.3.5	The system must have built-in mechanisms for using electronic digital keys of certified centers for the ability to sign data.	

1.3.6	The algorithm defined in DSTU 4145-2002 should be used for the formation and verification of the electronic digital signature.	
1.3.7	The key distribution protocol according to item 8.3 of DSTU ISO/IEC 15946 should be used for the calculation of session keys.	
1.3.8	The level of data security in the system should be such as to enable the construction of a Comprehensive Information Security System (hereinafter CISS) for the System.	
1.3.9	The system should be able to encrypt data stored at the central level using encryption libraries that have passed the appropriate certification of the State Special Service, which will ensure the construction of CISS without purchasing additional software/hardware.	
1.3.10	Algorithms defined in DSTU 28147: 2009 should be used to encrypt information. The algorithm defined by DSTU 34.311-95 should be used to calculate the hash function.	
1.4	**Automated workstations requirements**	
1.4.1	Workstation - Customer Physician Main tasks: formation of requests for telemedicine consultation, registration of patients, addition to the request for telemedicine consultation of various medical and diagnostic information, interaction with the mobile diagnostic complex, interaction with stationary radiological diagnostic devices, communication with the consultant doctor via video/audio communication.	
1.4.2	Workstation - Consulting Physician Main tasks: Processing requests for telemedicine counseling and forming consultant's conclusions.	
1.4.3	Workstation - Patient Main tasks: registration on the Portal registration, recording for a telemedicine consultation, viewing the results of telemedicine consultations, communication of the patient with the doctor via video/audio communication.	
1.4.4	Workstation – Moderator Main tasks: management of providers and recipients of telemedicine services.	
1.4.5	Workstation - Administrator Main tasks: System administration and debugging.	
1.4.6	The system should provide the ability to create new and modify existing automated workstations depending on customer needs.	
1.4.7	The system should allow the creation of user roles by configuring various access rights to interfaces, functions (rights to create, edit, view, print reports, and forms, etc.), without additional programming.	
1.4.8	The system must be able to configure individual roles and access rights for an individual user or group of users.	
1.5	**Requirements for ergonomics and technical aesthetics**	

1.5.1	Users should interact with the software using a visual graphical user interface (GUI). The system interface should be clear and convenient, should not be overloaded with graphic elements, and should provide a fast display of screen forms.	
1.5.2	Navigation elements must be made in a user-friendly format. Means of editing information must comply with the provisions on the use of function keys, operation modes, search, use of the window system. Data input and output of the System, acceptance of control commands, display of their results must be performed in an interactive mode. The interface must meet modern requirements and provide easy access to the main functions and operations of the System.	
1.5.3	The interface should be focused on the use of a "mouse" type manipulator, i.e. the system should be controlled by a set of OSD menus, buttons, icons, etc. elements. Keyboard input mode should be used mainly when filling and/or editing text and numeric fields of screen forms.	
1.5.4	All labels, as well as messages to the user (except system messages), must be in Ukrainian.	
1.5.5	The system must ensure the correct handling of emergencies caused by incorrect user actions, incorrect format, or invalid input values. In these cases, the system must notify the user with an appropriate message and then return to the operating state preceding the incorrect (invalid) command or incorrect data input.	
1.5.6	Screen forms must meet the requirements of unification: - All screen forms of the user interface must be made in a single graphic design, with the same location of the main controls and navigation; - Use the same icons, buttons, and other controls and navigation to indicate the same type of operation. The terms used to denote standard operations (creating a new record, editing an existing one), as well as the sequence of user actions to perform them must be unified; - The external behavior of typical interface elements (reaction to hovering the mouse pointer, pressing a button, etc.) must be implemented in the same way for the same type of elements.	
1.6	**Documentation requirements**	
1.6.1	Documentation must be written in Ukrainian and submitted electronically.	
1.6.2	The end-user documentation should include a description of each function of the System, as well as the steps that the System user must follow to use this function. End-user documentation consists of: - User manual	
1.6.3	The description of the main functions of the System must be provided with video instructions.	
2.	**FUNCTIONAL REQUIREMENTS**	
2.1	**System logical structure requirements:**	

2.1.1	The system must provide access to different groups of its functions according to user rights.	
2.1.2	The system should include the following subsystems (modules): - Management of providers and recipients of telemedicine services - Registration and accounting of patients - Telemedicine counseling - Electronic medical card - Medical Imaging Subsystem (PACS) - Interaction with the mobile diagnostic complex - Interaction with stationary radiological diagnostic devices - Video/audio communication - Key performance indicators - Patient portal - System Setting - System Administration.	
2.2.	**Requirements for the subsystem "Management of providers and recipients of telemedicine services"** The subsystem should automate the management of providers and recipients of telemedicine services, in particular, the following functions:	
2.2.1	Setting up a list of medical facilities and consultants who can provide telemedicine consultations by specialization;	
2.2.2	Management of consultants' work schedules and patient service;	
2.2.3	Search for free consultants in the System;	
2.2.4	Accounting for telemedicine consultations;	
2.3.	**Requirements for the subsystem "Registration and accounting of patients"** The subsystem should automate the work of registration and accounting of patients, in particular, the following functions:	
2.3.1	Identification of the patient in an unambiguous way, after which medical records are attached to this patient;	
2.3.2	Ability to create, edit, delete "Patient Registration Card";	
2.3.3	Accounting for patient contact information, including addresses, telephone numbers, and demographic data such as date of birth, time of birth, gender, and other information is stored and maintained to uniquely identify patients;	
2.3.4	Display of key patient identifiers on all patient source data;	
2.3.5	Execution by users of various requests to search for cards according to the key details of the patient's card;	
2.3.6	Patient registration by different categories of accounting;	
2.4.	**Requirements for the subsystem "Telemedicine consulting"** The module is designed for synchronous and asynchronous telemedicine consultation of patients and doctors, exchange of medical data with a medical facility of the highest level of medical care, and should provide the following functions:	
2.4.1	Formation of a request for telemedicine consultation following the form of primary accounting documentation № 001/tm "Request for	

	telemedicine consultation", approved by the order of the Ministry of Health of Ukraine dated October 19, 2015, № 681;	
2.4.2	Ensuring the addition of various medical and diagnostic information to the request for telemedicine consultation in different ways: - adding information by scanning paper documents; - adding information using the subsystem "Electronic Medical Card"; - adding information using the medical imaging subsystem (PACS); - adding information from mobile software and hardware systems for telemetry and telemedicine consulting.	
2.4.3	Ability to communicate during telemedicine consultation via video/audio communication;	
2.4.4	Accounting of telemedicine consultations is kept in the journal of accounting of telemedicine consultations in accordance with the form of primary accounting documentation № 003/tm "Journal of accounting of telemedicine consultations";	
2.4.5	Formation of an opinion by the form of primary accounting documentation № 002 / tm " Medical consult", approved by the order of the Ministry of Health of Ukraine dated October 19, 2015, № 681;	
2.4.6	Ensuring clear formulation of questions to consultants with the help of formalized requests for consultation, answers of doctors-consultants by means of formalized conclusions;	
2.5.7	Ability to depersonalize the data sent to the consultant.	
2.6.	**Requirements for the subsystem "Electronic medical card"** The subsystem should provide input and review the patient medical information, fixation of an interaction between the doctor and the patient, tracking of the course of a patient's disease, formation of various documentation based on EMC, in particular:	
2.6.1	Maintaining an electronic medical card (EMC), which includes inpatient and outpatient patient records, the results of instrumental and laboratory tests, letters of appointment, etc.;	
2.6.2	EMC must contain: 3) **General information about the patient,** in particular: - Unique code (identifier) of the patient - Full Name - Demographics - Contacts - The main patient documents (according to the requirements of the regulations of the Ministry of Health in the provision of medical care) - Registration of belonging of the patient to Contingents groups, (according to requirements of regulatory documents of the Ministry of Health at the rendering of medical care) - The main "signal" indicators (according to the requirements of regulatory documents of the Ministry of Health)	

	- Additional (optional) parameters - Attributes of registration of the declaration chronology between the patient and family doctors 4) **Medical patient data,** in particular: - patient immunization - patient diagnoses - laboratory tests - diagnostic tests - prescribed drugs - referral for research - referral for treatment - postponed surgery - pregnancy and childbirth - allergic reactions list - results of inpatient treatment and discharge epicrisis - additional factors that affect the patient's health - sick leaves - other medical records.	
2.6.3	Setting up convenient templates for medical documents for doctors of any specialty. (See section 2.13 Requirements for the Setting System Subsystem;	
2.6.4	Security of access to EMC, taking into account the access users rights to medical information approved by the medical institution;	
2.6.5	Review of the patient's EMC and quick search for the necessary information in large volumes of medical documentation;	
2.6.6	Formation of various extracts based on EMC, such as certificates, epicrisis, their printing and storage of these documents' copies;	
2.6.7	Review of the patient's medical data: diagnoses, prescriptions, etc.;	
2.6.8	Ability to attach various documents to the EMC.	
2.7.	**Requirements for the Medical Imaging Subsystem (PACS)** The subsystem must configure and organize the transfer of medical images to the image archive and perform the following functions:	
2.7.1	Work with the operational database of medical images;	
2.7.2	Automation of the process of archiving, search and access to medical images;	
2.7.3	Receiving and processing data in DICOM format from radiological devices;	
2.7.4	Support for access to external and local PACS server.	
2.8.	**Requirements for the subsystem "Interaction with the mobile diagnostic complex"** The subsystem "Interaction with the mobile diagnostic complex" should provide integration with mobile software and hardware systems for telemetry and telemedicine consulting should ensure:	
2.8.1	Transfer from mobile software and hardware complexes for telemetry and telemedicine consultation to the System in the card of telemedicine consultation of results of the patient's examination;	

2.8.2	Collection of telemetry data to assess and monitor the patient's condition to obtain information about his health, as well as control of physiological parameters of the human body by remote measurement, collection, and transmission of information on performance and physiological parameters of the patient;	

2.8.2	Obtaining telemetry data conducted by means of the following types of diagnostic devices:
	    - electrocardiograph;
	    - spirograph;
	    - glucometer/cholesterometer;
	    - thermometer;
	    - pulse oximeter;
	    - blood pressure tonometer;
	    - stethoscope.	

2.8.3	Review of the results of examinations by mobile telemedicine complexes systems with the use of the visualization systems corresponding to the executed research;	
2.8.4	Accounting for mobile examination;	
2.8.5	Keeping a general journal of mobile examination;	
2.8.6	Maintaining a personalized archive of diagnostic results from portable diagnostic systems.	
2.9.	**Requirements for the subsystem "Interaction with stationary radiological diagnostic devices"** The subsystem "Interaction with stationary radiological diagnostic devices that support the DICOM format" must provide:	
2.9.1	Ability to deploy a local PACS-server at the point of receiving telemedicine services;	
2.9.2	Integration of the local PACS-server in the point of receiving telemedicine services with the telemedicine system;	
2.9.2	Creating a card of instrumental examination;	
2.9.3	Link the results to the Instrumental Examination card after conducting the examination and publishing them on a PACS server;	
2.9.4	Ability to input examination data (CT, MRI, ultrasound, etc.) and images directly from medical equipment, edit and include them in patient's documents.	
2.10.	**Video/Audio Communication Module Requirements** The module "Video/audio communication" should provide video/audio conference (including multi-channel with sufficient technical resources):	
2.10.1	Conducting video/audio conferences (including multi-channel if there are sufficient technical resources);	
2.10.2	Setting the technical parameters of the video/audio communication;	
2.10.3	Logging of video/audio conferencing system events;	
2.10.4	Integration of video/audio conferencing system with electronic telemedicine consultation card;	

2.10.5	Ability to block the user's ability to receive audio/video communication.	
2.11.	**Requirements for the subsystem "Key performance indicators"** The subsystem provides the formation of summary information on the main indicators of the System and its display in a convenient form:	
2.11.1	Analysis of service activity;	
2.11.2	Data entry control;	
2.11.3	Visual accounting of workload and services provided;	
2.11.4	Audit of work with medical documents.	
2.12	**Requirements for the module "Patient Portal"** The subsystem must provide the functions of the patient's account through a web-application	
2.12.1	Patient registration on the Portal;	
2.12.2	Registration for a telemedicine consultation;	
2.12.3	Providing access to the patient and reviewing the results of telemedicine consultations;	
2.12.4	Physician-patient communication via video/audio communication.	
2.13	**Requirements for the System Setting subsystem** This section lists the requirements that should allow users of the System to make changes to the data and functions of the System without contacting the developer:	
2.13.1	The ability for users to fill in the data classifiers used for the fields of electronic cards of the System, with the type "Select from the list";	
2.13.2	Ability to create additional fields for entering information on existing cards, the following types: - text - number - date, time - text with text templates - attached files.	
2.13.3	Ability to create additional types of simple cards in the System, linked to patient cards, so that users of the System can edit, delete and view new types of cards;	
2.13.4	Ability to create additional types of simple cards in the System so that System users can edit, delete and view the new type of cards in the list;	
2.13.5	Possibility to set specific logic for additional cards: - checks of the values entered in the fields; - automatic filling of some fields based on others.	
2.13.6	Ability to create additional classifiers (for use in additional card fields);	
2.13.7	Ability to create additional reports and to use in them all the data entered into the System, including additional fields and cards;	
2.13.8	Ability to configure appropriate text templates for the text fields of the System, for which the description states that they allow the selection of text from templates;	

2.13.9	Settings for e-cards the ability to attach files, adjust the maximum file size that can be attached to this card, and the name of the field that will be displayed to the user;	
2.13.10	Setting the rules of the numbering of electronic cards for which the description is given that they have numbers that are automatically generated for each card separately: - number template - specify prefixes and suffixes of numbers, separate for each entity in which they are registered, or the same for all institutions; - indicator from which to start numbering at the start of the system - in case of deleting a card with an automatically assigned number, automatically keep records of missed numbers and allow them to be reused.	
2.14	**Requirements for the subsystem "System Administration"**	
2.14.1	The system must allow the following actions to work with the information of system users: - create/delete user, edit his data; - block the user's access to the System.	
2.14.2	The system must allow the following actions to work with user passwords: - creating a primary password; - password change	
2.14.3	The system should allow the creation of user roles, combining different access rights to the functions of the System (rights to edit, view certain cards of the System, perform certain functions, print reports and forms)	
2.14.4	The system must allow you to manage access rights to its functions by assigning roles to specific users (the same user can have multiple roles).	
2.14.5	The system should allow users to be divided according to the institutions in which they work, and accordingly, give each user the right to access only the data of his institution.	
2.14.6	The System should allow the System Administrator to view the following logs: - history log on user login, data viewing, reporting, user logging; - log of errors and unforeseen program stops; - log of creating / editing / deleting electronic cards.	
2.14.7	The system must allow the user to be identified by an electronic digital key.	
3	**RELIABILITY REQUIREMENTS**	
3.1	The system must ensure uninterrupted operation of subsystems, with planned technical breaks within the regulated procedures defined by the Customer;	

3.2	The resilience of the System to failures should be ensured by a set of technical and methodological measures, including redundancy of hardware and software, use of uninterruptible power supplies, organization of backup components of the System; backing up information;	
3.3	It should be possible to back up a database of medical information with a frequency that meets the customer's reliability requirements.	
4	**SYSTEM SUPPLY CONDITIONS AND OTHER REQUIREMENTS**	
4.1	Transfer of software products on information/digital mediums;	
4.2	Installing the software (server-side telemedicine systems and customer crypto-product) in the information and telecommunication systems with built CISS;	
4.3	Software warranty support for 12 months from the date of its transfer.	

Annex 4

Model Contract

Договір на надання Товарів та/або Послуг **між Програмою розвитку Організації Об'єднаних Націй та**	UNDP *Empowered lives.* *Resilient nations.*	**Contract for Goods and/or Services Between the United Nations Development Programme and**	UNDP *Empowered lives.* *Resilient nations.*
1. Країна, у якій будуть постачатись Товари та/або надаватись Послуги: Україна		1. **Country Where Goods Will be Delivered and/or Services Will be Provided**:Ukraine	
2. **ПРООН** [ ] Запит цін [X] Запит пропозиції [ ] Запрошення на участь у конкурсі [ ] укладення прямих договорів Номер та дата:		2. **UNDP** [ ] Request for Quotation [X] Request for Proposal [ ] Invitation to Bid [ ] direct contracting Number and Date:	
3. **Посилання на номер договору (напр., номер присудження договору):**		3. **Contract Reference (e.g. Contract Award Number):**	
4. **Довгострокова угода**: Ні		4. **Long Term Agreement**: No	
5. **Предмет Договору**: [ ] товари [X] послуги [ ] товари *та* послуги		5. **Subject Matter of the Contract**: [ ] goods [X] services [ ] goods *and* services	
6. **Тип Послуг:**		6. **Type of Services:**	
7. **Дата початку Договору**:	8. **Дата завершення Договору**:	7. **Contract Starting Date**:	8. **Contract Ending Date**:
9. **Загальна сума Договору**: 9а. **Передплата**: Не застосовується		9. **Total Contract Amount**: 9a. **Advance Payment**: Not applicable	
10. **Загальна вартість Товарів та/або Послуг:** [ ] **менше 50 000 дол. США (лише Послуги)** – застосовуються Загальні умови ПРООН для базових (незначних) договорів [ ] **менше 50 000 дол. США (Товари *або* Товари та Послуги)** – застосовуються Загальні умови ПРООН для договорів [ ] **50 000 дол. США або більше (Товари *та/або* Послуги)** – застосовуються Загальні умови ПРООН для договорів		10. **Total Value of Goods and/or Services**: [ ] **below US$50,000 (Services only)** – UNDP General Terms and Conditions for Institutional (de minimis) Contracts apply [ ] **below US$50,000 (Goods *or* Goods and Services)** – UNDP General Terms and Conditions for Contracts apply [ ] **equal to or above US$50,000 (Goods *and/or* Services)** – UNDP General Terms and Conditions for Contracts apply	
11. **Метод оплати:** [X] тверда (фіксована) ціна [ ] відшкодування витрат		11. **Payment Method:** [X] fixed price [ ] cost reimbursement	
12. **Назва(Ім'я) Підрядника:**		12. **Contractor's Name:**	
13. **Ім'я контактної особи Підрядника**: Посада: керівник Адреса: Номер телефону:		13. **Contractor's Contact Person's Name**: Title Address: Telephone number:	

Факс: Email:	Fax: Email:
14. Ім'я контактної особи ПРООН: Посада: Адреса: Тел.: + Email:	14. **UNDP Contact Person's Name**: Title: Address: Telephone number Email:
15. **Банківський рахунок Підрядника, на який будуть перераховуватись платежі:** Отримувач: Назва рахунку: Номер рахунку: Назва банку: МФО ЄДРПОУ	15. **Contractor's Bank Account to which payments will be transferred**: Beneficiary: Account name: Account number: Bank name: Bank address: MFO EDRPOU

Даний Договір складається з наступних документів, які, у разі виникнення конфлікту між ними, мають перевагу один перед одним у наступному порядку:

1. Дана лицьова сторінка («Лицьова сторінка»).
2. Загальні умови ПРООН для договорів – Додаток 1
3. Технічне завдання (ТЗ) - Додаток 2
4. Графік надання послуг, що включають опис послуг, результати надання товарів та/або послуг, планові показники, терміни, графік здійснення платежів, та загальну суму договору – Додаток 3.
5. Технічна та Фінансова пропозиції Підрядника від _____; причому ці документи не додаються, але відомі Сторонам і знаходяться у їх розпорядженні, і є невід'ємною частиною цього Договору.
6. Реалізація даного Контракту відбувається в рамках виконання проекту міжнародної технічної допомоги між Урядом України та відповідними Донорами та Виконавцем та, згідно з умовами пункту 197.11 Податкового Кодексу України, операції звільнені від ПДВ.
7.

Все вищезазначене, включене до цього документу за допомогою посилання, містить увесь обсяг домовленостей («Договір») між Сторонами, при цьому усі інші переговори та/або угоди, незалежно від того, виконані вони в усній або ж у письмовій формі, що

This Contract consists of the following documents, which in case of conflict shall take precedence over one another in the following order:

1. This face sheet ("Face Sheet").
2. UNDP General Terms and Conditions for Contracts – Annex 1
3. Terms of Reference (TOR) – Annex 2
4. Schedule of Services provision, incorporating the description of services, deliverables and performance targets, time frames, schedule of payments, and total contract amount – Annex 3
5. The Contractor's Technical Proposal and Financial Proposal, dated _____; these documents not attached hereto but known to and in the possession of the Parties, and forming an integral part of this Contract.
6. This Contract implementation is conducted within the framework of the of international technical assistance project between the Government of Ukraine and the relevant Donors and the Executor and is concluded without VAT, in accordance with paragraph 197.11 of the Tax Code of Ukraine.
7.

All the above, hereby incorporated by reference, shall form the entire agreement between the Parties (the "Contract"), superseding the contents of any other

відносяться до предмету даного Договору, втрачають силу. Даний Договір вступає в силу з дня проставлення належним чином уповноваженими представниками Сторін останнього підпису на Лицьовій сторінці і припиняє свою дію в Дату завершення Договору, яка зазначена на Лицьовій сторінці. Внесення змін та/або доповнень до даного Договору можливе лише у разі оформлення належним чином уповноваженими представниками Сторін письмової угоди. **НА ПОСВІДЧЕННЯ ЧОГО,** нижчепідписані, належним чином уповноважені на це представники Сторін, підписали цю Угоду від імені Сторін у місці та в день, що вказані нижче	negotiations and/or agreements, whether oral or in writing, pertaining to the subject of this Contract. This Contract shall enter into force on the date of the last signature of the Face Sheet by the duly authorized representatives of the Parties, and terminate on the Contract Ending Date indicated on the Face Sheet. This Contract may be amended only by written agreement between the duly authorized representatives of the Parties. **IN WITNESS WHEREOF**, the undersigned, being duly authorized thereto, have on behalf of the Parties hereto signed this Contract at the place and on the day set forth below.

Від імені Підрядника / For the Contractor		Від імені ПРООН / For UNDP	
Підпис / Signature:		Підпис / Signature:	
Ім'я / Name:		Ім'я / Name:	
Посада / Title:		Посада / Title:	
Дата / Date:		Дата / Date:	