RESPONSES TO THE PRE-BID QUERIES RECEIVED TILL 26 OCT 23

JSI/TIFA has received several pre-bid inquiries regarding the Request for Applications (RFA) focused on involving AYUSH and Chemists in TB control in Himachal Pradesh. We appreciate your interest and enthusiasm in participating in this initiative.

Current Stage: In this initial stage of the RFA, we are seeking concept notes that outline your strategies and provide a broad overview of your proposed activities. The primary goal at this stage is to encourage innovative ideas and approaches to address the requirements mentioned in the RFA. We are not specifying geographic coverage or targeting particular populations at this point.

RFA Scope: The RFA aims to address the challenge of reducing delays in TB diagnosis by engaging with AYUSH health care providers, rural health practitioners, and chemists in Himachal Pradesh, in close coordination with the National Tuberculosis Elimination Program (NTEP).

Future Collaboration: Following this initial concept proposal stage, JSI/TIFA will collaborate with the selected organization(s) in a co-design process. During this phase, specific details regarding intervention locations, activities, and geographic coverage will be worked out. This process will be conducted in close coordination with both the national and state NTEP teams to ensure the effectiveness and alignment of the interventions.

We appreciate your interest in contributing to this important initiative, and we look forward to receiving your innovative ideas.

The compiled responses to the queries are as follows:

Query	Response
1) Does the proposal given for Whole state or any Specific District.	Intervention geography to be decided in consultation with the state NTEP.
2) an budget limitation and budget head	Budget limit $250,000 as indicated in RFA. No need to narrate budget head at this point.
3) We would be a Pvt. Ltd. company registered in UP, India. Are we eligible to apply?	Yes, you are eligible to apply
4) Section ||| point no 2. - Description of country and/or regional context, including key stakeholders. What actually do we need to describe under this point?	Provide geographical context to the health challenge stated in the RFA.

5)	Is the RFA for all 12 districts of Himachal Pradesh? If not, how many and which districts?	Intervention geography to be decided in consultation with the state NTEP.
6)	What is the estimated number of providers (public and private AYUSH facilities, rural health practitioners, chemists) to be mapped?	To be decided in coordination with with State NTEP.
7)	Is engagement with and capacity-building of providers required to be done through staff recruited under this project or in partnership with PPSAs / NTEP staff?	Questions 7 to 10: This will be discussed during co-design process. Refer to the clarification provided above this table.
8)	Is tracking of patients required to be done through staff recruited under this project or in partnership with PPSAs / NTEP staff?	
9)	For establishing reduction in average delay in TB diagnosis, does a baseline survey of time-to-diagnosis need to be conducted?	
10)	For establishing reduction in average delay in TB diagnosis, what is the starting point of time-to-diagnosis, starting of symptoms or first care-seeking or first TB test?	
11)	Will the implementing agency directly engage the AYUSH ministry to develop strategies to end TB?	Yes, there will be direct engagement with AYUSH Ministry in coordination with CTD.
12)	Please mention the duration of the project?	The duration of the project is up to 12 months (maximum limit)

13) How much number of training sessions to be conducted please specify the frequency of sessions? 14) Please specify the number of AYUSH and rural practitioner to be targeted through the project?	Questions 13 and 14: This will be discussed during co-design process. Refer to the clarification provided above this table.
15) Is it mandatory to active project in Himachal Pradesh?	No
16) Can we do the project in consortium?	No
17) What does 'cough syrup surveillance' refer to? Are there any relevant reference materials or publications available for reference?	Tracking of patient purchasing cough syrup to link & evaluate for TB.
18) We understand that cough syrup surveillance will involve cough syrup sales data. Could you please clarify if the data should be collected solely for cough syrup or if it should be disaggregated by AYUSH and non-AYUSH providers?	This will be decided during the co-design process.
19) Please clarify if we should focus on the entire state for project implementation or if we should select specific districts in Himachal Pradesh.	This will be discussed during co-design process. Refer to the clarification provided above this table.