



International Organization for Migration (IOM)
The UN Migration Agency

MINUTES

- Subject:** 1st Pre-bid Conference
- Reference:** Provision of Medical and Psychosocial Services in accommodation facilities throughout Greece for one (1) year with the possibility of extension for two (2) years (ITB.2024.GR10.01.MEDSERV)
- Date/Time:** 12/03/2023, 15:00 UTC+3 Athens/Greece
- Duration:** 1 hour and 20 minutes
- Place:** Teleconference via Teams and onsite at IOM Office in Alimos, Greece
- Participants:** a. IOM GR Procurement dept.
b. IOM GR Project Management.
c. Prospective bidders
d. IOM Senior Resource Management Officer

IOM Greece has conducted a pre-bid conference on 12/03/2024 in the framework of the published tender dated 27/02/2024 entitled “Provision of Medical and Psychosocial Services in accommodation facilities throughout Greece for one (1) year with the possibility of extension for two (2) years”

Introduction

The pre-bid conference started with all participants presenting themselves. A brief presentation via PowerPoint slides was then presented by the IOM Greece Procurement Department providing information on the tender and explaining the ITB procedure, requirements, and timelines.

The following points were in detail presented:

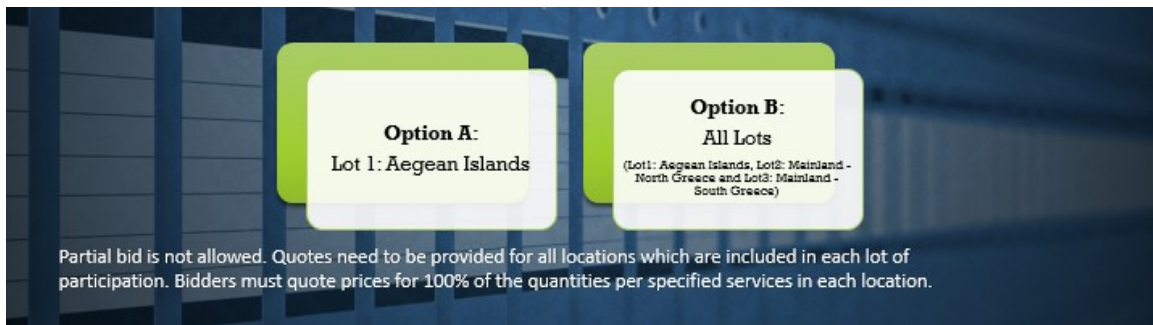


Preparation and Submission of Proposals:

- Bids can be submitted either by regular mail or email
- Mail - The bidder shall submit the bid in one sealed envelope containing the technical and price components. The envelope shall indicate the name and address of the bidder.
- Email - All files should be inserted within a Zip File which should be password protected. The password will not be part of the bid. Separate request will be sent to sender's email address to make known to IOM during the evaluation process. Max. File Size per transmission: 20 MB
- The Bids must be delivered by hand/courier mail at IOM office in Athens, Dodekanisou 6 str., Alimos, Greece or by email to iomgrprocurement@iom.int before March 26, 2024, 14:00 local hrs.

LOTS of Participation:

Bidders allowed to quote for either option of lots of participation:



BID SECURITY:

- Required in the amount of 2% of total bid amount.
- Total bid amount can be the summary of bids of Option A or Option B of participation.

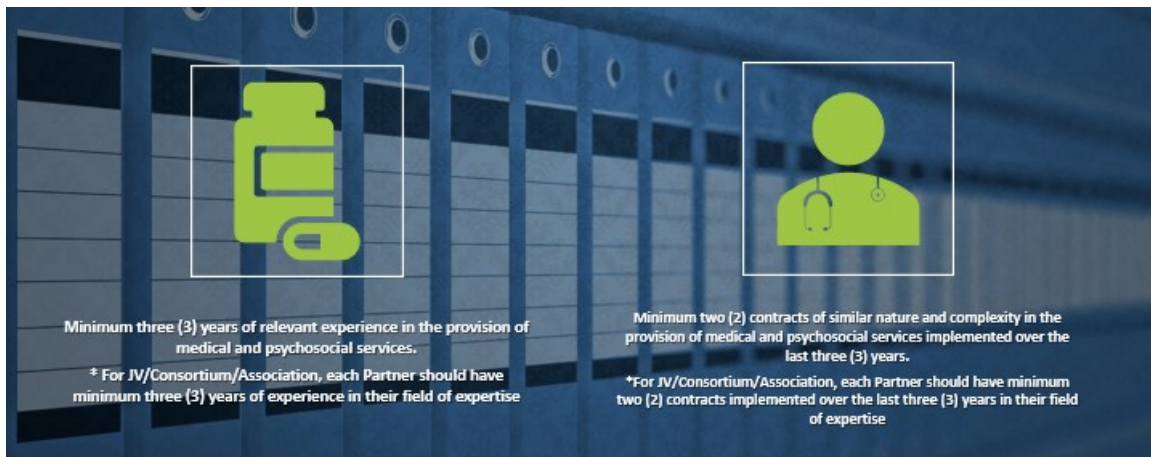


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In case of email submission, digital copy of the bid security should be part of the bid. The original bid security should be posted by mail and received by IOM no later than Friday 29th of March 2024, 14:00 local hrs.

Non-compliance with the above requirements shall result in disqualification of the interested bidder and any submitted quote will not be considered for evaluation.

EVALUATION OF BIDS:



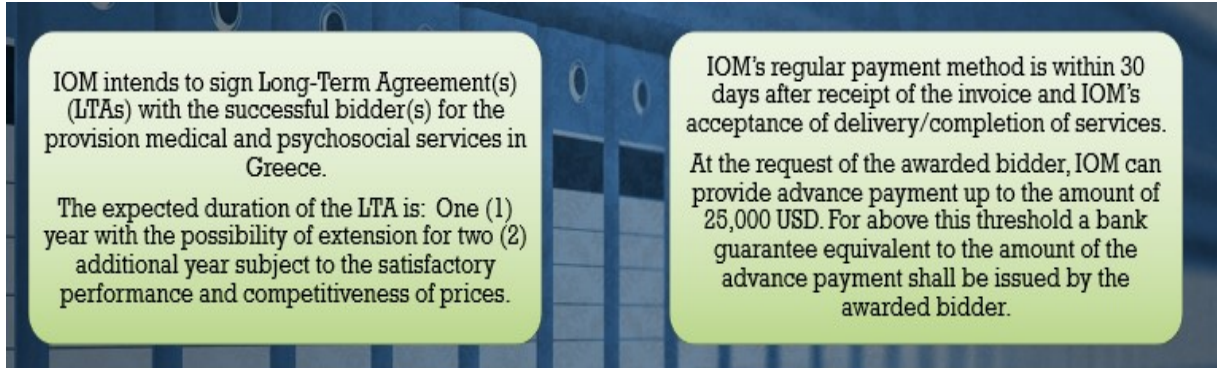
The evaluation and award of contract will be conducted per Lot:

- Lot No. 1: Aegean Islands.
- Lot No. 2: Mainland - North Greece.
- Lot No. 3: Mainland - South Greece



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AGREEMENT AND ADVANCE PAYMENT:



At the end of the presentation IOM explained the participation of Joint Venture is highly recommended and encouraged ideally with NGOs due to the complexity of the services required.

The session continued with questions and answers.

Questions/Clarifications/Discussion

The below questions were asked by prospective bidders participating in pre-bid conference followed by IOM's response:

Question 1:

What does IOM mean on page 20 by National and European medical standards?
Does IOM has a list from countries of origin or citizenship where the staff should originate from?

IOM's response: The main requirement is that the personnel need to have the necessary license to practice and perform their respective medical activities in Greece.



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Question 2:

How do you consider EU medical licenses because what you imply is that primarily Greek medical professionals will be used, and we know that in Greece it is going to be short of resources and it is crucial, because we speak about 400 positions.

IOM's response: The example of a microbiologist was provided to explain that some specialties of a foreign country with a certain degree may not be eligible to practice their profession in Greece due to not already acquiring the respective Greek license. Each personnel must comply with the national permit/licenses regarding their medical activities.

Follow up by prospective bidder: The example provided is a very precise specialty whereas the scope of work of the project has general practitioners, nurses, midwives, social workers which are relatively standard medical qualifications and that why it could be the case that a nurse coming from abroad sometimes speaking also the appropriate languages could be fit for purpose.

IOM highlighted that the requirement is for first medical degree support activities meaning that doctors proceed with referrals in case of secondary or tertiary needed support. That is why the tender includes non-prescribed medicines.

Question 3:

But if precisely non-prescribed medicines are required, then why there is a need to be locally licensed in Greece? Because if it is only about a medical assessment aiming at the subsequent referral to the national healthcare system then the requirement of local medical license is even less justified?

IOM's response: In the CCACs in the islands and in the mainland the scope of work will be more related to medical services as in the islands there are already teams providing medical registration (evaluation of VoTs, disabilities, vulnerability and age assessments etc.) which requires examinations and referrals



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to the national healthcare system. Therefore, first degree support is required and then the doctors will be proceeding with referrals to the national health system. Furthermore, IOM mentioned that the services (medical and psychosocial) will be on board on a daily basis, 8 hours per day excluding weekends. During the weekends only national emergency support (EKAV) will be on board.

Question 4:

How do you manage the continuity of medical records and medical care considering the working hours?

IOM's response: At the moment, if something occurs outside of working hours the camp management team has the responsibility to provide the information to the relevant medical team.

Question 5:

As migrants are moving to a final location within Greece or outside of Greece, is their medical record managed by the camp manager, or local authorities, or the contractor or IOM?

IOM's response: The health records are kept by each patient and are provided to the next doctor by the patient itself. This procedure is under the Ministry's scope, and it is the Ministry's responsibility how this data is managed and accessed.

Question 6:

Are there any desired languages on the staff? There is no indication of the desired language. What would be your expectation?

IOM's response: Interpreters will be on board. It would be preferable to be able to communicate in Greek and also in English in order to communicate with beneficiaries from different backgrounds and to enhance the communication with the referrals to the public hospitals.



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Question 7:

It seems that more than 400 people under this project will be relocated within Greece rather than coming from abroad. How do you see this happening?

IOM's response: If staff can have the legal capacity and required licenses to practice their medical services in Greece, then they can work by coming from any country. This is in accordance with the Greek law.

IOM further explained that the tender was issued as an international advertisement process because the idea was that there are international companies in the medical and psychosocial sector having businesses in Greece and they can hire staff in line with the Greek law. In addition, it can be the possibility of a partnership between local and foreign entities. Therefore, IOM did not want to limit the possibilities to potential interested parties as it is known that there can be opportunities under different combinations both locally and internationally to form partnership to implement this kind of project.

Question 8:

Can you clarify if a previous grant or existing grant would be considered as subsidy between the parties? – reference on page 5, clause 21 of bidding documents.

IOM's response: Clause 21 refers to the fact that we are not allowing one bidder that is part of a Joint Venture to submit another bid by itself or part of another Joint Venture. Therefore, only one bid is allowed.

Question 9:

Who will coordinate the field teams?

IOM's response: The coordinator will be the doctor.



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Question 10:

As there are no administrative staff how will the clinics be managed?

IOM's response: The medical team with the medical and psychosocial personnel will be responsible in coordination with the staff from the Ministry for the good operation of their medical area.

Question 11:

There is no need for prescribed medication in this tender, correct? What will happen if prescribed medication are needed, is there any provision for that?

IOM's response: There is only the requirement for non-prescribed medication under this project.

Question 12:

What will happen to people who do not have AMKA (Social Security Registration Number) and PAIPA (Temporary Social Security)?

IOM's response: This is under the ministry's control. This project is related to service provision.

Question 13:

Can you clarify that this tender is about just service provider to staff the reception centers?

IOM's response: This is correct.

Question 14:

The service provider is not responsible for collecting any data (such as demographic data) and reporting, is this correct?

IOM's response: The field team (medical psychosocial) will keep data according to their roles and for their professional purposes.



Question 15:

There is no indirect cost foreseen and there is no admin cost either, correct? If so, there is no cost foreseen for procurement either, is that the case?

IOM's response: The purpose of this tender is the identification of a service provider. Therefore, admin, procurement and other relevant costs are under the responsibility of the service provider how to arrange them.

Question 16:

Is it true that for this tender any administrative costs or any 'behind the scenes' work that needs to be done related to this project will need to be priced-out within the quote under each line? For example, if admin cost is 10% then the bidder shall increase each line by 10%?

IOM's response: Associated and related costs can be factored within the quote.

Question 17:

Regarding page 39 on form FORM F: ELIGIBILITY AND QUALIFICATION FORM. What is meant when you refer to *Top 3 (three) Clients or more* in the Statements of Satisfactory Performance? *Top 3* is referring to the table right above or top 3 is it in terms of contract value?

IOM's response: This section is referring to the top 3 clients of the proposed list of contracts.

Question 18:

Regarding the financial standing and the annual turnovers within FORM F: ELIGIBILITY AND QUALIFICATION of the bidding documents. Some NGOs operate from an internationally based HQ with an either a locally registered Greek based organization or local office. If the headquarters does most of the financial management but the local organization has the experience but they are two



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separate legal entities is there any guidance on how to present that? Because the financial management is the same.

IOM's response: In case the interested participant does not keep financial data at local level due to the nature of the organization and the financial data are kept and issued by the headquarters, then and only for this reason the financial data of its organization at central level can be submitted.

Question 19:

Can you elaborate on what is needed regarding the experience of 2 contracts of similar nature and complexity? As NGOs, we operate on grant agreements, is that something we can submit to prove experience? Because it is not exactly an agreement between the government and the NGO it more of an approval.

IOM's response: If the grant implemented is related to the requested services of this project then the respective bidder can submit the grant agreement itself, or a letter of award with the amount of the grant or a similar document proving the relevant experience.

Question 20:

At which email address should the Form A: Bid Confirmation be submitted to

IOM's response: At the email address: iomgrprocurement@iom.int which is the same email address for the request for clarifications and submission of the bids. However, prospective bidders should note that form A is not mandatory.

Question 21:

Is it expected from IOM that from 1st of May the first purchase orders will be issued? Are you expecting that all the staffing will be ready by 1st of May?

IOM's response: The purpose is to establish a Long-Term Agreement and upon signature the estimation is to commence the activities in May. This will also depend on the actual composition of the medical staff.



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Question 22:

What will happen if upon award the contractor fails to fulfill one position as per the bid and agreement?

IOM's response: In such a case IOM shall apply Liquidated Damages for the damages and/or risks caused to IOM resulting from the Contractor's delays or breach of its obligations as per the Contract. Liquidated damages Will be imposed as follows: Percentage of contract price per week of delay: 0.7 % (point seven percent) up to a maximum of 10% (ten percent) of the Contract value, after which IOM may terminate the contract.

Question 23:

Can IOM explain how the division occurred between option A (islands) and option B (all regions).

IOM's response: The reasoning was that the islands are quite challenging due to their geographic location, and it is crucial the required services are fully operative in the islands. To avoid the outcome of the region of the islands becoming fruitless the division of option A and B was done like that. Therefore, this way Bidders are allowed to bid for either Option A: Lot 1: Aegean Islands or Option B: All Lots.

As there were not any other questions/clarifications by the participants, the pre-bid conference was concluded.