



GOVERNMENT OF NATIONAL CAPITAL TERRITORY, DELHI
DIRECTORATE OF HEALTH SERVICES
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Dated:- 18/11/2013

MINUTES OF MEETING

A meeting was held in the conference room, 9th floor, Delhi Secretariat on 25 Oct. 2013, to discuss the issues related to procurement of medicines and surgical consumables by hospitals through CPA. The meeting was chaired by the Secretary, Health & Family Welfare, and attended by the following officers:

- a. Dr N V Kamat, Director Health Services.
- b. Dr Rajpal, Medical Superintendent, GTB Hospital.
- c. Dr S Ramji, Medical Superintendent, LN Hospital.
- d. Dr Savita Babbar, Medical Superintendent, DDU Hospital.
- e. Dr Rajesh Kalra, Medical Superintendent, DHAS.
- f. Dr Ashok Rana, Medical Superintendent, GGS Hospital.
- g. Dr Puneeta Mahajan, Medical Superintendent, SGM Hospital.
- h. Dr Rupender Kumar, HOO, represented Medical Superintendent, SRHC Hospital.

The meeting started with heads of the institutions highlighting issues, with the current procurement method and their suggestions to improve the supply chain management. The outcomes of the deliberations are as under:

1. **Quantity flexibility:** For last two years CPA has been floating tenders on fixed quantity basis after collecting the annual requirements of the hospitals, divided in four quarters. In order to further improve the system, it was decided that:

- a) The hospitals while forecasting the demand shall take into account the requirement of buffer and submit their requirements to CPA accordingly.
- b) DHS shall add about 20% of the cumulative demand as its own demand projection, to be procured and stored as buffer from where the hospitals may lift their emergency requirements. DHS would create such store(s) at suitable places.
- c) The tender shall be floated by CPA with stated requirement of items varying to the extent of 20%.
- d) Suitable amendments shall be made in the tender document to increase the tendered quantity and/or the duration of the tender in case of exigencies.

2. **Procurement of Surgical Consumables:** CPA informed that in spite of repeated tenders the procurement of surgical consumables has not materialised successfully; the bidders are not coming probably because of lack of centralised payment system, issue of approval of surgical items etc. Moreover, CPA is presently tendering less than 50% of Surgical Consumable items commonly used in hospitals for which individual hospitals invariably float their own tenders.

Email

DMS Pls for n.a
on part of concerned officials.

Purchase Committee
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 ← Surgery
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It was decided that CPA shall presently concentrate on 100% procurement of medicines and for surgical consumables four big hospitals shall be made Cluster Procurement Centres (CPC) for a group of hospitals as detailed under, in the interest of economy and efficiency of procurement:

Medicines & Surgical Consumables

CPC-L (Lok Nayak Hospital)

- Lok Nayak Hospital
- Maulana Azad Medical College
- Maulana Azad Institute of Dental Sciences
- Guru Nanak Eye Centre
- GB Pant Hospital
- Aruna Asaf Ali Hospital
- Chacha Nehru Bal Chikitsalaya

CPC-G (GTB Hospital)

- GTB Hospital
- Lal Bahadur Shastri Hospital
- District Stores, under DHS
- School Health Scheme
- Institute of Human Behavior and Allied Sciences
- Hedgewar Arogya Sansthan
- Rajiv Gandhi Super Speciality Hospital
- Jag Pravesh Chandra Hospital
- Delhi State cancer Institute
- Kanti Nagar Hospital

CPC-A (BSA Hospital)

- BSA Hospital
- Bhagwan Mahavir Hospital
- Sanjay Gandhi Memorial Hospital
- Babu Jagjeevan Ram Hospital
- Maharishi Valmiki Hospital
- Mobile Health Scheme
- Attarsen Jain Hospital
- Directorate of Family Welfare
- Satyawadi Raja Harishchandra Hospital

CPC-D (DDU Hospital)

- DDU Hospital
- Dada Dev Matri Auv Shishu Chikitsalaya
- Super Speciality Hospital, Janakpuri
- Rao Tula Ram Memorial Hospital
- Acharya Shree Bikshu Hospital

- Sardar Vallabh Bhai Patel Hospital
- Madan Mohan Malviya Hospital
- Guru Govind Singh Government Hospital
- Tihar Jail
- NC Joshi memorial Hospital

The annual demand shall be collected by these CPCs which shall float and finalise tenders for the requirement of their groups and convey the RCs to the group hospitals. The orders shall be placed by respective hospitals. The management of tender viz. collection of the performance security deposit, non-performance deductions etc shall be done by the CPC. The specifications of the surgical consumables and the terms and conditions of the tender shall remain the same as finalised by CPA.

3. Surgical Consumables: With the revised system of procurement of surgical consumables through Cluster procurement system, presently being tried, CPA shall communicate the current procurement status to hospitals so that planning for future procurements is expeditiously done by the CPC. CPA shall finalise and freeze the specifications of all the surgical items required by the hospitals and publish that as Essential Surgical Consumables List (ESCL) which shall be used by all the Cluster Procurement Centres.

4. Provision of IT personnel: The hospitals submitted that there were problem in data entry because the pharmacists in the stores are not computer savvy. To this DHS remarked that that in the existing system at NIRANTAR, hardly anything required to be entered except the numbers because every other thing is system provided, including the name of item, batch number, manufacture and expiry date, price and for entry of only numbers no special computer acumen is required. Hospitals were advised to gradually shift the pharmacists from stores and purchase branches, to be replaced by executive assistants with commerce background trained in medical stores management.

5. Inter hospital transfer: It was submitted by one of the hospitals that inter hospital transfer was not possible at NIRANTAR. CPA informed that the system is already running smoothly and there should not be any problem. There is already a provision for inter hospital transfer and if any hospital is finding difficulty, it may contact the CPA.

6. Supply timeliness. The reasons for non finalisation of contracts, delayed supply, risk purchases issues were discussed.

Secretary Health stressed that CPA be treated as a procurement solution and CPC should consider it as its responsibility to see that the hospitals get all medicines in time and should consider all fall back options including amending the tender terms and conditions and going for emergency/limited procurements.

In cases of risk purchases and in emergency procurements, getting products with printed logo and marking may be replaced by local stamping with indelible ink.

7. Fresh tender initiative:

Since orders for all four quarters of the current financial year have been issued by CPA, the procurement exercise should be started now for the yr 2014-15. A calendar of procurement activity shall be issued to hospitals by this November end.

CPA has been advised to float basically three types of tenders, the regular tender where CPA is getting competitive bids, a tender for items where contract could not be finalised and the third tender for those items which are to be supplied directly to DHS stores and where the quantity and the value of procurement is not high.

8. Software issues:

A meeting was held at National Institute of Health and Family Welfare, Munirka, Delhi, organised by Min of Health & family Welfare and CDAC jointly. This was attended by MS, SGM hospital, MS, DDU hospital and Addl. Dir CPA who briefly apprised the issues discussed in the meeting. Addl. Director CPA submitted that Delhi has already a system named NIRANTAR which is running successfully and can be modified as per requirement. It was decided to adhere to with the existing system and hold workshops for these stakeholders where problems with NIRANTAR programme can also be identified & addressed.

P.O.
S.I.K.


9. Enhancement of local purchase power: DMS / S. Atc office / P.O.

Medical Superintendents requested that the current limit of purchases given in GFR 2005 is creating problem because the limits have not got revised after 2005. It was decided that a request shall be sent to Finance Department to enhance it by three times. The hospitals shall move their files for this stating the quantum of procurement in exigencies

10. Central drug store:

It was unanimously felt that a modern warehouse for essential drugs and consumables was the need of the hour. It was decided that DHS would identify the site and DSHM would take it up on turnkey project basis, with funds from NRHM, GOI.

The meeting ended with vote of thanks to the chair.


Dr. N. V. Kamat
Director Health Services

Copy to:

1. PS to Secretary, Health & Family Welfare.
2. MD, Delhi State Health Mission.
3. Dr Rajpal, Medical Superintendent, GTB Hospital.
4. Dr S Ramji, Medical Superintendent, LN Hospital.
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10. All Heads of the Institutions/ Hospitals.


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Director Health Services