

REQUEST FOR QUOTATION (RFQ)

RFQ Reference: RFQ IT10/014/2023 Provision of CXR and
Specialist Examinations in Crotone

Date: 01 June 2023

SECTION 1: REQUEST FOR QUOTATION (RFQ) for the provision of medical services for IOM Italy beneficiaries from 1 July to 30 October 2023 in Crotone with possibility of extension under same conditions based on satisfactory performance

International Organisation for Migration (IOM) kindly requests your quotation for the provision of services as detailed in Annex 1 of this RFQ.

This Request for Quotation comprises the following documents:

Section 1: This request letter

Section 2: RFQ Instructions and Data

Annex 1: Schedule of Requirements

Annex 2: Quotation Submission Form

Annex 2 bis: Vendor Information Sheet

Annex 3: Technical and Financial Offer

Annex 4: Contract template "MEDICAL SERVICES AGREEMENT"

Annex 5: Certification Replacement Statement – Anti-Mafia

Annex 6: IOM Data Protection Principles

When preparing your quotation, please be guided by the RFQ Instructions and Data. Please note that quotations must be submitted using **Annex 2: Quotation Submission Form and Annex 3 Technical and Financial Offer**, by the method and by the date and time indicated. It is your responsibility to ensure that your quotation is submitted on or before the deadline. Quotations received after the submission deadline, for whatever reason, will not be considered for evaluation.

Thank you and we look forward to receiving your quotations.

Approved by: Natasa Gjorgjievska

Signature: _____

Name: Natasa Gjorgjievska

Title: Procurement Associate

Date: 1/06/2023

SECTION 2: RFQ INSTRUCTIONS AND DATA

Deadline for the Submission of Quotation	19 June 2023, 03:00 PM If any doubt exists as to the time zone in which the quotation should be submitted, refer to http://www.timeanddate.com/worldclock/ .
Method of Submission	<p>Quotations must be submitted as follows:</p> <p><input type="checkbox"/> E-tendering</p> <p><input checked="" type="checkbox"/> Email</p> <p><input type="checkbox"/> Courier / Hand delivery</p> <p><input type="checkbox"/> Other Click or tap here to enter text.</p> <p>Bid submission address: iomromeprocurement@iom.int</p> <ul style="list-style-type: none"> ▪ File Format: PDF ▪ File names must be maximum 60 characters long and must not contain any letter or special character other than from Latin alphabet/keyboard. ▪ All files must be free of viruses and not corrupted. ▪ Max. File Size per transmission: 30 MB ▪ Mandatory subject of email: RFQ IT10/014/2023 Provision of CXR and Specialist Examinations in Crotone ▪ Multiple emails must be clearly identified by indicating in the subject line "email no. X of Y", and the final "email no. Y of Y". ▪ It is recommended that the entire Quotation be consolidated into as few attachments as possible. ▪ The proposer should receive an email acknowledging email receipt.
Cost of preparation of quotation	IOM shall not be responsible for any costs associated with a Supplier's preparation and submission of a quotation, regardless of the outcome or the manner of conducting the selection process.
Supplier Code of Conduct	All prospective suppliers must read the UN Supplier Code of Conduct and acknowledge that it provides the minimum standards expected of suppliers to the UN. The Code of Conduct, which includes principles on labour, human rights, environment and ethical conduct may be found at: Supplier Code of Conduct (ungm.org) .
Conflict of Interest	UN encourages every prospective Supplier to avoid and prevent conflicts of interest, by disclosing to UN if you, or any of your affiliates or personnel, were involved in the preparation of the requirements, design, specifications, cost estimates, and other information used in this RFQ.
General Conditions of Contract	Any Purchase Order or contract that will be issued as a result of this RFQ shall be subject to the IOM General Conditions of Contract for provision of goods/services/transportation/medical services available at https://www.iom.int/do-business-us-procurement .
Eligibility	Bidders shall have the legal capacity to enter into a binding contract with IOM and to deliver in the country, or through an authorized representative.
Currency of Quotation	Quotations shall be quoted in EURO
Duties and taxes	<p>The International Organization for Migration is exempt from all direct taxes, except charges for public utility services, and is exempt from customs restrictions, duties, and charges of a similar nature in respect of articles imported or exported for its official use. All quotations shall be submitted net of any direct taxes and any other taxes and duties, unless otherwise specified below:</p> <p>All prices shall:</p> <p><input type="checkbox"/> be inclusive of VAT and other applicable indirect taxes</p> <p><input checked="" type="checkbox"/> be exclusive of VAT and other applicable indirect taxes</p>

Language of quotation and documentation including catalogues, instructions and operating manuals	Italian or English
Documents to be submitted	<p>Bidders shall include the following documents in their quotation:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Annex 2: Quotation Submission Form duly completed and signed; <input checked="" type="checkbox"/> Annex 2 bis: Vendor Information Sheet duly completed and signed; <input checked="" type="checkbox"/> Annex 3: Technical and Financial Offer duly completed and signed and in accordance with the Schedule of Requirements in Annex 1; <input checked="" type="checkbox"/> Annex 4: A copy of the contract template "MEDICAL SERVICES AGREEMENT" (not to be signed) to be initialled on each page for acknowledgement; <input checked="" type="checkbox"/> Annex 5: Certification Replacement Statement – Anti-Mafia; <input checked="" type="checkbox"/> Annex 6: IOM Data Protection Principles; <input checked="" type="checkbox"/> Annex 7: Up-to-date extract from the Chamber of Commerce Register; <input checked="" type="checkbox"/> Annex 8: VAT Registration Certificate and/or a valid Fiscal Code; <input checked="" type="checkbox"/> Annex 9: A brief presentation of the bidder company.
Quotation validity period	Quotations shall remain valid for 60 days from the deadline for the Submission of Quotation.
Price variation	No price variation due to escalation, inflation, fluctuation in exchange rates, or any other market factors shall be accepted at any time during the validity of the quotation after the quotation has been received.
Partial Quotes	<input checked="" type="checkbox"/> Not permitted <input type="checkbox"/> Permitted (<i>please specify, i.e. by LOTS only or by line item, etc</i>)
Payment Terms	<input type="checkbox"/> 100% within 30 days after receipt of goods, works and/or services and submission of payment documentation. <input checked="" type="checkbox"/> On a monthly basis within 60 days after receipt of goods, works and/or services and submission of payment documentation
Contact Person for correspondence, notifications and clarifications	<p>Focal Person: Luca Corso – IOM Medical Focal Point E-mail address: lcorso@iom.int Attention: Quotations shall not be submitted to this address but to the address for quotation submission above.</p>
Clarifications	Requests for clarification from bidders will not be accepted any later than 5 working days before the submission deadline. Responses to request for clarification will be communicated on email by 14 June 2023
Evaluation method	<input type="checkbox"/> The contract will be awarded to the lowest price substantially compliant offer <input checked="" type="checkbox"/> The call will be awarded to the competitor who has obtained the highest overall score given by the sum of the "technical offer" (maximum 60 points) and "economic offer" (maximum 40 points). The results will be rounded to the nearest hundredth of a point.
Evaluation criteria	<input checked="" type="checkbox"/> Full compliance with all requirements as specified in Annex 1 <input checked="" type="checkbox"/> Full acceptance of the General Conditions of Contract <input type="checkbox"/> Comprehensiveness of after-sales services <input type="checkbox"/> Earliest Delivery /shortest lead time <input type="checkbox"/> Others (<i>for ex, environmental criteria/considerations, etc</i>)
Right not to accept any quotation	IOM is not bound to accept any quotation, nor award a contract or Purchase Order
Right to vary requirement at time of award	At the time of award of Contract or Purchase Order, IOM reserves the right to vary (increase or decrease) the quantity of services and/or goods, by up to a maximum 25% of the total offer, without any change in the unit price or other terms and conditions.
Type of Contract to be awarded	Medical service agreement

Expected date for contract award.	01 July 2023
Policies and procedures	This RFQ is conducted in accordance with Policies and Procedures of IOM
UNGM registration	IOM is encouraging all suppliers to register at the United Nations Global Marketplace (UNGM) website at www.ungm.org . The Bidder may still submit a quotation even if not registered with the UNGM, however, if the Bidder is selected for Contract award of USD 100,000 and above, the Bidder is recommended to register on the UNGM prior to contract signature. For vendors who do not have the technical means to register in UNGM, the UNGM has implemented an assisted vendor registration functionality that allows IOM procurement personnel to add local vendors to the UNGM.

ANNEX 1: SCHEDULE OF REQUIREMENTS

The International Organization for Migration (IOM), founded in 1951 and since 2016 an Agency affiliated with the United Nations, is the main Intergovernmental Organization working in the field of migration, with 174 Member States and more than 460 offices around the world. The Organization manages numerous national and international projects, including the "Voluntary Relocation from Italy to other EU Member and Associated States - RELITA" project (funded by the European Commission), in collaboration with the Italian Ministry of the Interior and the European Commission, which has as its ultimate goal the voluntary, safe and regular relocation of asylum seekers (beneficiaries) from Italy to other Member States. As part of the project activities developed in the territory of the Metropolitan City of Crotone, it is necessary to medically assess the beneficiaries, including through different medical screenings, in order to provide them with fitness-to-travel before departure.

The type and frequency of medical checks that will be required, as well as the number of beneficiaries who will have to undergo them, may vary considerably from week to week (from 0 to 200 services required weekly).

The provision of medical checks for beneficiaries may be requested either at dedicated reception facilities or at the premises of the bidder.

The results of the medical checks that will be requested from time to time should be reported to the IOM Medical Focal Point no later than 48 hours after being carried out.

Technical Specifications for Services:

Item No	Minimum technical requirements
1.	Chest x-ray with paper report and images saved on CD in Dicom viewer format or, alternatively, radiogram
2.	Pneumological examination
3.	Cardiological examination with possible EKG/echocardiogram
4.	Gynaecological examination with possible gynaecological ultrasound

Delivery Requirements

Delivery Requirements	
Delivery date and time	Bidder shall deliver the services immediately after contract signature by last party.
Customs clearance (must be linked to INCOTERM)	<input checked="" type="checkbox"/> Not applicable Shall be done by: <input type="checkbox"/> Name of organisation <input type="checkbox"/> Supplier/bidder <input type="checkbox"/> Freight Forwarder

ANNEX 2: QUOTATION SUBMISSION FORM

Bidders are requested to complete this form, including the Company Profile and Bidder's Declaration, sign it and return it as part of their quotation along with Annex 3: Technical and Financial Offer. The Bidder shall fill in this form in accordance with the instructions indicated. No alterations to its format shall be permitted and no substitutions shall be accepted.

Name of Bidder:	Click or tap here to enter text.	
RFQ reference:	RFQ IT10/014/2023 Provision of CXR and Specialist Examinations in Crotone	Date: Click or tap to enter a date.

VENDOR INFORMATION SHEET¹ (ANNEX 2-BIS)

The Bidder shall submit filled in and signed copy of the **VENDOR INFORMATION SHEET**

BIDDER'S DECLARATION OF CONFORMITY²

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I hereby represent and warrant that neither the Supplier, nor any person having powers of representation, decision-making or control over it or any member of its administrative, management or supervisory body, has been the subject of a final judgement or final administrative decision for one of the following reasons: bankruptcy, insolvency or winding-up procedures; breach of obligations relating to the payment of taxes or social security contributions; grave professional misconduct, including misrepresentation, fraud; corruption; conduct related to a criminal organisation; money laundering or terrorist financing; terrorist offences or offences linked to terrorist activities; child labour and other trafficking in human beings, any discriminatory or exploitative practice, or any practice that is inconsistent with the rights set forth in the Convention on the Rights of the Child or other prohibited practices; irregularity; creating or being a shell company.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier is financially sound and duly licensed.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier has adequate human resources, equipment, competence, expertise and skills necessary to complete the contract fully and satisfactorily, within the stipulated completion period and in accordance with the relevant terms and conditions.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier complies with all applicable laws, ordinances, rules and regulations.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier will in all circumstances act in the best interests of IOM.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that no official of IOM or any third party has received from, will be offered by, or will receive from the Supplier any direct or indirect benefit arising from the contract.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier has not misrepresented or concealed any material facts during the contracting process.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier will respect the legal status, privileges and immunities of IOM as an intergovernmental organization.

¹ [Vendor Information Sheet.xlsx](#)

² This form is mandatory to fill in and sign by every vendor who submits quotation

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that neither the Supplier nor any persons having powers of representation, decision-making or control over the Supplier or any member of its administrative, management or supervisory body are included in the most recent Consolidated United Nations Security Council Sanctions List (the "UN Sanctions List") or are the subject of any sanctions or other temporary suspension. The Supplier will immediately disclose to IOM if it or they become subject to any sanction or temporary suspension.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier does not employ, provide resources to, support, contract or otherwise deal with any person, entity or other group associated with terrorism as per the UN Sanctions List and any other applicable anti-terrorism legislation.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that, the Supplier will apply the highest ethical standards, the principles of efficiency and economy, equal opportunity, open competition and transparency, and will avoid any conflict of interest.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier undertakes to comply with the Code of Conduct, available at https://www.unhcr.org/Public/CodeOfConduct .
<input type="checkbox"/>	<input type="checkbox"/>	It is the responsibility of the Supplier to inform IOM immediately of any change to the information provided in this Declaration.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I certify that I am duly authorized to sign this Declaration and on behalf of the Supplier I agree to abide by the terms of this Declaration for the duration of any contract entered into between the Supplier and IOM.
<input type="checkbox"/>	<input type="checkbox"/>	IOM reserves the right to terminate any contract between IOM and the Supplier, with immediate effect and without liability, in the event of any misrepresentation made by the Supplier in this Declaration.

Signature: _____

Name: Click or tap here to enter text.

Title: Click or tap here to enter text.

Date: Click or tap to enter a date.

ANNEX 3: TECHNICAL AND FINANCIAL OFFER - SERVICES

Bidders are requested to complete this form, sign it and return it as part of their quotation along with Annex 2 Quotation Submission Form. The Bidder shall fill in this form in accordance with the instructions indicated. No alterations to its format shall be permitted and no substitutions shall be accepted.

Name of Bidder:	Click or tap here to enter text.	
RFQ reference:	RFQ IT10/014/2023 Provision of CXR and Specialist Examinations in Crotone	Date: Click or tap to enter a date.

Technical Offer 60/100

Provide the following:

Item No.	Technical specifications	Applicant's comments (please delete the grey text before completing each part)
1	<i>a brief description of your qualification, capacity and expertise to provide for the services requested under the "Technical Specifications for Goods" at page 5 (max 20 points, 4 points for each of the Specification listed, 2 points for the clarity of the text and 2 points for proven qualification and expertise)</i>	<i>Please provide a brief description</i>
2	<i>team composition, language skills and CVs of key personnel (max 20 points, 5 points for each staff possessing the necessary, required requirements to perform the activities under the "Technical Specifications for Goods")</i>	<i>Please provide a brief description</i>
3	<i>a brief description of experience gained by the bidder (and/or staff) in the field of migrant health monitoring and protection (max 10 points, max 5 points for the number of years of experience and max 5 points if more than 5 staff suitable for carrying out the activities requested)</i>	<i>Please provide a brief description</i>
4	<i>capacity of reducing the timeframe to provide the results of the examinations performed based on IOM's request and capacity to provide for additional tests/examinations in case requested by IOM (max 10 points, max 5 points for the capacity to reduce the time to share results with IOM and max 5 points if capable of ensuring additional examinations.</i>	<i>Please provide a brief description</i>

Financial Offer 40/100

Provide a lump sum for the provision of the services stated services of your technical offer. The lump-sum should include all costs of preparing and delivering the Services.

Currency of Quotation: Euro

Ref	Description of Deliverables	Unit Price
1.	Chest x-ray with paper report and images saved on CD in Dicom viewer format	
2.	Chest x-ray with paper report and radiogram	
3.	Pneumological examination	
4.	Cardiological examination with possible EKG/echocardiogram	
5.	Gynaecological examination with gynaecological ultrasound	
Total Price		

Compliance with Requirements

	You Responses		
	Yes, we will comply	No, we cannot comply	If you cannot comply, pls. indicate counter proposal
Delivery Lead Time	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
Validity of Quotation	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
Payment terms	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
Other requirements [pls. specify]	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.

I, the undersigned, certify that I am duly authorized to sign this quotation and bind the company below in event that the quotation is accepted.	
<i>Exact name and address of company</i> Company Name: Click or tap here to enter text. Address: Click or tap here to enter text. Click or tap here to enter text. Phone No.: Click or tap here to enter text. Email Address: Click or tap here to enter text.	Authorized Signature: Date: Click or tap here to enter text. Name: Click or tap here to enter text. Functional Title of Authorised Signatory: Click or tap here to enter text. Email Address: Click or tap here to enter text.