



## A Systemic Approach to better Health

Systemic Calls for Tender in the Healthcare Sector

November 2015









### **Background**

Infrastructure investments in the healthcare sector often face challenges that lead to insufficiently used potential. The reasons are manifold; ranging from incompatibility of medical devices or systems, inadequate training of medical staff, to insufficient maintenance and service.

Traditional tenders often lead to breaks between planning and executing, creating problems in coordinating between the individual suppliers.

The study "A Systemic Approach to better Health", conducted by BMZ, GIZ, KfW and GHP offers insights into the advantages of an integrated and holistic approach to tenders in the healthcare sector.

Systemic Calls for Tender can help to ensure greater sustainability in healthcare projects, e.g. by considering life-cycle costs, comprehensive training of medical staff and all-encompassing maintenance contracts.

#### **About GHP**

The German Healthcare Partnership (GHP) is the voice and advocate for the German export-oriented healthcare industry. GHP member companies cover nearly the entire German healthcare value chain, thus creating a unique network with excellent contacts to adjacent federations, academia and politics – both domestic and abroad.

GHP promotes sustainability in procurement processes in the healthcare sector and works towards efficient, adequate and feasible healthcare solutions worldwide.

### Differences between traditional and systemic calls for tender

Traditionally, lots are tendered separately through descriptive tenders. While this approach might be easier for the tendering agencies - offers are mainly compared by price – it often leads to less than ideal situations in regard to compatibility and long-term sustainability of the facility. More than often, the policy of awarding the cheapest bidder leads to a heterogeneous system where medical devices are incompatible up to the point of uselessness thus achieving the exact opposite of saving money.

Systemic calls for tender ideally include the planning of the project, supply and provision, installation, maintenance contracts, training and provision of consumables. Because pure acquisition costs only represent part of the total, systemic tenders should include a calculation of lifecycle costs (LCC). Without the calculation of LCC it is difficult to avoid buying the initially low-priced product and having it turn out to have high energy consumptions and expensive consumables.

## Why systemic calls for tender?

The holistic approach leads to economical and sustainable solutions. Although it might appear more costly at the point of acquisition, the investment is costeffective in the mid- and longrun. The compatibility of the devices within the system is ensured in the planning phase, medical and technical staff is adequately trained, and the highest possible up-time is guaranteed by the supplier.





# Training & Local Capacity Building

Adequately trained personnel ensures the optimal functioning of the facility as well as the best possible treatment for and of patients. The education level is being raised within the facility as well as in the region/country. In the long run, this leads to an improved international standing, which in turn results in a rise in demand for the offered high quality diagnosis- and therapy possibilities.



#### LCC

Lifecycle costs arise over the entire serviceable life of medical devices. In addition to acquisition and installation costs, LCC includes the following factors as well:

- maintenance
- consumables
- training needs
- energy consumption
- waste removal
- disposal
- personnel costs for operation
- therapy- and process costs
- others

Lifecycle costs have to be considered for a sound economic decision. Costs beyond acquisition costs can have a considerable impact on the award of the contract. The total amount of up-time should be listed in the calculation as well as the necessary time frames for updates during which the devices are briefly unavailable.

#### Maintenance

Preventive maintenance on a regular basis is especially important for 2 reasons:

1) A well serviced device is a guarantee for a high up-time, 2) In case of emergency, hospital staff and patients can rely on the device to function flawlessly. All in all, preventive maintenance is economically as well as socially beneficiary.

#### **WIN WIN WIN Situation**

#### WIN 1 – Tendering party / Partner Country

Having successfully conducted a systemic call for tender and awarded a suitable bidder, the buyer acquired a high-quality health care facility. Due to comprehensive maintenance, service and training contracts, a long-term partnership is founded between the awarded bidder and the buyer. Well trained staff, functioning equipment and smoothly running operations help the facility to raise the standards by making a name for themselves. More patients will come for preventive procedures and treatment which leads to economic and social benefits.

#### WIN 2 - Patients and Society

A better healthcare system and well equipped medical facilities make therapeutic measures more accessible. Diseases are easier to diagnose and can be treated with the help of reliable medical devices. Preventive measures help to keep the society healthy. Well trained personnel is capable to tend to the patients, even in emergencies. With high-quality care like this, patients are able to leave the facility faster and re-integrate into social, cultural and professional life. Trained staff raises the educational standard of the region.

#### WIN 3 - The awarded bidder

Systemic calls for tender raise the standard for bidders. The demanded documents and qualifications (LCC assessments, international references etc.) make sure that bidders with low price products have to adjust. Competitive disadvantages for bidders of high-quality products with holistic approaches, e.g. as the German healthcare industry, are reduced.

# Guideline for systemic tender generation

To ensure efficient investments eliciting a sustainable impact on the quality of healthcare provision the tender is well-advised to shift away from focusing solely on investment costs. Placing life-cycle costs in the center of the procurement procedure could considerably contribute to an improvement in the quality of

tender processes. Therefore criteria that reflect quality, safety standards as well as life-cycle considerations must be accounted for. Systemic procurements secure a level playing field in international tenders and enable the contracting authority to identify the economically most advantageous bid. The check-list below is a practical tool to develop standardized tender methods for reliable and comparable results.

| A.1   | Investment   |  |
|---|--|--|
| A.2   | Maintenance  |  |
| A.3   | Uptime (in combination with a service contract)  |  |
| A.4   | Pay Per Use (if available, eg. reduction of maintenance costs)   |  |
| A.5   | Life-cycle contracts (investment and full-service-contract)  |  |
|   |  |  |
| В   | Planning   |  |
| B.1   | Checking the installed base at customer site   |  |
| B.2   | Workflow   |  |
| B.2.1   | Patient throughput   |  |
| B.2.2   | Consumables and other materials  |  |
| B.2.3   | Personnel fluctuation (new employees)  |  |
| B.2.4   | Data transfer and data storage   |  |
| B.3   | Room fitting   |  |
|   |  |  |
|   |  |  |
| С   | Technical systems  |  |
| C<br>C.1  | Technical systems Product history  |  |
|   | ·  |  |
| C.1   | Product history  |  |
| C.1<br>C.1.1  | Product history  Market introduction of the system  Updates und Upgrades (safety and application widening, spare parts availability)  Certificates and Approvals   |  |
| C.1.1<br>C.1.2  | Product history  Market introduction of the system  Updates und Upgrades (safety and application widening, spare parts availability)   |  |
| C.1<br>C.1.1<br>C.1.2<br>C.2  | Product history  Market introduction of the system  Updates und Upgrades (safety and application widening, spare parts availability)  Certificates and Approvals   |  |
| C.1<br>C.1.1<br>C.1.2<br>C.2<br>C.2.1                                   | Product history  Market introduction of the system  Updates und Upgrades (safety and application widening, spare parts availability)  Certificates and Approvals  Declaration of conformity (CE-certificate)   |  |
| C.1<br>C.1.1<br>C.1.2<br>C.2<br>C.2.1<br>C.2.2                          | Product history  Market introduction of the system Updates und Upgrades (safety and application widening, spare parts availability)  Certificates and Approvals Declaration of conformity (CE-certificate) FDA approval (512k approval)  Sustainability Product compatibility (connectivity, data and image transfer) with installed base and also   |  |
| C.1<br>C.1.1<br>C.1.2<br>C.2<br>C.2.1<br>C.2.2<br>C.3                   | Product history  Market introduction of the system Updates und Upgrades (safety and application widening, spare parts availability)  Certificates and Approvals Declaration of conformity (CE-certificate) FDA approval (512k approval)  Sustainability  |  |
| C.1<br>C.1.1<br>C.1.2<br>C.2<br>C.2.1<br>C.2.2<br>C.3                   | Product history  Market introduction of the system Updates und Upgrades (safety and application widening, spare parts availability)  Certificates and Approvals Declaration of conformity (CE-certificate) FDA approval (512k approval)  Sustainability Product compatibility (connectivity, data and image transfer) with installed base and also   |  |
| C.1<br>C.1.1<br>C.1.2<br>C.2<br>C.2.1<br>C.2.2<br>C.3<br>C.3.1          | Product history  Market introduction of the system Updates und Upgrades (safety and application widening, spare parts availability)  Certificates and Approvals  Declaration of conformity (CE-certificate)  FDA approval (512k approval)  Sustainability  Product compatibility (connectivity, data and image transfer) with installed base and also future investments   |  |
| C.1<br>C.1.1<br>C.1.2<br>C.2<br>C.2.1<br>C.2.2<br>C.3<br>C.3.1          | Product history  Market introduction of the system Updates und Upgrades (safety and application widening, spare parts availability)  Certificates and Approvals Declaration of conformity (CE-certificate) FDA approval (512k approval)  Sustainability Product compatibility (connectivity, data and image transfer) with installed base and also future investments Updates: free-of-charge safety updates - including hardware and software (during whole life-time-cycle) Upgrades availability (on-site upgradeability of software and as well hardware components)   |  |
| C.1<br>C.1.1<br>C.1.2<br>C.2<br>C.2.1<br>C.2.2<br>C.3<br>C.3.1          | Product history  Market introduction of the system Updates und Upgrades (safety and application widening, spare parts availability)  Certificates and Approvals Declaration of conformity (CE-certificate) FDA approval (512k approval)  Sustainability Product compatibility (connectivity, data and image transfer) with installed base and also future investments Updates: free-of-charge safety updates - including hardware and software (during whole life-time-cycle) Upgrades availability (on-site upgradeability of software and as well hardware components) DICOM-3 data and image transfer between Hospital Information System |  |
| C.1<br>C.1.1<br>C.1.2<br>C.2<br>C.2.1<br>C.2.2<br>C.3<br>C.3.1<br>C.3.2 | Product history  Market introduction of the system Updates und Upgrades (safety and application widening, spare parts availability)  Certificates and Approvals Declaration of conformity (CE-certificate) FDA approval (512k approval)  Sustainability Product compatibility (connectivity, data and image transfer) with installed base and also future investments Updates: free-of-charge safety updates - including hardware and software (during whole life-time-cycle) Upgrades availability (on-site upgradeability of software and as well hardware components)   |  |

|   | _            |   |   |
|---|--------------|---|---|
|   | D            | Commissioning/ Start-Up   |   |
|   | D.1          | Installation  |   |
|   | D.2          | Technical documentation   |   |
|   | D.3          | Application training (basic and advanced application services)                                  |   |
|   | D.4          | Documentation of application trainings (certified)  |   |
|   |              | ,   |   |
|   | Е            | Customer training (at manufacturer site)  |   |
| Ī | E.1          | Application training  |   |
|   | E.1.1        | Physicians  |   |
|   | E.1.2        | Operators   |   |
|   | E.1.3        | Hospital technicians (first-line-service to reduce service costs and down-time of the system)   |   |
|   | E.1.4        | Training materials (presentation, hands-on training, etc.)                                      |   |
|   | E.2          |   |   |
|   | E.2          | Educational trainings for customers (new applications, user communities for knowledge transfer) |   |
|   | F            | Warranty  |   |
|   | F.1          | Start of warranty   |   |
|   | F.2          | End of warranty   |   |
|   | F.3          | Conditions (a description has to be provided)   |   |
|   | F.4          | What is included AND what is excluded   |   |
|   | Г.4          | What is included AND what is excluded   | ш |
|   | G            | Service (on call)   |   |
|   | G.1          | Use of original spare parts (NO third-party parts)  |   |
|   | G.2          | Personnel   |   |
|   | G.2.1        | Service engineers - no call center agents   |   |
|   | G.2.1        | Response time for on-site visits  |   |
|   | G.2.2        | ·   | _ |
|   |              | Contact availability (operating times, via email, telephone)                                    |   |
|   | G.4          | Safety-updates  |   |
|   | Н            | Maintenance (recommended)   |   |
|   | H.1          | Use of original spare parts (NO third-party parts)  |   |
|   | H.2          | Personnel   |   |
|   | H.2.1        | Certified technicians (from manufacturer)   |   |
|   | H.2.2        | Response time for on-site visits  |   |
|   | п.2.2<br>Н.3 | Maintenance intervals   |   |
|   |              |   |   |
|   | H.4          | Maintenance contracts (from manufacturer)   |   |
|   | H.5          | Contact availability (operating times, via e-mail, telephone)                                   |   |
|   | G            | References  |   |
| ĺ | G.1          | Regional  |   |
|   | G.1.1        | Number of installed systems   |   |
|   | G.1.1        | Trainings   |   |
|   |              | · · · · · ·   |   |
|   | G.1.3        | Service   |   |
|   | G.1.4        | Maintenance   |   |
|   | G.2          | International (world-wide)  |   |
|   | G.2.1        | Number of installed systems   |   |
|   | G.2.2        | Trainings   |   |
|   | G.2.3        | Service   |   |
|   | G.2.4        | Maintenance   |   |
|   | G.3          | Publications and customer responses   |   |
|   |              |   |   |

#### **Imprint**

Publisher

German Healthcare Partnership (GHP)

Breite Straße 29 10178 Berlin, Germany Tel. +49 (0) 30 2028 1699

info@germanhealthcarepartnership.de www.germanhealthcarepartnership.de

Kreditanstalt für Wiederaufbau (KfW) Bankengruppe

Referat:

East Asia and Pacific

Palmenstraße 5-9 60325 Frankfurt am Main, Germany Tel. +49 (0) 69 7431 1672

www.kfw.de

Edited by

German Healthcare Partnership (GHP) Breite Straße 29

10178 Berlin, Germany

Design

Sagross Design Office GmbH, Berlin

Printed by Xerox GmbH

Photo credits

Cover: Getty Images

As of

November 2015 GHP, GIZ und KfW are responsible for the content of this publication. Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH

Headquarters
Bonn und Eschborn

Sektorvorhaben Gesundheitssystemstärkung Godesberger Allee 119 53175 Bonn, Germany Tel. +49 (0) 228 44 60 - 0

hss@giz.de www.giz.de

Commissioned by:

Federal Ministry for Economic Cooperation and Development (BMZ)

Postal Addresses of BMZ:

BMZ Bonn Dahlmannstraße 4 53113 Bonn, Germany Phone +49 (0) 228 99 535 - 0

BMZ Berlin Stresemannstraße 94 10963 Berlin, Germany Tel. +49 (0) 30 18 535 - 0

poststelle@bmz.bund.de

www.hmz.de