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|   | **Questions** | **Answers** |
| 1. | Are you open to offshore partners? | YES (all our RFQs are open for local and international companies) |
| 2. | Are you willing to subcontract all the work to vendor partner? | No, we do one contract with one supplier , if he subcontracted another vendor , it is his responsibility with no interference from our side |
| 3. | Do you already have base content ready? What is the mode of delivery used? | The Training Content:- Maternal mortality and morbidity- Maternal mortality in Egypt- Signs- Ante-natal care for high risk pregnancy- Obstructed labour- Rupture uterus- Third degree perineal tears- Shoulder dystocia- Assisted breech delivery- Pre-eclampsia and Gestational diabetes- Ante-partum hemorrhage- Placenta Previa- Accidental hemorrhage- Pre-term labour & Premature rupture of membranes- Management Protocol for post-partum hemorrhage- Indication for C-section- Obstetric sepsis- Management protocol for maternal shock and collapse- Ultrasound in obstetric emergency,  In addition to a video for emergency obstetric care during delivery, as a practical session. |
| 4. | If we are not allowed to have access to the manual at this phase, can you share with us a sample of it? And can you mention how many sections/chapters it includes? (I know that the average number of pages 200-300) | There is no comprehensive curriculum, we have several resources, but need to be adapted to the digital content, that is why it was requested to have a medical on board. |
| 5. | If the manual was used to be delivered on a physical training mode, it was used to be delivered on how many training days? | The Training used to be delivered 5-6 days, excluding the practical session which will be a video. |
| 6. | It is mentioned that we are required to hire a medical expert, as a consultant for this project, is there a specific requirement for this expert. | Medical consultant: OBGYN, at least 10 years clinical experience, has an experience in similar capacity building experience. |
| 7. | I am confirming that we are required to convert only one training material, which is 200-300 Pages.-   | There is no comprehensive curriculum, we have several resources, but need to be adapted to the digital content, that is why it was requested to have a medical on board. |
| 8. | Do you want the course to be developed in Arabic or English language? | Only one course will be developed and it will be a mix of English with complimentary Arabic content. |