

# Review of: "Procurement Planning & the Rwanda Biomedical Centre (RBC)"

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**Potential competing interests:** No potential competing interests to declare.

## Reviewer comments:

The language requires major revision. I suggest the authors to consult a native English speaker. Besides, authors are advised to read and understand the "Author Information Pack" and comply with it before submission especially the abstract and reference format (text and list).

This incisive study navigates the intricate terrain of procurement planning and its palpable impact on the operational efficacy of public institutions, spotlighting the case study of the Rwanda Biomedical Centre (RBC). In a climate where the RBC, entrusted with the pivotal task of advancing the nation's health, has grappled with the specter of suboptimal procurement practices, the study unfurls against a backdrop of compelling concerns. The Auditor General's report (2015) and a report from the national daily, the New Times, serve as compelling testimonies to the institution's procurement woes, augmenting the urgency and significance of the research endeavor. Pioneering four distinct objectives, the study embarks on a nuanced journey: delving into the pivotal role of a meticulous needs assessment, unraveling the multifaceted impact of procurement cost estimation, scrutinizing the nexus between quality specifications and institutional performance, and culminating in a strategic exploration of remedies to confront the labyrinth of challenges besieging procurement planning at the RBC.

How do the inconsistencies highlighted in the Auditor General's report and the New Times article specifically manifest in the procurement processes of the Rwanda Biomedical Centre, and what systemic flaws contribute to these discrepancies?

In the context of public health institutions, how does the meticulousness of needs assessment significantly influence not only the efficacy of procurement planning but also the overall operational performance of an entity like the Rwanda Biomedical Centre?

Can you elaborate on the intricate relationship between procurement cost estimation and the performance of public institutions, with a specific focus on the Rwanda Biomedical Centre, and how inaccuracies in cost estimation might reverberate throughout the institution?

Considering the multifaceted nature of goods in the healthcare sector, how does the study address the challenges associated with quality specifications in procurement planning at the Rwanda Biomedical Centre and its consequential

impact on institutional performance?

Delving into the strategies proposed for mitigating challenges in procurement planning, how can these strategies be tailored to the specific context of the Rwanda Biomedical Centre, and what are the potential hurdles in implementing these remedies within the institutional framework?

For the text clarity would you refrain from using additional words, mostly meaningless filler words, which can be omitted or some archaic words see e.g. “respectively”, “thus”, “hence”, “therefore”, “furthermore”, “thereby”, “basically”, “meanwhile”, “wherein”, “herein”, “Nonetheless”, “Perceivably,” etc. ? Please carefully **go through the entire manuscript including Table and Figure.**

Avoid using the words of etc., we, they and us.

All percentage by weight (wt.%) or volume (v.%)? Such as yield, etc. Please carefully **go through the entire manuscript including Table and Figure. Kindly use wt.% and v.%** for better understanding.

Billion may refer to:

In numbers: Long and short scales. 1,000,000,000 (number), one thousand million,  $10^9$ , in the short scale. 1,000,000,000,000 (number), one million million,  $10^{12}$ , in the long scale. Please clarify. Please carefully **go through the entire manuscript**. Kindly change the million into  $\times 10^6$

You may see these articles. The relevant reference may be of interest to the author according to below:

<https://doi.org/10.1016/j.jhep.2019.03.011>