



REQUEST FOR PROPOSAL

“Public-Not for profit Partnership” for implementation of Adolescent Health Programme under NHM, Odisha

DISCLAIMER

The information contained in this Request for Proposal (RFP) document or subsequently provided to bidder(s), whether verbally or in documentary form by or on behalf of the District Authority under Department of Health & Family Welfare, Govt. of Odisha, or any of their employees or advisors, is provided to bidder(s) on the terms and conditions set out in this RFP document. This RFP document is not an agreement and is not an offer or invitation by the District Authority or its representatives to any other party. The purpose of this RFP document is to provide interested parties with information to assist the formulation of their proposal and detailed Proposal. This RFP document does not purport to contain all the information each bidder may require. This RFP document may not be appropriate for all persons, and it is not possible for the Department, their employees or advisors to consider the investment objectives, financial situation and particular needs of each party who reads or uses this RFP document. Some bidders may have a better knowledge of the proposed Project than others. Each bidder should conduct its own investigations and analysis and should check the accuracy, reliability and completeness of the information in this RFP document and obtain independent advice from appropriate sources. District Authority / Department, its employees and advisors make no representation or warranty and shall incur no liability under any law, statute, rules or regulations as to the accuracy, reliability or completeness of the RFP document. District Authority / Department may in its absolute discretion, but without being under any obligation to do so, update, amend or supplement the information in this RFP document.

TABLE CONTENTS

Sl. No.	Description	Page No.
1	Section 1: Notice inviting proposal	4
2	Section 2: Schedule of online proposal submission	5
3	Section 3: Instruction to bidders	6-11
4	Section 4: Terms of Reference for implementation of Adolescent Health Programme under NHM	12
5	Section 5: Principle of Agreement.	13
6	Section 6: Service Description & Responsibilities	14-19
7	Section 7: Terms and Conditions	20-24
8	Section 8: Evaluation of Proposals	25-26
9	Section 9: Forms and Formats	27-31

SECTION -1: NOTICE INVITING PROPOSAL

Detailed proposals are invited through **ONLINE** from eligible entities to select the Agency for **“Implementation of Adolescent Health Programme”** under NHM, Odisha.

Important timelines

Sl. No.	Activity	Timeline
1	Date of Advt. publication.	Date. <u>19.09.2021</u> (The detailed RFP document downloadable from Website: www.nhmodisha.gov.in)
2	Pre bid Queries, if any.	The pre bid queries, if any, are to be addressed in the e-mail ID: pppcellnrhm@gmail.com latest by <u>24.09.2021</u> by 5.00 P.M. The clarification/amendment, if any, due to the pre bid queries shall only be hosted in the NHM, Odisha website (www.nhmodisha.gov.in (under ‘Tender’ link)).
3	Last date for submission of online proposal.	Date: <u>22.10.2021</u> NB: Proposals should be submitted through ONLINE only. No other mode of submission will be accepted or entertained.
4	Link for online application	Interested Agencies can apply on the web link: www.nhmodisha.in/ngo .

SECTION - 2: SCHEDULE OF ONLINE PROPOSAL SUBMISSION

Online proposals are invited for implementation of Adolescent Health Programme in the following district.

Sl. No	RFP No	District	Mode of submission of application
1	NHM/ AH/2021/01	Koraput	Online only

SECTION – 3: INSTRUCTIONS TO THE BIDDERS

3.1 Scope of Proposal

Interested bidders fulfilling the eligibility criteria **may apply for the project by submitting their application through online for implementation of Adolescent Health Programme listed in Section 2: Schedule of Proposal Submission.** The following points are to be ensured while applying for the projects.

- (a) Detailed description of the objectives, scope of services, deliverables and other requirements relating to “Implementation of Adolescent Health Programme” are specified in this RFP. The manner in which the proposal is required to be submitted, accepted and evaluated is also explained in this RFP.
- (b) Proposals must be submitted through **online only** within the due date and time mentioned in this RFP. **Application submitted in any other mode and received after the due date and time will not be accepted.**
- (c) The selection of the Agency shall be on the basis of an evaluation by the Desk Appraisal Committee and District NGO Committee of the concerned District through the Selection Process specified in this RFP. Bidders shall be deemed to have understood and agreed that no explanation or justification for any aspect of the Selection Process will be given and that the CDM&PHO-cum-District Mission Director’s decision is without any right of appeal whatsoever.
- (d) The bidder shall submit online proposal in the form and manner as specified in this RFP. **There shall not be any Financial Proposal to be submitted in the tender, as this is a fixed cost based project. The cost of project is Rs. 27,56,775/- per project per annum (fixed cost)** as per provision made in the NHM PIP 2021-22. The cost may be modified based on approval in the NHM PIP from time to time. The continuation of the project is also subject to the approval of the activity in annual PIP of NHM.
- (e) Upon selection, the Agency shall be required to enter into a MoU with the Zilla Swasthya Samiti (ZSS) of the concerned District for implementation of the project. The implementation of the “Adolescent Health Programme” will be guided by the terms and conditions of the MoU.

3.2 Eligibility Criteria for the Agency

The entities fulfilling the following criteria are eligible to apply:

1. It must be registered under Society Registration Act/Indian Trust Act.
 - (a) If registered under Society Registration Act **(In case of other than home district NGO, they must have Society Registration before the appropriate Authority to work beyond one district)**, it must have the provision of health services, health care, primary healthcare, and any other health related services in its memorandum of association.
 - (b) If it is a Trust, it must have been formed to provide health services, health care, primary health care or any other health related services.

2. To be eligible to apply, the entity must be in existence for at least 5 years as on 31st March 2021. Organizations established/registered after 1st April 2016 are not eligible to apply.
3. The entities must have minimum 5 years of proven field level experience in Health & Family Welfare Programme or any Social Development Sectors as on 31st March 2021.
4. The entity must have Unique ID Number through registration in the portal NGO-DARPAN of NITI Aayog.
5. The entities should have an annual turnover of at least Rs 25 lakhs per each year in the last three financial year i.e 2018-19, 2019-20 & 2020-21.
6. The entity must enclose documents of having minimum of Rs. 10 lakhs as fixed assets in the name of the entity in terms of Land, building and other fixed assets as per audit report of last FY 2020-21.
7. Entity should have been registered under 12-A of Income Tax exemption.
8. The entity must not have been “blacklisted”/ “debarred” from participating in any tendering process by any State Govt./Central Govt. Institutions. An original affidavit to this effect is to be submitted.
9. The entity or any of its office bearers must not have been convicted/case pending against them by any court of law in India or Abroad for any civil/criminal offences. An original affidavit to this effect is to be submitted.
10. If partnership with the entity has been discontinued due to poor performance in implementation of any PPP projects under NHM as identified by the External Evaluating Agency, the said entity shall not be eligible to apply any projects for the same district. Further, in case of partnership with any entity have been discontinued on the basis of the conduct of any financial irregularities, the said entity shall not be allowed to apply in any of the district under any scheme.
11. The entities must submit an undertaking for the willingness to sign the service level agreement towards the implementation of the project.

3.3. Submission of Proposal

The proposal shall be submitted through **ONLINE** in the following manner:

- i. The interested Agencies can apply on the web link: **www.nhmodisha.in/ngo**.
- ii. To apply, the Agency will first register its details in the Index Page of the web application to get User ID and Password in the registered Mobile Number. This is mandatory and a onetime activity.
- iii. After creation of User ID and Password at the Index Page, the User can login to submit online application which contains; Agency profile, details of experiences, annual turnover, details of EMD, declaration, upload of required documents (compulsory and optional documents), preview of application and submit.
- iv. The user can also go back by clicking the edit option and re-check the information submitted.
- v. The information / data once submitted will be the final and cannot be edited again.

- vi. After completion of all required formalities, the user has to Log Out from the application and back to Index Page.
- vii. In the selection process, if the District User has raised any objection to the application before making it shortlisted, the same will be displayed to the User in the screen along with a message notification to reply to the same within a stipulated time. The Agency may submit their compliances, if any, through online.
- viii. The detailed User Manual for Agencies for 'online NGO Application System' can be downloadable from Website: www.nhmodisha.gov.in
- ix. **The last date for submission of online application is 22.10.2021.**

3.4. Earnest Money Deposit (EMD)

EMD of **Rs. 40,000/-** per each Project applied for in the shape of a Demand Draft or Banker's Cheque in favour of **ZSS, NRHM Additionalities, (Name of the District for which the bidder is applying for)** is to be submitted separately in a sealed envelope through **Speed Post/Registered post/Courier only** to the CDM&PHO, **(Name of the applied district)** along with a forwarding letter. The EMD must be reached to the CDM&PHO, **(applied district)** on or before the last date & time for submission of online application specified in the Section-1 of the RFP. Details of the Demand Draft or Banker's Cheque (DD/BC No., date, name of the Bank) must be mentioned in the appropriate box under online application.

The EMD will be refunded after selection of the successful bidder. No interest will be paid on the EMD. **The online bid proposals not accompanied by EMD will not be considered. EMD of the bidder will be forfeited if it is discovered that the bidder has submitted false or forged or incorrect or misleading documents or information. In case of successful bidder, the EMD furnished by the bidder shall be refunded after submission of Performance Security for execution of contract/MoU.**

3.5. Supporting documents to be uploaded:

The following supporting documents required to be uploaded during online application by the entity in the appropriate locations. Below prescribed **Compulsory Documents are mandatory** to upload, failing which the submission may not be accepted.

Sl. No	Particulars
A. Compulsory Documents	
1	Registration Certificate of the Agency (Appropriate registration under Society/Trust Act)
2	Unique ID under the portal NGO Darpan of NITI Aayog
3	Memorandum of Association / By-Law /Deed of the Agency
4	Contract/MoU documents pertaining to the Agency work experience.
5	Annual Financial Statements of the last 3 years duly audited by a qualified CA. (As per Form-T1)
6	Fixed Asset Statement of last Financial Year duly audited by a qualified CA. (As

Sl. No	Particulars
	per Form-T2).
7	12A Registration certificate.
8	PAN Card.
9	Bank Pass Book.
10	An undertaking in the form of original Affidavit that the office bearer of the Agency has not been convicted by any court of law for any criminal offence (As per Form-T3).
11	An undertaking in the form of original Affidavit certifying that Agency is not blacklisted (As As per Form-T4)
12	An undertaking that the Agency is willing to sign the service level agreement (As per Form-T5).
B. Optional Documents	
13	Names of the Office Bearers along with their addresses.
14	80G Registration certificate
15	Award certificate (National/State/Dist) received from any Govt./Govt. Institutions only.
16	Meeting minutes of the Executive Committee/ Governing body/ any other body meeting based on by-law/ Memorandum of the Society/ registration document of last three financial years.
17	Details of manpower engaged by the Agency other than Funding Project Staff (Name, Designation, Qualification, years of experience etc along with Acquaintance sheet)
18	Document relating to the presence of Agency in the State of Odisha either land & building record issued in the name of Agency/lease agreement in affidavit mode.

All the uploaded supporting documents must be clearly visible and readable. The entity must show the same original documents during physical verification of documents before the District level Committee. **In case the entity fails to submit any supporting documents during online application, further consideration of the same document shall not be entertained during physical verification of documents and award of score by the Dist. level Committee.**

3.6. Financial Bid:

No financial bid is required to be submitted as this is a fixed cost based project.

3.7. Number of Proposals

Interested bidders fulfilling the eligibility criteria may submit their online proposal, **subject to the condition mentioned in the clause No. 3.12 of the RFP.**

3.8. Cost of Proposal

The bidder shall be responsible for all the cost associated with the preparation of their proposals and their participation in the selection process. The concerned District Authority will neither be

responsible nor in any way be liable for such costs, regardless of the conduct or outcome of the selection process.

3.9. Acknowledgement by the bidder

- (a) It shall be deemed that by submitting the Proposal through online, the bidder has: -
 - (i) Made a complete and careful examination of the RFP;
 - (ii) Received all relevant information requested from the concerned District Authority.
 - (iii) Acknowledged and accepted the risk of inadequacy, error or mistake in the information provided in the RFP or furnished by or on behalf of the concerned district authority relating to any of the matters stated in the RFP Document;
 - (iv) Satisfied itself about all matters, things and information, necessary and required for submitting the Proposal and performance of all of its obligations there-under;
 - (v) Agreed to be bound by the undertaking provided by it under and in terms hereof.
- (b) The concerned district authority shall not be liable for any omission, mistake or error on the part of the bidder in respect of any of the above or on account of any matter or thing arising out of or concerning or relating to RFP or the Selection Process, including any error or mistake in any information or data given by the concerned district authority.

3.10. Language

The online proposal with all accompanying documents (the “**Documents**”) and all communications in relation to or concerning the selection process shall be in English language and strictly as per the forms provided in this RFP. No other supporting document or printed literature shall be submitted with the proposal unless specifically asked for. In case any of these documents is in another language than English, it must be accompanied by an accurate translation of the relevant passages in English, in which case, for all purposes of interpretation of the Proposal, the translation in English shall prevail.

3.11. Process of Online Selection

- (a) After receipts of the online application and EMD, the Desk Appraisal Committee at the District level will conduct online screening process of the proposals received through online within the due date. The Committee will verify whether soft copies of all the required documents as per the advertisement have been submitted along with each proposal. If at all, any deficiency in document submission pertaining to the eligibility criteria is found out in any of the proposal, the same proposal shall be rejected.
- (b) The Desk Appraisal Committee constituted for conducting the selection process as per vide letter no. OSH&FWS/10565/PPP/432/2017, Dt. 02.08.2018 will conduct the Desk Appraisal.
- (c) After desk appraisal of the online proposals by the Desk Appraisal Committee, the shortlisted Agencies shall be finally called to the office of CDM&PHO for necessary verification of their original documents vis-à-vis documents submitted with their online application.

- (d) After verification of the original documents vis-à-vis documents submitted with online application, the Desk Appraisal Committee will award score in the prescribed score sheet in online. No field appraisal process shall be conducted for selection.
- (e) The merit list of the Agencies will be prepared those have secured minimum 50% score in the score sheet in order to be eligible for merit.
- (f) The entire selection process will be approved in the District NGO Committee meeting Chaired by the Collector-cum-Chairperson of the Dist. NGO Committee. Detailed process shall be recorded in the minutes of the meeting and the Agency in the top of the merit list shall be recommended to State by the Dist. NGO Committee for decision in the matter.
- (g) Thereafter, the District is required to submit the recommendation of the Dist. NGO Committee on the selection of Agency for the project and upload the approved minutes of the District NGO Committee through online.
- (h) The final selection result on the recommendation of the District will be notified through online after due approval of the State NGO Committee of OSH&FW Society.

3.12. Maximum ceiling limit of Projects:

- (a) **A maximum number of 10 projects** only (includes existing and new) which can be sanctioned to a particular Agency in the State out of OSH&FW Society Funds.
- (b) **In a District maximum upto any 5 partnership projects** (includes existing and new) under OSH&FW Society Funds can be sanctioned to a particular Agency.

3.13. Post Selection Procedure:

- i. After approval of the State NGO Committee of OSH&FW Society the selected Agency will be informed in writing of its selection for the Project. This will be the letter of award which shall be issued by the concerned CDM&PHO to the selected Agency.
- ii. Further, the selected Agency can also be able to view / intimated about their selection through online.
- iii. Within 15 days of the issue of the letter of award, the selected Agency will be required to inform the concerned CDM&PHO in writing of its acceptance of the award, failing which, the award will be offered to the 2nd rank bidder in the merit for the Project.
- iv. On completion of these formalities, the District Authority will inform the selected Agency regarding date of signing of the agreement/MoU.

SECTION 4: TERMS OF REFERENCE FOR IMPLEMENTATION OF ADOLESCENT HEALTH PROGRAMME

4.1 Introduction:

- (a) Adolescents are young people in the age group of 10-19 years. As per Census 2011, adolescents comprise nearly one-fifth (20.9%) of India's total population (253 million). Of the total adolescent population, 11 per cent are in the age group of 10-14 years and nearly 10 per cent are 15-19 years old. Considering the huge demographic dividend in working with adolescents, Government is committed to provide an enabling environment so that all Adolescents in the State are able to realize their full potential by making informed and responsible decisions related to their health and well-being.
- (b) Access to primary health care remains uneven across the length and breadth of the country. The wide variations in capacity, governance and institutional structures and state investments in health have determined the extent to which the Govt. support has improved health care particularly for the vulnerable marginalized and those living in underserved areas such as remote rural geographies.
- (c) Inadequate primary health care is reflected in the escalating demands for secondary and tertiary care services resulting in overcrowding of facilities at these levels leading to high cost and unsatisfactory health care. There is enough evidence to date demonstrate that quality primary health care mitigates cost and suffering.
- (d) With a view to further improving the quality of healthcare services at the community level, Government has rolled out a special healthcare programme for adolescent population.
- (e) NHM views the agreement as public private partnership in the public health system in Odisha. Such partnership is seen as a step towards strengthening the public healthcare system.
- (f) The partnership will be initially for a period of one year. Further extension of the partnership is subject to the agency scoring 70% or more in annual assessment after completion of one year of project as well as recommendation of the concerned District NGO Committee.
- (g) Such partnership should not be seen as the Government abdicating its responsibility to provide public health service, but rather as a supplementary measure towards facilitating the State to be able to manage such services after the term of the partnership ceases.
- (h) The spirit of such a public private partnership is essentially to share risks and rewards in such a manner that comprehensive primary health care can be provided to those who need these services. Government recognizes that such partnerships with organizations that have competence and credibility offers the government avenues to leverage the knowledge and expertise.
- (i) Government expects that grant in aid will not be treated as a business venture and will not be used to make profits.

SECTION 5: PRINCIPLE OF AGREEMENT

- 5.1 Both the parties agree to view the arrangements enforced by this agreement as a Public Private Partnership in the Public Health System in India. Such a partnership is seen as a step towards strengthening the Public Health System and as a measure towards facilitating and building the capacity of the state to manage such services by demonstrating models, with an emphasis on active community engagement.
- 5.2 Both parties recognize that the Public Health System in India, despite phenomenal improvements, faces significant challenges. Both parties also recognize that the spirit of such a Public Private Partnership is essentially to share risks and rewards in such a manner so that primary health care can be provided to those who need these services. NHM recognizes that such partnerships with organizations that have competence and credibility offers the governments avenues to leverage the knowledge and expertise of such organizations to improve management and delivery of primary health care services.
- 5.3 Both parties are committed to enhance the health and well-being of targeted beneficiaries of the project areas covered in this agreement by providing quality services, innovation and development and to meet identified needs within the resources available to both the parties.
- 5.4 The Agency will agree that the concession granted will not be treated as a business venture and will not be used to, make profits.
- 5.5 The Agency agrees that no money would be collected from the target groups for any services provided under the programme.
- 5.6 The partner Agency would furnish a certificate of up-to-date payment along with copies of scroll to the District every month under information to the PPP Cell, Mission Directorate, NHM, Odisha.

SECTION- 6. SERVICE DESCRIPTION OF ADOLESCENT HEALTH PROJECT AND RESPONSIBILITIES

6.1 Introduction:

Rashtriya Kishor Swasthya Karyakram (RKSK) under National Health Mission (NHM) offers a range of services for adolescents through government hospitals and frontline health workers (ASHA/ANM) available in the community. The programme focuses on an ‘adolescent friendly’ approach and works to build the skills and capacities of adolescent girls and boys to resolve their health concerns. This is done through rights-based access to services of choice - information, counselling, preventive, curative and referral services.

6.2 Programme Strategy :

There are six strategic areas for intervention under the programme:

- (i) Nutrition
- (ii) Sexual reproductive health
- (iii) Non- communicable diseases
- (iv) Substance misuse
- (v) Injuries and Violence (including gender based violence)
- (vi) Mental Health

6.3 Intervention methods/ approach:

Following approaches are to be adopted for rollout of the programme.

A) Community Based intervention:

I. Peer Education

Peer Educators are adolescents, selected to guide and help other adolescents in their area/locality who face numerous challenges during the growing up phase and use the opportunities available to them in the best possible way. Under the Rashtriya Kishor Swasthya Karyakram, peer educator is a volunteer, who has the ability and willingness to dedicate adequate time to the program and has high motivation, is non-biased, non-judgemental, trustworthy and shows leadership qualities to reach out to adolescents. In Odisha Peer Educators named as “**Kishor Sathi**” and the programme is being rolled out in 4 districts i.e at Dhenkanal, Bolangir, Bhadrak & Koraput. However, there is a plan to implement the programme in Koraput district in partnership mode.

II. Adolescent Health Day(AHD)

A key component of community level initiative of RKSK program is the Adolescent Health Day (AHD). It is independent of, and in addition to, all the activities carried out for adolescents under the RKSK program. It has four key objectives:

- Increase awareness among adolescents about the determinants of adolescent health such as (nutrition, sexual and reproductive health, mental health, injuries and violence including GBV, substance misuse and NCD)
- Improve coverage with preventive and promotive interventions on (nutrition, sexual and reproductive health, mental health, injuries and violence including GBV, substance misuse and NCD) for adolescents
- Increase awareness among parents and other key stakeholders on adolescents health needs
- Improve awareness of other adolescent health services in particular “Shraddha Clinic”

AHD services:

Information (IEC/IPC)	Commodities	Services
Nutrition SRH Mental Health GBV NCD Substance misuse	Sanitary Napkins IFA Albendazole Anti-spasmodic Tab Contraceptives	Registration, General health check-up, (BMI, anaemia and diabetes), Referral to AFHCs/SHRADDHA clinics (for counselling and clinical services)

AHD rolled out in 4 districts (Dhenkanal , Balangir , Bhadrak & Koraput) of Odisha in the beginning phase.

III. Menstrual Hygiene Scheme(MHS)

To address the limited access to sanitary napkins and improve safe menstrual hygiene practices among adolescent, this scheme successfully implemented in all 30 districts of Odisha. Under the scheme, adolescent girls are provided sanitary napkin @ 6/- per packet through ASHA by social marketing. The packet has been branded as “Khusi”.

IV. Weekly Iron Folic acid Supplementation (WIFS)

The Weekly Iron and Folic Acid Supplementation (WIFS) program involves the administration of supervised Weekly Iron-folic Acid Supplements of 100mg elemental iron and 50mg Folic acid using a fixed day approach for school and non school going adolescents respectively, screening of target groups for moderate/severe anemia and referring these cases to an appropriate health facility, biannual de-worming (Albendazole 400mg) for control of helminthes infestation, information and counselling for improving dietary intake and for taking actions for prevention of intestinal worm infestation.

B) Facility Based intervention:

I. Adolescent Friendly Health Clinic (AFHC) in Odisha designated as Shraddha Clinic

The clinics functioning at DHH, SDH & CHC level to provide counselling services on adolescent health issues with referral and linkages with other services like ICTCs, NCDs. Under the RKSK program, the services would be provided keeping in mind the rights of adolescents to privacy, confidentiality, non-judgemental attitude, non-discrimination and acceptance of their health needs as that of any other adult client. Further, in addition to providing services through doctors, counsellors and community based health workers, the programme now aims to reach out to the adolescents through the ‘peer educators’.

6.4 Peer Education Program in Odisha

In Odisha, the peer education programme has been rolled out in 4 districts (Dhenkanal, Bolanagir, Bhadrak & Koraput). In Koraput district Out of 10416 targeted 10181 Peer Educators identified. Hence, 10181 Peer Groups to be formed with adolescent boys and girls under each Peer Educator and 3696 Adolescent Friendly Club Meeting to be organised at Sub Centre level. The Peer Educators are named as “Kishor Sathi” in Odisha. Under the RKSK program, at least four peer educators i.e. two males and two females are selected per ASHA. To ensure coverage of adolescents in schools and out-of-school, four peer educators have been selected in a village, two for in-school (i.e. one male and one female) and two for out-of-school (i.e. one male and one female) adolescents.

Male and female peer educators will:

- Form a group of about 15-20 boys and girls respectively from their community and conduct weekly/monthly one to two hour interactive sessions using the Peer Education kit (PE kit), which includes the activity book, the reference (FAQ) book and other informative material which would help in conducting the session
- Mobilize the adolescents to participate in Adolescent Health Day organized quarterly to inform and educate adolescents with their parents and other community members regarding issues related to adolescent health
- As and when required, refer young people to- Adolescent Friendly Health Clinics (SHRADDHA clinic) and /or Adolescent Helpline and the Adolescent Health Day for health check-ups.
- Under the overall guidance of ANM, PEs will constitute Adolescent Health Club at sub-centre level. These clubs will meet monthly to discuss issues of PEs and get support from other frontline health workers.

Peer Educators are expected to maintain a diary, including a brief overview of each session and the number of adolescents who participated in each session. The diary, bag and other related documents/books provided to each Peer Educators.

For intensive monitoring and hand holding support, involvement of NGOs and Credible organisations reinforce the system for strengthening the PE program. It also ensures quality of PE sessions & AFC meetings by supportive supervision and regular data analysis at each level. NHM views the agreement as public private partnership in the public health system in Odisha. Such partnership is seen as a step towards strengthening the programme.

6.5 Proposal for NGO Intervention:

The Peer Educators are adolescents selected to guide and help other adolescents to face numerous challenges during the growing up phase and use the opportunities available to them in the best possible way. Under the Rashtriya Kishor Swasthya Karyakram, peer educator is a volunteer, who has the ability and willingness to dedicate adequate time to the program and has high motivation, is non-biased, non-judgmental, trustworthy and shows leadership qualities to reach out to adolescents.

The program envisages that peer educators will facilitate the following:

- i) Promote learning from trained peers
- ii) Promote support seeking through trained peers
- iii) Help reduce fears or barriers experienced by adolescents in accessing health services
- iv) Help to establish information and support network among adolescents
- v) Increase access to reliable sources in the community to seek guidance.

6.6 Activities to be undertaken by NGOs under the programme:

The activities of NGOs are broadly based on hand holding support to Peer Educators to strengthen the community based intervention of RKSK programme. Following are the key activities to strengthen the programme.

- Facilitation for formation of adolescent groups under Peer Educator at village level.
- Handholding support to Peer Educators for conducting monthly PE sessions.
- Participation in Adolescent Friendly Club meeting at Sub centre level for support ANMs in conduction of meeting and documentation.
- Assessment quality implementation of AHDs on sample basis using checklist & report to Block /District authority.

6.7 Roles and responsibility of Govt. and NGO:

Government	NGO
<p>I. Orientation of NGO and its staff related to the programme.</p> <p>II. Guide and handholding support as required by the NGO related to the programme.</p> <p>III. Ensuring necessary support from DPMU and BPMU to address operational issues, if any.</p> <p>IV. Release of fund as per the RFP and society norm.</p> <p>V. Monitoring of the programme and external evaluation of the programme by third party.</p>	<p>I. Engagement of required manpower under the Project and their orientation as per plan.</p> <p>II. Provide resources for day to day field visit and support</p> <p>III. Regular rapport building with PRIs, Community leader and influential persons in community along with village level institutions like GKS and AFC</p> <p>IV. Submission of monthly progress report of each activity as per the deliverables.</p> <p>V. Submission of assessment report in sample AHDs</p> <p>VI. Appraisal and advocacy at various levels as per requirement.</p> <p>VII. Submission of UC and required documents on timely basis</p> <p>VIII. Documentation like Peer Session activities, AFC and AHD handholding report in details and streamlining of several report related to the programme and case studies / successes stories related to activities.</p> <p>IX. Accountable for staff management under the project and resolve their related issues.</p>

6.8 Key Deliverables and outcomes :

Target	Deliverables
<p>Total PE group :10181</p> <p>Target: 100%</p> <p>Deliverable: 2 ASHA (8 adolescent groups formation</p>	<ul style="list-style-type: none"> • Preparation of sub centre wise and PE wise micro plan along with block level functionaries/ANM for formation of adolescent groups. • Support ASHAs and Peer Educators for formation of adolescent groups • Sensitise adolescent parents and key stakeholders regarding PEs and formation of groups. • Help the peer educators to form their adolescent

	<p>groups and preparation of group data base</p> <ul style="list-style-type: none"> • Facilitate for a meeting space at village level with discussion with key stakeholders
2. Handholding support to Peers and adolescents for peer educator sessions	
<p>Total Monthly PE sessions: 10181.</p> <p>Target: 60% (6108 sessions to be reached for hand holding support)</p>	<ul style="list-style-type: none"> • Support in preparation of session micro plan in support of ANM for each formed adolescent group. • Discuss with local leaders/PRI and authorities for finalisation of place for meeting eg. AWC/Clubs etc • Help PEs for sharing of venues for meeting and attend sessions to facilitate proper process for conduction of PE sessions. • Facilitate session reporting and compilation
3. Assessment quality implementation of AHDs on sample basis using checklist & report to Block /District authority.	
<p>Total AHD: 10564</p> <p>Target : 15% of Total AHDs (1584 AHDs)</p>	<ul style="list-style-type: none"> • Visit Quarterly AHD site and asses quality of AHD by using checklist. • Midterm/Annual assessment report on AHD
4. Participation in Adolescent Friendly Club meeting at Sub centres for support ANMs on conduction of meeting and documentation	
<p>Total AFCs in a Year : Sub centre :3696(308 SCs X 12 Month)</p> <p>Target : 30 % of AFCs (1108)</p>	<ul style="list-style-type: none"> • Support in preparation of Micro plan for AFC in support of ANM and block functionaries. • Hand holding support to ANMs in quality AFC meeting & prepare reports.

SECTION-7: TERMS & CONDITIONS.

- 7.1 The Selected Agency will have to open a separate saving bank account for this grant-in –aid in any Nationalized Bank. The account will be opened in the name of the project, which shall be operated jointly by at least two office bearers authorized for the purpose by the management committee of the Agency.
- 7.2 The selected Agency has to submit the monthly progress report on the programme to CDM & PHO at district level and RSKS Cell, NHM (rkskodisha@gmail.com) at State level in a standardized format.
- 7.3 The amount of grant should be utilized only for the purpose for which it is sanctioned and the unspent balance of the grants shall be refunded after the close of the financial year.
- 7.4 The Agency will submit monthly statement of expenditure and progress report to the district with a copy to NHM. At the end of the project year, the Agency shall furnish annual report of the project along with the audited reports.

7.5 Period of Partnership

The duration of the project will be initially for **one year**. However, the project may be extended subject to the fund provision approved in NHM PIP and satisfactory performance of the Agency in implementation of Adolescent Health Programme.

7.6. Award of Contract and Agreement

On evaluation of proposals and decision thereon, the selected Agency shall have to execute a bi-partite agreement/MoU with the Zilla Swasthya Samiti within 15 days from the date of acceptance of their bid is communicated to them. **This Request For Proposal along with documents and information provided by the bidder shall be deemed to be integral part of the agreement/MoU. Before execution of the agreement/MoU, the bidder shall have to deposit performance security as per norm.**

7.7 Commencement of Service

The selected Agency shall commence the service within **15 days** from the date of signing of the Agreement/MoU. If the Agency fails to commence the service as specified herein, the district/ authority may, unless it consents to the extension of time thereof may cancel the agreement and forfeit the Performance Security.

7.8. Performance Security

The selected Agency on acceptance must provide the District Authority a **Bank Guarantee for Rs.1, 00,000/- (Rupees One lakh only) per project** in the name of concern Zilla Swasthya Samiti,_____, from a Nationalized Bank valid for a period of minimum one year as performance security of the project which will have to be renewed by the Agency for a further period based on the period of project extension from time to time. **In case of non-submission of performance security or fails to execute the contract by the successful bidder, the EMD furnished by the successful bidder shall be forfeited.**

7.9 Payment

- Grant-in-Aid for the project shall be released to the Agency on the basis of budget provision made in the NHM PIP.
- The disbursement/release of funds by ZSS to the Agency would be in three installments i.e. 30%, 35% and 35% in advance of total project cost.
- The 1st installment i.e. 30% will be released after signing of the MoU and submission of the performance security. The 2nd installment, i.e. 35% will be released on 4th month after receipt of the utilization certificate for 75% of 1st installment. The 3rd installment i.e. 35% will be released after receipt of the utilization certificate for 75% of 2nd installment on 9th month of annual project period.
- The DPMU will make assessment of the project in every six months of operation and annual assessment of the project using the standardized checklist. Further, evaluation of the project may be conducted by an Independent External Agencies after three year's of completion of project period.
- The annual budget of the project may be revised time to time on the basis of approval in the NHM PIP by MoH& FW, Govt. of India.

7.10 Performance Monitoring and Standard of Services

- The performance of the Agency will be monitored largely on the basis of output based indicators specified in the key deliverables at 6.8. These indicators and performance standards can be suitably expanded and/ or modified in the interest of better service delivery to the general public.
- The indicators of health service delivery expected from the Agency are of the minimum standard. The Agency would be encouraged to serve as a role model and to provide services at a much higher standard.
- State shall use other mechanisms such as monthly reporting information and external monitoring process to assess performance on key indicators.
- A half yearly review meeting will be held and attended by appropriate levels of officials of the Government and from the selected agency to review the performance, the anticipated outcome as per the agreement and future service developments and changes.
- At the State level, NHM through its RKSK Cell and PPP Cell will monitor and evaluate the programme. NHM will review the work done under the project and may suggest suitable improvement, mid-course correction and address the difficulties faced by the Agency in running of the Project.
- Concurrent monitoring shall be conducted by NHM representatives along with the District Health Administration on quarterly basis and as when required and submit

the report to appropriate authority besides Mission Director. The District Programme Management Unit (DPMU) will monitor the progress and send monthly report to NHM on a prescribed format.

- Fixed day review meeting of all PPP projects in every month/bi- monthly at District level.
- Third party evaluation of the project by an External Independent Agency.

7.11. ARBITRATION

- If the Agency fails to resolve their dispute or difference by such mutual consultations within thirty days of commencement of consultations, then either the Government or the agency may give notice to the other party of its intention to commence arbitration, as hereinafter provided. The applicable arbitration procedure will be as per the Arbitration and Conciliation Act 1996 of India. In that event, the dispute or difference shall be referred to the sole arbitration of an officer as the arbitrator to be appointed by the Government. If the arbitrator to whom the matter is initially referred is transferred or vacates his office or is unable to act for any reason, he / she shall be replaced by another person appointed by the Government to act as Arbitrator.
- Services under this agreement shall, notwithstanding the existence of any such dispute or difference, continue during arbitration proceedings and no payment due or payable by the Government shall be withheld on account of such proceedings unless such payments are the direct subject of the arbitration.
- Unless such payments are the direct subject of the arbitration.
- Venue of Arbitration: The venue of arbitration shall be the place from where the agreement has been issued.

7.12. BREACH

If either Party breaches the Conditions Contract or these Terms and Conditions and fails to remedy such breach within 30 days of written notice from any other Party calling for the breach to be remedied, then the non-breaching Party shall be entitled, without prejudice to any other rights that it may have in law, whether under the Contract or otherwise, to cancel the Contract without notice or to claim immediate specific performance of all the defaulting parties.

7.13. PENALTY

If the Agency fails to provide services as stipulated in the Service Description at Section-6, the Government shall be entitled to fix penalty which would be deducted from the dues payable to the Agency. However, in case there is no amount is due for payment to the Agency, the penalty shall be recovered from them.

7.14. FORCE MAJEURE

No penalty or damages shall be claimed in respect of any failure to provide service, which the agency can prove to be directly due to a war, sanctions, strikes fire, flood or tempest or Force Majeure, which could not be foreseen or overcome by the agency or to any act or omission on the part of persons acting in any capacity on behalf of agency provided that the agency shall at the earliest bring the same to the notice of the State Government.

7.15. TERMINATION

- Either party may terminate this agreement by giving not less than one months' notice in writing to the other. This notice shall include reasons as to why the agreement is proposed to be terminated.
- The Government may terminate the agreement, or terminate the provision of any part of the Services, by written notice to the Agency with immediate effect if the Agency is in default of any obligation under the agreement, where the default is capable of remedy but the Agency has not remedied the default to the satisfaction of the Government within 30 days of at least two written advice after serving of written notice specifying the default Cine requiring it to be remedied; or
 - the default is not capable of remedy; or
 - the default is a fundamental breach of the agreement
 - If the Government terminates the agreement and then makes other arrangements for the provision of the Services, it shall be entitled to recover from the Agency any loss that had to be incurred due to such sudden termination of agreement.
- Both the parties agree that no further payment would be made to the Agency, even if due till settlement of anticipated loss as a result of premature termination of the agreement.
- The Government reserves the right to terminate the agreement without assigning any reason if services of the Agency create serious adverse publicity in media and prima facie evidence emerges showing negligence of the Agency.
- At the time of termination, the Agency agrees to hand over all moveable and immoveable assets to the authorized representative of the State Government on a mutually agreed date on "as is where is" basis.
- The Agency agrees that no asset will be moved out of the premises or destroyed other than consumables used during the normal course of operation of the facilities, at any time during the period from the effective date to the date of termination without the prior written approval of the State Government.
- The concessionaire agrees that the date of handing over will not be more than 15 calendar days from the date of termination.

7.16. INDEMNITY

- By this agreement, the Agency indemnifies the Government Odisha against damages of any kind or for any mishap/injury/accident caused to any personnel/property of the facilities.

- The Agency agrees that all liabilities, legal or monetary, arising in any eventuality shall be borne by the Agency.

7.17. Redressal of Grievances

The grievance related to the “Implementation of Adolescent Health Programme” is to be redressed at the level of CDM&PHO or District NGO Committee of the District.

7.18. Jurisdiction of Court

Legal proceedings if any shall be subject to the concerned District jurisdiction only.

7.19. Compliance with existing laws:

The Agency agrees to abide by all laws of the land as will be applicable for operation and maintenance of the facility.

7.20. Right to Accept and Reject any Proposal

The District Authority reserves the right to accept or reject any proposal at any time without any liability or any obligation for such rejection or annulment and without assigning any reason.

SECTION 8 – EVALUATION OF THE PROPOSALS

8.1 Evaluation of Technical Proposals

After receipts of the online application, the Desk Appraisal Committee at the District level will conduct online screening of the proposals. Any deficiency in document submission by the bidder pertaining to the eligibility criteria is found out in any of the proposal; the same proposal shall be rejected. Only those bidders who qualify as per the eligibility criteria assessed through online, their bid will be considered for the next stage of online evaluation and award of marks as per the prescribed checklist given below

The bidder has to score **at least 50% or above** score in order to be considered for the preparation of merit list for the project.

SCORING SHEET FOR ASSESSMENT OF THE BIDDER (ONLINE)

Sl.	Areas of assessment	Maximum marks	Means of Verification
1	Registration & Establishment: (7 marks)		
	a) Years of existence of entity registered in Society Registration Act/Indian Trust Act. (5 yrs -10 yrs=1 mark; >10 yrs-15 Yrs=2 marks,>15 yrs - 20 yrs= 3 marks, >20 yrs= 4)	4	Appropriate Registration certificate
	b) Registered under 80G (if yes=1 mark; if No=0 mark)	1	80G Regd. certificate
	c) Governance System (Meeting & minutes of the Executive Committee/ Governing body meeting based on bye-law & Memorandum of the society in the last financial year): (Less than 50% meeting=0 mark; 50%-75% meeting =1 mark; >75% meeting= 2 marks)	2	Proceeding/ Meeting register of GB & EB
2	Field Level Experience: (60 marks)		
	a. Years of experience in implementing projects in any social development sector out of any Government Funding support. (1-3 years= 5 marks; >3 to 5 years=8 marks; > 5 years to 10 years=15 marks; > 10 years= 25 marks)	25	MoU/Agreement/ Authenticated sanctioned with fund released letter.
	b. Years of experience in implementing projects in any social development sector out of any Private Agency Funding support. (1-3 years= 5 marks; >3 to 5 years=8 marks; > 5 years to 10 years=15 marks; > 10 years= 25 marks)	25	MoU/Agreement/ Authenticated sanctioned with fund released letter.

Sl.	Areas of assessment	Maximum marks	Means of Verification
	c. Working experience on social sector in the applied district. (1-2 years= 1 marks; > 2 to 3 years=2 marks; > 3 – 5 years =4 marks, > 5 years = 5 marks)	5	MoU/Agreement/Authenticated sanctioned with fund released letter.
	d. Agency having Multi-State experience in implementation of similar kind of project (Adolescent Health Programme) out of any Govt. Funding support. (1-2 years= 1 marks; > 2 to 3 years=2 marks; > 3 – 5 years =4 marks, > 5 years = 5 marks)	5	MoU/Agreement/Authenticated sanctioned with fund released letter.
	Financial strength: (25 marks)		
3	a. Financial turn over (minimum 25 lakhs per each year in the last three FY as per audit report) (>25-50 lakhs =5 marks; >50-75 lakhs=7 marks; >75 lakhs to <1 Crore =10 marks; 1 Crore & above =15 marks)	15	Annual Financial Statements of last 3 FY audited by a qualified CA/Audit report of last 3 FY.
	b. Fixed assets in the name of the Agency (minimum 10 lakhs assets) as per last audit report. (>10-25 lakhs =4 marks; > 25-35 lakhs=6 marks; >35 to < 50 lakhs=8 marks; 50 lakhs & above=10 marks)	10	Fixed Asset Statement of last FY duly audited by a qualified CA/ Audit report of last FY
	Manpower strength: (05 marks)		
4	Agency having currently own staff in the payroll other than any Funding Project Staff. <ul style="list-style-type: none"> • Minimum 1 Clinical Staff (MBBS /AYUSH /SN/ANM/Pharmacist) =1 mark • Minimum 1 Managerial Staff (Post Graduate qualification)=2 marks • Minimum 1 Accounts Staff = 2 marks 	05	Acquaintance & HR documents.
	Other Strength (Reward & Recognition): (03 marks)		
5	Agency received any National/State/District Level award by any Government /Government Institutions for significant contribution in social development Sector. (District Level=1 marks; State Level=2 marks; National level=3 marks.	03	Certificate received from any Govt./ Govt. Inst.
Total Marks		100	

SECTION 9 – FORMS & FORMATS

FORM –T1

ANNUAL AVERAGE TURN OVER STATEMENT

*(To be furnished in the **letter head** of the Chartered Accountant)*

The Annual Turnover of _____

For the last 3 financial years are given below and certified that the statement is true and correct.

Sl No	Financial Year	Turnover in Lakhs (Rs.)
1	2018-19	
2	2019-20	
3	2020-21	
Average Annual Turnover of last three years (Rs. In lakhs)		

Date:

Signature of Chartered Accountant
(Name in Capital)

Place:

Seal

Membership No

Note:

- 1) To be issued in the **letter head** of the Chartered Accountant with membership No.
- 2) Also attach photocopies of the audited P/L account of **each year highlighting the turnover** in support of that.

FORM –T2

FIXED ASSETS STATEMENT

*(To be furnished in the **letter head** of the Chartered Accountant)*

The Fixed Assets value of _____
for the last financial year statement is given below and certified that the statement is true and correct.

Sl No	Financial Year (last FY)	Fixed Assets value in Lakhs (Rs.)
	2020-21	

Date:

Signature of Chartered Accountant
(Name in Capital)

Place:

Seal

Membership No

Note:

*(i) To be issued in the **letter head** of the Chartered Accountant with membership No.*

FORM –T3

(To be furnished in the proposal)

Affidavit Format for Undertaking by the Agency (On Non Judicial Stamp Paper of relevant value)

Affidavit

I, (Sole Chief Functionary of the Agency), (the names and addresses of the registered Agency), with reference to RFP No. _____ for ____(Name of the RFP)____ do hereby solemnly affirm and sincerely state that;

- a) I or any other office bearer on behalf of the Agency has not been convicted by any court of law in India or abroad for any criminal offence.
- b) The Agency has not been blacklisted by any Government (State or Central) Department or Agency in India, which is in force during the currency of the contract.

I further affirm that, in case of any such evidence in contradiction to above declaration come to the notice of the contracting authority any time during the currency of the contract then our partnership with Zilla Swasthya Samiti /NHM, H&FW Department, Govt. of Odisha under such contract shall be liable for termination in addition to other legal recourse available under the law of the land.

Dated thisDay of, 2021

Name of the Applicant

.....

Signature of the Authorized Person

.....

Name of the Authorized Person

Notary

Regd. No.

(Seal of the Notary)

(Seal of the entity)

FORM –T4

(To be furnished in the proposal)

Affidavit Format for Undertaking certifying that Agency is not blacklisted (On Non Judicial Stamp Paper of relevant value)

Affidavit

This is to certify and confirm that
(The name of the agency with address of the registered office), with reference to RFP No. _____ for (Name of the RFP) , our organization / we or any of our promoter(s) / director(s) are not barred by Department of Health & FW, Govt. of Odisha / or any other entity of Govt. of Odisha or blacklisted by any State Government or Central Government/ Department / Organization in India from participating in the Project/s, either individually or as member of a Consortium as on the _____ (Date of Signing of proposal).

We further confirm that we are aware that, our proposal for the captioned Project would be liable for rejection in case any material misrepresentation is made or discovered at any stage of the Bidding Process or thereafter during the agreement period.

Dated thisDay of, 2021

Authorized Signatory/Signature [*In full and initials*]: _____

Name and Title of Signatory: _____

(Seal of the entity)

**Notary
Regd. No.
(Seal of the Notary)**

FORM T5

(To be furnished in the proposal)

Format for WILLINGNESS/ CONSENT LETTER

I, Mr/Ms. (The name of the agency with address of the registered office), with reference to RFP No. _____ for _____ *(Name of the RFP)* , do herewith giving my consent to sign the agreement abiding by all norms.

This is for favour of your information and necessary action.

Dated thisDay of, 2021.

Authorized Signatory/Signature [*In full and initials*]: _____

Name and Title of Signatory: _____

(Seal of the entity)