



Government of Bagmati Province
Ministry of Health
Health Directorate
Hetauda, Nepal

Re: Request for Expression of Interest

Consulting Service on Management of TB/HIV/AIDS Targeted Intervention

EoI No: HD/Bagmati Province/CS/01/2078-079

Date of Re Publication: 2078/12/10 (24 March, 2022)

The Health Directorate, Bagmati Province, Hetauda, Nepal Re: invites EoI from eligible Non-Governmental Organizations (NGOs) for the management of TB/HIV/AIDS Targeted Intervention under Procedures specified in Public procurement Act and Regulations , Eligible NGOs may obtain further information from the office of Health Directorate, Hetauda, Phone No: 057 524510/ 057524761, email address :hd.prov3@gmail.com

1. Interested NGOs can obtain EoI document free of cost from the office of Health Directorate, Hetauda or can down load from website of Ministry of Health, Bagmati province: <https://www.moh.bagamati.gov.np>
2. EoI must be submitted to the office of Health directorate, Hetauda before 12:00 noon on 14 chaitra, 2078 (28 March, 2022) and it will be opened at 1:00 PM 14 chaitra, 2078 (28 March, 2022) at the office of Health directorate, Hetauda. EoI received after the deadline will be rejected.
3. NGOs already submitted EoI through PPMO's e-GP system can submit additional supporting documents to Health Directorate before above mentioned deadline.

Director



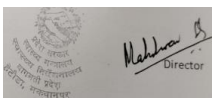
Expression of Interest (EOI)

**Title of Consulting Services: Management of
TB/HIV/AIDS Targeted Intervention**

Method of Consulting Service: *National*

Project Name : Management of TB/HIV/AIDS Targeted Intervention
EOI Number : HD/Bagmati province/NCB/CS/01/2078-079
Office Name : Health Directorate
Office Address : Bagmati Province, Hetauda.
Issued on : 2078-11-02

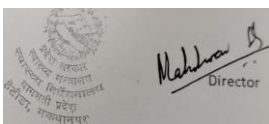
Financing Agency: Government Budget



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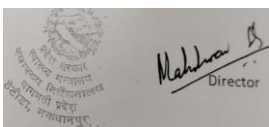
Abbreviations

CV	-	Curriculum Vitae
DO	-	Development Partner
EA	-	Executive Agency
EOI	-	Expression of Interest
GON	-	Government of Nepal
PAN	-	Permanent Account Number
PPA	-	Public Procurement Act
PPR	-	Public Procurement Regulation
TOR	-	Terms of Reference
VAT	-	Value Added Tax



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A. Request for Expression of Interest

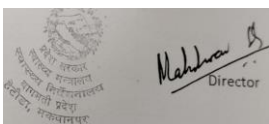
Government of Bagmati Province
Ministry of Health
Health Directorate
Hetauda, Makawanpur

First date of publication: 2078-11-02

Name of Project: Management of TB/HIV Targeted Intervention

1. Government of Nepal (GoN) has allocated grant toward the cost of TB/HIV targeted intervention (Comprehensive package for Migrant and Their Spouse) and intends to apply a portion of this Grant to eligible payments under the Contract for which this Expression of Interest is invited for National consulting service.
2. The Health Directorate, Hetauda, Makawanpur now invites Expression of Interest (EOI) from eligible NGO's ("consultant") to provide the consulting services as TOR of EOI Document.
3. Interested eligible NGO's may obtain further information and EOI document free of cost at the address Health Directorate, Hetauda, Makawanpur during office hours or visit e-GP system www.bolpatra.gov.np/egp.
4. Consultants may associate with other consultants to enhance their qualifications.
5. Expressions of interest shall be delivered online through e-GP system www.bolpatra.gov.np/egp before **2078-11-18 At 12:00 Noon**.
6. In case the last date of obtaining and submission of the EOI documents happens to be a holiday, the next working day will be deemed as the due date but the time will be the same as stipulated.
7. EOI will be assessed based on **Qualification 30%, Experience 55%, and Capacity 15%** of NGO's and key personnel. Based on evaluation of EOI, only shortlisted firms will be invited to submit technical and financial proposal through a request for proposal.
8. Minimum score to pass the EOI is 65% Marks.
9. Any discrepancies or error in the EOI document, EOI notice or any other document will be as per Public procurement act 2063 and Public Procurement Regulation 2064 and other Nepal Law, and the Office of Health Directorate reserves the right to amend and correct at any time.

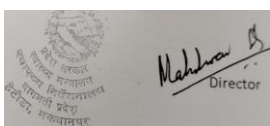
Director



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B. Instructions for submission of Expression of Interest

1. Expression of Interest may be submitted by a sole firm or a joint venture of consulting firms and the maximum number of partners in JV shall be limited to two.
2. Interested consultants must provide information indicating that they are qualified to perform the services (*descriptions, organization and employee and of the firm or company, description of assignments of similar nature completed in the last 7 years and their location, experience in similar conditions, general qualifications and the key personnel to be involved in the proposed assignment*).
3. This expression of interest is open to all eligible **consulting firm/ organization**.
4. The assignment has been scheduled for a period of **2 months** Expected date of commencement of the assignment is **2079-03-01**.
5. A Consultant will be selected in accordance with the **QCBS**.
6. Expression of Interest should contain following information:
 - (i) A covering letter addressed to the representative of the client on the official letter head of company duly signed by authorized signatory.
 - (ii) Applicants shall provide the following information in the respective formats given in the EOI document:
 - *EOI Form: Letter of Application (Form 1)*
 - *EOI Form: Applicant's Information (Form 2)*
 - *EOI Form: Work Experience Details (Form 3(A), 3(B) & 3(C))*
 - *EOI Form: Capacity Details (Form 4)*
 - *EOI Form: Key Experts List (form 5).*
7. Applicants may submit additional information with their application but shortlisting will be based on the evaluation of information requested and included in the formats provided in the EOI document.
8. The Expression of Interest (EOI) document must be duly completed and submitted in sealed envelope and should be clearly marked as "EOI Application for Short-listing for the HIV/AIDS targeted intervention (Comprehensive package for Male Labor Migrant and Their Spouse). Applicants must submit their EOI application through e-GP system by using the forms and instructions provided by the system.
9. The completed EOI document must be submitted on or before the date and address mentioned in the "**Request for Expression of Interest**". In case the submission falls on public holiday the submission can be made on the next working day. Any EOI Document received after the closing time for submission of proposals shall not be considered for evaluation.



C. Objective of Consultancy Services or Brief TOR

Province Government, Bagmati Province, Ministry of Health, Health Directorate, Bagmati Province has decided to conduct the TB/HIV Targeted Intervention Program with Pool fund source. The directorate has been managing the Pool Fund grant to implement the TB/HIV Targeted Intervention program for key affected population from this FY 2076/077. Health Directorate intends to contract qualified and experienced civil society organizations, Non-Governmental Organizations (NGOs), NGO networks, private sector institutions and professional organizations to continue the comprehensive services to the targeted populations. Health Directorate will start the contracting of organizations for delivery of the targeted interventions program for key affected populations, as part of the essential services of the health sector response related to TB/HIV and STI. Therefore, Province Government, Bagmati Province, Ministry of Health, Health Directorate, Bagmati Province, Hetauda invites Expression of Interest from eligible applicants to implement the services for the component as specified in the table below.

The consulting services (“the Services”) include the following component to implement the TB/HIV Targeted Intervention.

SN	Components	Duration	Districts
1	TB/HIV targeted intervention (Comprehensive package for Migrants)	2 months	Makawanpur, Sindhupalchok, Kavre and Nuwakot

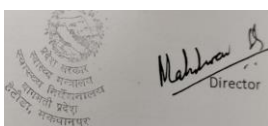
Province Government, Bagmati Province, Ministry of Health, Health Directorate, Hetauda, Makawanpur now invites eligible consulting firms (“Consultants”) to indicate their interest in providing the Services. Interested Consultants should provide information demonstrating that they have the required qualifications and relevant experience to perform the services.

Objectives of the Assignment:

The main objective of this contract is to control and prevent the spread of TB/HIV in migrants and their spouses in Nepal.

The specific objectives are:

- i) 60% of migrants and their spouse at risk in working area are reached with prevention interventions;
- ii) 95% of migrants and spouses reached with prevention interventions will be tested for HIV and know their status,
- iii) Link and enroll all diagnosed HIV positive people to care, support and treatment.
- iv) Ensure all HIV infected individual enrolled in ART have tested for TB.
- v) Test all the presumptive migrants for TB and enroll for treatment if positive



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Scope of Work:

The implementing NGO/firm/consultants will provide the following package of services to high-risk migrants and their spouses taking into account source, transit and destination locations. It will prepare work plan to implement these services:

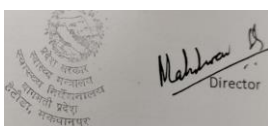
- Increase safer sex practices and improve health care seeking behavior through behavior change interventions using outreach workers
- Provide HIV testing and counselling using updated national guidelines through community-based testing.
- Distribution of condom to the migrants
- Ensure HIV positive people are linked and enrolled in care, support and treatment services
- Address human rights related barriers to services by promoting an enabling environment and reduce HIV related stigma and discrimination among migrants and their spouses.
- Screen TB among the migrants using questionnaire
- Support in TB testing among the presumptive cases and enroll for treatment if diagnosed for TB

Performance Framework

Indicator	Makawanpur	Sindhupalchok	Kavre	Nuwakot	Total
Estimated number of Migrant population	4086	3727	3426	3373	14612
# reached for BCC services	2452	2236	2056	2024	8767
# tested volunable population tested for HIV	2329	2124	1953	1923	8329
# of reactive cases	9	8	8	8	33
# screened for TB	2452	2236	2056	2024	8767
# of people identified as presumptive TB	123	112	103	101	438
# of presumptive case referred for TB testing	123	112	103	101	438
# of TB cases diagnosed	12	11	10	10	44
# of TB cases enrolled for treatment	12	11	10	10	44

Milestone by the end of the first one month:

- i) All project staff have been recruited and trained in the basic principles of HIV interventions for migrants and their spouses.
- ii) Specific staff member is delegated and trained to conduct advocacy for an enabling environment; an advocacy program is begun with key stakeholders;
- iii) Coordination with the relevant stakeholders
- iv) Knowledge and skills in the technical aspects of TB/HIV & STI management and HTC for migrants are improved with appropriate technical assistance;



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- v) Infrastructure, i.e. computer programs, clinics, safe spaces, commodities, are secured for operation
- vi) Materials (printed, video, audio, musical, etc.) used in discussions among migrants and their spouses are collected
- vii) M & E framework developed, including indicators for coverage, exposure to intervention and changes in safer sex behaviors, TB/HIV & STI treatment seeking behaviors, quality of TB/HIV & STI care and effectiveness, of advocacy for an enabling environment.
- viii) Implementation plan developed and shared with health directorate

Reporting Requirements

The Consultant shall submit reports to the Client as follows:

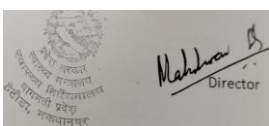
- Submit monthly testing and counseling (T & C) report to respective Palika through HMIS.
- Submit progress report and financial report by using the standard reporting format to Health Directorate within 15 days of project completion

In addition, the following are required:

- (i) The NGO's staff (including peers educators or outreach workers) will maintain a daily log of their activities in sufficient detail to allow a review and assessment by the supervisory personnel of the quality of services, both internal and external; the number of clients per day using the services and the regularity of clients in using services.
- (ii) Maintenance of stock registers to allow monitoring and reporting of stock-outs of essential commodities.
- (iii) Maintenance of a register of clients for HTC services in sufficient detail to allow data analysis and its interpretation but keeping confidentiality of records from persons not related to program management and implementation.
- (iv) Maintain income and expenditure statements of the project proceeds for external annual financial audit and provide copy of the audit report to the Health Directorate or its representative within three months after the completion of a fiscal year.
- (v) The financial audit will be used solely to determine whether the organization is financially viable.
- (vi) Preparation of progress reports to Health Directorate will be as follows :
 - Progress made against the agreed work plan
 - Submit reports as per reporting requirements
 - Challenges encountered and options used to resolved them
 - Relations with stakeholders like IDUs, MSM,/TG, Palika, local police, and community leaders.

Duration:

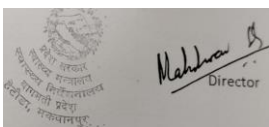
The duration of this assignment will be 2 months after signing the contact.



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Payment:

The Health Directorate, Bagmati Province, Hetauda will pay as per contract signed between Health Directorate and the NGO's.



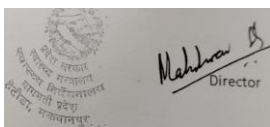
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D. Evaluation of Consultant's EOI Application

Consultant's EOI application which meets the eligibility criteria will be ranked on the basis of the Ranking Criteria.

<u>i) Eligibility & Completeness Test</u>	<u>Compliance</u>
1.Updated Registration Certificate	
2.Updated SWC affiliation certificate	
3.VAT/PAN Registration Certificate	
4.Tax Clearance of Fiscal Year 2077/078	
5.Organization's Constitution	
6.Final Audit Report Of Last Year	
7.Diagram of Organization structure	
8.Admin Finance & HR Policy	
9.Governing Board /Member Profile	
In case of a natural person or firm/institution/company which is already declared blacklisted and ineligible by the GoN, any other new or existing firm/institution/company owned partially or fully by such Natural person or Owner or Board of director of blacklisted firm/institution/company; shall not be eligible consultant.	
EOI Form 1: Letter of Application	
EOI Form 2: Applicant's Information Form	
EOI Form 3: Experience (3(A) and 3(B))	
EOI Form 4: Capacity	
EOI Form 5: Qualification of Key Experts	

<u>ii) EOI Evaluation Criteria</u>	<u>Insert Minimum Requirement if Applicable</u>	<u>Score [Out of 100]</u>
A. Qualification		
<i>Qualification of Key Experts</i>	1. Project manager(1)- Master degree (public health/ community medicine/) 2. M&E officer(1)- Bachelor degree (public health) 3. Finance/ Adm. Assistant (1)- Bachelor degree in finance or accounting 4. Facilitator cum counselor (24) –CMA/ANM/Lab Assistant	12% 8% 5% 5%
<i>Experience of Key Experts</i>	1.Project manager -Minimum 3years of workexperience in similar field of HIV/TB targeted intervention program	



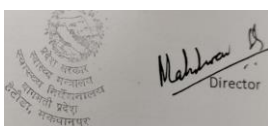
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	2. M&E officer- Minimum 2 years of workexperience in similar field of HIV/TB targeted intervention program 3. Finance/ Adm. Assistant- Minimum 2 years of work experience in similar field of HIV/TB targeted intervention program 4. Facilitator cum counselor (CMA/ANM/Lab Assistant) - Minimum 1 years of work experience in related field.	
B. Experience		
<i>General of consulting firm</i>	Five years of experience in the HIV/TB targeted intervention program	35%
Experience of conducting similar program in specific field	<i>Specific experience of consulting firm within last 7 years. In case of person, specific experience of the person within last 4 years.</i>	10%
<i>Similar Geographical experience of consulting firm</i>	Experience of conducting similar program in different province and /or district of Nepal	10%
C. Capacity		
<i>Financial Capacity¹</i>	Average annual turnover of last three years should be at least 3000000.00	10%
<i>Infrastructure/equipment related to the proposed assignment²</i>	<i>Laptop, Printer, projector/LCD, bike and furniture .</i>	5%

Note : In Case, a corruption case is being filed to Court against the Natural Person or Board of Director of the firm/institution /company or any partner of JV, such Natural Person or Board of Director of the firm/institution /company or any partner of JV such firm's or JV Eoi shall be excluded from the evaluation, if public entity receives instruction from Government of Nepal.

¹ Average turnover required shall not exceed 150% of cost estimate

² This Evaluation criteria should be deleted if infrastructure/equipment are not the part of the proposed assignment.



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E. EOI Forms & Formats

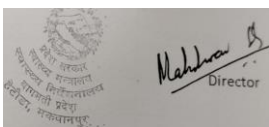
Form 1. Letter of Application

Form 2. Applicant's information

Form 3. Experience (*General, Specific and Geographical*)

Form 4. Capacity

Form 5. Qualification of Key Experts



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1. Letter of Application

(Letterhead paper of the Applicant or partner responsible for a joint venture, including full postal address, telephone no., fax and email address)

Date:

To,

Full Name of Client: _____

Full Address of Client: _____

Telephone No.: _____

Fax No.: _____

Email Address: _____

Sir/Madam,

1. Being duly authorized to represent and act on behalf of (hereinafter "the Applicant"), and having reviewed and fully understood all the short-listing information provided, the undersigned hereby apply to be short-listed by Health Directorate, Bagmati Province, Hetauda Makawanpur as Consultant for TB/HIV targeted intervention (Comprehensive package for Male Labor Migrant and Their Spouse). Attached to this letter are photocopies of original documents defining:

- a) the Applicant's legal status;
- b) the principal place of business;

2. Health Directorate, Bagmati Province, Hetauda, Makawanpur and its authorized representatives are hereby authorized to verify the statements, documents, and information submitted in connection with this application. This Letter of Application will also serve as authorization to any individual or authorized representative of any institution referred to in the supporting information, to provide such information deemed necessary and requested by yourselves to verify statements and information provided in this application, or with regard to the resources, experience, and competence of the Applicant.

3. Health Directorate, Bagmati Province, Hetauda and its authorized representatives are authorized to contact any of the signatories to this letter for any further information.³

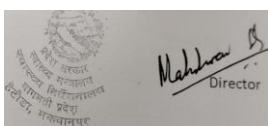
4. All further communication concerning this Application should be addressed to the following person,

[Person]

[Company]

[Address]

³ Applications by joint ventures should provide on a separate sheet, relevant information for each party to the Application.



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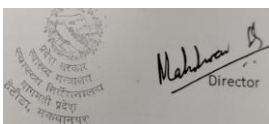
[Phone, Fax, Email]

5. We declare that, we have no conflict of interest in the proposed procurement proceedings and we have not been punished for an offense relating to the concerned profession or business and our Company/firm has not been declared ineligible.
6. We further confirm that, if any of our experts is engaged to prepare the TOR for any ensuing assignment resulting from our work product under this assignment, our firm, JV member or sub-consultant, and the expert(s) will be disqualified from short-listing and participation in the assignment.
7. The undersigned declares that the statements made and the information provided in the duly completed application are complete, true and correct in every detail.

Signed :

Name :

For and on behalf of (name of Applicant or partner of a joint venture):



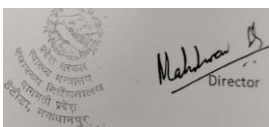
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2. Applicant's Information Form

(In case of joint venture of two or more firms to be filled separately for each constituent member)

1. Name of Firm/Company:
2. Type of Constitution (*Partnership/ Pvt. Ltd/Public Ltd/ Public Sector/ NGO*)
3. Date of Registration / Commencement of Business (*Please specify*):
4. Country of Registration:
5. Registered Office/Place of Business:
6. Telephone No; Fax No; E-Mail Address
7. Name of Authorized Contact Person / Designation/ Address/Telephone:
8. Name of Authorized Local Agent /Address/Telephone:
9. Consultant's Organization:
10. Total number of staff:
11. Number of regular professional staff:

(Provide Company Profile with description of the background and organization of the Consultant and each joint venture partner for this assignment.)



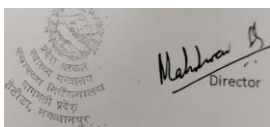
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3. Experience

3(A). General Work Experience

(Details of assignments undertaken. Each consultant or member of a JV must fill in this form.)

S. N.	Name of assignment	Location	Value of Contract	Year Completed	Client	Description of work carried out
1.						
2.						
3.						
4.						
5.						
6.						
7.						



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3(B). Specific Experience

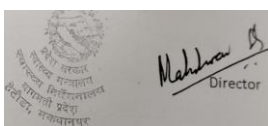
Details of similar assignments undertaken in the previous seven years

(In case of joint venture of two or more firms to be filled separately for each constituent member)

Assignment name:	Approx. value of the contract (in current NRs; US\$ or Euro) ⁴ :
Country: Location within country:	Duration of assignment (months):
Name of Client:	Total No. of person-months of the assignment:
Address:	Approx. value of the services provided by your firm under the contract (in current NRs; US\$ or Euro):
Start date (month/year): Completion date (month/year):	No. of professional person-months provided by the joint venture partners or the Sub-Consultants:
Name of joint venture partner or sub-Consultants, if any:	Narrative description of Project:
Description of actual services provided in the assignment: Note: Provide highlight on similar services provided by the consultant as required by the EOI assignment.	

Firm's Name: _____

⁴ Consultant should state value in the currency as mentioned in the contract



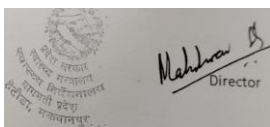
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3(C). Geographic Experience

Experience of working in similar geographic region or country

(In case of joint venture of two or more firms to be filled separately for each constituent member)

No	Name of the Project	Location (Country/ Region)	Execution Year and Duration
1.			
2.			
3.			
4.			
5.			
6.			
7.			



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4. Capacity

4(A). Financial Capacity

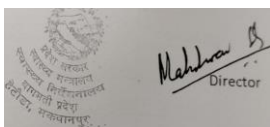
(In case of joint venture of two or more firms to be filled separately for each constituent member)

Annual Turnover	
Year	Amount Currency

- **Average Annual Turnover of Best of 3 Fiscal Year Of Last 7 Fiscal Years**

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(Note: Supporting documents for Average Turnover should be submitted for the above.)

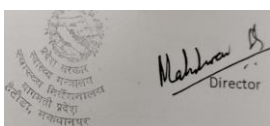


Standard EOI Document

4(B). Infrastructure/equipment related to the proposed assignment⁵

No	Infrastructure/equipment Required	Requirements Description
1.		
2.		
3.		
4.		
5.		

⁵ Delete this table if infrastructure/equipment for the proposed assignment is not required.



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5. Key Experts *(Include details of Key Experts only)*

(In case of joint venture of two or more firms to be filled separately for each constituent member)

SN	Name	Position	Highest Qualification	Work Experience (in year)	Specific Work Experience (in year)	Nationality
1						
2						
3						
4						
5						

(Please insert more rows as necessary)

