



Office of the District Social Security Officer
Keonjhar, Odisha

RFP No: 02

Date: 01.01.2026

REQUEST FOR PROPOSAL

SELECTION OF AGENCIES FOR ESTABLISHMENT AND MANAGEMENT OF A 40 BEDDED DE-ADDICTION AND REHABILITATION CENTRE AT KEONJHAR

Office of the Assistant Director of Sericulture, Keonjhar, Government of Odisha, invites sealed proposals from eligible bidders for "Establishment and Management of a 40 Bedded De-Addiction and Rehabilitation Centre at Keonjhar" under District Mineral Foundation Keonjhar

Bidders fulfilling the prescribed eligibility criteria of the RFP can access and download the complete RFP Document and other details from <https://kendujhar.odisha.gov.in>.

The major events under the bid process are:

Sr. No.	List of Key Events	Critical Dates
1	Date of Issue of RFP	01.01.2026
2	Deadline for Submission of Pre-Proposal Query	06.01.2026 by email
3	Issue of Pre-proposal Clarifications	10.01.2026 via online mode
4	Last Date for Submission of Bid	21.01.2026 by 05.00 PM
5	Date of Opening of Technical Bid	22.01.2026 at 11.00 AM
6	Date of Technical Presentation	To be intimated to shortlisted bidder in pre-criteria stage bidders at later stage
7	Method of Selection	Quality Based Selection

The proposal complete in all respects must reach the undersigned by **Speed Post/Registered Post** only latest by **21.01.2026 before 5.00 PM** in a sealed envelope clearly mentioning on the top of it "Establishment and Management of a 40 Bedded De-Addiction and Rehabilitation Centre at Keonjhar under District Mineral Foundation Keonjhar". The proposals received beyond the last date and time will be rejected. The authority reserves the right to reject any/ all proposals at any stage before awarding of contract without assigning any reason thereof.

Address for Submission of Proposal:

Office of the District Social Security Officer
Collectorate, Keonjhar,
Pin – 758001, Odisha

REQUEST FOR PROPOSAL

FOR

**SELECTION OF AN AGENCY FOR 'ESTABLISHMENT AND MANAGEMENT OF A 40 BEDDED
DE-ADDICTION AND REHABILITATION CENTRE AT KEONJHAR'**

Issuer

District Social Security Officer, Keonjhar

Government of Odisha

Email: dssokeonjhar@gmail.com

Address for Communication and Submission of Documents during Tender Period

District Social Security Officer,

Office of District Social Security, Collectorate Keonjhar, P.O. Keonjhargarh – 758001

Email: dssokeonjhar@gmail.com

DISCLAIMER

The information contained in this Request for Proposal (RFP), hereinafter referred to either as 'Tender' or 'Bid Document' provided to the Bidders, by the Tender Issuing Authority (TIA) which is the District Social Security Officer (DSSO), Keonjhar, on the terms and conditions set out in this Tender document and all other terms and conditions subject to which such information is provided.

The purpose of this Tender document is to provide the Bidder(s) with information to implement the following assignment:

'SELECTION OF AN AGENCY FOR 'ESTABLISHMENT AND MANAGEMENT OF A 40 BEDDED DE-ADDICTION AND REHABILITATION CENTRE AT KEONJHAR'

This Tender document does not purport to contain all the information each Bidder may require. This Tender document may not be appropriate for all persons, and it is not possible for the TIA, or its office staff, employees, or advisors to consider the business/investment objectives, financial situation and particular needs of each Bidder who reads or uses this Tender document.

Each Bidder shall conduct its own investigations and analysis and shall check the accuracy, reliability, and completeness of the information in this Tender document and wherever necessary obtain independent advice from appropriate sources. TIA i.e., DSSO, Keonjhar, or its office staff, 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 Tender document.

DSSO, Keonjhar may, in its absolute discretion, but without being under any obligation to do so, update, amend or supplement the information in this Tender document.

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Section 1: Letter of Invitation

District Social Security Officer (DSSO), Keonjhar
Government of Odisha

Address:

District Social Security Officer (DSSO),
At- Collectorate, Keonjhar
P.O. Keonjhargarh,
District - Keonjhar, Pin-758001
Email: dssokeonjhar@gmail.com

SUBJECT: SELECTION OF AN AGENCY FOR 'ESTABLISHMENT AND MANAGEMENT OF A 40 BEDDED DE-ADDICTION AND REHABILITATION CENTRE AT KEONJHAR'

The District Social Security Officer (DSSO), Keonjhar invites proposals from reputed agencies for **Selection of an Agency For 'Establishment and Management of a 40 Bedded De-Addiction and Rehabilitation Centre at Keonjhar'**.

The Agency will be selected based on Quality Based Selection (QBS) criteria described in this RFP.

The RFP comprises the following sections:

Section 1 – Letter of Invitation

Section 2 – Definitions and Acronyms

Section 3 – Factsheet

Section 4 – Instructions to the Bidders

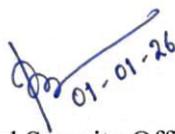
Section 5 – Terms of Reference

Section 6 – Standard Forms

Section 7 – Technical Proposal Forms

Section 8 – Financial Form

Section 9 – Annexures (I – Draft Performance Guarantee, Annexure II – Budget and Fund Flow, Annexure III – Space Plan for the Proposed Centre)


District Social Security Officer (DSSO),
Keonjhar
District Social Security Officer,
Keonjhar.

Section 2: Definitions and Acronyms

Act	:	Narcotic Drugs and Psychotropic Substances (NDPS) Act of 1985 and 2012; Indian Mental Health Care Act 2017; Guidelines for 'Central Sector Scheme for Assistance for Prevention of Alcoholism and Substance (Drugs) Abuse and Social Defence Services', effective from 2018 by Government of India, Ministry of Social Justice and Empowerment etc
AA	:	Alcoholic Anonymous
ADL	:	Activities of Daily Living
Agency	:	Entities or persons that may provide or provides the Services to the Client under the Contract.
AIIMS	:	All India Institute of Medical Sciences
APL	:	Above Poverty Line
Assignment / Job / Project	:	The work to be performed by the selected Agency pursuant to the Contract.
BPL	:	Below Poverty Line
CDM&PHO	:	Chief District Medical & Public Health Officer
Centre	:	De-addiction and Rehabilitation Centre/Nisha Mukti Kendra. Centre that specializes in the evaluation and treatment of drug addiction, alcoholism and associated disorders. Centre which shall admit 'alcohol and other substance abuse persons' and shall provide treatment and rehabilitation of these people in the society.
CV	:	Curriculum Vitae
DAMS	:	Drug Abuse Monitoring System
Day	:	Calendar day
DCPO	:	District Child Protection Officer
DD	:	Demand Draft
DDAP	:	Drug Deaddiction Program
DEO	:	District Education Officer
DMF, Keonjhar	:	District Mineral Foundation, Keonjhar
DPEP	:	Detailed Project Execution Plan
DPEP	:	Detailed Project Execution Plan to be submitted by the selected Agency to DSSO pursuant to the Contract.
DRDA	:	District Rural Development Agency
DSSO/Client	:	District Social Security Officer, Keonjhar, Government of Odisha
DSWO	:	District Social Welfare Officer
DTP	:	Desktop Publication
DWO	:	District Welfare Officer
EC	:	Evaluation Committee
EMD	:	Earnest Money Deposit
EO	:	Executive Officer
FY	:	Financial Year
HIV	:	Human Immunodeficiency Virus
Indigent	:	Any Drug Addict who is not having sufficient means, as determined by the State Government, to maintain oneself.

Inmate	:	A beneficiary duly admitted residing at the Drug De-addiction Centre.
Instructions to applicant Agencies	:	The document which provides interested Agencies with the information needed to prepare their respective Proposals.
IPD	:	Inpatient Department
IRCA	:	Integrated Rehabilitation Centre for Addicts
ITI	:	Industrial Training Institutes
LOI	:	Letter of Invitation, (Section 1 of the RFP) means the 'Letter of Invitation' being sent by the Client.
MIS	:	Management Information System
NA	:	Narcotics Anonymous
NAPDDR	:	National Action Plan for Drug Demand Reduction
NDDTC	:	National Drug Dependence Treatment Centre
NDPS	:	Narcotic Drugs and Psychotropic Substances
NGO	:	Non-Governmental Organization
NISD	:	National Institute of Social Défense
NSF	:	Net Square Feet
NSM	:	Net Square Meter
OPD	:	Outpatient Department
Personnel	:	Professionals and support staff provided by the selected Agency and assigned to perform the Services or any part thereof.
Proposal	:	Pre-Qualification Documents, Technical Proposal and Financial Proposal.
PWDs	:	Persons with Disabilities
QBS	:	Quality Based Selection
RFP	:	Request for Proposal, circulated by the Client for the selection of an Agency.
RRTC	:	Regional Resource and Training Centre
Sq. ft.	:	Square Feet
STD	:	Sexually Transmitted Diseases
TIA	:	Tender Inviting Authority /Client
TOR	:	Information included in the RFP which explains the objectives, scope of work, activities, tasks to be performed, respective responsibilities of the Client and the selected Agency.
UN	:	United Nations
WHO	:	World Health Organization

Section 3: Factsheet

Request for Proposal (RFP) document made available to the applicants	01.01.2026
Last date for receiving queries	06.01.2026
Response to queries	10.01.2026
Last date for receipt of Proposals (Sealed Envelope)	21.01.2026 by 05.00 pm
Opening of Proposals received within the stipulated date	22.01.2026
Address for Opening of Proposals and Pre-qualification check	Zilla Parishad Conference Hall, 2 nd Floor, Zilla Parishad Building, Collectorate, Keonjhar – 758001, Odisha
Technical Presentation	Will be informed separately to shortlisted agency in pre-criteria stage
Address for Technical Presentation	Zilla Parishad Conference Hall, 2 nd Floor, Zilla Parishad Building, Collectorate, Keonjhar – 758001, Odisha
Letter of Award	To be intimated to the selected Agency
Project Start Date	To be intimated to the selected Agency
Cost of Tender / Tender Fees (Demand Draft)	INR 5,000/- (Rupees Five Thousand Only) non-refundable
Earnest Money Deposit (EMD) (Demand Draft)	INR 25,000/- (Rupees Twenty-Five Thousand Only)
Performance Bank Guarantee	3% (Three percent) of the total contract value. Relaxation may be applicable to the agency as per OGFR 2023.
Method of Selection	Quality Based Selection (QBS)
Contact Details	District Social Security Officer, At- Collectorate, Keonjhar P.O. Keonjhar District- Keonjhar, Pin-758001 Email: dssokeonjhar@gmail.com

Note:

1. The Client reserves the right to change any schedule. Please visit the website <https://kendujhar.odisha.gov.in/> regularly for the same.
2. Proposals must be submitted before the date, time and venue mentioned in the Factsheet through Speed/Registered Post or by Courier. Proposals that are received after the deadline will not be considered.

Section 4: Instructions to the Bidders

1. General Instructions

1. Interested Organizations /Agencies must submit the proposal document as per the prescribed guidelines of the RFP.
2. Name of Project: ‘Establishment and Management of a 40 Bedded De-Addiction and Rehabilitation Centre at Keonjhar’. The detailed scope of the project has been described in the Terms of Reference in Section 4.
3. The Proposal consists of three parts (i) Pre-Qualification documents (ii) Technical Proposal (iii) Financial Proposal. Applicants shall submit self-certified hard copy of their Technical Proposal/Bid as well as the Financial Proposal/Bid in sealed envelope, super-scribed with name of the project, nature of document (Pre-Qualification documents/Technical Proposal/Financial Proposal), due date and time.
4. Only technically qualified bidders shall be allowed to participate in financial bid process.
5. Once quoted, the bidder shall not make any subsequent price changes, whether resulting or arising out of any technical/commercial clarifications sought regarding the bid, even if any deviation or exclusion may be specifically stated in the bid. Such price changes shall render the bid liable for rejection.
6. The Price/ rates / quotes by the bidder shall be applicable for the entire contract period.
7. No Consortium or joint venture is allowed for bidding.
8. No subletting / subcontract is permissible.
9. The Proposal submission address is: District Social Security Officer, At- Collectorate, Keonjhar, P.O. Keonjhar District, Pin-758001, Email: dssokeonjhar@gmail.com
10. Last Date for Submission: The Proposal (comprising of Pre-Qualification documents, Technical Proposal and Financial Proposal) must be submitted by registered/speed post, which shall be received by the Client, no later than the 21.01.2026 Time: 05:00 PM
11. The Proposal, technical presentation, and any clarifications provided by the applicant Agencies along with the Terms of Reference provided in the RFP will be the basis for selection and ultimately for a signed Contract with the selected agency.

12. Only One Proposal: An applicant Agency may only submit one proposal. If an applicant Agency submits or participates in more than one proposal, all such proposals shall be disqualified.
13. Proposal Validity: Proposals must remain valid for 180 days after the submission date. During this period, applicant Agencies shall maintain the availability of Professional staff nominated in the Proposal and fully commit to their financial proposal, unchanged. The Client will make its best effort to complete negotiations within this period. Shall the need arise; however, the Client may request applicant Agencies to extend the validity period of their proposals. Applicant Agencies who agree to such extension shall confirm that they maintain the availability of the Professional staff nominated in the Proposal, unchanged, or in their confirmation of extension of validity of the Proposal, applicant Agencies could submit new staff in replacement, who would be considered in the final evaluation for contract award. Applicant Agencies who do not agree, have the right to refuse to extend the validity of their Proposals, under such circumstances, the Client shall not consider such proposal for further evaluation.
14. Tender Fee of Rupees Five Thousand (Rs. 5,000.00), in the form of Demand Draft (DD) drawn in favour of “District Social Security Officer, Keonjhar” and payable at Keonjhar, must be submitted along with the Proposal. Proposals not accompanied by Tender Fee shall be rejected as non-responsive.
15. Earnest Money Deposit (EMD): An Earnest Money Deposit (EMD) of Rupees Twenty-Five Thousand (Rs. 25,000.00), in the form of Demand Draft (DD) drawn in favour of “District Social Security Officer, Keonjhar” and payable at Keonjhar, must be submitted along with the Proposal. Proposals not accompanied by Tender Fee and EMD shall be rejected as non-responsive. No interest shall be payable by the Client for the sum deposited as EMD and no bank guarantee will be accepted in lieu of the EMD. The EMD of the successful and unsuccessful bidders would be returned within one month of signing of the contract. The EMD shall be forfeited of the applicant Agencies in the following events:
 - a. If Proposal is withdrawn during the validity period or any extension agreed by the applicant Agencies thereof.
 - b. If the Proposal is varied or modified in a manner not acceptable to the Client after opening of Proposal during the validity period or any extension thereof.
 - c. If the applicant Agencies tries to influence the evaluation process.
 - d. If the selected Agency withdraws its proposal during negotiations.
16. Performance Bank Guarantee: The selected Agency shall be required to furnish a Performance Bank Guarantee of 3% (Three percent) of the total contract value in the form of an unconditional and irrevocable bank guarantee from a Nationalized/Scheduled bank in India in favour of “District Social Security Officer, Keonjhar” valid for the entire period of contract, i.e., 3 years along with additional 90 days claim period. The bank guarantee must be submitted after award of contract but before signing of contract. The successful bidder must renew the bank guarantee on same terms and conditions for the period up to contract including extension period, if any. Performance Bank Guarantee would be returned only after successful completion of tasks assigned to them and only after adjusting/recovering any dues recoverable/payable from/by the selected

Agency on any account under the contract. On submission of this performance guarantee and after signing of the contract, demand draft submitted towards EMD would be returned in original. The format for the Performance Bank Guarantee is provided in Annexure I.

17. Applicant Agencies shall bear all costs associated with the preparation and submission of their proposals and contract negotiation. The Client is not bound to accept any proposal and reserves the right to annul the selection process at any time prior to Contract award, without thereby incurring any liability to the applicant Agencies.

18. Applicant Clarifications

- a. The Client invites queries from applicant Agencies (if any) as per the details mentioned in the Fact Sheet of this document.
- b. The Applicants must ensure that their queries shall reach DSSO, Keonjhar, on or before last date mentioned in Fact Sheet of this document only through the e-mail of the Client i.e., dssokeonjhar@gmail.com
- c. The queries shall necessarily be submitted in the following format:

Section/Page No.	Content of RFP requiring clarification	Change/clarification requested	Remarks

- d. Client shall not be responsible for ensuring that the Applicant's queries have been received by them.
- e. Any requests for clarifications post the indicated date and time may not be entertained by the Client.
- f. The purpose of query clarification is to provide the Applicants with information regarding the RFP, project requirements, and opportunity to seek clarification regarding any aspect of the RFP and the project.
- g. However, the Client reserves the right to hold or re-schedule the process.

Responses to Queries and Issue of Corrigendum:

- a. The Authorized Representative of the Client will endeavour to provide timely response to the queries. However, no representation or warranty as to the completeness or accuracy of any response made in good faith, nor does undertake to answer all the queries that have been posed by the Applicants.
- b. At any time prior to the last date for receipt of Proposals, the Client may, for any reason, whether at its own initiative or in response to a clarification requested by a prospective Applicant, modify the RFP Document by a corrigendum.
- c. The Corrigendum (if any) and clarifications to the queries from all Applicants will be uploaded on the website <http://kendujhar.odisha.gov.in>. Any such corrigendum shall be deemed to be incorporated into this RFP.
- d. To provide prospective Applicants reasonable time for taking the corrigendum into account, the Client may discretionally extend the last date for the receipt of Proposals.

e. The Client's representative is: DSSO Keonjhar.

19. Conflict of Interest/ Conflicting Relationships:

a. Client requires that the selected Agency shall perform the required services, provide professional, objective, and impartial advice and at all times hold the Client's interest's paramount, strictly avoid conflicts of interest with other assignments or their own interests and act without any consideration for future work. Without limitation on the generality of the foregoing, the agencies, and any of their affiliates, shall be considered to have a conflict of interest and shall not be engaged, under any of the circumstances set forth below:

- Applicant Agencies (including its Personnel and Sub-Agencies) that has a business or family relationship with a member of the Client's staff who is directly or indirectly involved in any part of (i) the preparation of the Terms of Reference of the Assignment, (ii) the selection process for such Assignment, or (iii) supervision of the Contract, may not be awarded a Contract, unless the conflict stemming from this relationship has been resolved in a manner acceptable to the Client throughout the selection process and the execution of the Contract.

b. Applicant Agencies have an obligation to disclose any situation of actual or potential conflict that impacts their capacity to serve the best interest of the Client, or that may reasonably be perceived as having this effect. Failure to disclose said situations may lead to the disqualification of the applicant / selected Agency or the termination of its Contract.

c. No Agency or current employees of the Client shall work as Agency under their own ministries, departments, or agencies.

- **Unfair Advantage:** If an applicant Agency could derive a competitive advantage from having provided other services related to the assignment in question, the Client shall make available to all other applicant Agencies together with this RFP all information that would in that respect give such applicant Agency any competitive advantage over competing applicant Agencies.

- **Fraud and Corruption:** It is required that applicant Agencies participating in the project adhere to the highest ethical standards, both during the selection process and throughout the execution of the contract.

The Client:

d. Defines the terms set forth below as follows:

i. "corrupt practice" means the offering, giving, receiving, or soliciting, directly or indirectly, of anything of value to influence the action of a public official or members of the Evaluation Committee, in the selection process or in contract execution.

ii. "fraudulent practice" means a misrepresentation or omission of facts in order to influence a selection process or the execution of a contract.

iii. "collusive practices" means a scheme or arrangement between two or more applicant Agencies with or without the knowledge of the Client, designed to establish prices at artificial, non-competitive levels.

- iv. “coercive practices” means harming or threatening to harm, directly or indirectly, persons or their property to influence their participation in a procurement process or affect the execution of a contract.
- v. will reject a proposal for award, if it determines that the Agency recommended for award has, directly or through an agent, engaged in corrupt, fraudulent, collusive, or coercive practices in competing for the contract in question.
- e. Applicant Agencies shall be aware of the provisions on fraud and corruption stated in the specific clauses in the Contract.
- f. Applicant Agencies shall furnish information on commissions and gratuities, if any, paid or to be paid to agents relating to this proposal and during execution of the assignment if the applicant Agency is awarded the Contract.

2. Eligibility Criteria

The Agencies/ organization / NGO’s meeting the following criteria can apply for providing said services:

1. The NGO /Agency shall be registered under Society/Trust/ Company Act not for Profit under prevailing law and provision.
2. The organization shall have been registered with Service Tax Authority (GST) / Form 12 AA Certificate along with 80G. If exempted to be registered, documentary proof must be submitted.
3. The Agency shall have been in operation for the past four (4) years as on 31/03/2025 and filed ITRs for the last 3 FYs i.e.,2022-23, 2023-24 and 2024-25.
4. The Agency shall have an average annual turnover of at least Rupees 50 Lakhs over the last three FYs 2022-23, 2023-24 and 2024-25. This must be the individual Agency’s turnover and not that of group companies/organizations. The Audit Report duly certified by a Chartered Accountant shall be submitted with the Bid documents.
5. The Agency must have working experience in the field of development sector. Such experience may include operation of De-addiction Centres, Substance Abuse Rehabilitation Centres, Recovery Homes, as well as residential facilities for Homeless Persons, Disabled Persons (PwDs), Beggar Homes, Maa Gruha, or other similar Government-supported or NGO-run residential rehabilitation institutions for adults, provided the facility involved structured residential care and rehabilitation services.
6. The organization must have adequate staff with relevant qualification, skill and working experience. List of the dedicated staff shall be submitted with the bid.
7. The organization must have good reputation / credentials and have not been blacklisted by Central Govt. /any State Govt. and PSUS. An affidavit declaring non-black list of the organization must be submitted with the bid documents.

8. The organization shall have financial soundness to continue the project even, in the absence of assistance from any Govt. / Donor Agency.

3. Preparation of Proposals/Bids

1. The Proposal as well as all related correspondence exchanged by the applicant Agencies and the Client, shall be written in English.
2. In preparing their Proposal, applicant Agencies are expected to examine in detail the documents comprising the RFP. Material deficiencies in providing the information requested may result in rejection of a Proposal.
3. The Proposal consists of three parts (i) Pre-Qualification documents (ii) Technical Proposal (iii) Financial Proposal.

Pre-Qualification Documents

The Technical Proposals of only those applicant Agencies who meet the pre-qualification criteria in the table below will be opened. Applicant Agencies failing to meet these criteria or not submitting requisite proof for supporting pre-qualification criteria are liable to be rejected summarily. Applicant Agencies shall fill the Pre-Qualification Forms which are included in Section 6 of this RFP. The filled-up Pre-Qualification Form and the supporting documents shall be enclosed in a separate envelope marked as 'Pre-Qualification Documents'.

Sr. No.	Pre-Qualification Criteria	Specific Requirement	Documents Required
1.	Legal Entity	The Agency shall be a not-for-profit organization registered under any of the following: 1. Societies' Registration Act 1860 2. Indian Trust Act 1882 3. Companies Act 1956 4. Any other registration approved by the Indian govt.	Certificate of incorporation Registration Certificate PAN No. GST No. / Form 12 AA Certificate along with 80G Registration certificate of NGO Darpan Portal
2.	Operation	The Agency shall have been in operation for the past three (3) years as on 31/03/2025 and filed ITRs for the last 3 FYs i.e., 2022-23, 2023-24 and 2024-25.	Last three FY's Audited Financial Statement duly signed by a Chartered Accountant for 2022-23, 2023-24 and 2024-25
3.	Financial Capacity	The Agency shall have an average annual turnover of at least Rupees 50 Lakh over the last three FYs 2022-23, 2023-24 and 2024-25. This must be the individual Agency's turnover and not that of group companies/organizations.	Average Annual Turnover Statement

4.	Consortium	No consortium / JVs / associations / subcontracting shall be allowed under this project.	Declaration of submitting as independent Agency from the Authorized Signatory.
5.	Blacklist	The Agency shall not have been blacklisted by any Central / State Government Ministry in India or Public Sector Undertakings or any Government Agencies.	Undertaking by the Authorized Signatory
6.	Experience	<p>The bidder must possess a minimum of one (01) year of proven experience in the management and operation of residential de-addiction and/or rehabilitation centres for adults, including structured accommodation, counselling, care, and rehabilitation services.</p> <p>Such experience may include operation of De-addiction Centres, Substance Abuse Rehabilitation Centres, Recovery Homes, as well as residential facilities for Homeless Persons, Disabled Persons (PwDs), Beggar Homes, Maa Gruha, or other similar Government-supported or NGO-run residential rehabilitation institutions for adults, provided the facility involved structured residential care and rehabilitation services.</p>	Copies of Work Orders/ Sanction Orders/ MOUs/ Engagement Letters/ Completion Certificates or equivalent documentary evidence shall be provided as proof. Documents in other languages shall be supplemented by an English translated copy.
7.	Authorized Representative	A Power of Attorney/ Board Resolution in the name of the person signing the proposal.	Original Power of Attorney (notarized on a Rs. 100/- Bond paper)
8.	Cost of Tender/ Tender Fee (Non-refundable)	The Agency shall furnish a Tender Fee of Rs. 5,000.00 (Rupees Five Thousand Only), in the form of Demand Draft in favour of 'The District Social Security Officer, Keonjhar), and payable at Keonjhar.	Original Demand Draft
9.	Earned Money Deposit (EMD)	The Agency shall furnish an EMD of Rs. 25,000.00 (Rupees Twenty-five Thousand Only), in the form of Demand Draft in favour of The District Social Security Officer, Keonjhar, and payable at Keonjhar.	Original Demand Draft

NOTE: The copies of documents submitted towards Pre-qualification criteria are to be substantiated through production of originals, when required.

Technical Proposal Format and Content

Applicant Agencies are required to fill the **Technical Forms**. The filled-up Tech Forms (in Section 7) shall be enclosed in a separate envelope along with all necessary/supporting documents to justify the claims. The supporting documents must be produced in original by the applicant Agencies, when demanded by the Client. Submission of the wrong type of Technical Proposal will result in the Proposal being deemed non-responsive.

The formats of the Technical Proposal (in Section 7) to be submitted are:

- a) Technical Form 1: Technical Evaluation Form
- b) Technical Form 2: Letter of Proposal Submission
- c) Technical Form 3: Applicant Agency's Organization and Experience
- d) Technical Form 4: Description of Approach, Methodology and Work Plan for Performing the Assignment
- e) Technical Form 5: Team Composition and Task Assignments
- f) Technical Form 6: Curriculum Vitae (CV) of proposed staff
- g) Technical Form 7: Undertaking regarding any Conflicting Activities and Declaration thereof

The Technical Proposal shall not include any financial information. A Technical Proposal containing financial information shall be declared nonresponsive.

Financial Proposals

The Financial Proposal shall be prepared using the attached Financial Form (in Section 8). The financial proposal shall not include any conditions attached to it and any such conditional financial proposal shall be rejected.

• Submission, Receipt and Opening of Proposals

- a) The Proposals (Pre-Qualification, Technical Proposal and Financial Proposal) shall contain no interlineations or overwriting, except as necessary to correct errors made by the applicant Agencies themselves. The undersignee person for the proposal must provide his initial beside such corrections. Submission letters for the Technical Proposal and Financial Proposals shall respectively be in the format specified.
- b) An authorized representative of the applicant Agency shall initial all pages of the original Pre-Qualification, Technical and Financial Proposals. The authorization shall be in the form of an original written power of attorney accompanying the Technical and Financial Proposals.

- c) The Pre-Qualification forms and all documents (as listed in listed in Section 6 including the Tender Fee, EMD, declaration of submission as independent agency and power of attorney) shall be placed in a separate sealed envelope clearly marked “PRE-QUALIFICATION DOCUMENTS”. The Technical Proposal including all the Technical Forms and supporting documents (listed in Section 7) shall be placed in a separate sealed envelope clearly marked “TECHNICAL PROPOSAL”. Similarly, the Financial Proposal including the Financial Form (described in Section 8) shall be placed in a separate sealed envelope clearly marked “FINANCIAL PROPOSAL” All the three sealed envelopes shall be placed in an outer envelope and sealed. This outer envelope shall bear the submission address and shall be clearly marked “DO NOT OPEN, EXCEPT IN PRESENCE OF THE OFFICIAL APPOINTED, BEFORE scheduled Date.
- d) The Client shall not be responsible for misplacement, loss, or premature opening if the outer envelope is not sealed and/or marked as stipulated. This circumstance may also be deemed as fit case for Proposal rejection. If the Proposal is not submitted in separate sealed envelopes duly marked as indicated above, this will constitute grounds for declaring the Proposal non- responsive and deemed as fit case for Proposal rejection.
- e) The Proposals shall be sent to the address indicated and received by the Client no later than the time and the date of submission, or any extension to this date in accordance with corrigendum. Any proposal received by the Client after the deadline for submission shall be returned unopened.
- f) From the time the Proposals are opened to the time the Contract is awarded, the applicant Agencies shall not contact the Client on any matter related to its Technical and/or Financial Proposal. Any effort by applicant Agencies to influence the Client in the examination, evaluation, ranking of Proposals, and recommendation for award of Contract may result in the rejection of the applicant Agencies' Proposal.

4. Evaluation of Technical Proposal

1. An Evaluation Committee (EC) will be constituted by the Client for the purpose of evaluating the proposals.
2. In the first stage of evaluation, only responsive proposals which satisfy the Pre-Qualification Criteria shall be further taken up for evaluation. A Proposal shall be rejected if it is found deficient as per the requirements indicated.
3. The EC shall then evaluate the Technical Proposals based on their responsiveness to the Terms of Reference and by applying the evaluation criteria, sub-criteria specified in the Table below.
4. The Evaluation Committee while evaluating the Technical Proposals shall have no access to the Financial Proposals until the technical evaluation is concluded, and the competent authority accepts the recommendation.
5. Agencies shall also make a presentation before the Evaluation Committee, which will be evaluated.
6. Each responsive Proposal will be given a technical score.
7. A Proposal shall be rejected at this stage if it does not respond to important aspects of the RFP and particularly the Terms of Reference or if it fails to achieve the minimum technical score indicated below.

• **Criteria, sub-criteria, and points system for the Evaluation of Technical Proposals**

Sl.	Evaluation Criteria	Supporting Form	Max. Marks
1.	Turnover	Average Annual Turnover Statement	5
1.1	<p>Average annual turnover of the last three financial years, i.e., 2022-23, 2023-24 and 2024-25</p> <p><u>Scoring criteria</u></p> <ol style="list-style-type: none"> 1. Rs. 30.00 lakhs – Rs. 34.99 lakhs: 1 mark 2. Rs. 35.00 lakhs – Rs. 39.99 lakhs: 2 marks 3. Rs. 40.00 lakhs – Rs. 44.99 lakhs: 3 marks 4. Rs. 45.00 lakhs – Rs. 49.99 lakhs: 4 marks 5. Rs. 50.00 lakhs – Rs. 70.00 lakhs: 5 marks 		5
2.	Experience		20
2.1	The bidder must possess at least five (05) years' experience in social sector and presently active and operational.		5
2.2	The bidder must be a locally registered agency having an established office in Keonjhar District.		5
2.3	<p>The bidder must possess a minimum of one (01) year of proven experience in the management and operation of residential de-addiction and/or rehabilitation centres for adults, including structured accommodation, counselling, care, and rehabilitation services.</p> <p>Such experience may include operation of De-addiction Centres, Substance Abuse Rehabilitation Centres, Recovery Homes, as well as residential facilities for Homeless Persons, Disabled Persons (PwDs), Beggar Homes, Maa Gruha, or other similar Government-supported or NGO-run residential rehabilitation institutions for adults, provided the facility involved structured residential care and rehabilitation services.</p> <ol style="list-style-type: none"> 1. Up to 1 year: 0 marks 2. More than 1 year up to 2 years: 2 marks 3. More than 2 years up to 3 years: 4 marks 	Technical Form 3	10

Sl.	Evaluation Criteria	Supporting Form	Max. Marks
	4. More than 3 years up to 5 years: 6 marks 5. More than 5 years: 10 marks		
3	Personnel*	Technical Form 5 and Technical Form 6	10
3.1	Project Co-Ordinator-cum-Center Head (1) Matching appropriate educational criteria and requisite work experience		4
3.2	In charge Medical Officer/Doctor (1) Matching appropriate educational criteria and requisite work experience		3
3.3	Counsellor/Psychologists (1) Matching appropriate educational criteria and requisite work experience		3
4	Presentation of Approach, Methodology and Work Plan before the evaluation committee	Technical Form 4	15
Total Marks =			50

* Experiences till 31th December 2025 only will be considered for evaluation.

Note: The minimum qualifying mark is: 30 (60 %).

5. Evaluation of Financial Proposal

1. The Financial Proposal is only a declaration of acceptance of the proposed budget (including Management Fee) by the applicant Agencies and is non-evaluative in nature.
2. Financial Proposals of only those applicant Agencies who are technically qualified (i.e., obtain minimum 60 % in Technical Evaluation) shall be opened.

6. Final Selection of Agency and Negotiations

All applicant Agencies who are technically qualified (i.e., obtain minimum 60 % in Technical Evaluation) shall be ranked based on marks obtained in the Technical Evaluation and the Agency scoring the highest marks will be selected by the Client.

- **Negotiations**

Negotiations will be held (if necessary) at the office of DSSO Keonjhar. The invited Agency will, as a pre-requisite for attendance at the negotiations, confirm availability of all Professional staff. Failure in satisfying such requirements may result in the Client proceeding to negotiate with the next-ranked Agency. Representatives conducting negotiations on behalf of the Agency must have written authority to negotiate and conclude a Contract.

1. **Technical Negotiations:** Negotiations will include a discussion of the Technical Proposal including the proposed technical approach and methodology, work plan, organization and staffing, and any suggestions made by the selected Agency to improve the Terms of Reference. The Client and the selected Agency will finalize the Terms of Reference, staffing schedule, work schedule, and reporting. These documents will then be incorporated in the Contract as “Description of Services”. Special attention will be paid to clearly defining the inputs and facilities required from the Client to ensure satisfactory implementation of the assignment. The Client shall prepare minutes of negotiations which will be signed by the Client and the selected Agency.
2. **Financial Negotiations:** After the technical negotiations are over, financial negotiations will be carried out to discuss any changes in financials due to change in scope of work or due to clarification on any aspect of the technical proposal during the technical negotiations. Under ordinary circumstances, the financial negotiation shall not result in any increase in the proposed budget. However, in case of exceptional reasons/circumstances, the client may consider an increase/modification in the budget.
3. **Conclusions of Negotiations:** Negotiations will conclude with a review of the draft Contract. To complete negotiations the Client and the selected Agency will initial the agreed Contract. If negotiations fail, the Client will invite the next-ranked Agency to negotiate a Contract.

7. Award of Contract

1. After completing negotiations, the Client shall issue a Letter of Intent to the selected Agency, and promptly notify all applicant Agencies who have submitted proposals about the decision taken.
2. The selected Agency will sign the contract after fulfilling all the formalities/pre-conditions including submission of the Performance Bank Guarantee within seven (7) working days of issuance of the Letter of Intent.

8. Confidentiality

Information relating to evaluation of Proposals and recommendations concerning awards shall not be disclosed to the applicant Agencies who submitted the Proposals or to other persons not officially concerned with the

process, until the publication of the award of Contract. The undue use by any Agency of confidential information related to the process may result in the rejection of its Proposal.

Section 5: Terms of Reference

1. Background and the need for an Inpatient Alcohol and Substance Abuse De-Addiction and Rehabilitation Centre

Drug and Substance abuse is a serious problem adversely affecting the social fabric of the country. Addiction to drugs not only affects the individual's health but also disrupts their families and the whole society. Regular consumption of various drugs and psychoactive substances leads to drug dependence of the individual. Some drug compounds may lead to neuro-psychiatric disorders, cardiovascular diseases, as well as accidents, suicides, and violence. Therefore, drug abuse needs to be viewed as a psycho-social-medical problem. The Ministry of Social Justice & Empowerment has been implementing the Central Sector Scheme for Prevention of Alcoholism and Substance (Drug) Abuse since 1985-86 with the objective of creating awareness and educate people about the ill-effects of alcoholism and substance abuse and for providing a whole range of community-based services for identification, motivation, counselling, de-addiction, after care and rehabilitation for Whole Person Recovery (WPR) of substance and alcohol users.

Government of India's Narcotic Drugs and Psychotropic Substances (NDPS) Act of 1985 provisions stringent measures for the control and regulations narcotic drugs and psychotropic substances as well as establishment of centers for identification, treatment, etc., of addicts. The Government of India has also brought out a National Policy on Narcotic Drugs and Psychotropic Substances (NDPS) in 2012 to serve as a guide to various Ministries/Departments, State Governments, International Organizations, NGOs, etc. and re-assert India's commitment to combat the drug menace in a holistic manner. The Policy, inter-alia, states the role of the Government for treatment, rehabilitation, and social reintegration of drug addicts. The Policy also lists out the roles of various Ministries/Departments which include conducting National Survey on Drug Abuse, training of doctors in Government Hospitals in de-addiction, supporting other hospitals in setting up de-addiction and treatment facilities, establishing separate facilities for female patients, developing minimum standards of care to be followed by de-addiction centers, inclusion of rehabilitation and social reintegration programme for victims of drug abuse in all Government run treatment centers etc.

As per the 1st National Survey on 'Extend and Pattern on Substance Abuse in India' conducted in 2018 by National Drug Dependence Treatment Centre (NDDTC) of the All India Institute of Medical Sciences (AIIMS), New Delhi:

- Alcohol is the most common psychoactive substance used by Indians followed by Cannabis and Opioids.
- About 16 Crore persons consume alcohol in the country, 3.1 Crore individuals use cannabis products and 2.26 Crore use opioids.
- More than 5.7 Crore individuals are affected by harmful or dependent alcohol use and need help for their alcohol use problems.

- About 25 Lakhs suffer from cannabis dependence and approximately 77 Lakhs individuals are estimated to need help for their opioid use problems.

Keonjhar district comprises of 5.3 per cent of Odisha's landmass with about 4.24 per cent of the population of the state. The district has abundant mineral resources and large forest reserves. Despite the vast natural resources, the district continues to be socio-economically backward. The poverty Head Count Ratio (HCR) of the district is 47 percent. More than 85 percent of the population of the district live in rural areas. The district has high proportion of Scheduled Caste (SC) and Scheduled Tribe (ST) population, of which SC accounts for 11.6 per cent and ST accounts for 45.5 per cent (2011 Census). In the context of Keonjhar, given the travails associated with the mining economy, including poverty and lack of awareness substance and alcohol abuse is a rising problem in the hutting's and slum areas. Therefore, it is imperative that an Inpatient De-addiction cum Rehabilitation Centre be established to ensure access to the patients requiring such services as well rehabilitation of the ex-addicts into the society.

Under point (vi) of sub-section (A) of Section 10 of Odisha District Mineral Foundation Rules, 2015, special programs such as De-addiction cum Rehabilitation Centre can be taken up for welfare of the addicted population and patients. DMF Keonjhar endeavors to adopt a just, humane, and sensitive approach to ensure that the population at large is aware of the ill effects of substance and alcohol abuse and the addicts have access to the Centre which shall provide a whole package of clinical rehabilitative services to ensure a fruitful recovery. The Drug and Substance Abuse De-Addiction and Rehabilitation Centre thus established shall be funded by District Mineral Foundation (DMF), Keonjhar.

2. Project Introduction

A 'De-Addiction and Rehabilitation Centre at Keonjhar with 40 bedded inpatient capacity is being proposed for establishment and operations at Keonjhar. This Centre shall specialize in the evaluation and treatment of drug addiction, alcoholism and associated disorders and will admit 'alcohol and other substance abuse persons' and shall provide treatment and rehabilitation of these people in the society.

3. Project Objectives

The '40 Bedded De-addiction and Rehabilitation Centre' for Alcohol, Substance and Drug Abuse shall provide composite /integrated services for the treatment and rehabilitation of the substance dependent person.

1. Identification of addicts, screening and assessment on alcohol, substance (drugs) use disorder. Special focus would be towards vulnerable groups like children including street children, both in and out of school, children of alcoholics and drug addicts, children of HIV affected parents;adolescent/youth; beggars; eunuchs; released from prison persons; sex-workers, injecting drug users (IUDs); drivers etc.This would require assessing the problem related to addiction and motivating the addict to avail the services at the centre.

2. Detoxification/de-addiction and pharmacological interventions for safe and ethical management of withdrawal symptoms. The addict would be helped to overcome the desire to use drugs even when he is in situations, which were once tempting.
3. Psychosocial interventions including Cognitive Behavioural Therapy, motivational interviewing, and counselling etc. Appropriate amalgamation of individual, group and family counselling, group therapy to be provided via a multi-disciplinary team including Physiotherapist (pain management, to maintain and restore physical mobility, overcome weakness) and Occupational therapist (activity-based interventions for maximizing self-efficacy and competency to perform life skills including Activities of Daily Living) shall be provided. Alternative therapies like Music Therapy, Dance Therapy, Art Therapy, Yoga in combination of exposure to self-help/support groups, and introduction to other recovering addicts to be undertaken.
4. Whole Person Recovery (WPR) of addicts to make them drug free, crime free and gainfully employed. WPR shall be aimed at enabling the addict to achieve total abstinence and improve the quality of their lives by helping them to:
 - Identify areas of necessary change.
 - Become aware of risk factors leading to relapse and evolve positive coping skills.
 - Strengthen inter-personal relationships.
 - Develop a healthy work ethic.
 - Sustain their recovery through follow-up services.
5. Ensure referral and linkage to higher treatment centres in case of deviant behavioural symptoms (like violence, depression, suicidal thoughts, etc., shall be assessed and referred to a psychiatric hospital immediately for availing specialized psychiatric services) or allied, opportunistic medical manifestations (like tuberculosis, hepatitis-C, STDs etc to DHH Keonjhar).
6. After care follow-up, reintegration into the social mainstream, including support and care to families of the addicted person after the discharge of patients from the centre. The outcome of therapy depends largely on the effectiveness of the follow-up efforts towards the whole person recovery (WPR) of the addict, and their reintegration into the community. As an after-care plan, alternative methods for patients who have not recovered shall be devised. A well-defined plan shall be chalked out for 'Care and support to families for co-dependence and rehabilitation'. This can include:
 - Self-help programme and reaching out to the families of the addicts through regular home visits.
 - Family counselling for relapse prevention focused to make the families understand that addiction is a disease and help them develop a caring attitude towards the addicts.
 - The thrust would be to help the addicts as well as their families deal with their negative emotions and improve their quality of life.
7. Vocational Counselling and assistance, Skill Development, and Livelihood support of ex-drug addicts by industry specific skill training, effective networking for availing financial assistance for livelihood generation.

To facilitate the self-sustainability of the addict/dependent family members, efforts shall be focused for the ex-addict to be able to utilize the services available through various Centrally and State sponsored schemes/programmes. Interventions may include relevant vocational training utilising local resources, identification and networking with government recognized vocational centres, ITI's etc to refer recovering/recovered addicts for training. The centre would also maintain a network directory of the specialized services.

8. Community based out-reach activities for prevention and awareness generation via organizing camps with objective of mobilizing the community, identifications of addicts, promote awareness, and collective initiatives towards substance abuse etc. Preventive Education and Awareness Generation programme shall address specific target groups (vulnerable and at-risk groups) in the neighbourhood, educational institutions, workplace, slums, and social welfare organizations with the purpose of sensitising the community about the impact of addiction, and the need to take professional help to treat.

4. Functioning of the De-addiction and Rehabilitation Centre

Patients addicted to Alcohol and Substance Abuse, who require in-patient management, would be admitted in the Centre. While the duration of the in-patient treatment may vary as per the individual needs of the patients, all efforts must be made to provide in-patient treatment for an adequate length of time. During the in-patient stay, following services shall be made available to the patient:

1. Assessment by the Specialist doctor(s) once every day during the morning rounds. Followed by monitoring by GDMO/MBBS doctor, round the clock. Availability of emergency care /on call doctor.
2. Availability of nursing care, medication management, assisting in monitoring and observation, full time.
3. Provision of Medicines, for management of associated conditions / symptoms, management of withdrawal symptoms, pain etc. Opioid subsistence/abstinence therapy as per treatment schedule prescribed by Specialist/Treating doctor in coordination with Mental Health and Substance Abuse Specialist from DHH Keonjhar.
4. Basic laboratory services, which can be supplemented with the lab services from DHH.
5. Multi-disciplinary therapy including Physiotherapy, Occupational Therapy, Psychosocial interventions, Music and Dance Therapy etc.
6. Nutritious and wholesome food to be provided as per doctors advise three times a day to all the patients. Recreation facilities: newspapers, television (if available), indoor games, facility to meet visitors during the specified visiting hours.
7. Skill development, vocational training, and livelihood support of ex-drug addicts: In order to promote meaningful livelihood activities and employment to instil a sense of purpose and self-esteem in individuals to steer them away from drugs, programmers for skill development, vocational training and livelihood support of ex-drug addicts would be carried out. In addition to this, vocational training and livelihood programmes would

also be carried out in collaboration with Ministry of Women and Child Development, Ministry of Skill Development and Entrepreneurship and its affiliated institutes and State Governments etc.

8. Maintenance of clinical records is a very important aspect of the functioning of the Centre. It is not only necessary for adequate clinical care of a patient at the individual level, but it is also necessary for monitoring and evaluation purpose, OPD and IPD files of patients as well as Drug Abuse Monitoring System (DAMS) proforma, Medication dispensing records shall be properly maintained.
9. Prompt referral services to higher treatment centres in case of clinical worsening of symptoms and manifestation of other diseases etc.
10. Computerization of all the records shall be made mandatory. Space to be provided to store records of patients to ensure confidentiality and a system of easy retrieval. Computerization of case histories to be considered and implemented. Addiction related educational material such as posters to be prominently displayed at strategic points. Information pamphlets, hand-outs, and other educational materials (IEC) in the vernacular to be made freely available for the public. The centre can have LCD projector / overhead projector to conduct awareness programmes.
11. Mattresses, pillows, blankets shall be provided for each patient. Bed linen to be changed at least twice a week. Three set of linen shall be available in the centre per patient at any given time.
12. Adequate fire safety measures and evacuation facilities, security provisions via security personnel and CCTV cameras shall be provided.
13. Infrastructure: The centre shall provide such appropriate facilities that would ensure a respectable dignified standard of living for patients. Accordingly, the centre shall provide for the following:
 - a. Space of approximately 60 sqft per patient in the ward, excluding common space and utilities with adequate facilities of bathrooms, toilets etc (one bathroom for ten patients and one toilet for five patients is desirable).
 - b. Each patient shall be provided with locker and storage space for personal belongings.
 - c. Centre shall have adequate space and rooms viz Doctors Consultation room, Basic Laboratory, Store – Drugs and Consumables, Crash Cart area, Clean / Dirty Utility room, Therapy Room/Multipurpose Hall which can be used as common / entertainment cum therapy room, Office for Administrative Staff, Medical Records Storage Room, Kitchen and Dining Area, Visitors Space with common utilities of drinking water and toilets facility adorned by garden/open spaces.
 - d. Initially the centre to be established and continue in a rented/leased house. House with a minimum built-up area/space of a round of 9,600 Sq. ft. for 40 patients to be rented for establishing the centre. Proposed space plan for encompassing the various rooms, utility areas and zones are defined in Annexure III.
 - e. The centre shall be properly ventilated, well-lit, and maintained in a clean manner.
 - f. Drinking water facility shall be available 24 x 7.
 - g. Ensure basic safety of the patients with adequate fire-fighting equipment's.
 - h. Waiting space with seating arrangements for a minimum 5 persons.

- i. Reception, enquiry, and registration counters.
- j. Cubicles / rooms for consultation for physical examination.
- k. Nursing Station with facilities to store drugs, linen, and records of patients.
- l. Facilities with privacy for providing individual counselling, group therapy, re-educative sessions, family classes. They shall be airy with comfortable seating with floor mats /chairs. Blackboard, chalk, and other material to be provided.
- m. Availability of recreational facilities such as books for reading, indoor games - carom, chess, radio, television, and outdoor games/activities.

5. Process of Admission to De-addiction cum Rehabilitation Centre

1. Self-motivated patients can walk-in to the Centre along with their previous medical records and any government issued identity proof such as Aadhaar, Electoral Photo Identity Card (EPIC), Ration Card/ BPL/APL card or any other documents issued by the Central/State Government.
2. Patients can be brought to the nearest CHC/SDH/DHH by Social Workers, Counsellors etc via identification in the awareness camps after due counselling and informing to the immediate family members. Written acknowledgement from family members to be taken before bringing the patients to the CHC/SDH/DHH. The Medical Officer/MOIC/Specialist Doctor at CHC/SDH/DHH shall assess these patients for its eligibility for admission in the De-addiction and Rehabilitation Centre. If assessed to be eligible, these patients shall be referred to the De-addiction and Rehabilitation Centre by the assessing MOIC/Medical Officer/Specialist Doctor.
3. Medical Officer/MOIC/Specialist Doctor of the PHCs, CHCs, SDHs, DHH shall be trained by the De-addiction cum Mental Health Expert at DHH for assessment and identification of patients who require services of the Centre. They shall take detailed 'history taking'; clinically evaluate their physical, mental status; counsel the patients and family members; and refer them to the Centre after informing/consent by patient's family members.

6. Period of Stay

1. While a fixed period cannot be prescribed for the treatment of all the addicts, as the period of treatment will differ with type and severity of addiction (whether alcohol or drugs) and between individual addicts, a period of one month would generally be required for an addict to undergo the various phases of counselling, detoxification, de-addiction, and psychological recovery. However longer or shorter periods of stay may be required, in certain cases, depending upon individual circumstances, for after-care of the addicts, particularly in case of 'Therapeutic Community model' to take care of co-dependence in the family members, psychological rehabilitation of the addict through yoga, meditation, spiritual inputs etc. The period of stay, in no circumstances, shall exceed two months.

2. If necessary, for admission of an addict patient in the Centre for a period of more than one month in view of local or case specific situation, consent to this effect shall be obtained by the Agency/Organization from an Executive Committee consisting of the Substance Abuse cum Mental Health Specialist, DSSO Keonjhar, Project Coordinator cum Project In charge and Medical Officer of the Agency. While doing so, the interest of the patients being served by the centre shall be kept into mind without compromising on the basic components of the overall treatment and rehabilitation. Sakhi Cell in DHH / DCPO /DWO / DSWO /Police authorities shall also be informed, and consent to be obtained in case of juvenile patients, vulnerable patients, women patients etc as applicable.

7. Scope of Services

1. Ensure that all the 'Project Objectives', 'Functioning of the Centre', and as mentioned in Section 4 (3 to 5 and 8) are met.
2. Formulate a Detailed Project Execution Plan (DPEP) for the establishment and operationalization of the Centre. The DPEP shall include details regarding:
 - i. Recruitment, Training Modules and Plan for training of 'De-addiction and Rehabilitation Centre' staff.
 - ii. Standard Operating Procedures (SOP) for day-to-day operation to ensure proper functioning of the Centre along with SOPs for different emergency scenarios.
 - iii. Copy of approvals / permissions required under relevant statutes and rules.
 - iv. Formats for registers, MIS, and other related documentation. The format, content, frequency, and circulation of the MIS shall be decided in consultation with the office of the DSSO and CDM&PHO Keonjhar.
 - v. Implementation schedules for placement of personnel, adoption/development of MIS, and other deliverables under this project.
3. Execute the approved DPEP.
4. Maintain and enforce a geo-tagged attendance system for all the personnel hired under this project.
5. Provide regular updates to the Client through the assigned point of contact in the office of the DSSO.
6. Ensure proper documentation (Medical Records as well as administrative documents, registers, reports etc) as per decided by the executive committee.
7. Undertake annual financial planning of the project, submit necessary bills for release of funds and submit Utilization Certificates for the fund spent.
8. Submit Monthly, Quarterly, and Annual Progress Reports to the office of the DSSO Keonjhar.
9. Undertake periodic appraisal of the project execution status and take/suggest corrective steps/mid-course correction.
10. Identify critical gaps in existing social security systems and recommend any improvements/additions required to amplify the impact of the project to the client.
11. Attend all meetings as required by the office of the DSSO related to progress and assessment of the program.

12. Take feedback from the patients, relatives, staff, act on the complaints/feedback received and take corrective measures.
13. Any other relevant work as directed by the Client. Client can request for any other services as per the provisions of:
 - i. The Scheme for Prevention of Alcoholism and Substance (Drugs) Abuse 2009, NAPDDR
 - ii. Indian Mental Health Care Act 2017.
 - iii. Narcotic Drugs and Psychotropic Substances (NDPS) Act of 1985 and 2012.
 - iv. Minimum Standards of Care, for the Government De-Addiction Centres, 2009 by NDDTC, AIIMS, New Delhi.
 - v. Revised Manual on Minimum Standards of Services for the Programmes under the Scheme for Prevention of Alcoholism and Substance (Drugs) Abuse, 2009, by NISD and RRTC under Government of India, Ministry of Social Justice and Empowerment.
 - vi. Guidelines for ‘Central Sector Scheme for Assistance for Prevention of Alcoholism and Substance (Drugs) Abuse and Social Defence Services’, effective from 2018 by Government of India, Ministry of Social Justice and Empowerment. Scheme of National Action Plan for Drug Demand Reduction, revised w.e.f. 01.04.2020 by Ministry of Social Justice and Empowerment, Govt. of India.

8. Project Duration

1. Initially the duration of the project will be for Three (3) Years i.e., Thirty-Six Months (36 Months) from the date of signing of agreement and may be extended for a further period of Two (2) years i.e., Twenty-Four Months (24 Months) subject to satisfactory performance.
2. The number of De-addiction and Rehabilitation Centres/ Number of beds in De-addiction and Rehabilitation Centre may be extended upon satisfactory performance of the selected agency and decision of the Competent Authority as well as availability of built-up infrastructure/building etc.
3. Commencement: The selected agency shall commence the work with immediate effect from the date of signing of the agreement.
4. Validity: Unless terminated earlier, the agreement shall be valid up to 36 months from the date of execution of agreement and automatically expire after completion of the agreement period.

9. Steps in Project Implementation

Sr. No.	Step	Responsibility	Timeline for Completion
1	Issue of Letter of Intent (LoI)	DSSO	Within 15 working days of finalization of the agency
2	Finalization of the site, procurement, installation of necessary equipment, furniture, etc. deployment of manpower, readiness of the Centre by the agency by approval of DSSO following due	Agency	Within 30 working days of signing of MOU

	process		
3	Preparation of DPEP	Agency	Within 40 working days of signing of MOU
4	Approval of DPEP and formation of the Executive Committee	DSSO and CDM & PHO, Keonjhar	Within 15 working days of receiving the DPEP
5	Execution of the project	Agency	Within 30 to 40 working days of signing of MOU
6	Submission of monthly bills by the Agency to the DSSO	Agency	By the 4 th of every proceeding month
7	Fund release to the selected Agency on submission of bills (monthly)	DSSO	Within 12 working days of receiving of bills from the Agency
8	Supervision, Monitoring and Review of the project (monthly)	DSSO	By 20 th of every month

10. Human Resources

The Centre will be led by trained staff, staffed by multidisciplinary team adequately trained in the delivery of evidence-based interventions for treatments of addicts and a successful rehabilitation. The hiring of the clinical staff can be phased as per the number of patient occupancy in consultation with the Executive Committee. Details of staff requirement per shift is provided in ‘Annexure II.3’.

Sr. No.	Name of Post and Minimum Qualification	Responsibilities
1	General Duty Medical Officer/Doctor Completed MBBS from a recognized institute. Hold a Training Certificate in De-Addiction Medicine from a recognized institute (preferred). At least three years clinical work experience in an in-patient hospital facility.	Assessing patients/inmates with regard to their physical / mental conditions. ‘History taking’, complete examination, complete documentation of medical records etc for all the patients. Presentation of the case findings and discussion of further plan of medications and treatment with the Mental Health cum Substance Abuse Specialist at DHH Keonjhar. Carrying out the treatment plan as per case discussions. Follow the instructions of specialist for their treatment specific regime for each individual patient. Documentation of case history, symptoms, assessment, and evaluation finding, treatment prescribed, tests results etc for complete medical record management. Monitoring of drug administration by the staff nurses providing treatment. Prescribing medication during detoxification, follow up and relapses and handling all medical emergencies e.g., fits and acute psychotic episodes etc. Respond immediately to the clinical emergency and be available for 24 hours on call. Maintain all records of detoxification, emergencies and follow up of patients.

		<p>Coordinating with the counsellors to plan the treatment and recovery of individual patients.</p> <p>Preparing discharge summary, follow-up schedule in consultation with the multi-disciplinary team and explain the medication which are to be continued after discharge.</p> <p>Liaison with specialists in psychiatry, internal medicine, neurology, pathology, bio chemistry etc for referral in case of further treatment.</p>
2	<p>Counsellor /Psychologist* Master's Degree in Counselling/Psychology with a Diploma in Counselling from a government approved university. Atleast four years of experience in counselling practice. Hold a Certificate of three months Training Course in de-addiction counselling by NISD (Preferred). Have knowledge of English and Odiya language.</p>	<p>Assessment of patients/inmate individually as well as along with the clinal team.</p> <p>Understand the behaviour patterns, attitude, capabilities, and limitations of newly admitted inmates and record them in the Medical File.</p> <p>Prepare an effective and practical care plan for the inmate in the light of the information collected through observation, enquiries, and medical reports.</p> <p>Providing motivation, counselling clients, families and significant others and planning treatment strategies from admission to treatment, to follow-up.</p> <p>Conducting group therapy for clients.</p> <p>Maintaining individual case records of patients.</p> <p>Participation in awareness programmes in the community.</p> <p>Functioning in a team to coordinate activities and receive feedback from other members of the team.</p> <p>Conducting re-educative classes, family therapy and group therapy.</p> <p>Recording and documentation of the patient's treatment processes.</p> <p>Visiting and net working with governmental and non-governmental agencies to support the client in treatment and escorting / guiding patients for admission to other organisations.</p> <p>Attend concerned meetings, training and capacity building activities organized as necessary and any other relevant work that may be included during the negotiations or as directed by the Client.</p>
3	<p>Staff Nurse* General Nursing Midwifery (GNM) from recognized medical institution. Registered in State Nursing Council. Atleast two years' experience in hospital.</p>	<p>Assisting with history taking, on admission assessment, daily rounds.</p> <p>Dealing with emergencies and assisting the Medical Officer/doctor on duty.</p> <p>Administering medication, injections etc and monitoring for any adverse drug reaction, following doctors' orders etc.</p> <p>Informing the doctor of any pertinent clinical issue noted during the drug administration or routine monitoring.</p> <p>Maintaining all registers and records of patients during detoxification (e.g., blood pressure and urine sugar etc).</p> <p>Ensuring continuous availability of medicines and keeping the doctor and centre head informed, well in advance in case of less medicine stock.</p> <p>Ensuring safekeeping of medication.</p>

		<p>Ensuring adequate dispensing procedure: confirming patients' intoxication status, patients' identity, dose, current prescription, dispensing medications in directly observed manner and ensuring that no diversion happens.</p> <p>Ensuring adequate record keeping for the medicine and other consumables and stock.</p> <p>Ensure that the inmates' belongings are properly recorded, stored in safe custody, and handed over to them with defined procedures as and when required.</p> <p>Supervising the functioning of ward boys, sweepers.</p>
4	<p>Project Coordinator cum Centre Head and Project Incharge *</p> <p>Master's Degree in Social Work / Social Sciences / Bachelors in Hospital Management & Administration.</p> <p>Experience of managing similar centres for a minimum period of four years or work experience in project planning, implementation, and management.</p> <p>Good knowledge and experience of participatory approaches in program implementation.</p> <p>Demonstrable capability for running such centres and having working knowledge of computers.</p>	<p>Responsible for overall functioning, coordinating administrative responsibilities, and managing the day to day activities of 'De-addiction and Rehabilitation Centre'.</p> <p>Ensure that all the project objectives are met and the Centre functions as per standards mentioned in the RFP.</p> <p>Warrant that the inmates are admitted following due procedure and proper documentation.</p> <p>Actively coordinate between the Client, line departments, Centre staff and Executive Committee, take necessary steps to resolve issues and represent the De-addiction and Rehabilitation Centre at meetings.</p> <p>Follow instructions on matters relating to the administration, running and management of the Centre given by the Client.</p> <p>Supervise the work of other staff and ensure that they are fulfilling their responsibilities.</p> <p>Liaison with Sakhi Cell in DHH / DCPO / DWO / DSWO /Police department and other appropriate administrative authorities in case of legal compliances pertaining to the admission and treatment of juvenile patients, vulnerable patients, women patients etc to the Centre.</p> <p>Inform the DSSO in case of violation of rules and regulations by the inmates and take necessary and immediate action against them as per written direction.</p> <p>Ensure that the unused and un-repairable items are auctioned and remit their value to DMF as per the rules and norms set by the DSSO.</p> <p>Preparation of Annual Report, progress reports, process documents, regulating the legal and statutory compliances, and other reports in a time bound manner and submit the same to DSSO.</p> <p>Organize monthly and other meetings of the Centre and other related agencies as per schedule and follow recommendations/suggestions/orders as mentioned in the minutes of the Executive Committee meeting.</p> <p>Inform the DSSO in case of personal and professional misconduct of the staff and take necessary and immediate action against them as per written direction.</p> <p>Hold responsibility as the Public Relation Officer of the Centre and manage day to day correspondence.</p> <p>Proper maintenance of various files related to records of the inmate(s), staff, stock, finance, assets, etc.</p>

		<p>Encourage and conduct training programs and capacity building activities for volunteers / staff / stakeholders as per the instructions of the Executive Committee.</p> <p>Any other relevant work that may be included during the negotiations or as directed by the DSSO.</p> <p>Liaison with government and non-governmental organisations working in the field of de-addiction.</p>
5	<p>Outreach Worker/Social Worker*</p> <p>Master's in social work / Social Sciences.</p> <p>Certificate Course in De-addiction services (preferred)</p> <p>Atleast two years of work experience in awareness / outreach activities planning, implementation, and management.</p>	<p>Plan, coordinate and carry out the outreach and awareness activities and campaign in coordination with relevant government departments.</p> <p>Providing routine information and services of the Centre for creating awareness in the masses and public.</p> <p>During routine outreach work keeping a lookout for clients suitable for the De-addiction and Rehabilitation Centre.</p> <p>Identification and rescue of potential inmates / patients to be admitted in the Centre for de-addiction especially the vulnerable group i.e., children from hutting's, street children, child labourers, prostitutes, sex workers, ex-prisoners etc and pursue their admission in the Centre with due procedure.</p> <p>Motivational counselling for voluntary de-addiction, rapport building with the potential inmates for the centre and facilitating their access to the Centre.</p> <p>Regular follow-up with inmates and their family members for increasing the impact of Centre for De-addiction and Rehabilitation services provided to the inmates/patient and prevention of relapses.</p> <p>Reporting regularly to the team at Centre for planning further awareness and outreach activities and multidisciplinary treatment approach for the patients/clients.</p>
6	<p>Vocational Rehabilitation Counsellor</p> <p>Master's in social work / Social Sciences / Psychology / Rehabilitation Counselling.</p> <p>Atleast two years' experience of counselling is essential.</p> <p>Candidates with certificate in Career Counselling and atleast one year experience in vocational skill development / counselling / rehabilitation of mental health patients / persons with disabilities / patients with vocational disabilities etc will be preferred.</p>	<p>Interview and assess patients / inmates to determine their employment readiness and the type of work that best suits their skills and qualifications.</p> <p>Evaluate patients / inmates by studying their qualifications, strengths, and weaknesses to help determine suitable employment for them.</p> <p>Assess patients' skills and viability for the workforce to determine if they are ready for part-time or full-time employment positions.</p> <p>Provide vocational counselling and assistance for employability.</p> <p>Engage the inmates / patients in activities which shall enhance skill learning of the commonly employable traits. Ex: Tailoring, Weaving, Candle making, envelope making, saal leaves plate making, paper plates making, typing and basic computer skills, DTP, painting, cooking, gardening, beauty parlour / barber shops, telephone operators, tele-callers, leather goods maker, etc.</p> <p>Follow up with patients and record and add notes to their files to maintain a current record after every session with the patients/inmates and provide group and individual job counselling.</p>

		<p>Liaison with District Employment Exchange/Vocational development centres/skill training institutes/ ITI's etc for referring the ex-addicts for imparting skills for vocational habilitation and livelihood support by industry specific skill training.</p> <p>Assist for livelihood support of ex-drug addicts by effective networking with employable agencies, schemes, programs, contractors, institutions etc.</p> <p>Assist in availing financial assistance for livelihood generation.</p> <p>Facilitate the self-sustainability of the addict/dependent family members by assisting the ex-addicts to utilize the services available through various Centrally and State sponsored schemes/programmes.</p> <p>Maintain a network directory of the specialized vocational skill imparting institutions as well employment exchange agencies and organizations.</p> <p>In case of juvenile ex- addicts, liaison with DCPO / DEO / DWO / DSWO etc as applicable for enrolment in age-appropriate educational intuition / LINK centre / schools etc.</p> <p>In consultation with counsellors, social worker/outreach worker maintain appropriate follow-up for sustained education, vocation, livelihood etc.</p>
7	<p>Physiotherapist/Occupational Therapist</p> <p>Degree in Bachelors in Physiotherapy (B.P. Th) /bachelor's in occupational therapy (B.O. Th).</p> <p>Experience of three years 'work in hospital / healthcare institute.</p> <p>Work experience in Mental Health institutions / De-addiction Centres / Special Schools etc (Preferred)</p>	<p>Visit the Centre every-day for a minimum one hour per day for providing physical exercises in consultation with the treating specialists as per the treatment plan chalked out for each patient.</p> <p>Evaluate the patient's ability to function, help them set short- and long-term goals, and evaluate their likelihood for relapse.</p> <p>Engage each patient in activities which will help patients to re-establish the roles and identities most meaningful to them.</p> <p>Addressing various issues such as development of coping strategies, rebuilding roles, balancing responsibilities, managing money, effectively communicating with others, and developing stress management skills.</p> <p>Participate in multi-disciplinary team approach for sustaining recovery via stress and anger management, modifications to social behaviour, occupational exploration, and development of life skills which will ultimately help in improvements in occupational performance, improve the quality of life, sustain recovery, and prevent relapses.</p> <p>Participate in group Behavioural Change and Family Counselling sessions as well as in awareness camps and outreach activities.</p>
8	<p>Yoga Therapist (Part-time)</p> <p>Diploma in Yoga from a recognized Institute.</p> <p>Experience of atleast 1 year in a healthcare/wellness centre.</p>	<p>Shall visit the Centre atleast 3 times a week for one hour per visit.</p> <p>Conducting physical exercises / yoga for the patients.</p> <p>Conducting meditation and classes on spirituality.</p> <p>Teaching meditation and relaxation techniques.</p> <p>Participation in multidisciplinary team approach for treatment, de-addiction and vocational rehabilitation.</p>

9	<p>Arts/Music/Dance Trainer (Part-time) Diploma/Courses in Arts/Painting/Dance Therapy. Experience of 1 year atleast of working in a healthcare facility Mental Health institutions / De-addiction Centres / Special Schools etc preferred.</p>	<p>Shall visit the Centre atleast 3 times a week for one hour per visit. Conducting arts/painting/ dance/music classes. Teaching various coping mechanisms and productive expression via arts, paper crafts, painting, music, dance etc. Participation in multidisciplinary team approach for treatment, de-addiction and vocational rehabilitation.</p>
10	<p>Peer Educator* 12th Pass and an Ex-drug user with 1-2 years of sobriety. Willing to be trained and work among alcohol and drug using population as well as is possessing qualities like empathy, communication skills. Agrees to refrain from using, buying, or selling drugs. Ready to work for the prevention of harmful alcohol and drug use and relapse.</p>	<p>Participation in outreach and awareness campaign planning and implementation. Creating awareness in the community and motivating for voluntary de-addiction and treatment. Making home visits for patients whilst treatment. Organizing group activities / fun games in the evenings. Assisting the therapy team in whatever areas possible. Giving an exposure to self-help groups (AA / NA) by organizing either a sharing or interaction. Providing details of AA/NA meetings in the location.</p>
11	<p>Multi-purpose Worker / Ward Boy /Attendant 10th Class pass preferably experienced in such centres. Ward Boy shall undergo training by National Institute of Social Defence (NISD).</p>	<p>Assisting the nurses in the detoxification unit. Attending to the personal hygiene of bed- ridden patients. Escorting the patients to labs or other specialists. Monitoring the visitors and checking patients for possession of drugs. Assist in conducting physical exercises for the patients. Assist the staff in office work of the Centre as and when required. Assist in procurement and purchase of the required materials for the Centre. Assist in the disposal of waste, through composting and other means.</p>
12	<p>Sanitary Worker / Housekeeping Staff 10th Class pass preferably experienced in such centres.</p>	<p>Cleaning of the entire centre including toilets and bathrooms. Maintaining the garden or space available around the Centre. Maintaining clean and hygienic environment. Sweep and mopping the Centre atleast twice daily with appropriate disinfectant. Clean and disinfect the toilets atleast thrice daily with 0.5 % active chlorine solution. Take the soiled clothes, used bed sheets and pillow covers from the inmates for washing in the laundry. After washing, assist the inmates in sun drying the clothes and make sure the inmates get their clothes and bed materials back. Any other relevant work that may be included during the negotiations or as directed by the Client.</p>

13	Accountant/Clerk (Part-time) B. Com with knowledge of Computers, MS-Office, and Tally. Working Experience of one year preferred.	Compilation of accounts, book-keeping, computerizing collected database & information, maintaining records & files, maintaining bills, vouchers etc as per provisions of the project. Writing main account / petty cash account and preparing monthly expenditure statement. Ensure supplies and other logistics as per the procurement rules and standards. Ensure that procured items are properly recorded in the Stock Register. Disbursement of cash for salaries and incidental expenditure.
<p>* Must have good communication skills in Odia i.e., to read, write and speak. ** Security services, Food & Beverage/Cooking and Cleaning/Housekeeping services may be outsourced to professional agencies providing these services. Nevertheless, the minimum number of personnel/staffs as mentioned in AnnexureII.3, shall be deployed for avoiding any hinderances in quality services provisions.</p>		

11. Monitoring and Evaluation

1. Review meetings shall be conducted by the office of the DSSO to monitor the implementation of the project. The selected agency shall submit the progress report on monthly basis in the desired format as per given schedule to the office of the DSSO.
2. Quarterly review will be conducted by a team nominated by the Collector-cum-Chairperson and Managing Trustee, DMF to assess the services provided, impact of the Centre upon the community at large, and the compliance of the selected agency to the Scope of Work.
3. DSSO shall undertake an 'Inspection' for evaluation of the Centre and submit the report to Collector-cum-Chairperson and Managing Trustee, DMF. The Inspection shall be carried out after the end of each year (after project initiation) and shall take feedback from the patients of the Centre; inspect the Centre for cleanliness and security; check the geo-tagged attendance of the staffs; inspect the video recording of the CCTV cameras; financial assessments for reconciliation of funds received/expenditure incurred and other related tasks.
4. **The 'Final Evaluation'** shall be carried out by a third-party agency at the end of the project (i.e., 3 years) and will consider the following aspects in addition to those addressed in the yearly audit:
 - a. The project's achievement with respect to the objectives.
 - b. The effectiveness of the Centre for service delivery as envisioned.
 - c. Suitability of the Agency, regarding extension of the contract.
 - d. Impact generated, opportunities of improvements, and recommendations.
5. 'Annual Financial Audit' shall be carried out by the selected agency through an independent auditor and the report shall be submitted to DSSO within three months of completion of a Financial Year. No additional funds shall be provided for this purpose.

6. All assets, equipment and tools procured under the project will be property of the office of the DSSO, Keonjhar and the Agency will have no right over it.
7. Executive Committee: This committee shall comprise of DSSO Keonjhar (Chairperson), Substance Abuse cum Mental Health Specialist from DHH, Keonjhar; Project Coordinator cum Project In charge (Member Convener); and Medical Officer of the agency; and any other member as approved by the District Collector cum Managing Trustee DMF Keonjhar. It shall be responsible for overall execution and management of the project. The process of finalizing the capital/one time purchase items, approval if excess funds if required, phasing of clinical staff hiring, training of staff, admission of patients for more than 1 months etc shall be firstly approved by this committee.

Section 6: Standard Forms

Pre-Qualification Form 1

S. No	Basic Requirement	Specific Requirement	Documents Required	Document Submitted (Yes/No)
1.	Legal Entity	The Agency shall be a not-for-profit organization registered under any of the following: 5. Societies' Registration Act 1860 6. Indian Trust Act 1882 7. Companies Act 1956 Any other registration approved by the Indian govt.	Certificate of incorporation Registration Certificate PAN No. GST No. / Form 12 AA Certificate along with 80G Registration certificate of NGO Darpan Portal	
2.	Operation	The Agency shall have been in operation for the past three (3) years as on 31/03/2025 and filed ITRs for the last 3 FYs i.e.,2022-23, 2023-24 and 2024-25.	Last three FY's Audited Financial Statement duly signed by a Chartered Accountant for 2022-23, 2023-24 and 2024-25	
3.	Financial Capacity	The Agency shall have an average annual turnover of at least Rupees 50 Lakh over the last three FYs 2022-23, 2023-24 and 2024-25. This must be the individual Agency's turnover and not that of group companies/organizations.	Average Annual Turnover Statement	
4.	Consortium	No consortium / JVs / associations / subcontracting shall be allowed under this project.	Declaration of submitting as independent Agency from the Authorized Signatory.	
5.	Blacklist	The Agency shall not have been blacklisted by any Central / State Government Ministry in India or Public Sector Undertakings or any Government Agencies.	Undertaking by the Authorized Signatory	
6.	Experience	The bidder must possess a minimum of one (01) year of proven experience in the management and operation of residential de-addiction and/or rehabilitation centres for adults, including structured accommodation, counselling,	Copies of Work Orders/ Sanction Orders/ MOUs/ Engagement Letters/ Completion Certificates or equivalent documentary evidence shall be provided as proof. Documents in other languages shall be	

		<p>care, and rehabilitation services.</p> <p>Such experience may include operation of De-addiction Centres, Substance Abuse Rehabilitation Centres, Recovery Homes, as well as residential facilities for Homeless Persons, Disabled Persons (PwDs), Beggar Homes, Maa Gruha, or other similar Government-supported or NGO-run residential rehabilitation institutions for adults, provided the facility involved structured residential care and rehabilitation services.</p>	<p>supplemented by an English translated copy.</p>	
7.	Authorized Representative	A Power of Attorney/ Board Resolution in the name of the person signing the proposal.	Original Power of Attorney (notarized on a Rs. 100/- Bond paper)	
8.	Cost of Tender/ Tender Fee (Non-refundable)	The Agency shall furnish a Tender Fee of Rs. 5,000.00 (Rupees Five Thousand Only), in the form of Demand Draft in favour of 'The District Social Security Officer, Keonjhar), and payable at Keonjhar.	Original Demand Draft	
9.	Earned Money Deposit (EMD)	The Agency shall furnish an EMD of Rs. 25,000.00 (Rupees Twenty-five Thousand Only), in the form of Demand Draft in favour of The District Social Security Officer, Keonjhar, and payable at Keonjhar.	Original Demand Draft	

Note: All claims shall be substantiated through production of supporting documents. All supporting documents shall have the period of execution, along with details of the project components, partners, etc. clearly highlighted.

Pre-Qualification Form 2

AVERAGE ANNUAL TURNOVER STATEMENT

The Average Annual Turnover statement of <name of the organisation>, at<address of the organisation>, for the last three financial year are given below and certified that the statement is true and correct.

Sl. No.	Financial Year	Turnover in Crores (Rs.)
1	2022-23	
2	2023-24	
3	2024-25	
4	Average annual turnover statement	

Date:

Signature of Chartered Accountants

Place:

Seal:

Membership No:

Note:

1. To be issued in the letter head of the Chartered Accountant
2. The annual average turnover statement will be invalid without the membership number of the Chartered Accountant

Pre-Qualification Form 3

NON-CONSORTIUM DECLARATION

We, <name of the Organisation>, having our registered office at,<HQ address of the Organisation> hereby declare that we are submitting this proposal in reference to the Request for Proposal for Selection of an Agency for “Establishment and Management of a 40 Bedded De-Addiction and Rehabilitation Centre at Keonjhar”.

We declare that we are submitting this proposal as an independent agency, and not as a part of any consortium/Joint Venture/Associations.

We also acknowledge that in case of misrepresentation of the information, our proposal / contract shall be rejected / terminated at any stage by the client, which shall be binding on us. Any loss or damage to the client, on this count will be compensated by us.

Date:

Authorised Signature

Place:

Name and Title of Signatory

Seal:

Note:

1. To be issued on the letter head of the Organisation

Pre-Qualification Form 4

NON-BLACKLIST UNDERTAKING

We, <Name of the Organisation>, having our registered office at<HQ address of the Organisation> hereby declare that we are submitting this proposal in reference to the Request for Proposal for the “Selection of an Agency for ‘Establishment and Management of a 40 Bedded De-Addiction and Rehabilitation Centre at Keonjhar’.

We declare that we have not been blacklisted by any Ministry / Department / Public Sector Undertaking or any other agency of the Central/State Government.

We declare that there are no proceedings, disputes or enquiries pending against us in connection with cheating, misappropriation of funds or exploitation of beneficiary.

We also acknowledge that in case of misrepresentation of the information, our proposal / contract shall be rejected / terminated at any stage by the client, which shall be binding on us. Any loss or damage to the client, on this count will be compensated by us.

Date:

Authorised Signature

Place:

Name and Title of Signatory

Seal:

Note:

1. To be issued on the letter head of the Organisation

Section 7: Technical Proposal Forms

Technical Form 1: Technical Evaluation Form

Sr. No.	Evaluation Criteria	Supporting Technical Form		
1.	Turnover	Average Annual		
1.1	<p>Average annual turnover of the last three financial years, i.e., 2022-23, 2023-24 and 2024-25</p> <p><u>Scoring criteria</u></p> <p>1. Rs. 30.00 lakhs – Rs. 34.99 lakhs: 1 mark 2. Rs. 35.00 lakhs – Rs. 39.99 lakhs: 2 marks 3. Rs. 40.00 lakhs – Rs. 44.99 lakhs: 3 marks 4. Rs. 45.00 lakhs – Rs. 49.99 lakhs: 4 marks 5. Rs. 50.00 lakhs – Rs. 70.00 lakhs: 5 marks</p>	Turnover Statement as mentioned in Pre-Qualification Form 2	<i>[Provide average annual turnover for the last three financial years]</i>	
2.	Experience	Tech Form 3		
2.1	<p>The bidder must possess at least five (05) years' experience in social sector and presently active and operational.</p> <p>(Marks awarded will be dependent on the summation of number of such projects, i.e., $P = P1 + P2 + P3 + \dots + Pn$)</p> <p><u>Scoring criteria</u></p> <p>Project less than 1 = 0 marks 1 Project to 3 Projects = 1 marks 3 Projects to 5 Projects = 5 marks More than 5 Projects = 7 marks</p>		<i>Name of Drug De-addiction and Rehabilitation Centre Home</i>	<i>No. of Inmates</i>
			<i>Project 1-P (1)</i>	<i>N (1)</i>
			<i>Project 2-P (2)</i>	<i>N (2)</i>
			<i>Project 3-P (3)</i>	<i>N (3)</i>
		
2.2	The bidder must be a locally registered agency having an established office in Keonjhar District.			
2.3	<p>Experience in the management and operation of residential de-addiction and/or rehabilitation centres for adults, including structured accommodation, counselling, care, and rehabilitation services.</p> <p>Such experience may include operation of De-addiction Centres, Substance Abuse Rehabilitation Centres, Recovery Homes, as well as residential facilities for Homeless Persons, Disabled Persons (PwDs), Beggar Homes, Maa Gruha, or other similar Government-supported or NGO-run residential</p>		<i>Project name</i>	<i>No. of Years</i>
			<i>Project 1</i>	<i>Y1</i>
			<i>Project 2</i>	<i>Y2</i>
			<i>Project 3</i>	<i>Y3</i>
		

Sr. No.	Evaluation Criteria	Supporting Technical Form		
	rehabilitation institutions for adults, provided the facility involved structured residential care and rehabilitation services. (Marks awarded will be dependent on the summation of years of experience in individual projects, i.e., $Y = Y1 + Y2 + Y3 + \dots + Yn$) <u>Scoring criteria</u> 6. Up to 1 year: 0 marks 7. More than 1 year up to 2 years: 2 marks 8. More than 2 years up to 3 years: 4 marks 9. More than 3 years up to 5 years: 6 marks 10. More than 5 years: 10 marks		<i>Project (n)</i>	<i>Y(n)</i>
3	Personnel*	Technical Form 5 and Technical Form 6		
3.1	Project Coordinator cum Center Head (1) Matching appropriate educational criteria and requisite work experience = 4 marks		<i>CV attached? (Yes/No)</i>	
3.2	Incharge Medical Officer/Doctor (1) Matching appropriate educational criteria and requisite work experience = 3 marks		<i>CV attached? (Yes/No)</i>	
3.3	Counsellor / Psychologist (1) Matching appropriate educational criteria and requisite work experience = 3 marks		<i>CV attached? (Yes/No)</i>	
4	Presentation of Approach, Methodology and Work Plan before the evaluation committee Total 15 Marks	Technical Form 4		

* Experiences between 1stApril 2015 to 31thMarch 2025 only will be considered for evaluation. *

Note: All claims shall be substantiated through production of supporting documents. All supporting documents shall have the period of execution, along with details of the project components clearly highlighted.

Technical Form 2: Letter of Proposal Submission

**To,
District Social Security Officer,
At- Collectorate, Keonjhar
P.O. Keonjhar District, Pin-758001**

Dear Sir,

We, the undersigned, offer to execute the assignment - **‘Establishment and Management of a 40 Bedded De-Addiction and Rehabilitation Centre at Keonjhar’** in accordance with your Request for Proposal dated _____. We are hereby submitting our Proposal, which includes the Pre-Qualification Documents, Technical Proposal and Financial Proposal, sealed in separate envelopes.

We hereby declare that all the information and statements made in this Proposal are true and accept that any misinterpretation contained in it may lead to our disqualification. Our Proposal is binding upon us and subject to the modifications resulting from Contract negotiations.

We undertake, if our Proposal is accepted, to initiate the services related to the assignment not later than the date indicated.

We understand you are not bound to accept any Proposal you receive.

We remain,

Yours sincerely,

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

Name and Title of Signatory: _____

Name of Agency: _____

Address: _____

Location: _____ Date: _____

Technical Form 3 – Applicant Agency’s Organization and Experience

1. Name of the Organization: As mentioned in the Registration Certificate. Also attach the certification copy (along with page number in the proposal).
2. Ownership details:
3. Date and Place of Registration/Establishment:
4. Address of Head Office:
5. Correspondence Address (if different from above):
6. Telephone Number and Email id:
7. Name, contact number and email id of Authorized person for this project:
8. Name, contact number and email id of the Chief Officer/Head of the Organization:
9. Work Experience for Operations and Management of Drug De-addiction and Rehabilitation Centre:

Sr. No.	Name of the Project*	Number of Beneficiaries	Name of the Funding Agency	Source of funding (Govt. / Private)	Project Start Date	Project End Date	Project Cost (In Rs)	Major Task Carried Out
1								
2								
3								

(*Attach sanction order as documentary proof along with page number in the proposal and add more lines as required)

10. Work Experience in field of Development Sector (i.e., managing residential accommodation facilities for adults, like Old Age Home / Urban Homeless Centres / Rehabilitation Centres for Homeless and Disabled Persons (PwDs) / Beggar Home / Maa Gruha, etc or any other residential setups with minimum 25 inmates or working for vulnerable section of the society):

Sr. No.	Name of the Project*	Number of Beneficiaries	Name of the Funding Agency	Source of funding (Govt. / Private)	Project Start Date	Project End Date	Project Costs (In Rs)	Major Task Carried Out
1								
2								
3								

(*Attach sanction order as documentary proof along with page number in the proposal and add more lines as required)

11. Any award/recognition for execution of similar projects: Attach copy and mention page number in proposal.
12. Details of Tender Fees DD: Attach copy and mention details here
13. Details of EMD DD: Attach copy and mention details here

Note 1: Information provided in this form shall sufficiently support/justify the criteria of the Technical Qualification Form.

Note 2: All the claims shall be substantiated through production of supporting documents. All supporting documents shall have the period of execution, along with details of the project components clearly highlighted.

Technical Form 4 – Description of Approach, Methodology and Work Plan for Performing the Assignment

[Technical approach, methodology and work plan are key components of the Technical Proposal. You are suggested to present your Technical Proposal divided into four chapters viz ‘Technical Approach & Methodology, Work Plan, Organization & Staffing, Challenges Envisaged’]

- a) **Technical Approach and Methodology:** In this chapter, you shall explain your understanding of the objectives of the assignment, approach to the services, methodology for carrying out the activities and obtaining the expected output, and the degree of detail of such output. You shall highlight the problems being addressed and their importance and explain the technical approach you shall adopt to address them. You shall also explain the methodologies you propose to adopt and highlight the compatibility of those methodologies with the proposed approach.
- b) **Work Plan:** In this chapter, you shall propose the main activities of the assignment, their content and duration, phasing and interrelations, milestones (including interim approvals by the Client), and delivery dates. The proposed work plan shall be consistent with the technical approach and methodology, **showing understanding of the TOR** and ability to translate and implement **each of the objectives, services, and care to be provided, and scope of work** into a feasible working plan. A list of the final documents, including reports, drawings, and tables to be delivered as final output, shall be included here. The work plan shall be consistent with the Work Schedule.
- c) **Organization and Staffing:** In this chapter, you shall propose the structure and composition of your team. You shall list the main disciplines of the assignment, the key expert responsible, and proposed staff. The details of these resources shall be given in Technical Form – 5 and 6.
- d) **Challenges Envisaged:** In this chapter, you shall list out some major challenges that could arise while implementation of the project. Also, the proposed action plan/road map and quality control mechanisms that you shall contemplate to follow while overcoming these challenges.

The agencies who are selected for technical presentation shall adhere to the following format while presentation:

Maximum Number of Slides	Slide Heading	Maximum Marks (15)	Maximum Time for Presentation
1 to 3	Technical Approach and Methodology	5	5 minutes
4 to 6	Work Plan and Staffing	5	5 minutes

7 to 10	Challenges Envisaged	5	5 minutes
	Question & Answer Session		5 minutes

Note 1: Information provided in the form shall correspond to the Technical Presentation.

Note 2: All the claims shall be substantiated through production of supporting documents.

Technical Form 5 – Team Composition and Task Assignments

Professional Staff			
Name of Staff	Qualification	Position Assigned	Years of experience in similar Job Description

Note:

1. Information provided in the form shall correspond to Key Personnel criteria of the Technical Qualification form.
2. All the claims shall be substantiated through production of supporting documents.
3. Experiences between 1stApril 2015 to 31thMarch 2025only will be considered.

Technical Form 6 - Curriculum Vitae (CV) of Proposed Staff

	Proposed Position			
	Name of Agency			
	Name of Staff			
	Date of Birth			
	Education			
Name of Institution	Degree(s) or Diploma(s) obtained:	Date/Year of Qualifying		
	Membership in Professional Associations/ Trainings attended			
	Languages			
Language	Reading	Speaking	Writing	
English				
Odia				
Hindi				
Any other				
	Employment Record			
From	To			
Employer				
Position/s held				
Responsibilities/ Activities performed:				
From	To			
Employer				
Position/s held				
Responsibilities/ Activities performed				
From	To			
Employer				
Position/s held				
	Work Undertaken that Best Illustrates Capacity to Handle the Tasks Assigned			
	Name of assignment or project			
	Year			
	Location			
	Client			
	Main project features:			
	Position/s held			
	Responsibilities/Activities performed			

	Name of assignment or project
	Year
	Location
	Client
	Main project features
	Position/s held
	Responsibilities/Activities performed
	Certification
	I, the undersigned, certify that to the best of my knowledge and belief, this CV correctly describes me, my qualifications, and my experience. I understand that any wilful misstatement described herein may lead to my disqualification or dismissal, if engaged.
	Signature

Note:

1. Information provided in the form shall correspond to the Key Personnel Criteria of the Technical Qualification form.
2. All the claims shall be substantiated through production of supporting documents by attaching photocopies of educational documents and experience certificates.
3. Experiences between 1stApril 2015 to 31thMarch 2025only will be entertained.

**Technical Form7 – Undertaking Regarding any Conflicting Activities and Declaration
Thereof**

Are there any activities carried out by your Agency which are of conflicting nature as mentioned in para 19 of Section 5. If yes, please furnish details of any such activities.

If no, please certify,

[We hereby declare that our Agency has not indulged in any such activities which can be termed as the conflicting activities under para 19 of the Section 5. We also acknowledge that in case of misrepresentation of the information, our proposals /contract shall be rejected / terminated by the Client which shall be binding on us.]

Authorized Signature [In full and initials]:

Name and Title of Signatory:

Name of Agency:

Address:

Section 8: Financial Form

[Location, Date]

To,
District Social Security Officer,
At- Collectorate, Keonjhar
P.O. Keonjhar District, Pin-758001

Dear Sir,

We, the undersigned, offer to provide services for the assignment '**Establishment and Management of a 40 Bedded De-Addiction and Rehabilitation Centre at Keonjhar**' in accordance with your Request for Proposal (RFP) dated _____ and our Technical Proposal.

We fully accept the proposed budget (including the Management Fee) in the RFP. The proposed budget (including the Management Fee) shall be binding upon us subject to the modifications resulting from Contract negotiations, up to expiration of the validity period of the Proposal.

We understand that the management fee will be released on the yearly audit as specified in Section 4para 10 of the RFP documents.

We hereby certify that we have taken steps to ensure that no person acting for us or on our behalf will engage in bribery. We undertake that, in competing for (and, if the award is made to us, in executing) the above contract, we will strictly observe the laws against fraud and corruption in force in India namely "Prevention of Corruption Act, 1988".

We understand you are not bound to accept any Proposal you receive.

We remain,

Yours sincerely,

Authorized Signature [In full and initials]: _____

Name and Title of Signatory: _____

Name of Agency: _____

Address: _____

Section 9: Annexures

Annexure- I: Draft Performance Bank Guarantee

(To be issued by a Bank _____)

This deed of Guarantee executed at _____ by _____ (Name of the Bank) having its Head/Registered Office at _____ (hereinafter referred to as “the Guarantor”) which expression shall unless it be repugnant to the subject or context thereof include its heirs, executors, administrators, successors, and assigns.

In favor of **District Social Security Officer, Keonjhar** having its office at (Keonjhar) (hereinafter called DSSO, Keonjhar, which expression shall unless it be repugnant to the subject or context thereof include its heirs, executors, administrators, successors, and assigns).

Whereas _____, an organization registered/formed under _____ (specify the applicable law) and having its registered office at _____ (hereinafter referred to as the Agency) has been, consequent to conduct and completion of a competitive bidding process in accordance with the Request for Proposal (RFP) document No. ___ dated _____ issued by **District Social Security Officer (DSSO), Keonjhar**, selected for the Agreement by Collector & Chairperson cum Managing Trustee, DMF Keonjhar as more specifically defined in the aforementioned Document including statement of work and the Agreement executed between the **DSSO, Keonjhar** and Agency .

The Agreement requires the Agency to furnish an unconditional and irrevocable Bank Guarantee for an amount of ₹ _____/- Rupees _____ only) by way of security for guaranteeing the due and faithful compliance of its obligations under the Agreement.

Whereas, the Agency approached the Guarantor, and the Guarantor has agreed to provide a Guarantee being these presents.

Now this Deed witnessed that in consideration of the premises, we, _____ Bank hereby guarantee as follows:

1. The Agency shall implement the project– ‘**Establishment and Management of a 40 De-Addiction and Rehabilitation Centre at Keonjhar**’ in accordance with the term and subject to the conditions of the Agreement and fulfil its obligations there under
2. We, the Guarantor, shall, without demur, pay to **DSSO, Keonjhar** an amount not exceeding Rs. _____ (Rupees _____ only) within 7(seven) days of receipt of a written demand from **DSSO, Keonjhar** stating that the Agency has failed to fulfil its obligations as stated in Clause 1 above.
3. The above payment shall be made by us without any reference to the Agency or any other person and irrespective of whether the claim of the **DSSO, Keonjhar** is disputed by the Agency or not.
4. The Guarantee shall come into effect from _____ (Start Date) and shall continue to be in full force and effect till the earlier of its expiry at 1700 hours Indian Standard Time on _____ (Expiry Date) (both dates inclusive) or till the receipt of a claim, from the **DSSO, Keonjhar** under this Guarantee, which is one

month after the expiry of performance guarantee, whichever is earlier. Any demand received by the Guarantor from **DSSO, Keonjhar** prior to the Expiry Date shall survive the expiry of this Guarantee till such time that all the moneys payable under this Guarantee by the Guarantor to **DSSO, Keonjhar**.

5. In order to give effect to this Guarantee, **DSSO, Keonjhar** shall be entitled to treat the Guarantor as the principal debtor and the obligations of the Guarantor shall not be affected by any variations in the terms and conditions of the Agreement or other documents by **DSSO, Keonjhar** or by the extension of time of performance granted to the Agency or any postponement for any time of the power exercisable by **DSSO, Keonjhar** against the Agency or forbear or enforce any of the terms and conditions of the Agreement and we shall not be relieved from our obligations under this Guarantee on account of any such variation extension forbearance or omission on the part of **DSSO, Keonjhar** to the Agency to give such matter or thing whatsoever which under the law relating to sureties would but for this provision have effect of so relieving us.
6. The Guarantee shall be irrevocable and shall remain in full force and effect until all our Obligations under this guarantee are duly discharged.
7. The Guarantor has power to issue this guarantee and the undersigned is duly authorized to execute this Guarantee pursuant to the power granted under_____.

In witness, whereof the Guarantor has set its hands hereunto on the day, month and year first here-in-above written.

Signed and Delivered by_____ Bank by the hand of Shri _____its _____and authorized office.

Authorized Signatory _____ Bank

Annexure-II: Budget and Fund Flow

1. Abstract of Budget

Cost of operational zing De-addiction cum Rehabilitation Centre (Over Three Years) - 40 Patients					
Sr. No.	Item	Costs in 1st Year (in Rs.)	Cost in 2nd Year (in Rs.)	Cost in 3rd Year (in Rs.)	Remarks
1	Capital Cost	200000			One time as per
2	Personnel Cost	6180000	6489000	6813450	5% increment in subsequent year (as per NHM norms)
3	Recurring Cost	3996000	3996000	4195800	
4	Management Fee**	508800	524250	550462.5	5 % of (Personnel Cost + Recurring i.e., Running Cost)
Total		10884800	11009250	11559712.5	
		33453762.5			

**The detailed work plan to be undertaken by the agency using the management fees shall be discussed post selection of agency and be put forth in the MoU detailing out roles and responsibilities.

2. Detailed Recurring i.e., Running Costs

Sr. No.	Item	Monthly Budgeted Cost (in Rs.)	Annual Budgeted Cost (in Rs.)
1	Cooking allowance (@ Rs.150/inmate for 3 wholesome meals per day for 40 inmates)	180000.00	2160000.00
2	Consumables (medicines (As per Govt. doctor's advice of DHH Keonjhar), toiletries, detergents, life skills educational kits, BCC, and IEC material etc.)	40000.00	480000.00
3	Newspapers, periodicals, books for vocational rehabilitation, skill training material	3000.00	36000.00
4	Contingency (electricity, DTH, stationary, repairs, maintenance, transport, water, telephone etc.)	20000.00	240000.00
5	Payment of Part-time Staff	20000.00	240000.00
6	Rent	70000.00	840000.00
Total		333000.00	3996000.00

3. Detailed HR Cost and Requirement

Post	Number of Staff	Shift	Reliever	Total Number of Staff	Cost per person per month (in Rs.) *	Total Cost Estimate per month (in Rs.)	Annual Cost Estimate (in Rs.)	Remarks
Coordinator cum centre Head	1	1	0	1	40000	40000	480000	General shift, available for 24 hours
Counsellor/Psychologists	1	1	0	1	35000	35000	420000	9 am to 5 pm
Social Worker/Outreach Worker	2	1	0	2	30000	60000	720000	9 am to 5 pm
Vocational Counsellor/Instructor	1	1	0	1	30000	30000	360000	9 am to 5 pm
Peer Educator	1	1	0	1	10000	10000	120000	9 am to 5 pm
General Duty Medical Officer / Doctor/ Weekly Thrice (General Duty) /on call basis rest 04 days in the week	1	1	0	1	50000	50000	600000	9 am to 5 pm
Physiotherapist/ Occupational Therapist	1	1	0	1	30000	30000	360000	9 am to 5 pm
Staff Nurses	1	3	1	4	20000	80000	960000	7 am to 3 pm, 3 pm to 11 pm, 11 pm to 7 am
Cook	2	2	0	4	10000	40000	480000	7 am to 3 pm, 2 pm to 10 pm
Sanitary Worker / Housekeeping Staff	2	2	0	4	10000	40000	480000	7 am to 7 pm, 7 pm to 7 am
Multi-purpose Worker / Ward - boy/ Attendant	2	3	1	7	10000	70000	840000	7 am to 3 pm, 3 pm to 11 pm, 11 pm to 7 am
Security Guards	1	3	0	3	10000	30000	360000	7 am to 3 pm, 3 pm to 11 pm, 11 pm to 7 am
Total Resources				30			6180000	
* Maximum limit for payment of salary to be provided per month per person								

Note:

- i. Management fee will be based on actual expenditure incurred each month on Personnel and Recurring i.e., Running cost.
- ii. Funds provisioned under Capital Cost shall be utilized by the selected agency to procure the items as per tentative list provided at Annexure IV by following a due procedure of rate realisation (lowest quotation) subject to the budget provisioned. If in case the procurement cost exceeds with respect to the budget, then the matter shall be put up before Executive Committee for its due approval and further approval of funds under DMF.
- iii. Personnel cost shall be calculated on the reports generated from biometric system for staff as per their attendance in the particular month.
- iv. Recurring i.e., Running Cost shall be reimbursed to the agency after submission of original bill, vouchers etc.
- v. In case Security services, Food & Beverage/Cooking and Cleaning/Housekeeping services are outsourced; the expenses incurred for monthly payments, shall be reimbursed to the agency after submission of original bill, vouchers etc.

4. Fund Flow Mechanism

