



**OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH**  
**OFFICER, KEONJHAR**  
**(MEDICAL WINGS)**

**REQUEST FOR PROPOSAL (R.F.P) FOR OUTSOURCING OF**  
**DIET SERVICES FOR INDOOR PATIENTS OF D.H.H,**  
**KEONJHAR**  
**TENDER CALL NOTICE**

RFP No. 789 / DMO (MS) Date. 24/03/2026

Sealed tenders are invited from the reputed eligible registered diet preparation and catering firm/agency/ effective SHG(Home District Only)can also apply to prepare and distribute diet in the District Head Quarter Hospital, Keonjharon annual contract basis. The details, Terms and conditions, guidelines etc. is included in tender paper format. The tenders in the prescribed format along with all relevant documents under bid system in two separate envelops i.e. Cover -A & Cover – B and both should be deposited in one envelop should be super scribed on top of envelop “**Tender for supply of Diet for District Head Quarter Hospital Keonjharfor the year 2026-27**”in sealed envelope should reach at the office of the undersigned by dt.23/04/2026 at 3.00 P.M.through Regd. Post / Speed Post / Courier only. The bid will open on dt.24/04/2026 at 11.00A.M. In presence of bidders or their authorised representatives. The undersigned reserves the right to reject any or all the bids/Tenders without assigning any reason thereof.

*Postmaster 24.03.26*  
Chief District Medical & Public Health Officer  
Keonjhar  
Public Health Officer,  
Keonjhar

## DISCLAIMER

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

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Admission 24.3.26  
**Chief Dist. Medical &  
Public Health Officer,  
Keonjhar**

## NOTICE INVITING PROPOSAL

RFP No.: /Diet, Keonjhar Date.

**DETAILED PROPOSALS ARE INVITED FROM ELIGIBLE BIDDERS FOR SELECTION OF THE MOST SUITABLE AGENCY FOR SUPPLY OF DIET (DRY, LIQUID, COOKED) TO INDOOR PATIENTS OF D.H.H,KEONJHAR**

### Schedule of Events:

1	Period of Availability of RFP Document	FromDt.24/03/2026 to Dt.23/04/2026
2	Pre-bid meeting	Date:08/04/2026, 4.00PM Address-D.T.U, Hall, D.H.H, Keonjhar.
2	Last date for submission Of Proposal	Date: 23/04/2026, Time: 3.00 PM Address: The CDM & PHO,Keonjhar, O/O of the Chief District Medical & Public Health Officer,Keonjhar. <i>NB: Proposals must be submitted through Speed post / Registered post / Courier only.</i>
3	Date, time and place of Opening of Proposal and presentation	Technical Proposal (Part A & B) Opening on 24/04/2026 at 11.00 A.M at D.T.U,Hall,D.H.H,Keonjhar <i>[Bidders or authorized representative (with valid original authorization letter) may remain present at the time of opening of proposal]</i>

*Posmishra 24.3.26*  
**Chief Dist. Medical &  
Public Health Officer,  
Keonjhar**

## SECTION 1 :

### SCHEDULE OF PROPOSAL SUBMISSION

Sl.	RFP. No. & Date	Name of Institutions	Address for Submission of Proposal & Opening of Proposal	Last date & Time of Submission of Proposal	Date & time of Opening of Technical Proposal
	<b>District: Keonjhar</b>				
1	No. , Date.	DHH, Keonjhar	The Chief District Medical & Public Health Officer, Keonjhar, At/ P.O./Dist- Keonjhar, Odisha, PIN-758001.	Date:23/04/2026 Time: 3.00pm	Date :24/04/2026 Time: 11.00 A.M.

*Posmishes 24.3.24*  
**Chief Dist. Medical &  
Public Health Officer,  
Keonjhar**

**SECTION 2 :**  
**INSTRUCTIONS TO BIDDERS**

**2.1 Scope of Proposal**

- (a) Interested bidders fulfilling the eligibility criteria may submit their bid. Detailed description of the objectives, scope of services, deliverables and other requirements relating to "Provisioning of Diet Services for indoor patients of D.H.H, Keonjhar are specified in this RFP. The manner in which the proposal is required to be submitted, evaluated and accepted is explained in this RFP.
- (b) The selection of the Agency shall be on the basis of an evaluation by the tender committee of the concerned Institution, through the Selection Process specified in this RFP. Bidders shall be deemed to have understood and agreed that no explanation or justification for any aspect of the Selection Process will be given and that the decision of Chief District Medical & Public Health Officer, Keonjhar will be final and binding without any right of appeal whatsoever.
- (c) The bidder shall submit its proposal in the form and manner specified in the RFP. Upon selection, the agency shall be required to enter into an Agreement with the Chief District Medical & Public Health Officer, Keonjhar as per the RFP/Bid Document.
- (d) The Tender committee is entitled to issue/float any corrigendum found necessary afterwards relating to tender process.

**2.2 Eligibility Criteria**

The bidder should fulfill the following Eligibility Criteria

- I. The bidder must be registered as a Company / Firm / Society / Trust OR SHG / SHG Federation and must have registration Certificate under relevant Act / Rule of the State or Central Government.
- II. The bidder must have a registered and operating office in Odisha.
- III. The bidder must have minimum 3 years' experience in diet preparation, supply & management of diet services in Government or Pvt. Health Institution/other Govt. Institutions. The bidder shall furnish the details of the past performance in the required format (Form T5) supported with the work order/experience certificate or contract copies.
- IV. In case of SHG / SHG Federation, the technical committee is to take decision in view of their past experiences (to be furnished in the required format (Form T5) supported with the work order/experience certificates or contract copies for at least minimum Two-year experiences for preparation of Diet and supply in any Health /Other Institutions.
- V. The bidder applying for DHH must have minimum average annual turnover of Rs. 1 Crore per year during the last three financial years (2022-23, 2023-24 & 2024-25). In case of SHG / SHG Federation, the bidder must have minimum average annual turnover of Rs. 30 Lakhs per year during the last three financial years (2022-23, 2023-24 & 2024-25). The bidder has to furnish the details of their annual turnover in certified by a chartered accountant in the required format (Form T4) supported by Audit Report / audited Profit & Loss Statement.
- VI. The bidder must have valid labour registration certificate.
- VII. The bidder must have PAN.
- VIII. The bidder must have GST registration.

*Note: ISO certification / Food License is not mandatory. However, bidders having ISO certification / food license shall be given additional weightage in the evaluation criteria as mentioned in section 5.*

**In case of a selected bidder, they will have to furnish the up-to-date food registration / license (if not having) from the authority on the concerned region within 10 days of Issue of notification of award and before signing of contract.**

### 2.3 Proposal Submission

Interested bidders fulfilling the eligibility criteria may submit their bid to **Chief District Medical & Public Health Officer, Keonjhar**. The bidders interested to submit their bids with EMD, Tender Document Cost & documents as set forth in this RFP through registered post/speed post/courier, the detail address of which is mentioned in **Section 1: Schedule of Proposal Submission**.

The proposal shall be submitted in two parts:

- (1) **Part A (Cover A)** – Tender/Bid Document Cost, EMD as per format set out in RFP.
  - (2) **Part B (Cover – B)** - Technical Proposal as per the format set out in RFP.
- (I) The Proposal shall be typed or written legibly in indelible ink and shall be signed in full Signature by the bidder at the bottom of every page.
  - (II) Any interlineations, erasures or overwriting shall be valid only if the person or persons signing the proposal have put his/their initial prior to submission of the same.

*Note: There is no Financial Proposal to be submitted in the bid, as this is a fixed cost-based tender. Details of the fixed cost (Diet Rate) to be paid per patient / day for different types of diet with menu is mentioned at Section 3 – Terms of Reference.*

### 2.4 Bid Document Cost

The bidders shall have to furnish a bid document cost of Rs. 2000/- (non-refundable) in the shape of a Banker's cheques / Demand Draft from any Nationalized / Schedule Bank payable at Keonjhar in favour of "RogiKalyanSamiti, DHH, Keonjhar" or Money Receipt in case of bid document purchased from office of the DHH, Keonjhar.

In absence of the bid document cost, the technical proposal of the bidder shall be rejected. There is no exemption in submission of bid document cost.

### 2.5 Earnest Money Deposit (EMD)

The bidder along with the technical proposal shall have to furnish Earnest Money Deposit (EMD) amounting to **Rs. 10,000/-** (refundable) in the shape of a Banker's cheques / Demand Draft from any Nationalized / Schedule Bank payable at Keonjhar and in favour of "RogiKalyanSamiti, DHH, Keonjhar".

In absence of the EMD, technical proposal of the bidder shall be rejected. However, as per the Finance Department, Govt. of Odisha office memorandum No. 21926 dated 12.8.2015, the local **MSEs (Micro & Small entrepreneurs)** registered with respective DICs, Khadi, Village, Cottage & Handicraft Industries, OSIC and NSIC are exempted from submission of EMD while participating in tenders of Govt. Departments and Agencies under its control. It is further clarified that the above exemption is applicable to local MSEs

**registered in Odisha only.** This exemption to the local MSEs shall be applicable if the kind of service as required under this tender enquiry is clearly specified against the details of the service to be provided in their DIC/NSIC registration certificate (to be furnished in the technical bid). The MSEs certificate issued must include the diet service in their services category as it relates to the diet tender, otherwise the exemption on EMD shall not be allowed.

Copy of Original registration certificate of the agency/bidder is mandatory without which the bid will be rejected outrightly. MSE/MSME certificate or Shop & Commercial establishment certificate is not at all a substitute to the original registration certificate. The MSE or MSME certificate is an additional certificate just to claim to get from concession/benefit/exemption as per bid document and shop & commercial establishment certificate is to prove the address only.

The EMD shall be returned to unsuccessful bidders within a period of 4 weeks from the date of announcement of the successful bidder.

The EMD shall be forfeited if the bidder withdraws its proposal during the interval between the proposal due date and expiration of the proposal validity period or on in case of successful bidder, if does not execute the agreement.

## **2.6 Packing, Sealing and Marking of Proposal**

- (a) The Tender document cost & EMD (Cover A) and Technical Proposal (Cover B) must be inserted in separate sealed envelopes, along with applicant's name and address in the left-hand corner of the envelope and super scribed in the following manner: -
- **Cover – A** – Tender Document Cost & EMD for “Supply of Diet (Dry, Liquid, Cooked) to Indoor Patients of DHH, Keonjhar”.
  - **Cover – B** – Technical Proposal for “Supply of Diet (Dry, Liquid, Cooked) to Indoor Patients of DHH, Keonjhar”.
- (b) The two envelopes, i.e., envelope for Cover –A, Cover –B must be packed in a separate sealed outer envelope and clearly super scribed with the following: -
- “Tender for supply of Diet for DHH, Keonjhar for the year 2026-27”.
  - RFP no., 789, Dt. 26/12/26, DHH, Keonjhar must be mentioned on the envelop and inside the bid. The bidder's Name & address shall be mentioned in the left-hand corner of the outer and inner envelope.
  - The bidder's Name & Address shall be mentioned in the left hand corner or the outer envelope.
- (c) The inner and outer envelopes shall be **addressed** to the **Chief District Medical & Public Health Officer, Keonjhar** as per the **detail address** mentioned at the Section -1: Schedule of Proposal Submission.

**If the outer envelope is not sealed and marked as mentioned above, then the O/o the CDM & PHO, Keonjhar will assume no responsibility for the tender's misplacement or premature opening. Telex, cable or facsimile tenders will be rejected.**

### **(d) Content of the Proposal**

#### **I. Cover A (Tender Document Cost & EMD)**

1. EMD of Rs. **10,000** /-(Ten Thousand) in the shape of a Demand Draft in favour of **RKS, Keonjhar, payable at Keonjhar.**

2. Bid document cost of Rs. 2000/- (Two thousand) in the shape of a Demand Draft in favour of **RKS, Keonjhar, payable at Keonjhar** or Money Receipt in case of the bid document purchased from office of the CDM & PHO, Keonjhar.
3. MSEs certificate (If applicable).

## II. Cover B (Technical Proposal)

The bidders are requested to submit a detailed technical proposal with respect to outsourcing of Diet Services (Therapeutic & Non-Therapeutic) for Indoor Patients at Govt. Hospitals during the proposed contract period in conformity with the Terms of Reference forming part of this RFP. All the documents, Audit reports, certificates, and affidavit must be in the legal name of the bidding agency otherwise submitted bid will out rightly be rejected.

1. Form T1 (Checklist)
2. Form T2 (Technical Tender Submission Form)
3. Photocopy of the Registration Certificate of the bidder (must be registered as a Company / Firm / Society / Trust OR SHG / SHG Federation) under relevant Act.
4. Photocopy of PAN in the name of the bidding organisation.
5. Photocopy of GST in the name of the bidding organisation.
6. Form T3 (Details of the Bidder)
7. Form T4 (Turnover Certificate from the Chartered Accountant with UDIN)
8. Photocopy of the audited Profit & Loss Statement/Audit report (**Tax Audit**) in the three financial years [2022-23, 2023-24 & 2024-25].
9. Form T5 – Relevant Experience Details in managing Diet Services in state Govt/Govt.Of India institutions / Govt. and Private Hospital during the last three years.
10. Photocopies of work orders/Contracts executed in support of the information furnished in Form T-5.
11. Form T6 – Affidavit certifying that the bidder is not blacklisted by any Institution.
12. Any other details, the bidder like to include in the proposal.

### 2.7 Number of Proposals

Interested bidders fulfilling the eligibility criteria may submit their bid. However, a bidder is eligible to submit only one proposal.

### 2.8 Validity of Proposals

The Proposal shall remain valid for 180 days after the date of bid opening. Any Proposal, which is valid for a shorter period, shall be rejected as non-responsive.

### 2.9 Cost of Proposal

The Bidder shall be responsible for all of the costs associated with the preparation of their Proposals and their participation in the Selection Process. The concerned district authority / Institution will neither be responsible nor in any way liable for such costs, regardless of the conduct or outcome of the Selection Process.

### 2.10 Acknowledgement by the bidder

- (a) It shall be deemed that by submitting the Proposal, the bidder has: -

- (i) Made a complete and careful examination of the RFP;
  - (ii) Received all relevant information requested from the concerned District authority / Institution;
  - (iii) Acknowledged and accepted the risk of inadequacy, error or mistake in the information provided in the RFP or furnished by or on behalf of the concerned district authority / Institution relating to any of the matters stated in the RFP Document;
  - (iv) Satisfied itself about all matters, things and information, necessary and required for submitting an informed Proposal and performance of all of its obligations there under;
  - (v) Acknowledged that it does not have a Conflict of Interest, and
  - (vi) Agreed to be bound by the undertaking provided by it under and its terms hereof;
- (b) The concerned district authority / Institution shall not be liable for any omission, mistake or error on the part of the bidder in respect of any of the above or on account of any matter or thing arising out of or concerning or relating to RFP or the Selection Process, including any error or mistake therein or in any information or data given by the concerned district authority.
- (c) Any person other than the bidder himself attending the pre-bid meeting/any other meeting related to the tender process if called from time to time must carry the original authorization letter with the signature of authorized person duly attested by the bidder in their organization letter head failing which the person will not be allowed to participate in the meeting.
- (d) The committee is free to verify the authenticity of the certificates/documents from the concerned authority before awarding the contract. So, the full address, email id and telephone numbers of the concerned Hospitals where the bidder has given the diet services shall be mentioned in the column of the T5.
- (e) Any false information submitted in the bid document will be dealt accordingly as per law and if proved the process for blacklisting of the organization as well as other legal action will be initiated if the committee desires.

### **2.11. Language**

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

### **2.12 Proposal Submission Due Date**

RFP filled in all respect must reach O/oThe Chief District Medical & Public Health Officer, Keonjhar.At/ P.O./Dist-Keonjhar, Odisha, PIN-758001at the address, time and date specified in the Section -1: Schedule of Proposal Submission, through Speed Post / Regd. Post / Courier. If the specified date for the submission of RFPs is declared as a holiday, the RFPs will be received up to the stipulated time on the next working day.

### 2.13 RFP Opening

- (a) The concerned authority of the district / institution in their respective institution will open all Proposals, in the presence of bidders or their authorized representatives who choose to attend, at the location, date and time mentioned in the Section 1: Schedule of Proposal Submission.
- (b) The bidder / their authorized representatives who will be present shall sign a register evidencing their attendance.
- (c) In the event of the specified RFP opening date being declared a holiday, the RFPs shall be opened at the stipulated time and location on the next working day.

## SECTION 3 – TERMS OF REFERENCE

### 1 3.1 Modalities of Diet Service

1. The successful bidder also referred here as the agency or outsourced agency would establish its kitchen setup with all required infrastructure & kitchen equipment and operate from the campus of the DHH, Keonjhar. The space and water supply required to setup the kitchen shall be provided by the DHH, Keonjhar to facilitate the smooth operation of the agency.
2. The agency would be abided by the cost and quality norms / standards as mentioned in the bid, diet guidelines and communicated to them from time to time by the DHH, Keonjhar.
3. The agency would recruit required number of staff for cooking and serving so that diet can be supplied to the in-door patients in time.
4. The agency would take up free health check-up of the cooking and serving staff from time to time
5. The maintenance of kitchen and equipment's would be the responsibility of the agency and the agency should ensure that proper care is taken in this regard.
6. The agency would prepare and supply diet adhering to the quality norms specified by the DHH, Keonjhar. The agency should also prepare different types of diet as per the indent placed by the DHH, Keonjhar keeping in mind the diet requirement of different category of patients.
7. The agency would be responsible for procurement of different items required for preparing diet and storing it properly. The DHH, Keonjhar would not be responsible for any loss of procured items.

8. Perishable items would be supplied / procured on daily basis and for that supplier / supplier would be identified jointly by the designated person of the DHH, Keonjhar and the outsourced agency.
9. The DHH, Keonjhar would have the right to monitor the quality of items purchased and used in the diet preparation process.
10. The agency would manage kitchen waste in a scientific manner with due consultation with the concerned hospital administration.
11. At any point of time i.e. during procurement of raw materials, processing, preparation of diet, serving the diet to the patients and cleaning the utensils / instruments, the dietician and / or any person from the DHH, Keonjhar can visit and interact with concerned agency. The agency should not have any restriction to this rather the agency would facilitate such process to improve the service quality.
12. The agency would prepare and update the accounts details and maintain other related documents that are required for reimbursement of the expenses on monthly basis. In case of incomplete documents, the Hospital Administration would not reimburse the incurred cost. The documents to be prepared should be supplied by the DHH, Keonjhar beforehand and maintained by the agency on daily basis. The financial and non-financial documents would be subject to audit.
13. The behavior of the staff of the agency towards the patients / attendants should be conducive and disciplinary action would be taken by the Hospital Administration against the staffs of the said agency violating the behavioral norm in consultation with the concerned agency.
14. The agency would be responsible to make alternative arrangements in cases of situations such as staff strike, local strike [Bandh/Hartal] etc. ensuring that the patients get diet in the appropriate time.
15. The agency would be abided by different Government notification, circulars, written instructions etc. published from time to time with regard to the subject. In case of requirement, the hospital administration would provide required clarity to the agency on the related notification, circular etc.
16. For any grievance, the agency would approach to the Superintendent in person and appraise him/her in written about the problem. It is the responsibility of the DHH, Keonjhar to comply with the grievance and solve it within a maximum of one-month time and decision should be communicated to the agency in the written form.
17. Any dispute arising in the process of managing the diet preparation and supply, both the party i.e., the outsourced agency and the hospital administration should discuss and take appropriate decision that is mutually agreeable.
18. The outsourced agency would provide uniform embedded with its logo to all the staff recruited by the agency. The agency would ensure that the recruited staff

attend their duty with clean uniform and keeping themselves neat and clean while on duty.

### 3.2 Category of Diet & it's Price

As per Government Resolution HFW-SCH-NRHM-0015-2018-29712/H, Dated, 10.10.2025 the following category of Diet shall be provided to the indoor patients of DHH, Keonjhar.

Sl.	Category of Diet	Diet Rate per Patient(Breakfast, Lunch & Dinner) per day(In Rs.)
1	General Diet	127
2	Pediatrics Diet	110
3	High Protein Diet	138
4	Dry Diet	110
5	Liquid Diet	127

**Note :**The Diet Rate per patient per day (Breakfast, Lunch & Dinner) to be paid to the outsourcing agency shall include all costs relating to food stuffs, raw vegetable, Spices, Edible Oils for cooking, fuel (LPG), Stove burners, cooking, distribution & cleaning, kitchen equipment, utensils, stainless steel diet trays for patients, food trolleys, manpower cost for cooking / distribution/ cleaning and service charges.

### 3.3. Category of Diet & its Food Stuff

#### 1. General Diet

Food Stuff	Vegetarian	Calorie	Protein	Non-Vegetarian
Cereals	375gm	1294	26.25	375 gm
Pulses	75 gm	259	16.5	75 gm
Green Leafy vegetables	100 gm	45	4	100 gm
Other Vegetables	200 gm	64	3.8	200 gm
Roots and Tubers	200 gm	146	2.6	200 gm
Fruits	100 gm	60	0.8	100 gm
Milk and milk products	500 ml	325	16	500 ml
Curd	100gm	65	32	
Egg	100gm	173	13.3	Egg (2 Nos.)
Sugar	20 gm	80		20 gm
Oil	25 ml	225		25 ml
Condiment and spices				
Calories		2563		2671
Proteins		73.15		83.25
Total Cost		<b>Rs. 127/- per patient/day</b>		

#### 2. Pediatrics Diet

Food stuff	Vegetarian (in gms)	Calorie kcal	Protein gram	Non-Vegetarian (in gms)
Cereals	180	621	12.6	180
Pulses	60	207	13.2	60
Green leafy vegetables	100	45	4	25
Other vegetables	100	32	1.9	75
Roots and tubers	100	73	1.3	75
Fruits	200	120	1.6	200
Milk	500ml	325	16	250ml
Curd	100	65	3.2	0

Egg	50	87	6.65	50gms
Sugar	20	80		30
Oil	30	270		25
Condiment and spices		0		
Total Calories		1838		1860
Total Protein		53.8		57.25
Total cost				
Total cost	<b>Rs.110/- per patient / day</b>			

### 3. Dry food (Milk, Bread, Egg, Fruits):

Food stuff	Amount
Milk	1000 ml
Bread	400gm
Egg	2Nos.
Banana	2Nos.
Protein	90gms
Calories	2055 Kcal
<b>Total cost</b>	<b>Rs. 110/- per patient per day</b>

### 4. Full Liquid Diet:

The full liquid diet can be provided to the patients in the pre- or post-operative stage for one or two days or based on the advice of the doctor and dietician. Only clear liquids such as milk, clear soup, fruit juice etc. should be given. This diet is to be used for a very short period of time. Full liquid diet may also be given to all patients with acute conditions including ICU patients as per the advice of the treating physician.

Food Stuffs	Amount
Milk	1000 ml
Fruit Juice	500ml
Sugar	50gms
Rice, Dal, Vegetable soup	50gms
Dal	20gms
Vegetable	100gms
<b>Total Cost</b>	<b>Rs. 127/- per patient per day</b>

5. High Protein Diet for TB/Bum/Cancer Patients:

Food Stuff	Vegetarian	Calorie	Protein	Non-Vegetarian
Cereals	375gm	1294	26.25	375 gm
Pulses	75 gm	259	16.5	75 gm
Green Leafy Vegetable	100 gm	45	4	100 gm
Other Vegetables	200 gm	64	3.8	200 gm
Roots and Tubers	200 gm	146	2.6	200 gm
Fruits	100 gm	60	0.8	100 gm
Milk and milk products	500 ml	325	16	500 ml
Curd	100gm	65	3.2	
Egg	200gm	246	26.6	Egg (4 No.)
Or Paneer / Cheese	50gm			
Sugar	20 gm	80		20 gm
Oil	25 ml	225		25 ml
Condiment and spices				
Calories		2563		2671
Proteins		73.15		83.25
<b>Total Cost</b>	<b>Rs.138/-per patient / day</b>			

### A.1 Daily Menu for General Diet of a Patient:

Day	Breakfast	Lunch	Dinner
Sunday	Idli -4pc, Sambar- 1/2 Bowl, 1medium size, Fruit,Milk- 1glass(250ml), Idli Mix-100gm., Refined oil-5gm, Fruit-100gms	Rice 1 ½ Bowl,dal - ½ bowl, egg curry/ cholepaneer curry -1/2 bowl & Mix veg curry - ½ bowl, Curd -100gms, Dal (Moong /Aharhar) - 25gms, egg-1/ paneer-20gms, chole-30gms, & Vegetables-50gms, potato-50gms, vegetable/cabbage-50gms, Mustard oil-10gms	Rice 1 ½ Bowl, Roti- 4nos Dalma- ½ bowl, chole Soya bean curry-½ bowl, Milk-1 glass250ml), Rice/atta-125gms,dal- 25gms, Vegetable-50gms, potato-50gms, chole- 25gms, Soyabean-25gms, Refined oil-10gms
Monday & Thursday	Upama- 1 Bowl, Alumatar - ½ Bowl, 1medium size Fruit, Milk-1 glass 250ml, Suji-100gms, Alo- 20gm,matar-20gms, oil-5gms, Fruit -100 gm	Rice 1 ½ Bowl, Dalma-1 Bowl, leaf veg/cabbage fry - ½ bowl., Curd -100gm, Rice- 175gms, dal-25gms, veg- 50 gms, potato-50gms, leafyveg/cabbagefry-50gm, Refined oil- 10gms	Rice 1 ½ Bowl, Roti- 4nos, Dalma-1/2 bowl, AluSoyabean curry- 1/2 bowl, Milk-250ml, Rice/atta-125gms, dal- 25gms, Vegetable-50gms, potato-50gms, Soyabean- 25grn, Refined Oil - 10gms
Wednesday	Simei Upma-1 Bowl,Sambar- ½bowl, 1medium size Fruit, Milk-1 glass(250ml), Simei -100gms, Potato- 20gm,matar- 20gms,oil- 20gms,oil- 5gmsFruit-100gms	Rice 1 ½ Bowl, dal - 1/2 Bowl, egg curry/ cholepaneer curry ½ 2bowl& Mix veg curry - ½ bowl, Curd -100grn, Rice- 175gms, dal (Moong/Aharhar)- 25gms,egg-1/ paneer-20gms, chole-30gms & Vegetables- 50gms, potato-50gms, vegetable/cabbage-50gms, Mustard oil-10gms	Rice 1½ Bowl, Roti- 4nos, dal - ½ bowl, Mix veg curry- ½ bowl, Milk- 1 glass(250m 1), Rice- 125gms/atta-125gms,dal- 2 gms, Vegetables -50gms, potato-50gms,soyabean- 25gms, mustard oil-10gms
Tuesday & Saturday	ChudaSantula - 1 Bowl, Matar curry - 1/2 Bowl,Fruit, Milk 250ml, Chuda - 100gms, matar- 20gms,oil-5gms, fruit - 100gms	Rice- 1½Bowl dal - ½Bowl, vegchole curry - 1/2Bowl, Leafy veg fry - 1/2bowl, Curd -100gm, Rice -150gms,dal- 25gms, Vegetable- 50gms, potato-50gms, Green leafy veg/ Cabbage- 50gms, chole- 25gms, mustard oil- 10gms	Rice 1 ½ Bowl, Roti- 4nos dal -½ bowl Mix veg curry- ½ bowl, egg/paneer curry Milk- 1 glass(250m 1), Rice- 125gms, dal- 25gms,vegetable-50gms, potato-50gms, Egg- 1/paneer- 30gm, Milk- 250ml, Mustard oil-10gms
Friday	Idli - 4pc, Sambar- ½ Bowl, 1 medium size Fruit, Milk- 1glass(250ml), Idli Mix- 100gms, Refined oil- 5gm, milk-250ml & Fruit 100gms	Rice -1 ½ Bowl, Dalma - 1 Bowl, egg paneer curry, leaf veg/cabbage fry - ½ bowl. Curd -100gm, Rice150gms, dal-25gms, vegetable-50gms, potato- 50gms,egg-1/paneer- 30gms, leaf vegetable/cabbage- 50gms & mustard oil-10gm	Rice 1 ½ Bowl, Roti- 4nos, dal - 1/2bowl Mix veg curry-1/2 bowl, Milk- 1 glass, (250ml), Rice- 125gms/atta- 125gms, Dal- 25gms, Vegetables-50gms, potato- 50gms, Chole- 25gms,mustard oil-10gms

**Bowl Volume: 250ml water**

Roti: 01 no, medium size = 30gm atta (raw unit), Rice: 01 bowl = 300gm cooked weight (100gm raw unit), Dal/ Pulses/ legumes: 01 bowl = 125 gm cooked weight (25 gm raw unit), Mixed vegetable: 01 bowl = 200gm cooked weight, Seasonal fruit: 01 no = 100gm, Upma and Poha: 01 bowl = 300gm.

## A2. DIET MENU FOR DIABETIC PATIENTS:

Day	Breakfast	Lunch	Dinner
Sunday	Idli -4pc, Sambar- ½ Bowl, 1 medium size Fruit, Milk- 1 glass (250ml), Idli Mix-100gms, Dal-20 gm, Refined oil-5gm, Fruit-100gms	Rice 1 Bowl, Roti- 3nos, dal - ½ Bowl, egg curry/ cholepaneer curry ½ bowl & Mix veg curry - 1/2 bowl, Curd -100gm, Rice/Atta-100gms, dal(Moong/Aharhar) - 25gms, egg-1 /paneer-20gms, chole-30gms &Vegetables-100gms, Vegetable/cabbage-50gms, Mustard oil-10gms	Roti- 3nos, Dalma - ½ bowl chholeSoyabean curry- ½ bowl, Milk- 1 glass (250ml), Atta-100gms, dal-25gms, Vegetable-100gms, chole-25gms, Soyabean-25gm, Refined oil-10gms
Monday & Thursday	Upama- 1 Bowl, Matarcurry - ½ Bowl, 1 medium size Fruit, Milk-1 glass 250ml, Suji-100gms, matar-25gms, oil-5gms, Fruit-100gms	Rice 1 Bowl / Roti- 3nos, Dalma- 1Bowl, leaf veg/cabbage fry - ½ bowl., Curd -100gm, Rice/Atta-100gms, dal-25gms, veg-100gms, leafy veg /cabbagefry-50gm, Refined oil-10gms	Roti- 3nos, Dalma- ½bowl, Soyabean curry- ½ bowl, Milk-250ml, Atta-100gms, dal-25gms, vegetable-100gms, Soyabean-25gm, Refined oil-10gms
Wednesday	Simej upma-1 Bowl, Sambar- 1/2 Bowl, 1 medium size Fruit, Milk-1 glass 250ml), Simej -100gms, Dal-20gms, oil-5gms Fruit-100gms	Rice 1 Bowl / Roti- 3nos, dal - 1/2 Bowl, egg curry/ cholepaneer curry ½ bowl & Mix veg curry - 1/2 bowl, Curd -100 gm, Rice/Atta-100gms, dal (Moong/Aharhar)-25gms, egg-1 /paneer-20, chole-30gms & vegetables-100gms, Vegetable/cabbage 50gms, Mustard oil-10gms	Roti- 3nos dal - ½ bowl Mix veg curry-½ bowl, Milk-1glass(250ml), Atta-100gms, dal-25gms, vegetables-100gms, soyabean-25gms, mustard oil-10gms
Tuesday & Saturday	Chudasantula - 1 Bowl, matar curry - ½ Bowl, Fruit, Milk-250ml, Chuda-100gms, matar-25gms, oil-5gms Fruit 100gms	Rice 1 Bowl / Roti- 3nos, dal - 1/2 Bowl, vegchola curry - 1/2 Bowl, Leafyveg fry - 1/2 bowl, Curd -100gm, Rice -150gms, dal-25gms, Vegetable- 100gms, Green leafy veg/ Cabbage-50gms, chole-25gms, mustard oil- 10gms	Roti- 3nos dal - 1/2 bowl Mix veg curry- 1/2 bowl, egg/paneer curry Milk- 1 glass - (250ml), Atta-100gms, dal-25gms, vegetable-100gms, Egg-1/paneer-30gm, Mk-250ml, Mustard oil-10gm
Friday	Idli -4pc, Sambar- ½, bowl, Fruit-1 medium size, Milk- 1 glass(250ml), Idli Mix-100gms, Dal-20gms, Refined oil-5gm, milk-250ml & Fruit-100gms	Rice 1 Bowl/ Roti, - 3nos, Dalma - 1 Bowl, egg/paneer, curry, leaf veg/cabbage fry - 1/2 bowl, Curd -100gm, Rice/Atta-100gms, dal-25gms, Vegetable-100gms, egg-1/paneer-30gms, leafy vegetable/cabbage-50gms, mustard oil-10gm	Roti- 3nos dal - 1/2 bowl Mix veg curry- 1/2 bowl, Milk- 1 glass(250ml), Atta-100gms, dal-25gms, Vegetables-100gms, Chola-25gms, mustard oil-10gms

### A3. DIET MENU FOR DIARRHOEA PATIENTS

Day	Breakfast	Lunch	Dinner
Monday & Thursday	SagoKhiri/ milk barley, banana, Sago/ barley-50gms, milk-250 ml, Sugar-30gms, Fruit 100gms i.e. Banana-2nos.	Khichdi, & boiled potato, Curd -100gm, Rice-80gm, Moong dal-25gm, Potato-50gm, Oil-10gm,	Roti/ White bread, Milk, Dalma, Banana, Wheat flour:70gm/ White bread-80gms, Dal: 15gm, Potato-25gms, Vegetables: 100gms, oil-10gms, Milk-250ml. Fruit-100gms i.e. Banana-2nos.
Tuesday & Saturday	Mandiakhir/ milk barley, banana, mandia 50gms/ barley-50gms, milk-250ml, Sugar-30gms, Fruit 100 gmi.e. Banana- 2nos.	Khichdi, & boiled potato, Curd -100gm, Rice-80gm, Moong dal-25gm Potato-50gm, Oil-10gm	Roti/ White bread, Milk, Dalma, Banana, Wheat flour, 70gm/ White bread-80gms, Dal: 15gms, Vegetables:100gm, oil-10gm, Milk-250ml, Fruit- 100gms i.e. banana-2nos.
Wednesday & Friday & Sunday	Chudakhir/ milk barley, banana, chuda- 50gms/ barley-50gms, milk-250ml, Sugar-30gms, Fruit - 100gms i.e. Banana- 2	Khichdi, & boiled potato, Curd -100gms, Rice-80gms, Moong dal-25gms, Potato-50gms, Oil-10gms	Roti / White bread, Milk, Dalma, Banana, Wheat flour: 70gm/ White bread-80gms, Dal: 15gms, Vegetables: 125gm, oil-10gms, Milk-250ml, Fruit 100gms i.e. Banana-2nos.

### A4. DIET MENU FOR JAUNDICE PATIENTS

Day	Breakfast	Lunch	Dinner
Sunday	SemaiUpamawithvegetable, Seasonalfruit, Semai-100gms, Vegetable -50gms Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1, oil-5gm	Rice, dal & Mix veg curry, Curd -100gm, Rice-150gms, dal (Moong/Aharhar)-25gms, Vegetables-100gms, potato-50gms, Leafyvegetable/cabbage-50gms, Mustard oil -10gms	Rice/Roti, Dalma, Rice/atta-100gms, dal-25gms, Vegetable-50gms, potato-50gms, Refined oil-5gms
Monday & Thursday	Upama, alu curry & fruit, Suji-50gms and semai-50gms, potato-50gms, matar-20gms, Oil-5gms & Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1)	Rice, Dalma, leaf veg/cabbage fry, Curd -100gm, Rice-150gms, dal-25gms, veg-100gms, leafy veg /cabbagefry-50gm, Refined oil-10gms	Rice/Roti, Dalma, Alucurry, Rice/atta-100gms, dal-25gms, Vegetable-50gms, potato-50gms, Refined oil- 5gms
Wednesday	SujiUpamawithvegetable, Seasonalfruit, Suji-100gms, Vegetable - 50gms, Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1), oil - 5mg	Rice, dal Mix veg curry, Curd -100 gm, Rice-150gms, dal (Moong/Aharhar)-25gms & Vegetables-100gms, potato-50gms, vegetable / cabbage-50gms, Mustard oil-10gms	Rice/roti, Dal, Mix veg curry, Rice/atta-100gms, dal-25gms, Vegetables-50gms, potato-50gms, mustard oil-5gm
Tuesday & Saturday	Chudasantula/bun, alu curry & Fruit, Chuda-100gms/bun-100gms, potato-50gms, oil-5gms Fruit-100gms (banana-	Rice, dal, veg curry, Leafy veg fry, Curd -100gm, Rice -150gms, dal-25gms, Vegetable-100gms, Greenleafy veg/ Cabbage-	Rice/roti, Dalma, Rice/atta-100gms, dal-25gms, Vegetable-50gms, potato-

	2/guava-1/Apple-1/Orange-1/Mango-1)	50gms, mustard oil – 10 gm	50gms, Milk-250ml, Mustard oil-5gms
Friday	Semai Upama with vegetable, Seasonal fruit. Semai-100gms, Vegetable - 50gms Fruit-100gms i.e. banana-2/guava-1/Apple-1/Orange-1/Mango-1), oil – 5gms	Rice, Dalma, leaf veg/cabbage fry, Curd - 100gm, Rice 150gms, dal-25gms, Vegetable-100gms, potato-50gms, leaf vegetable/cabbage-50gms & mustard oil-10gm	Rice/roti, Dal, Mix veg curry, Rice/atta-100gms, dal-25gms, Vegetables-50gms, potato-50gms, mustard oil-5gms

#### A5. DIET MENU FOR LIVER CIRRHOSIS PATIENTS

Day	Breakfast	Lunch	Dinner
Sunday	Semai kheeri, Seasonal fruit, Semai-50gms, sugar-20gms, milk-250ml & Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1), oil-5gm	Rice, dal, & Mix veg curry, Paneer-50gm, Curd-100gms, Rice-100gms, dal (Moong/Aharhar)-50gms & vegetables -50gms, potato-50gms, Soyabean-25gm, Mustard oil-5gms	Rice/Roti, Dalma, chola Soyabean curry, Milk-250ml, Rice/atta-50gms, dal-50gms, Vegetable-50gms, potato-50gms, chola-25gms, Soyabean-25gm Refined oil-5gms, Milk-250ml
Monday & Thursday	Upama, matar & fruit. Milk 250ml, Suji-50gms and semai-50gms, Milk 250ml, matar-20gms, Oil-5gms & Fruit-100gms i.e. banana-2/guava-1/Apple-1/Orange-1/Mango-1	Rice, Dal, Mix Veg Soyabean curry, Paneer-50gm, Curd-100gms, Rice-100gms, dal-40gms, veg-50gms, potato-50gms, Soyabean-50gm, Refined oil-5gms	Rice/Roti, Dalma, Milk-250ml, Rice/atta-50gms, dal-40gms, Vegetable-50gms, potato-50gms, Refined oil-5gms, Milk-250ml
Wednesday	Sujikheeri, Seasonal fruit, Suji-100gms, sugar-20gms, milk-250ml & Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1) oil-5gm	Rice, dal, & Mix veg curry, Paneer-50gm, Curd-100gms, Rice-100gms, dal (Moong/Aharhar)-50gms & vegetables -50gms, potato-50gms, soyabean-25gm, Mustard oil-5gms	Rice/Roti, Dalma, chole Soyabean curry, Milk-250ml, Rice/atta-50gms, dal-50gms, Vegetable-50gms, potato-50gms, chole-25gms, Soyabean-25gm, Refined oil-5gms, Milk-250ml
Tuesday & Saturday	Chudasantula/bun, matar curry & Fruit, Milk 250ml, Chuda-50gms/bun-100gms, matar-20gms, oil-5gms Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1)	Rice, dal, Veg chola curry, Paneer-50gm, Curd-100gms, Rice-100gms, dal-40gms, Vegetable-50gms, potato-50gms, chole-25gms, mustard oil – 5gms	Rice/roti, Dal, Mix veg curry, Milk, Rice/atta-50gms, dal-40gms, vegetable -50gms, potato-50gms, Soyabean-50gm, Milk-250ml, Mustard oil-5gms
Friday	Semai kheer & seasonal fruit, Semai-50gms, Refined oil-5gm, sugar-20gms, milk-250ml & Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1)	Rice, dal, Mix veg Chole curry, Paneer-50gm, Curd-100gms, Rice-100gms, dal (Moong/Aharhar)-50gms & Vegetables-50gms, potato-50gms, Chole-25gm, Mustard oil-5gms	Rice/roti, Dal, Mix veg Soyabean curry, Milk-250ml, Rice/atta-50gms, dal-50gms, Vegetables-50gms, potato-50gms, Soyabean-50gm, mustard oil-5gms

## A6. DIET MENU FOR CARDIAC DISEASE

Day	Breakfast	Lunch	Dinner
Monday & Thursday	Upama, alumatar&fruit, Milk 250ml, Suji-50gms Milk 250ml, matar-20gms, oil-5gms, & Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/ mango-1)	Rice/Roti, Dalma, green leafy veg & cucumber, Curd-100gms/ Egg white 1, Rice/Atta(whole wheat)-100gms, Dal-30gms, vegetable-100gms, leaf veg, /cabbage-100gms, mustard oil-5ml & cucumber-1	Roti, Dalma, Soyabean vegetable curry, One tomato/Cucumber, Atta(wholewheat)-50gms, Dal -30 gms, vegetable-Soyabean-25gm, 50gms, refined oil-5ml and veg-100gm
Tuesday & Saturday	Chudasantula / bun, matar curry & Fruit, Milk 250ml, Chuda-50gms/bun-100gms, matar-20gms, oil-5gms Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1)	Roti/Rice. Dal, cucumber, leaf veg /cabbage fry, Mix veg Chole curry, Curd-100gms/ Egg white 1, Rice, /Atta(whole wheat) -100gms, Dal-20gms, Chole-25gm, vegetable-100gms, leaf veg/cabbage-50gms, refined oil-5ml & cucumber-1	Roti, Dalma, Mix vegetable curry, One tomato, Milk- 250ml, Atta(whole wheat)-50gms Dal-20 gms, vegetable-100gms, refined oil-5ml
Wednesday	sujikheer, Seasonal fruit, Suji-50gms, sugar-20gms, milk-250ml & Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1), oil – 5gm	Roti/Rice, Dal, cucumber, Mix veg, Soyabean curry, Curd-100gms/ Egg white 1, Rice/Atta(whole wheat)-100gms Dal-30 gms, vegetable-50gms, Soyabean-50g m, leafveg/cabbage-50gms, refined oil-5ml & cucumber-1	Roti, Dalma, vegetable curry, One tomato, leafy veg /cabbage fry, Atta(wholewheat)-50gms, Dal-30gms, vegetable-50, leafveg/cabbage-100gms, refined oil-5ml & veg-100gms
Friday	Semaikhir & seasonal fruit, Semai-50gms, Refined oil-5gm, sugar-20gms, milk-250ml & Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1)	Roti/Rice, Dal, cucumber, leaf veg/cabbage fry, Mix veg Chole curry, Curd-100gms/ Egg white 1, Rice/Atta(whole wheat)-100gms, Dal-20gms, Chole-25gm, vegetable-100gms, leafveg/cabbage-50gms, refined oil-5ml	Roti, Dalma, Mix vegetable curry, One tomato, Milk-250ml, Rice/Atta(whole wheat)-50gms Dal-20gms, vegetable-100gms, refined oil-5ml
Sunday	Semeikheer, Seasonal fruit, Semei-50gms, sugar-20gms, milk-250ml & Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1), oil – 5gm	Roti/Rice, Dal, cucumber, Mix veg Soyabean curry, Curd-100gms/ Egg white 1, Rice/Atta(whole wheat)-100gms Dal-30 gms, vegetable-50gms, Soyabean-50gm, leafveg/cabbage-50gms & refined oil-5ml & cucumber-1	Roti, Dalma, vegetable curry, One tomato, leafy veg/cabbage fry, Rice /Atte(whole wheat)-50gms Dal-30gms, vegetable-50, Leafveg /cabbage-100gms, refined oil-5ml & veg-100gms

**A7. Weekly Diet Menu for Chronic Renal Failure [CRF] / chronic kidney disease [CKD]**

Day	Breakfast	Lunch	Dinner
Sunday	Porridge (sago) Raw -100gm, Milk-100gm, Sugar-30gm to taste	Rice-150gm, Dal-1 cup(15gm), Sabji (Seasonable vegetable except green Leafy Vegetable, Potato & Tomato, Egg white of one egg	Rice/Rotti, Sabji-150gm, Porridge-(kheer)-50gm-Cereals 100gm-Milk, 30gm-Sugar
Monday	Sago Raw-100gm, Milk-100gm Sugar-30gm to taste	Rice-150gm, Dal-1 cup(15gm), Sabji(Seasonable vegetable except Green Leafy Vegetable, Potato & Tomato	Rice/Rotti, Sabji-150gm, Porridge-(kheer)-50gm-Cereals, 100gm-Milk, 30gm-Sugar
Tuesday	Semia Raw-100gm, Milk-100gm, Sugar-30gm to taste	Rice-150gm, Dal-1 cup(15gm), Sabji(Seasonable vegetable except Green Leafy Vegetable, Potato & Tomato	Rice/Roti, Sabji-150gm, Porridge-(kheer) -50gm-Cereals, 100gm-Milk, 30gm-Sugar
Wednesday	Semia Raw-100gm, Milk-100gm, Sugar-30gm to taste	Rice-150gm, Dal-1 cup(15gm), sabji(Seasonable vegetable except Green Leafy Vegetable, Potato & Tomato, Egg white of one egg	Rice/Roti, Sabji-150gm, Porridge-(kheer)-50gm-Cereals, 100gm-Milk, 30gm-Sugar
Thursday	Chuda Raw-100gm, Milk-100gm, Sugar-30gm to taste	Rice-150gm, Dal-1 cup(15gm), Sabji (Seasonable vegetable except Green Leaf Vegetable, Potato & Tomato	Rice/Roti, Sabji-150gm, Porridge-(kheer)-50gm-Cereals, 100gm-Milk, 30gm- sugar
Friday	Chuda Raw-100gm, Milk-100gm, Sugar-30gm to taste	Rice-150gm, Dal-1 cup(15gm), Sabji (Seasonable vegetable except Green Leafy Vegetable, Potato & Tomato, Egg white of one egg	Rice/Roti, Sabji-150gm, Porridge-(kheer)-50gm-Cereals, 100gm-Milk, 30gm-Sugar
Saturday	Rice Raw-100gm, Milk -100gm, Sugar-30gm to taste	Rice-150gm, Dal-1 cup(15gm), Sabji (Seasonable vegetable except Green Leafy Vegetable, Potato & Tomato	Rice/Roti, Sabji-150gm, Porridge-(kheer)-50gm-Cereals, 100gm-Milk, 30gm-Sugar

**B) Daily Menu of Diet for Children:**

Day	Breakfast	Lunch	Dinner
Sunday	SemaiKhir, Fruit Semai -50gms, sugar-20gms, milk-250ml & Fruit100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1), oil - 5gm	Rice, Dalma & egg curry / Cholepaneer curry, leafy veg/cabbage fry, Curd - 100gm, Rice-80gms, dal- 30gms, vegetable -50gms, potato-25gms, egg-1, paneer-20 gm., chola-30gms & leaf vegetable/cabbage-25gms, Mustard oil-12gms	Rice/Roti, Dalma, Rice/atta-50gms, Dal-30gms, Vegetable-25gms, potato-50gms, Refined oil-8gms
Monday & Thursday	Upama, Alumatar, Fruit, Milk, Suji-25gms and semai-25gms, matar-20gms, & Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1), oil-5gm, Milk-250ml	Rice, Dalma, Alusoyabean curry & leaf veg/cabbage fry, Curd - 100gm, Rice-80gms, Dal-30gms, veg-50gms, potato-50gms, Soyabean-25gm, leafveg/cabbage-100gms, Refined oil-12gms	Rice/Roti, Dal, Mix veg curry, Milk, Rice-50gms/atta-50gms, dal-30gms, Vegetable-50gms, potato-50gms, mustard oil-8gms, Milk-250ml

Wednesday	SujiKhiri, Fruit, Suji-50gms, sugar-20gms, milk-250ml & Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/Mango-1), oil – 5gm	Rice, Dalma & egg curry/Cholepaneer curry, leafy veg/cabbage fry, Curd -100gm, Rice-80gms, dal-30gms, vegetable -50gms, potato-50gms, egg-1, paneer-20 gms, chole-30gms, & leaf vegetable/cabbage-100gms, Mustard oil-12gms	Rice/Roti, Dal, Mix veg curry, Rice-50gms/atta-50gms, Dal-30gms, Vegetable-50gms, potato-50gms, mustard oil-10gms
Tuesday & Saturday	Chuda Santula / bun, Matar curry & Fruit, Milk, Chuda-50gms / bun-50gms, matar-20gms & Fruit-100gms (banana-2/guava-1/Apple-1/Orange-1/mango-1), oil-5gm, Milk – 250 ml	Rice, Dalma, Alusoyabean curry & leaf veg/cabbage fry, Rice-100gms, dal-30gms, veg-50gms, potato-50gms, Soyabean-25gm, leaf veg /cabbage-100gms, Refined oil-12gms	Rice/Roti, Dal, Mix veg curry, Milk, Rice-50gms/atta-50gms, dal-30gms, Vegetable-50gms, potato-50gms, mustard oil-8gms, Milk-250ml
Friday	Semai Khir & fruit, Semal-50gms, sugar-20gms, milk-250ml & banana-2/guava-1	Rice, Dalma & egg curry, Chole Paneer curry, leafy veg / cabbage fry, Curd -100gm, Rice-80gms, dal-30gms, vegetable-50gms, potato-50gms, egg-1, paneer-20gm, chole-30gms & leaf vegetable/cabbage-25gms, Mustard oil-12gms	Rice/Roti, Dalma, Rice/atta-50gms, Dal-30gms, Vegetable-50gms, potato-50gms, Refined oil-8gms

#### C) Dry food (Milk, Bread, Egg, Fruits):

Food stuff	Breakfast	Lunch	Dinner
Milk	500ml		500ml
Bread	200gm		200gm
Banana		2nos	
Egg		2nos	

#### D) Full liquid diet

Clear Liquid Diet would be provided to the patients in the pre- or post-operative stage for one or two days or based on the advice of the doctor and dietician. This diet should be completely free of any solids even those found in the milk. Only clear liquids such as tea or coffee without cream or milk, clear soup etc. should be given. This diet is to be used for a very short period of time. Full liquid diet should be given for all acute conditions before diagnosis.

Food stuffs	Amount
Milk	1000 ml
Fruit juice	500 ml
Sugar	50gms

Rice, Dal, Vegetable soup (rice)	50gms
Dal	20gms
Vegetable	100gms

### E) DIET MENU FOR TB/BURN/CANCER PATINETS

Day	Breakfast	Lunch	Dinner
Sunday	Idli-4pc, Sambar-½ Bowl, 1 medium size Fruit, Milk- 1glass (250ml), 2 Eggs/ 50gm paneer, Idli Mix- 100gms, Refined oil-5gm, Fruit- 100gms	Rice 1½ Bowl, Dal — ½ Bowl, egg curry/ cholepaneer curry ½bowl & Mix veg curry - ½ bowl, Curd -100gm, Rice-175 gm, dal(Moong/Aharhar)- 25 gm, egg-1/ paneer-20gm, chole-30gms, & Vegetables- 50gms, potato-50gms, Vegetable / cabbage-50gms, Mustard oil-10gms	Rice-1½bowl, Roti-4nos, Dalma-½ bowl, choleSoyabean curry- ½ bowl, Milk-1 glass (250ml),Rice/atta-125gms, dal-25gms,Vegetable-50gms, potato-50gms,chole-25gms, soyabean 25gm, Refined oil-10gms
Monday & Thursday	Upama- 1 Bowl, Alumatar½Bowl,1 medium sizeFruit, Milk- 1glass(250ml),2Eggs/ 50gm paneer, Suji- 100gms, Alo-20gm, matar 20gms,oil-5gms Fruit-100gms	Rice 1 ½Bowl, Dalma 1 Bowl, leaf veg/cabbage fry ½ bowl,Curd-100gm,Rice- 175gms,dal- 25gms,veg50gms, potato 50gms, leafy veg / cabbagefry- 50gm,Refinedoil- 10gms	Rice-1 ½ Bowl, Roti- 4nos,Dalma— ½ bowl, AluSoyabean curry-½ bowl, Milk-250ml, Rice/atta125gms, dal-25gms, Vegetable- 50gms, potato-50gm, Soya bean- 25gm, Refined oil-10gm
Wednesday	Simei upma-1 Bowl, Sambar- ½ Bowl, 1 mediumsizeFruit,Milk- 1glass(250ml),2Eggs/ 50gm paneer, Simei-100 gms, Alo-20gm, matar- 20gms, oil-5gms, Fruit- 100gms	Rice1½Bowl,dal ½Bowl, eggcurry/cholepaneercurry ½bowl & Mix veg curry - ½bowl,Curd-100gm,Rice- 175gms, dal (Moong/Aharhar)- 25gms, egg-1/ paneer20, chole-30gms & Vegetables- 50gms, potato-50gms, vegetable/cabbage 50gms, Mustard oil-10gms	Rice 1 ½Bowl, Roti- 4nos, dal ½ bowl Mix veg curry ½bowl, Milk- 1glass(250ml), Rice-125gms/atta-125gms, dal-25gms, Vegetables-50 gms, potato-50gms, soyabean -25gms, mustard oil-10gms
Tuesday & Saturday	Chudasantula-1 Bowl, matar curry - ½ Bowl, Fruit, Milk 250ml, 2Eggs /50gmpaneer,Chuda- 100gms, matar- 20gms, oil-5gms Fruit 100gms	Rice- 1½ Bowl dal -½ Bowl, Veg chole curry ½ Bowl, Leafy veg fry - ½ Bowl, Curd-100gm, Rice -150gm, dal 25gm, Vegetable- 50gms, potato-50gms, Green leafy veg/ Cabbage 50gms, chole-25gms, mustard oil-10gms	Rice 1 ½ Bowl, Roti- 4nos dal ½bowl Mix veg curry½ bowl, egg/paneer curry, Milk- 1 glass, (250ml), Rice-125 gm, dal-25gms, vegetable - 50gms, potato 50gms,Egg- 1/paneer-30gm,Milk -250ml, Mustard oil-10gms
Friday	Idli -4pc, Sambar-½bowl, 1	Rice 1 ½Bowl, Dalma - ½	Rice 1 ½ Bowl, Roti- 4nos,

medium size fruit, milk-1glass (250) ml, 2 eggs/50gm paneer, Idli Mix-100gms, refined oil-5gm, milk-250ml & fruit-100gms	bowl, egg/paneer curry, leaf veg /cabbage fry -½bowl., Curd-100gm, Rice-150gms, dal 25gms, Vegetable-50gms, potato-50gms, egg-1/paneer-30gms, leaf vegetable/ cabbage 50gms, & mustard oil- 10gm	dal -½ bowl, Mix veg curry- ½ bowl, Milk- 1 glass (250ml), Rice-125 gms/atta-125gms, dal-25 gms, Vegetables-50gms, potato — 50gms, Chole-25gms, mustard oil-10gms
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**01 -Bowl – volume 250ml water, Roti:01no, medium size = 30gm atta (raw unit), Rice: 01 bowl=300gm cooked weight (100gm raw unit), Dal/ Pulses/ legumes: 01 bowl = 125 gm cooked weight (25 gm raw unit). Mixed vegetable: 01 bowl = 200gm cooked weight, Seasonal fruit: 01 no =100gm, Upma and Poha: 01 bowl = 300gm,**

**Note:**

The diet menu is suggestive and may change as per the availability of the proposed items. The concerned dietician / medical officer would be the final authority to take appropriate decision on the menu without compromising the quality.

**3.8 Timing of Diet Supply**

The timing of diet supply to the patients is mentioned below for adherence. In no case, there should be deviation in time, not exceeding 20 minutes for each category of diet timing. The diet preparing and distributing contractor would be advised accordingly

- Breakfast** : **Between 7.30 am to 8.00 am**
- Lunch** : **Between 1.00 pm to 2.00 pm**
- Dinner** : **Between 8.00 pm to 9.00 pm**

**Note:** Timing of diet and times of diet provision may vary based on the diagnosis and as per the recommendation / prescription of the dietician / doctor. The hospital manager / person designated for the management of dietary services would adhere to the timing as prescribed by the doctor / dietician. Timing for patients prescribed for “liquid diet” under therapeutic diet may vary based on the advice of the dietician / doctor.

**3.6 Storage of Commodities / Raw Materials**

1. Storage of commodities / raw materials would be the responsibility of the outsourced agency. However, it is to be monitored from time to time by the dietician / assistant dietician of the Hospitals or any other persons assigned for the purpose. The perishable and non-perishable items should be stored as per the storage specification norms.
2. Care should be taken to avoid quality degradation of the food commodities due to humidity, rodents, insects etc.

### 3.7 Fuel for Cooking

- 1) The kitchen should have LPG connection to be provided by the agency for diet preparation with provision of additional cylinder.
2. Coal and Wood must not be used for cooking excluding emergency cases.

### 3.8. Diet Certification

Diet prepared [cooked / dry diet] on day-to-day basis should be certified by the dietician before its distribution. The diet certification would be with regard to quality, test and its adherence to the specified menu.

### 3.9 Constituting Diet Vigilance Committee [DVC]

For monitoring and supervision of diet preparation, distribution, ensuring diet quality and overall management of diet, Diet Vigilance Committees [DVC] will be constituted. DVC would be constituted taking RKS members and medical staff of the Sub-Divisional Hospital. Superintendent would head the committee along with one Sr. Doctor. RKS would nominate two members on a rotational basis to be the member of DVC. The committee members shall meet once in a month to discuss matters related to present dietary services and propose changes, if necessary. The Hospital Manager and selected / nominated members of SwasthyaVikashSamiti would be the member of the DVC.

### 3.10 Role of DVC in Monitoring & Supervision:

Diet Vigilance Committee will overall supervise the diet preparation and distribution process. The Diet Vigilance Committee would do regular surprise check to see the aspects like quantity and quality check of the diet, timeliness in supply of diet, hygiene and other related aspects and report to the head of the concerned Public Hospitals on a periodic basis [time frame is to be decided by the Superintendent. The committee members will interact with the in-door patients on quality and quantity of diet and discuss accordingly with the outsourced agency.

### 3.11 Role & Function of Dietetics Section in the Hospital:

The dietetics section would be expected to perform important functions in dietary services and management. The basic responsibility of dietetics section would be;

- a) Menu Planning;
- b) Food purchasing [if not outsourced and in case of dry diet supply];
- c) Purchase of requisition of needed equipment and supplies;
- d) Establishment and maintenance of safe food storage practices;
- e) Selection, training, assignment of duties, supervision of personnel;
- f) Supervision of departmental sanitation;
- g) Establishment of adequate records and supervision of record keeping, budget planning, etc.,

### 3.12 Role of Dietician / Nutritionist:

- a) Periodic check of the quality of food materials
- b) Diet related counseling services to the patients during admission and discharge

- c) Prescribing diet for patients based on the diagnosis
- d) Monitoring the food preparation process and kitchen cleanliness
- e) Pre-distribution quality check of diet following self-testing procedure
- f) Monitoring food handling
- g) Interacting with patients and getting feedback on diet quality, diet menu etc.

Apart from this, the dietician would be responsible for the management of therapeutic diets including modifications of the general menus to meet the needs of the patient and maintaining diet records;

The dietician / in-charge or members of his/her team would prepare the diet distribution chart based on the placed indent by the ward boy/sister. The dietetics section would maintain records on day basis for the audit purpose. The dietetics section would also be responsible to deal with empaneled contractors and ensure qualitative diet supply to the patients as per the norm.

### 3.13 Sanitary Measures:

Required sanitary measures would be taken up by the agency in and outside the kitchen to prevent any contamination of food during its preparation or distribution. The Hospital Sanitation Committee should take up the following measures to ensure cleanliness.

- a) Periodic sanitary inspection of cooking & serving equipment's; at least once in a day;
- b) Daily inspection of food conveyors, kitchen equipment and service equipment;
- c) Supervise handling and disposing of garbage and waste;
- d) supervising cleanliness in the kitchen & taking appropriate measures.

### 3.14 Storage & Stock

- (a) The agency outsourced for diet preparation would be responsible for maintaining the store and stock. The agency should assign the responsibility of store keeping to person/s Recruited by him/her;
- (b) In case of dry diet, the Hospitals would maintain the store and stock; In such cases, one person would be assigned with the responsibility of the store and stock who would perform the following role.

### 3.15 Cleanliness:

- (a) **Kitchen Staff:** The kitchen staff should wear clean uniform while on duty and keeping themselves clean i.e. keeping hands cleaned properly including finger nails before cooking, limited conversation among them while cooking and serving, keeping utensils clean and maintaining kitchen cleanliness.
- (b) **Dishes/Utensils:** Cleaning of the dishes properly, before and after the use, would be the responsibility of the outsourced agency. However, it would be monitored by the Hospital Sanitation Committee from time to time. The dishes are to be cleaned and sterilized before and after use so that possible contamination can be avoided. Before service, it should be ensured that the dishes are properly cleaned, sterilized and dried. After the use, all the soiled dishes will be collected and placed in one place for washing. The soiled dishes should be cleaned with hot and soapy water. After wash, the dishes should be cleaned to leave no water stain on the dishes. Again, before serving, the dishes should be inspected and used. To avoid contamination, which is expected between the

cleaning and serving, the dishes should be cleaned once again with boiled water before serving.

### 3.16 Food Handling

The persons of the outsourced agency, who are handling food, should follow the followings:

- a) Keeping their hands clean and use glove for serving. They should not touch food in bare hand.
- b) They should wash their hands properly after visiting the toilet and before handling food.
- c) Cover cuts, burns and other raw surfaces with water-proof dressings while handling food.
- d) Ensure that food is supplied as per the consumption specification of foods [hot/warm/cold] and as per the direction of the dietician.
- e) Cover the main food container and protect from flies and other pests before and after serving.
- f) Persons suffering from a discharging wound, sores on hands or arms, discharging nose or who is suffering from attacks of diarrhea or vomiting should not handle food items, either during preparation or serving. Persons with such problems should be brought in to the notice of the catering manager for taking remedial measures.
- g) However, all the persons associated in diet preparation and its distribution should undergo regular free health check up in the concerned medical Hospitals periodically, at least once in every month and more particularly during sickness.

### 3.17 General Service Requirements of the Agency

- a) Operation, Maintenance of Kitchen equipment including cooking & distribution of the cooked food as per menu/diet chart to each hospital bed and collection of dirty dishes from each bed to the Kitchen for cleaning and proper disposal of the hospital kitchen wastes on daily basis at the respective Hospitals.
- b) Providing of good quality hygienic and qualitative food to patients from a Kitchen where Kitchen should be conducted under conditions which are controlled, thereby contributing to a reduction in the incidence of contamination in the hospital.
- c) Collection of dirty plates from each bed (Patients) from Hospital to Kitchen for washing & cleaning. If required, testing & inspection as quality checking and delivery to each bed and maintaining record with log book / challan on daily basis.
- d) Co-ordination with the hospital authority in arranging food/meal on day-to-day basis for patient and hospital needs.
- e) Setting up a comprehensive Kitchen facility within the space allocated in the concerned Hospitals to fulfil the requirements of Kitchen suitable for providing hygienic & qualitative meal to patients and to avoid any spread of unforeseen contamination.
- f) Keeping up in-house Kitchen & store for the concerned Hospitals functional to serve the breakfast, lunch & dinner in stipulated time as per requirement of the Hospitals.
- g) Ensuring of comprehensive Patient Dietary services with utmost care for all equipment and resultant services during the out sourced period.
- h) Providing of necessary Preventive & Breakdown maintenance of Kitchen Room and all Kitchen equipment. Operation and Maintenance of Kitchen with trained engineers/mechanics.

## SECTION 4 - TERMS & CONDITIONS

### 4.1 Period of Engagement

- (a) The engagement shall be for a period of Two years from the date of actual operation (beginning of service) or signing of contract whichever is later.
- (b) The contract shall be signed initially for a period of one year which shall be extended for another year if performance of the agency is found satisfactory as per due assessment.

### 4.2 Award of Contract

On evaluation of technical evaluation of the RFP and decision thereon by the tender inviting authority, the selected bidder shall have to execute a contract with the Tender Inviting Authority within 15 days from the date of acceptance of their bid is communicated to them. This Request for Proposal along with documents and information provided by the bidder shall be deemed to be integral part of the agreement.

### 4.3 Performance Security

The selected agency has to furnish a performance security deposit at the time of signing of contract, amounting to 5% of the total estimated yearly contract value of the concerned district / Institution in the shape of DD / BG from a National /Scheduled Bank in India. The amount of Earnest money deposit of the selected bidder can be adjusted against the performance security deposit. The performance security deposit is for due performance of the contract.

The District Authority / Institution in the following circumstances can forfeit it;

- 1) When any terms or the condition of the contract is infringed.
- 2) When the service provider fails in providing the required services satisfactorily.

### 4.4 Commencement of Services

The selected agency is required to set up the kitchen facility at the DHH, Keonjhar (in the space provided by the authority of the concerned Hospitals) with all infrastructures and the start the service within 15 days of signing of the contract. If the service provider fails to commence the service as specified herein, the tender inviting authority may, unless it consents to the extension of time thereof, forfeit the Performance Security.

### 4.5 Payment & Price Validity

- (a) The payment shall be made in Indian Rupees
- (b) The payment shall be made by the DHH,Keonjhar.
- (c)The mode of payment is as specified below:

The agency would be paid once in a month based on the case load and number of meals supplied. The number of diets prepared during "lunch" would be considered as the benchmark for calculation of number of patients/days. The payment shall be made within 21 days of submission of bills / vouchers in the prescribed format. The hospital administration would verify the bills, vouchers and other supporting and do the needful for payment of the dues within seven working days of submission of bills / vouchers /supporting documents.

#### 4.6 Penalty

- (a) A penalty of Rs.10,000/- shall be deducted for bad quality of food for each occurrence noticed during the inspection of hospital officials.
- (b) For not wearing Uniform/Hand gloves/Cap/Shoes or not possessing identity cards a penalty of Rs.100/- per person/day shall be deducted from the bill as penalty.
- (c) A penalty of Rs.5,000/- in a month shall be deducted for not using the required quantity of meal/food by the agency.
- (d) Rs.50/- per meal per person for shortfall of meal against the target output due to non-availability of man power, raw material etc.
- (e) The amount of penalty shall be deducted from the bill of the agency.

#### 4.7 Termination / Suspension of Contract

- (a) The Tender Inviting Authority may, by a notice in writing suspend the agreement if the selected agency fails to perform any of his obligations including carrying out the services, provided that such notice of suspension
  - i. Shall specify the nature of failure.
  - ii. Shall request remedy of such failure within a period not exceeding 15 days after the receipt of such notice.
- (b) The Tender Inviting Authority after giving 30 days clear notice in writing expressing the intension of termination by stating the ground/grounds on the happening of any of the events (a) to (b), may terminate the agreement after giving reasonable opportunity of being heard to the service provider.
  - (i) If the service provider does not remedy a failure in the performance of his obligations within 15 days of receipt of notice or within such further period as the tender inviting authority have subsequently approved in writing.
  - (ii) If the service provider becomes insolvent or bankrupt.
  - (iii) If, as a result of force major, service provider is unable to perform a material portion of the services for a period of not less than 60 days: or
  - (iv) If, in the judgment of the Tender Inviting Authority, the service provider is engaged in corrupt or fraudulent practices in competing for or in implementation of the project.

#### 4.8 Modifications

Modifications in terms of reference including scope of the services can only be made by written consent of both parties. However, basic conditions of the agreement shall not be modified,

#### 4.9 Force Majeure

For the purposes of this contract, "Force Majeure" means an event which is beyond thereasonable control of a Party, is not foreseeable, is unavoidable, and not brought about by or at the instance of the Party claiming to be affected by such events and which has caused the non-performance or delay in performance and which makes a Party's performance of its obligations hereunder impossible or so impractical as reasonably to be considered impossible in the circumstances, and includes, but is not limited to war, riots, civil disorder, earthquake, fire, explosion, storm, flood or other adverse weather conditions, strikes, lockouts or other industrial action (except where such strikes, lockouts or other industrial action are within the

power of the Party invoking Force Majeure to prevent), confiscation or any other action by Government agencies.

In such circumstances of emergencies and Force Majeure Event, if the Performance Standards are not complied with because of any damage caused to the services or any of the Project Facilities or non-availability of staff, or inability to Provide services in accordance with the Performance Standards as a direct consequence of such Force Majeure Events or circumstances, then no penalties shall be applicable for the relevant default in Performance Standards and would be applied to such particular defaults. Further, unless the Force Majeure event is of such nature that it completely prevents the operation of services, a suspension or failure to provide Services on the occurrence of a Force Majeure event will be an Event of Default and the District authority may terminate this Agreement without any termination payment being made in respect thereof.

The failure of a party to fulfill any of its obligations under the agreement shall not be considered to be a default in so far as such inability arises from an event of force majeure, provided that the party affected by such an event has taken all reasonable precautions, due care and reasonable alternative measures in order to carry out the terms and conditions of the agreement and has informed the other party as soon as possible about the occurrence of such an event.

#### **4.10 Settlement of Dispute**

If dispute or difference of any kind shall arise between the Tender Inviting Authority/User Institution and the service provider in connection with or relating to the contract, the parties shall make every effort to resolve the same amicably by mutual consultations.

If the parties fail to resolve their dispute or difference by such mutual consultation within twenty-one days of its occurrence, then such dispute or difference shall be referred to the sole arbitration of Secretary to Health, Govt. of Odisha whose decision shall be final.

#### **4.11 Right to Accept and Reject any Proposal**

The Tender Inviting Authority reserve the right to accept or reject any proposal at any time without any liability or any obligation for such rejection or annulment and without assigning any reason. The result will be declared after due verification of the submitted document. If found any false or fabricated data/document then the action will be taken against them for necessary blacklisting.

#### **4.12 Jurisdiction of Court**

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

**SECTION 5:**

**CRITERIA FOR EVALUATION**

**5.1 Evaluation of Technical Proposals based on eligibility criteria**

Evaluation of proposals shall be made **at the DHH, Keonjhar** by the concerned authority.

In the first stage, the Technical Proposal will be evaluated on the basis of bidders' fulfillment of eligibility criteria. Only those bidders whose Technical Proposals becomes responsive based on the eligibility criteria, shall qualify for further detail technical evaluation for awards of marks based on the following Criteria

**5.2 Evaluation Technical Proposal for Award of Marks**

The technical proposal of the bidders shall be evaluated and awarded marks based on the following criteria:

Sl No.	Criteria	Total marks (100 marks)	Marking as per criteria	Mark Obtained
1	Work experience	20	3years of experience (2022-23, 2023-24& 2024-25) (2 years for SHG i.e. 2023-24& 2024-25) in preparation and supply of Diet in Health Institutions / Other Institutions having bed strength / Persons of 30 to 100 = 5 marks	
			3years of experience (2022-23, 2023-24& 2024-25) (2 years for SHG i.e. 2023-24& 2024-25) in preparation and supply of Diet in Health Institutions / Other Institutions having bed strength / Persons of >100 to 200 = 10 marks	
			3years of experience (2022-23, 2023-24& 2024-25) (2 years for SHG i.e. 2023-24& 2024-25) in preparation and supply of Diet in Health Institutions / Other Institutions having bed strength / Persons of 200 to 300 = 15 marks	
			3years of experience (2022-23, 2023-24& 2024-25) (2 years for SHG i.e. 2023-24& 2024-25) in preparation and supply of Diet in Health Institutions / Other Institutions having bed strength / Persons of 300 = 20 marks	
2	Average Annual Turnover (Rs.)	20	<b>For DHH</b> For bidders other than SHG Below Rs. 1.00cr = 0 >Rs. 1.00cr to Rs.2 Crs = 10 marks >Rs 2 Crs = 20 marks	
			<b>For SHG / SHG Federation</b> For women Self Help Groups (SHG / SHG Federation] Below Rs.30 lakhs = 0 >Rs. 30 Lakhs to Rs.50 lakhs = 10marks More than Rs.50 lakhs = 20marks	
			<b>For CHC/PHC</b> <b>For bidders other than SHG</b>	

			Below Rs.30 Lakhs = 0 >Rs.30 lakhs to Rs.50 lakhs = 10marks More than Rs.50 lakhs = 20marks	
			<b>For SHG / SHG Federation</b> For women Self Help Groups [SHGs / SHG Federation] Below Rs.10 Lakhs = 0 >Rs.10lakhstoRs.30lakhs= 10 marks More than Rs.30 lakhs = 20marks	
3	No. of Diet Services (Preparation, Supply&Management) executed in different Institution (not less than 30 beds) / Persons (executed during the last three years i.e., 2022-23, 2023-24& 2024-25).	40	2 Institutions : 10 Marks 3-4 Institutions : 20 Marks 5-6 Institutions: 30 Marks > 6 Institution: 40 Marks	
4	Quality Certification	10	ISO 9001 Certification: 5 Marks Food License / Registration: 5 Marks	
5	Presentation	10	Power point presentation on Approach & methodology regarding how the bidder proposes to implement the diet service based on the TOR of the RFP (for max. 15 minutes)	

### 5.2.1 Award of Contract

1. The bidder who will secure highest total marks in the technical bid evaluation will be considered for award of contract.
  2. In case the total marks secured by two or more bidders become equal, then the bidder having **more marks in the SI. No.3** of the above Table (No. of Diet Services in different institution) shall be awarded the contract.
  3. In case the total marks in SI No-03 above the above table by two or more bidders become equal, then the bidder having the higher average annual turnover shall be awarded the contract.
- 5.3 In case of selected, the bidder they will have to furnish the up-to-date food registration license (if no having) from the authority of the concerned region within 30 days of issue of notification of award of contract.

**Note. There is no Financial Proposal to be submitted in the bid, as this is a fixed cost based tender Details of the fixed cost (Diet Rate) to be paid per patient / day for different types of diet with menu is mentioned at Section 3 - Terms of Reference.**

Full Signature of Bidder with seal

# **RFP FORMATS**

**Diet Services at Govt. Health Institutions**

## **TECHNICAL PROPOSAL**

# TECHNICAL PROPOSAL

## FORMAT — T 1

(to be furnished the technical proposal envelope)

### Check List (Technical Proposal)

Please check whether following have been enclosed in the respective cover, namely, Technical Proposal: *(please arrange the documents serially in the following order)*

Sl. No.	Item	Whether included Yes / No	Page No.
1	Format - T1 (Check List)		
2	Bid Document Cost as DD of Rs. _____/-		
3	Earnest Money Deposit of Rs. _____/- as Demand Draft		
4	MSE certificate (If applicable)		
5	Format - T2 (Technical Proposal Submission Form)		
6	Format — T3 (Details of Bidder)		
7	Format— T4 (Annual Turnover Statement by the Chartered Accountant).		
8	Copies of the annual audited statement /Annual Report for 2022-23, 2023-24& 2024-25 (Provisional statement of account shall not be considered)		
9	Copies of work orders & user certificates in support of the information furnished in Format T-5		
10	Copy of Quality Certifications: ISO 9001 if any.		
11	Food License under FSS Act, 2006 in Form - C		
12	Format — T6(Format of Affidavit regarding the firm/agency is not blacklisted)		
13	Copy of the Registration certificate of the bidder		
14	Copy of the GST registration certificate		
15	Copy of PAN (Income Tax)		
16	Copy of valid Labour License		
17	Copy of EPF & ESI registration certificate		
18	Copy of ITR for last 3years i.e. 2022-23, 2023-24, 2024-25.		
19	Any other appropriate documents/certificates/credentials (If applicable), the bidder like to include in the proposal		

**N.B.:** 1. In S.I. No.2, 3& 4 in the page number column should be mentioned as "submitted inside cover A" Instead of page number.

Full signature of Bidder with seal

**FORMAT — T 2**

*(to be furnished in the technical proposal envelope)*

**TECHNICAL TENDER SUBMISSION FORM**

*(On the letterhead of the firm)*

To \_\_\_\_\_

Re.: RFP Reference no. \_\_\_\_\_ dated \_\_\_\_\_

Dear Sir,

I/We, the undersigned, offer to provide the services for the work: **Selection of the agency for Supply of Diet (Dry, Liquid, and Cooked) to Indoor patients.**

I/We are hereby submitting our Proposal, which includes this Technical Proposal sealed under a separate envelope.

I/We hereby declare our Confirmation of acceptance of the Conditions of Contract mentioned in the RFP document under reference cited above.

I/We hereby declare that all the information and statements made in this Proposal are true and accept that any of our misrepresentations contained in it may lead to our disqualification.

I/We undertake that our Proposal shall remain valid for 180 days after the date of bid opening for the purpose of bid evaluation / finalization of contract,

**I/We hereby declare that my organisation has not been terminated/debarred / black listed by any Government/ Semi Government organizations. I/we further certify that I am the competent authority in my organisation authorized to make this declaration.**

I/We understand you are not bound to accept any Proposal you receive,

Yours sincerely,

Full Signature of the Bidder:

Name and designation of Signatory:

Name of Agency \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**Full signature of Bidder with seal**

## Format T3

(To be furnished in the Technical Bid envelope)

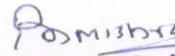
(On the letterhead of the Organization)

### DETAILS OF THE BIDDER

<b>GENERAL INFORMATION ABOUT THE BIDDER</b>				
<b>1</b>	Name of the Bidder			
	Registered address of the firm/agency			
	State			
	Telephone No.	District		
	Email	Fax		
		Website		
<b>Contact Person Details</b>				
<b>2</b>	Name	Designation		
	Telephone No.	Mobile No.		
<b>Communication Address</b>				
<b>3</b>	Address			
	State	District		
	Telephone No.	Fax		
	Email	Website		
	<b>Type of the Firm (Please relevant box)</b>			
<b>4</b>	Private Ltd.	Public Ltd.	Proprietorship	
	Partnership	Society	Others, specify	
	Registration No. & Date of Registration			
<b>Nature of Business (Please relevant box)</b>				
<b>5</b>	Manufacturer	Authorized service provider		
<b>Key Personnel Details (Chairman, CEO, Directors, Managing Partners etc.)</b>				
<b>6</b>	In case of Directors, DIN Nos. are required			
	Name	Designation		
	Name	Designation		
<b>7</b>	Whether any criminal case was registered against the company or any of its promoters in the past?			Yes/No
<b>8</b>	Details of the Branch Office			
<b>9</b>	<b><u>GST Registration:</u></b> Furnish the copy of the GST registration certificate			
<b>10</b>	<b>PAN:</b> Furnish the copy of the PAN			

11	Registration certificate of the firm/agency (furnish the copy)				
12	Copy of quality Certification: ISO 9001, Food License / Registration (furnish the copy)				
13	Bank Details of the Bidder: The bidders have to furnish the Bank Details as mentioned below for return of EMD / Payment for supply if any (if selected) Name of the Bank: Name of the Account & full address of the Branch concerned: Account no. of the Bidder IFS Code of the Bank:				
Date:		Office Seal		Full signature of the bidder	

**Full signature of Bidder with seal**

  
 24.2.26  
**Chief Dist. Medical & Public Health Officer,**  
**Keonjhar**

**FORM T4**

*(to be furnished in the technical proposal envelope)*

**ANNUAL AVERAGE TURN OVER STATEMENT**

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

The Annual Turnover of M/S \_\_\_\_\_ for the financial years are given below and certified that the statement is true and correct.

Sl	Financial Year	Turnover in Lakhs(Rs.)
01	2022-23	
02	2023-24	
03	2024-25	

**Membership No.:**

**Registration No. of Firm**

**Full signature of Chartered Accountant**

**Date:**

**Seal**

**Note:** a) To be issued in the letter head of the Chartered Accountant mentioning the **Membership no.** and **UDIN** as applicable.

a) Attach separate sheets if the space provided is not sufficient.

b) This turnover statement should also be supported by **copies of audited annual statement** of the last three years (2022-23, 2023-24 & 2024-25) and the turnover figure should be **highlighted** there.

*Admission 24.3.26*  
**Chief Dist. Medical &  
Public Health Officer,  
Keonjhar**

## FORMAT T 6

(to be furnished in the technical proposal envelope)

### Format for Affidavit certifying that the firm is not blacklisted (On a Stamp Paper of Rs.20/-)

#### Affidavit

I/We, M/s \_\_\_\_\_ (the name of the agency with address of the registered office) hereby certifies and confirm that we are not debarred by Department of Health & FW, Govt. of Odisha/ or any other entity of Govt. of Odisha or blacklisted by any state Government or Central Government / Department / Organization in India from participating in Tenders / Projects.

I/We further confirm that, our bidding proposal shall be liable for **rejection as well as initiation of legal action** by the tender committee in case any material misrepresentation is made or discovered at any stage of the Bidding Process or thereafter during/after the agreement period.

Dated this .....Day of .....

Full signature of the Bidder

Name:

Designation:

Seal

P.M.ish-2  
Chief Dist. Medical &  
Public Health Officer,  
Keonjhar  
03.26

## FORM T5

*(To be furnished in the technical proposal envelope)*

### PAST EXPERIENCE IN EXECUTING DIET PREPARATION AND ITS SUPPLY /SERVICES IN GOVERNMENT OR PVT HEALTH INSTITUTIONS /OTHER GOVT. INSTITUTIONS

(Attach separate sheets if the space provided is not sufficient)

Name / address of the organization	Work order/Contact No. and date	Brief Description of the scope of work	Details of the Kitchen Setup established if any	No. Of human resource deployed for the diet service	No. of beds/people for which diet service provided	Date of completion of assignment	Value of the assignment	Role of your firm

**Note:** Please furnish the work order /Contract copies of the works executed serially in support of the information mentioned above.

Authorized signatory/Signature (In full and Initials): \_\_\_\_\_

Name and title of Signatory \_\_\_\_\_ (Organization Seal)