

Directorate of National Vector Borne Disease Control Programme

NOTICE INVITING

Expression of Interest (Eoi) for House Hold Survey (HHS) under IMCP-3

Directorate of National Vector Borne Diseases Control Programme (NVBDCP) invites Expression of Interest (Eoi) from interested Organization(s) / Institute(s) for conducting household survey(s) (during October-December, 2017) in seven North Eastern states (viz. Assam, Arunachal Pradesh, Manipur, Meghalaya, Mizoram, Nagaland, Tripura) and Odisha under the Global Fund supported Intensified Malaria Control Project (IMCP) – 3. The IMCP-3, being implemented from October, 2015 to December, 2017 aims to reduce malaria related mortality and morbidity in the project areas by at least 50% by 2017 as compared to 2012 (details of project annexed).

The potential Organization(s) / Institute(s) will be expected to develop a protocol for the survey; recruit survey staff; conduct relevant training for them; undertake the survey; collate, validate & analyze the data; and submit the final report to NVBDCP in a time bound manner.

For being eligible to submit Eoi, prospective organizations/ institutes must have: (a) net worth of at least Rs. 1.5 Crore; and (b) successfully completed at least 3 similar community based studies/ surveys (worth Rs. 50 lakh each) during last three years. The interested organization(s)/ institute(s) may send the application in the prescribed format expressing their interest with profile of their organization(s) / Institute(s) indicating the available expertise for undertaking such household surveys through email / post on the following address within 7 days of publication of this advertisement.

The application should mention the details about organization(s) including its capacity, previous experiences for conducting such surveys, and details of financial assets and liabilities. All communications must cite the aforementioned heading. Detailed proposals/ protocols shall be sought from the selected organization(s) / institute(s) along with technical and financial requirements later.

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PROJECT DESCRIPTION**Title: Intensified Malaria Control Project (IMCP)- 3**

Goal: To reduce malaria related morbidity and mortality in project areas by at least 50% by 2017 as compared to 2012.

Objectives:

- a. To achieve near universal coverage (80%) by 2017 by effective prevention interventions (LLIN) for population living in high project areas (API >1).
- b. To achieve near universal coverage of fever cases by correct, affordable and appropriate parasitological diagnosis; and prompt effective treatment according to the national drug policy in project areas by 2017.
- c. To achieve 100% coverage in project areas by appropriate BCC activities to improve knowledge, awareness and responsive behavior, regarding effective preventive and curative malaria control intervention by 2017.
- d. To strengthen surveillance and M&E, programme planning and management and coordination and partnership development to improve service delivery in project areas by 2017.
- e. To strengthen health systems, community systems through capacity building (training) to improve service delivery in project areas by 2017.

Duration: October, 2015 to December, 2017.

Project areas: 7 NE states (viz. Assam, Arunachal Pradesh, Manipur, Meghalaya, Mizoram, Nagaland, Tripura) and Odisha.

Application Form for Expression of Interest (Eoi)

Section 1: The Applicant Details:

Full Legal Name of Applicant (As per registration certificate)	
Full Name of Applicant	
Complete Address	
Office Telephone & Fax Number (s)	
E-mail Address	
Web Address	
Name of Nodal Officer for House Hold Survey with E-mail address and Phone numbers	
Head of Organization with contact numbers and e-mail address	
Year organization/ institution was registered/recognized	
Registration Number	
Organization/institution mission statement/purpose and primary sectors of the organization's operation	
Staff strength of the organization (details to be annexed)	
No. of branch offices – provide full address; contact details; and officer in-charge's name.	

We/I hereby certify that the information contained herein and attached hereto is complete and accurate to the best of our/my knowledge.

Head of Organization/Institution

Signature

Date

SECTION 2 – PROPOSED ACTIVITY DETAILS:

1. General Details:

Title: Household survey in 7 NE states (viz. Assam, Arunachal Pradesh, Manipur, Meghalaya, Mizoram, Nagaland, Tripura) and Odisha under Intensified Malaria Control Project (IMCP)-3

Duration (3 months): October – December 2017

State(s) proposed to be covered:

Estimated funds requested (in INR):

2. Relevance of the proposed Activity to the Objectives of the Intensified Malaria Control Project – 3:

Please explain how your proposed activity is in line with the objectives of the Intensified Malaria Control Project - 3:

3. Proposed Tasks and Activities:

Please list and briefly describe the activities that your organization/institution proposes to undertake to meet the objectives of the proposed activity- (in 2 pages max.):

4. Past Experience:

Please list your organization's past experience in implementing similar activities:

5. Annexures:

Please attach a copy of your organization's Articles of Incorporation or other documentations which substantiate the legal character/registration of the organization:

6. Any other relevant information: