Annexure- 2						
Format for information related to Expression of Interest						
Section A: Basic Information						
1. Name of theOrganisation:						
2. PostalAddress:	PIN:	District:				
3. Telephone : Telex FaxEmail	Website (if any):					
4. Legal status : () Society () Company () O	thers(specify)					
5. Registration Details : Registered on(Date)						
By						

6. If Organisation/Society claimed as Community Based Organisation (CBOs) Provide the details of Community members those are part of the Governing Board/Executive Board:

S. No	Full Name	Designation	Contact details

7. Registration No. of NITI Aayog web portal (Copy to be enclosed): -----

8. Name of contact person and contact number:

Designation:_____

Section B: Organisational Background

9. Assets/Infrastructure of theorganisation

Category	

Worthinrupees

(eg. Land, building)

8 a. Please provide details, regarding the annual budget of your organisation at least last 3 years

(attach the detailed audited statement for 3 years)

Year	Source of funding	Amount (in Rs.)	List of activities	Activities similar to the TOR/Scope of Work	Geographical area of activities as mentioned in column no. 5
1	2	3	4	5	6

8.b.: Whether blacklisted/debarred by any agency (both government, private or World Bank/ UN bodies) in the past? If yes, provide details in an Affidavit.

8. c.:Whether anystafforboardmemberofyourorganisationispartof anySACS/TSUstaffs currentlyorinthe past. Please provide the above information in the form of anAffidavit.

Section C: Current Programmes being run by the organisation

- 9. Geographical location of Work List -Village, Panchayat, Block, Taluk/SubDivision, District (Each location should be separatelyspecified)
- 10. Population with which they are presently
- working:
- () Rural/Urban:
- () Socioeconomic group :
- () Occupational group :
- () Sex groups :
- () Students/Educational Institution :
- () Youth :
- () Women groups :
- () Others :
- 11. Please provide basic information on the key projects carried out by your organisation since the last three years (5 lines for each subject attachseparately).
 - \cdot Communityserved
 - · Objective
 - · Strategies
 - \cdot Mainoutcomes
 - \cdot Evaluation methods employed
 - \cdot Evaluation results
- 12. A brief write up on the programmes the organisation currentlyruns(not more than three pages)

- 13. Agencies with experience in Health and HIV sector. Please specify and provide details of the client/donor agency, nature of projects, project period, contract value, continuing/completed.
- 14. Agencies with experience of working with projects supported by SACS/DACS. If yes, provide in details name of the SACS/DACS, nature of projects, project period, status of the project (continuing/completed/terminated). In case of termination please provide the reason for termination. Attach any relevant document issued by SACS/DACS clarifying termination or the relevant reports including evaluationreports.

Section D: Documents Required

- 14. Copies of the following documents need to be provided with self-attestation by competent authority of the organisation
 - i. Copy of the valid Society Registration certificate / Trust Deed furnished
 - ii. Copy of Memorandum of Association and Article of Association furnished.
 - iii. Copy of Audited Statement attached (For NGOs 3 years For CBOs At least 1 year) Activity Report / Annual Reports furnished (For NGOs – 3 years For CBOs – Atleast 1 year)
 - iv. Copy of the PAN Card
 - v. List of Executive Committee/ Governing Board members with Contact details and occupation
 - vi. Copy of valid registration/number of NITI Aayog -Drpan portal
- vii. Copy of last or latest filled Income Tax Returns (ITR)
- viii. Identification document of Authorized signatory submitting EoI (copy PAN and AADHAAR Card)
- ix. Resolution by Executive Committee/ Governing Board members for submission of EoI to SACS
- x. Record of discussions / minutes of Executive Committee/ Governing Board for the last three years (in the case of CBO for minimum one year).
- xi. Copies of the affidavit as required
 - Indicating that is not involved in any corrupt practices and they have never been blacklisted/debarred by any agency (both government, private and World Bank/UN bodies).
 - In case the agency has been blacklisted/debarred in the past, the details of such blacklisting/debarment should be provided in the Affidavit.
 - Affidavit should also indicate that no staff or board member is part of any SACS/TSU staffs currently (or in the last 3 years which may create conflict of interest).
- xii. Copy of last filled Income Tax Returns (ITR)
- xiii. Copy of valid registration/certificate under section 12A or 80G of Income Tax Act/ Valid Tax exemption certificate
- xiv. Organogram reflecting staff of similar nature/scope of work projects in last three financial year. Experience of:
 - a) HIV/AIDS Project experience in carrying out Targeted Interventions/Link Worker Scheme with Core/ Vulnerable groups, Community Care Centres, Community Support Centre, Drop-In Centres (DIC) for PLHAs or any other activity as per guidance of NACO/SACS in last three financial year.

- b) Managing other health projects such as RCH, Sexual health project, TB, Family planning in last three financial year.
- c) Managing community development projects in last three financial year. (Health, Education, Skill development, Rural Development, SHGs formation, etc.)
- xv. Experience in forming / establishing community based networks
- xvi. Document showing any member of the target community in the advisory committee of the NGO/For CBO any professional in the advisory committee.
- xvii. NGO/CBO have any document explaining their experience of involving different Stakeholders in their work?, such as
 - a) Civil Society Organizations
 - b) Government Departments
 - c) Private Sector
 - d) Faith Based Organizations Cooperatives
- xviii. NGO/CBO being a part of any consortium / network
- xix. NGO/CBO involved in any committees formed by SACS / government departments
 - 15. Name of the person who filled this form:

Qualification and experience:

Designation:

Address:

TOR /Scope of work involved

Targeted interventions (TI) and Link Worker Scheme (LWS) are aimed at offering prevention, testing and care services to populations with high risk behavior. These populations include Female Sex Workers (FSW), Men-who-have-sex-with-men (MSM), Transgenders (TG), Injecting Drug Users (IDUs) and Bridge Population (Truckers and Migrants) and Prisoners with the active involvement of the community. These interventions seek to reduce risk and vulnerabilities associated with these populations and to increase health seekingbehaviour.

Components of Targeted Interventions under NACP:

1. Social and Behaviour ChangeCommunication

- This component involves understanding and assessment of individual and group practices/behavior which can pose risk to HIVinfection.
- Development of context specific strategies/activities to address the risk of infection through peer counseling, professional counseling, creating enabling environment to reinforce safepractices.
- The Peer educators/ peer leaders and Out Reach Workers/ Health educators lead activities under this component through one-to-one sessions and group sessions among the community.
- Information, Education and Communication (IEC) materials are developed to further augment behaviour change.

2. Access to HIV prevention, testing and treatment services

- This component is aimed at improving access to STI services as STI (both symptomatic and asymptomatic) pose greater risk for HIVinfection.
- Access to STI services is provided through three different approaches i.e. Project Based Clinics, Fixed day and time – Fixed time out reach clinics and Referral clinics either with private or public facility. Also health camp based approach is adopted for interventions working withmigrants.
- All IDU projects are required to establish a static clinic within the DIC for abscess

management, STI treatment and treatment of common physical co-morbidities. Whereas FSW MSM and TG TIs would have their DICs attached to project office or as decided in the contract. The migrant TIs would have 3 DICs in place preferably at the worksite, residences and project office or as decided in thecontract.

- Under TI budget there is provision for part time doctor and ANM / Counsellor for TI.
- Provision of commodities such as condoms, STI Kits, needle and syringes and lubes to ensure safe sex/injecting practices
- Enabling Environment throughstructuralintervention. The interventions focus on creating an environment which facilitates access to information, services and commodities by the high risk groups. The interventions carry out advocacy with key stakeholders and ellicit their involvement in the HIV preventionprogramme
- Linkages to ICTC, ART, Community Support Centre, NTEP Programme, Government OST centre, Detoxification services (for IDU projects). Some of NGO projects working with IDUs may be required to implement Opioid Substitution Therapy directly in addition to the other preventive services mentioned above.

Expected Deliverables

- The NGO/CBO contracted by SACS is expected to maintain separate full time staff as per the provisions and ensure that they are performing as per theirTOR.
- The TI project would work with specified groups in a locality as designated bySACS.
- The TI/ LWS project is expected to provide regular services (as per the provisions in the contract and project proposal) to the target group, make available condoms, lubes, needles and syringes as per therequirements.
- The TI/LWS project is expected to perform based on the performance indicators as agreed in the contract. This includes service provisioning to the target group, linking with services such HIV testing at ICTCs or through Community Based Screening (CBS), linkages with DSRC/ STI clinics, linkage with TB programme, ART programme and other social developmentprogrammes.

- The TI/LWS project is expected to maintain financial records and other documents in the TI project office as agreed in the contract and would be required to report to SACS/ TSU/NACO.
- The TI/LWS project is expected to provide support in implementation of TI Revamped Strategy programmatic Mapping Population Size Estimation (MPSE) and HSS.
- The project is expected to provide HIV/AIDS prevention, testing and treatment services to spouse/partners of HRGs and Index testing of PLHIV also.
- The NGO/CBO is expected to provide support in terms of advocacy and networking with local stakeholders to ensure that there is an enabling environment is maintained in the projectarea.
- Project to extend and ensuring to reach out the target community by linking them with various social protectionscheme.

Conflict of Interest

- Neither the NGOs/CBOs/Organisation, their personnel, agent, network partner or service provider nor their personnel shall engage in any personal business/professional activities, either during the course of or after the termination of contract, which conflict with or could potentially conflict with the object of the SERVICES.
- The NGOs/CBOs/Organisation shall notify the GRANTOR immediately of any such activities or circumstances, which give rise to or could potentially give rise to a conflict and shall advise the SACS/NACO how, they intend to avoid such a conflict.
- NGOs/CBOs/Organisation (including their personnel, agent, network partner or service provider) shall not have a close business or family relationship with a professional staff of the SACS/NACO who are directly or indirectly involved in any part of the selection process or the supervision of services provided under this Contract/Project/Intervention.
- In the event of a conflict as described above arising during the tenure of this Contract, the SACS/NACO reserves the right to terminate this Contract on giving written notice to the NGOs/CBOs/Organisation.