

TENDER FOR SELECTION OF AGENCY FOR SUPPLY OF DIET

1. Sealed tender are invited from eligible registered Individual suppliers/ catering farm & women self help group (having upto date GST clearance certificate) having adequate experiences in taking up the works for supply & Distribution of Therapeutic & Non- Therapeutic diet for District Head Quarter Hospital Bhadrak for the year 2019-20.
2. Interested bidders may obtain details terms and conditions from the website for taking up this assignment. The interested bidder may download the tender document from the district website i.e. www.bhadrak.nic.in.
3. The tender will have to be submitted in two parts i.e. technical bid (cover-A) and financial bid (cover-B). The bidders should their technical and price bid separately in two envelopes clearly marked as "Technical Bid" and "Price Bid". And those two envelopes should be put into another outer envelope superscribed as "Tender for supply of Diet" in reference to the Advt no. 1442 dt 12.02.2019
4. The tender should be addressed to:

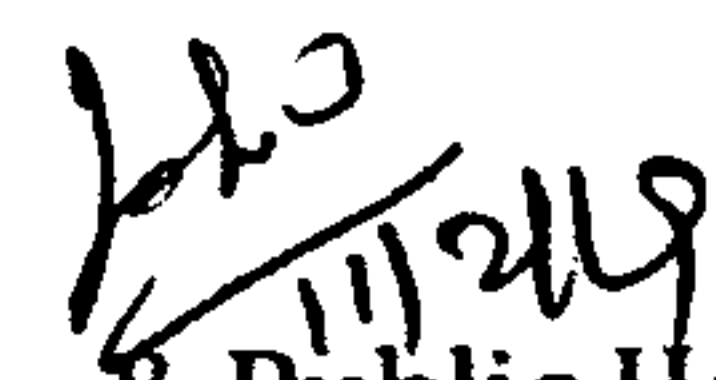
The Chief District Medical & Public Health Officer Bhadrak
Nuabazar, PIN: 756100, Post-/Dist-Bhadrak

5. The last date and time of submission of tender is 25.02.2019 at 5 p.m. The tender shall be opened on 26.02.2019 at 11.AM at DHH Conference Hall, O/o CDM & PHO Bhadrak at in presence of tenderers and their authorized representatives who may wish to be present.
6. The Women Self help group (SHGS) agencies certifying the criteria laid down in the bid document who have the required operational experience in dietary service & its management.
7. The work details have been mentioned in this bid documents for the reference of the bidder and preparing the the bid document accordingly.
8. Bidders who qualify technical bid their financial proposal shall only be opened.
9. The authority has every right to accept or reject the tender without assigning any reason there of.

NB:-

1. The rate should be inclusive of , GST & transportation cost.
2. Consignee: Chief District Medical Officer Bhadrak.

Sd/-Chief District Medical


& Public Health Officer
Bhadrak.

TERMS AND CONDITIONS

01. The organization should be a bonafied registered body.
02. The organization should have PAN / TIN holder & up to date GSTIN clearance certificate.
03. The organizations will have to submit the Affidavit (on original stamp paper of relevant value) with following clauses:
 - a. Our organization has not been blacklisted by any Government organization.
 - b. Our organization does not have any legal suit / criminal case pending against it for violation of VAT / ST / GSTIN Act or any other law.
 - c. That the organization agrees to abide by all terms & conditions of tender.
 - d. The organization will quote prices inclusive of all taxes.
04. The tender must be accompanied by EMD of Rs.50,000/- in shape of Bank Gurantee drawn on any Nationalized / Scheduled Bank in favour of CDMO, Bhadrak, payable at Bhadrak. Tenders not accompanied by EMD will not be considered.
05. The bidder should have a registered / operating office in the locality with staff strength not less than 10 members.
06. The bidder / outsourced agency should have relevant experience in diet preparation, diet service and overall management of diet in hospital or similar Government and/or non-Government establishments.
07. The bidder should have a minimum of 3 years experience in diet preparation and its supply / services in public or private institutions.
08. If the agency has provided similar type of services in any public /private health institution/s, it would be the added advantage. The agency should provide required evidence in this regard
09. The agency must be a registered body under appropriate law of the State or Central Government and having the documentary evidence in this regard.
10. The Hospital administration is free to take suitable decision and may consider relaxation in the overall eilligibility criteria in case of Women(SHGS)
11. Conditional tenders are liable to be rejected. In the event of acceptance, CDMO decision will be final. The tender, which is not as per our required specifications, will not be considered.
12. The Agencies after selection has to deposit security money in shape of bank guarantee amounting to Rupees 3,00,000 (Three Lakhs only) which should not be less then 5 % of the total reimbursable avarage amount annually Rs.60,00,000/-within one week of signing the contract.The bank guarantee would remain valid initially till the end of the intial contract period & extendable if the contract gets extended.If the bidder failed to supply the diet as per agreement the bank guarantee will be forfeited.
13. The CDMO will not pay any advance payment to the organization. The organization will have to carry out the entire job on its own and the amount will be paid only after satisfactory completion of the job and submission of bill in that regard.The payment will be made after received allotment from the DHS Odisha Bhubaneswar
14. Bidder must have sound knowledge of latest intellectual and property right. The authority who assigns the work is no way responsible for any deviation made by the supplier in this regard.



15. Under no circumstances shall the organization appoint any sub-contractor or sublease the contract. If it is found that the organization has violated these conditions the contract will be terminated forthwith without any notice and security deposited by the organization shall be forfeited

16. The head of the organization (bidder) should submit an authorization and specimen signature of their authorized signatory

17. In case of failure on part of the approved supplier to supply the item as per the supply order within stipulated period the CDM& PHO, Bhadrak shall have the liberty to purchase those items from other sources and the approved suppliers shall be liable to pay the excess amount which this office may have to incur being the difference of actual amount of purchase minus the amount of approved rate. Accordingly, the difference as aforesaid shall be recovered from the approved supplier from the performance security deposit amount.

18. 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 or any such norms that is suggested and agreed upon mutually by the hospital administration and the outsourced agency / bidder.

19. Hereby, it is mandatory for the health institution to pay the dues to the agency within the first seven working days of each month, based on the submitted 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 as per the availability of funds under diet.

20. Cost Norm for In-door Patient's Diet:

SN	Patient Category	Revised Rate of Diet per Patient per Day
1	Paediatric	50.00
2	General	50.00
3	Cancer	60.00
4	TB	60.00

21. 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 0.30 hrs for each category of diet timing. The diet preparing and distributing contractor would be advised accordingly

1. Breakfast: Between 7.30 am to 8.00 am
2. Lunch: Between 1.00 pm to 2.00 pm
3. Dinner: Between 8.00 pm to 9.00 pm

22. Right to Access Diet:

- a. Right to diet, as per the prescribed standard of diet, adhering to the quality and quantity, is reserved for all the in-door patients.
- b. Any in-door patient, if not allotted with bed but admitted as in-door patient would be entitled to avail the diet as per the prescription of the doctor and advice of the dietician.
- c. During admission to the in-door, every patient would have a diet advice slip [please find the format attached] which would be treated as diet entitlement slip for the in-door patients till discharged from the health institution.

23. Outsourcing Diet Preparation & Supply:

- a. Outsourcing for diet preparation and its supply/distribution is applicable for the cooked diet only. For dry diet, the concerned health institution would procure and distribute the diet. The health institution would procure dry diet from the empanelled agencies, empanelled specifically to supply dry food items like biscuits, milk, fruits etc.
- b. The agency empanelled and assigned with the responsibility of preparation and supply of diet would adhere to the prescribed quality standards under specific diet category [liquid diet, semi-solid diet, diet for diabetic etc.]. The agency must agree to provide different types of diet, as per the requirement of the patient and indent placed in this regard by the dietician / hospital management.
- c. The selected agency would sign a contract with the administration / management of health institution. The period of the contract would be initially for 12 months and can be extended for the same period based on the satisfactory performance of the supplier / outsourced agency. The performance of the agency must be certified by the management of the health institution before extending or renewing the contract period. During extending or renewing the contract period, the management may think of revising the conditions of the contract as per its suitability without affecting the basic objective.
- d. The outsourced agency would procure raw materials only from the designated suppliers identified mutually by the health institution and the outsourced agency. If so wished, the health institution along with the outsourced agency would empanel one or more than one supplier for the supply of different items, for preparation of cooked diet. For dry diet, procurement would be done by the concerned health institution through empanelled agencies without any outsourcing.
- e. For the supply of dry diet, the concerned health institution would empanel different suppliers independently. If so wished by the health institution, multiple agencies may be empanelled for different items. The agencies would be identified and empanelled through tender process following tendering norm of the Government. For tendering, quality of the items to be supplied would be fixed and lowest price, adhering to the mentioned quality would be selected for supply.
- f. The health institution would take care to ensure that the items [packaged ones] supplied or used for cooking have not surpassed the date of expiry. In case of perishable items, the quality of supply, as per the prescribed standard would be adhered to by the supplier / outsourced agency. In case, if the management of the hospital feels that the supplied items, perishable or non-perishable, are not up to the standard norm, they would return the items to the concerned agency on the spot of receiving. If so wished by the management, a penalty may be charged to the empanelled supplier for negligence and taking risk of providing poor quality materials. Quality review of the supplied items would be done by the dietician, members of DVC, management of the health institution and RKS from time to time.

24. Quality Assurance of Raw Materials:

- a. The materials / commodities to be supplied by the empanelled supplier/s, either for cooking or as dry food should be in line with the quality norm of the Government. One person should be assigned at the health institution level to look after the quality aspect of the supplied items.
- b. Quality inspection of supplied materials is mandatory for dry diet on day basis. For the raw materials supplied by different suppliers for preparation of cooked diet, quality check would be done on day basis during procurement / supply.
- c. Procurement should be planned to ensure that expected strike/s, prolonged holidays and/or any such unprecedented circumstances should not affect the diet preparation and its supply to the in-door patients

25. Storage of Commodities / Raw Materials:



- a. 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 health institution or any other persons assigned for the purpose. The perishable and non-perishable items should be stored as per the storage specification norms.
- b. Care should be taken to avoid quality degradation of the food commodities due to humidity, rodents, insects etc.

26. Fuel for cooking:

The kitchen should have LPG connection for diet preparation with provision of additional cylinder.

27. Diet Certification:

Diet prepared [cooked] / procured [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.

28. Sanitary Measures:

Required sanitary measures would be taken up 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.

1. Periodic sanitary inspection of cooking & serving equipments; at least once in a day;
2. Daily inspection of food conveyors, kitchen equipment and service equipment;
3. Supervise handling and disposing of garbage and waste;
4. Supervising cleanliness in the kitchen & taking appropriate measures

29. Cleanliness:

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.

Dishes/Utensils: Cleaning 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.

30. Food Handling:

The persons, who are handling food, should follow the followings.

1. Keeping their hands clean and use glove for serving. They should not touch food in bare hand.
2. They should wash their hands properly after visiting the toilet and before handling food.

3. Cover cuts, burns and other raw surfaces with water-proof dressings while handling food.
4. Ensure that food is supplied as per the consumption specification of foods [hot/warm/cold] and as per the direction of the dietician.
5. Cover the main food container and protect from flies and other pests before and after serving.
6. Person/s suffering from a discharging wound, sores on hands or arms, discharging nose or who is suffering from attacks of diarrhoea 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.
7. However, all the persons associated in diet preparation and its distribution should undergo regular free health check up in the concerned medical health institution periodically, at least once in every month and more particularly during sickness.

31. Other Key Requirements:

- a. The food after preparation should be checked and tested by the cook at the kitchen level and further verified and certified by the dietician / medical officer in-charge. If the quality and condition of food is found unsatisfactory, it should not be served and alternative arrangement should be made by the outsourced agency.
- b. Smoking in the public place including kitchen is strictly prohibited.
- c. Premises should be maintained and kept clean. This involves washing floors at least three times in a day supplemented by sweeping. Using damping agents, as often as may be necessary and cleaning all walls and other surfaces at least once in a week. All cupboards, drawers and other fixtures should be kept scrupulously clean and free from all articles other than those for which they are intended.
- d. Personal cleanliness on the part of the staff should be maintained. Other personal equipment/s should be washed and changed frequently.
- c. The refrigerator should be kept thoroughly cleaned and defrosted at least once in a week.
- e. Infestation by rats, mice and other rodents is dangerous as they can spread infection. All practicable steps should be taken to eliminate this source of infection such as maintaining the premises thorough repaired and cleaned, removing food scraps promptly and immediately, using impervious receptacles with tightly fitting covers for the storage of foods, fly-proof system etc.

32. Store and Stock:

- a. The agency outsourced for diet preparation [cooked diet only] 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 health institution 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.

33. Diet Menu:

Table 2: Diet menu for Paediatric

Day	Breakfast	Lunch	Dinner
Sunday	Apple one and Bread-100gm	Rice-50gm Dalma- [Dal 15 Gm + Veg50 Gm +Potato 25 Gm] Veg Potato fry- [Veg 50gm+ Potato 25gm]	Rice-50gm Dalma- [Dal 15 Gm + Veg50 Gm +Potato 25 Gm] Veg Potato fry- [Veg 50gm+ Potato 25gm]
Monday	Apple one and	Roti/Rice-50gms, Dal-	Roti/Rice-50gms, Dal-

	Bread-100gm	15gm, Vegetable-50gm, Potato-25gm, Paneer-25gm	15gm, Vegetable-50gm, Potato-25gm, Paneer-25gm
Tuesday	Orange one and Suji Kheer	Rice-50gm Dalma- [Dal 50gm + Veg 150gm], Veg potato fry [Veg 50gm + Potato 25gm]	Rice-50gm Dalma- [Dal 50gm + Veg 150gm], Veg potato fry [Veg 50gm + Potato 25gm]
Wednesday	Banana one and Suji Kheer	Rice Khichdi [Veg 100gm + Rice 25] Non Veg(Fish/Egg Curry) Potato Varta- [Potato 50gm]	Rice Khichdi [Veg 100gm + Rice 25] Potato Varta- [Potato 50gm]
Thursday	Apple one and Simei kheer	Rice-50gm Dalma- [Dal 15gm + Vegetable 75gm + Potato-25gm] Veg fry- 100gm	Rice-50gm Dalma- [Dal 15gm + Vegetable 75gm + Potato-25gm] Veg fry- 100gm
Friday	Orange one and Custard	Rice-50gm Dal-15gm Egg Curry- [Egg one]	Rice-50gm Dal-15gm Egg Curry- [Egg one]
Saturday	Banana one and Bread-100gm	Rice-50gm Dal-15gm Soyabean-20gm	Rice-50gm Dal-15gm Soyabean-20gm

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

33.

Breakfast	Milk-300ml
Mid-Morning [10.00 AM]	Plain Custard Milk-150ml 30gm Custard Sugar-5gm to 7gm
Lunch [1.00 PM]	Grinded & Stained Rice + Dal + Oil [5ml] rich in MUF & DUF
Evening Tea [4.00 PM]	Milk with/without sugar 300ml
Dinner [7.00 PM]	Rice & porridge (30gm Rice / suji sugar-5gm, milk-100ml)
Bed Time [10.00 PM]	Barley Water [15gm Barley+150ml milk] vol. 300ml

Note:

The diet menu is suggestive & may be changed based on the recommendation of the dietician / medical officer

34.

Day	Breakfast	Lunch	Dinner
Sunday	Bread-100gm	Khichdi(Rice-100gm+Dal50gm), Sntula	Roti-100gm Dalma-150gm/Santula-

		Bharta(Mixed/Brinjal bharta-100gm),Kheer-150gm	250gm Kheer/Milk-250ml
Monday	Suji Halwa-100gm	Khichdi(Rice-100gm+Dal50gm),Sntula Bharta(Mixed/Brinjal bharta-100gm),Kheer-150gm	Roti/Rice-50gms,Dal-15gm,Vegetable-50gm,Potato-25gm,Paneer-25gm
Tuesday	Bread-100gm	Khichdi(Rice-100gm+Dal50gm),Sntula Bharta(Mixed/Brinjal bharta-100gm),Kheer-150gm	Roti-100gm Dalma-150gm/Santula-250gm Kheer/Milk-250ml
Wednesday	Semia-100gm	Khichdi(Rice-100gm+Dal50gm),Sntula Bharta(Mixed/Brinjal bharta-100gm),Kheer-150gm Non-veg (Fish Curry)	Roti-100gm Dalma-150gm/Santula-250gm Kheer/Milk-250ml
Thursday	Custard-100gm	Khichdi(Rice-100gm+Dal50gm),Sntula Bharta(Mixed/Brinjal bharta-100gm),Kheer-150gm	Roti-100gm Dalma-150gm/Santula-250gm Kheer/Milk-250ml
Friday	Rice-100gm	Khichdi(Rice-100gm+Dal50gm),Sntula Bharta(Mixed/Brinjal bharta-100gm),Kheer-150gm Non -Veg (Egg Curry)	Roti-100gm Dalma-150gm/Santula-250gm Kheer/Milk-250ml
Saturday	Sugar-100gm	Khichdi(Rice-100gm+Dal50gm),Sntula Bharta(Mixed/Brinjal bharta-100gm),Kheer-150gm	Roti-100gm Dalma-150gm/Santula-250gm Kheer/Milk-250ml

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

35.

Table 5: Weekly Diet Menu for Diabetes Mellitus

Day	Breakfast	Lunch	Dinner
Sunday	Idli 3pc -240gm Sambar-100gm Fruit-80gm (Orange/Apple)	1 Cup rice-150gm or 3 Roti, Dal-100gm, Non-Veg.Curry- 100gm or Paneer-100gm	Rotti-2-100gm Dalma-100gmm Milk & Milk product- 1glass(240ml)
Monday	Phulka-2-100gm Santula-100gm Fruit-80gm	1 Cup Rice-150gm/3 Roti Dal-100gm Veg Curry-100gm Salad-1 Quarter plate	Roti-2-100gm Cholle masala-100gm Santula-100gm Milk & Milk Product-1glass
Tuesday	Dalia Upma- Vegetable- Fruit-80gm	1 Cup Rice/3 Roti-150gm Dalma-100gm Karela bharta-100gm Salad-100gm	Roti-2-100gm Vegetable Curry-150gm Dal-100gm Milk & Milk Product(240ml)

35

Wednesday	Chakuli-2-100gm Matar Curry-150gm Fruit-80gm	1 Cup Rice/3 Roti-150gm Dal-100gm Non Veg. Curry-100gm Paneer-100gm	Roti-2 Veg.curry-150gm Dal-100gm Milk & Milk Product(240ml)
Thursday	Idli-3 Sambar-100gm Fruit-80gm	1 Cup Rice/Roti-3- 150gm,Dalma-100gm, Brinjal bharta100gm, Curd- 80gm	Roti-2-100gm,Dal- 100gm,mix bhaja- 100gm,Milk &Milk Product(240ml)
Friday	Roti-2-100gm Santula-100gm Fruit-80gm	1 Cup Rice/3 Roti-150gm Dal-100gm Veg Curry-100gm Non-Veg-(Fish/Egg curry)	Roti-2-100gm Rajmah-100gm Santula-100gm,Milk &Milk Product(240ml)
Saturday	Dalia Upma- Vegetable- Fruit-80gm	1 Cup Rice/Roti-150gm,Dal- 100gm Veg curry-100gm Raita-50gm	Roti-2-100gm,Dal-100gm Brinjal bharta-100gm,Milk &Milk product(240ml)

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

36.

Table 6: Weekly Diet Menu for Patients of Heart Disease

Day	Breakfast	Lunch	Dinner
Sunday	Roti 3pc medium size, sambar and chatni	Rice/Roti-150gm, Dal-25-25gm Sabaji(mixed)-150gm-Seasonal vegetable Chicken/fish-75 gm/Egg-2pc/ Paneer 50gm exchange	Roti/Dalma/Mixed bhaja/Mixed vegetable curry, One glass of milk
Monday	Idli 3pc medium size, sambar and chatni	Rice/Roti-150gm, Dal-25-25gm Sabaji(mixed)-150gm-Seasonal vegetable, Meal Maker/Sola curry/Besan curry Fruits-apple/orange/banana-one medium size	Roti/Dalma/Mixed bhaja/Mixed vegetable curry, One glass of milk
Tuesday	Chakuli 3pc medium size, sambar and chatni	Rice/Roti-150gm, Dal-25-25gm Sabaji(mixed)-150gm-Seasonal vegetable, Meal Maker/Sola curry/Besan curry Fruits-apple/orange/banana-one medium size	Roti Dalma/Mixed bhaja/Mixed vegetable curry, One glass of milk
Wednesday	Upama, sambar and chatni	Rice/Roti-150gm, Dal-25-25gm Sabaji(mixed)-150gm-Seasonal vegetable Chicken/fish-75 gm/Egg-2pc/ Paneer 50gm exchange	Roti/Dalma/Mixed bhaja/Mixed vegetable curry, One glass of milk
Thursday	Chuda Puha, sambar	Rice/Roti-150gm, Dal-25-25gm	Roti/Dalma/Mixed

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	and chatni	Sabaji(mixed)-150gm-Seasonal vegetable, Meal Maker/Sola curry/Besan curry Fruits-apple/orange/banana-one medium size	bhaja/Mixed vegetable curry, One glass of milk
Friday	Roti 3pc medium size, sambar and chatni	Rice/Roti-150gm, Dal-25-25gm Sabaji(mixed)-150gm-Seasonal vegetable Chicken/fish-75 gm/Egg-2pc/ Paneer 50gm exchange	Roti/Dalma/Mixed bhaja/Mixed vegetable curry, One glass of milk
Saturday	Idli 3pc medium size, sambar and chatni	Rice/Roti-150gm, Dal-25-25gm Sabaji(mixed)-150gm-Seasonal vegetable, Meal Maker/Sola curry/Besan curry Fruits-apple/orange/banana-one medium size	Roti/Dalma/Mixed bhaja/Mixed vegetable curry, One glass of milk

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

37.

Table 7: Weekly Diet Menu for Chronic Renal Failure [CRF] / Chronic Kidney Disease [CKD]

Day	Breakfast	Lunch	Dinner
Sunday	Porridge (Sagoo) 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-Cerels 100gm-Milk 30gm-Sugar
Monday	Sagoo 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-Cerels 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/Rotti Sabji-150gm Porridge-(kheer)-50gm-Cerels 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/Rotti Sabji-150gm Porridge-(kheer)-50gm-Cerels 100gm-Milk 30gm-Sugar
Thursday	Chuda Raw-100gm	Rice-150gm Dal-1 cup(15gm)	Rice/Rotti Sabji-150gm

	Milk-100gm Sugar-30gm to taste	Sabji(Seasonable vegetable except Green Leafy Vegetable, Potato & Tomato	Porridge-(kheer)-50gm-Cerels 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/Rotti Sabji-150gm Porridge-(kheer)-50gm-Cerels 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/Rotti Sabji-150gm Porridge-(kheer)-50gm-Cerels 100gm-Milk 30gm-Sugar

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

38. Diet Prescription Slip:

Sl. No.		Date of Issue		
District		Institution Type	MCH	DHH
Block / Sub-division			SDH	AH
Patient's Name			CHC	PHC
Patient's Age		Gender	Male	Female
Diagnosed Disease		Diagnosis Date		
Name of the Doctor		Admission Date		
Expected days of stay		Expected Discharge Date		

Prescribed Diet:

Date	Breakfast		Lunch		Dinner		Special Diet, if any
	Diet Type	Diet	Diet Type	Diet	Diet Type	Diet	

Signature of the Dietician

Name:

Place:

Please mention the Diet Type by date:

[1] Normal Diet; [2] Semi-solid Diet; [3] Full-Liquid Diet; [4] Diet for Cardio-Vascular; [5] Diet for Diabetic; [6] Diet for CRF/CKD; [7] Diet for Paediatric

39. Diet Quality Certificate:

Date	Breakfast	Lunch	Dinner
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Diet Type	Quality			Diet Type	Quality			Diet Type	Quality		
	G	M	P		G	M	P		G	M	P

Signature of the Dietician _____

Signature of the Senior Doctor _____

G: Good; M: Manageable; P: Poor

Diet Type:

[1] Normal Diet; [2] Semi-solid Diet; [3] Full-Liquid Diet; [4] Diet for Cardio-Vascular; [5] Diet for Diabetic; [6] Diet for CRF/CKD; [7] Diet for Paediatric

40. Stock Issue Register:

Month	Date	Voucher / Bill No	Particular	Received		Issued		Balance Stock	Remark
				QT.	Price	Date	QT		

41. Indent Slip:

Date: _____

Ward: _____

Diet Time	Diet Type	No. of Persons
Breakfast		
Lunch		
Dinner		

Signature _____

42. Clarification on the Bid: _____

TENDER FORMAT
PART - I
(TECHNICAL BID) COVER - A
(To be furnished in Cover - A Technical Bid)

1	Name of the Organization	
2	Address of the organization	
3	Local office Address of the organization	
4	Authorization and specimen signature of the authorized signatory	
5	Telephone number of authorized signatory/Organization	
6	GST registration number	(Self Attested photocopy to be attached)
7	GST Clearance certificate no (Upto date)	(Self Attested photocopy to be attached)
8	PAN NO	(Self Attested photocopy to be attached)
9	Bank Guarantee of Rs 50,000/-	Original paper enclosed
10	Draft number and date, for the Tender paper cost & Tender processing cost (500+500) of Rs 1,000/- non-refundable.	Original Bank DD attached
11	3year Experience in Diet Preparation, Diet service and overall management of in hospital or similar government and non-government establishment. Copy of a.Work Order b.Annual Turn Over & Agreement	(Self Attested photocopy of Document to be attached)
12	The agency must be a registered body under appropriate law of the State or Central Government and having the documentary evidence in this regard.	(Self Attested photocopy of to be attached)
13	Affidavit of declaration that the Organization does not have any legal suit/criminal case pending against it for violation of ST / VAT /GSTIN Act or any other law and agree to abide by all terms and conditions of tender.	Affidavit in original stamp paper certified by notary with clauses as mentioned in clause no. 04 of terms and conditions.



14	Whether all documents submitted signed by the authorized signatory of the organization (Yes/No)	
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DECLARATION

I/we hereby certify that the terms and conditions, specification etc. given with the tender notice have been read carefully and acceptable to me/us and that the information furnished above is full and correct to the best of by/ our knowledge. I/we understand that in case of any deviation in the above statement at any state, the Firm/Agency will be blacklisted and will not have any dealing with our organization in future.

Place

Date

(Signature and seal of the authorized signature)



TENDER FORMAT

PART-II

(FINANCIAL BID) COVER-B

(TO BE FURNISHED IN COVER-B FINANCIAL BID)

Diet Type	Cost per Meal			Total Cost per patient per day
	Break fast	Lunch	Dinner	
General Diet				
Diabetic Diet				
Diet for Patients suffering from heart disease				
Diet for cancer				
Full Liquid Diet				
Semi Solid Diet				
Pediatric diet				
Average Cost per diet.				

Signature

[Name and designation of the person signing on behalf of the agency]



In case the bidder seeks further clarification, s/he may contact the following designated person for correspondence and providing clarification on the bid.

Name: Dr Pradeep Ku.Khuntia

Designation: DMO (MS) CUM Superintendent DHH Bhadrak

PH. NO.- 9439994328

43. General Information to Bidder:

1. Unsatisfactory performance by the successfully assigned bidder, authority right to reserve forfeits the E.M.D.
2. The successful bidder [also referred here as the agency or outsourced agency] would operate from the campus of the concerned health institution and required basic infrastructure would be provided by the health institution to facilitate the smooth operation of the agency.
3. 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 concerned health institution.
4. 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.
5. The agency would take up free health check-up of the cooking and serving staff from time to time, at least once in three months.
6. The maintenance of kitchen and equipments would be the responsibility of the agency and the agency should ensure that proper care is taken in this regard.
7. The agency would prepare and supply diet adhering to the quality norms specified by the health institution. The agency should also prepare different types of diet as per the indent placed by the health institution keeping in mind the diet requirement of different category of patients.
8. The agency would be responsible for procurement of different items required for preparing diet and storing it properly. The health institution would not be responsible for any loss of procured items.
9. Perishable items would be supplied / procured on daily basis and for that supplier / suppliers would be identified jointly by the designated person of the health institution and the outsourced agency.
10. The health institution would have the right to monitor the quality of items purchased and used in the diet preparation process.
11. The agency would manage kitchen waist in a scientific manner with due consultation with the concerned hospital administration.
12. 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 health institution can visit and interact with concerned person. The agency



