

## TERMS OF REFERENCE (TOR) OF

### **Institutional consultancy to scale up Family MUAC Program in two districts of Nepal**

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#### **1. BACKGROUND AND JUSTIFICATION:**

The Family-MUAC approach is widely implemented in countries across Africa and Asia, but predominantly in the West and Central Africa region. Mid-Upper Arm Circumference (MUAC) is the most practical, scalable and common form of anthropometric screening used at community level to detect and refer children for acute malnutrition treatment. Historically, MUAC screening at community level has been the primary responsibility of community health workers (CHWs) or community volunteers (CHVs). However, there is mounting evidence to suggest that families can also play a significant role in carrying out MUAC screening in their own communities.

Family MUAC empowers mothers, caregivers and other family members to screen their own children for acute malnutrition using color-coded MUAC tapes. Neither literacy or numeracy skills are required.

The rationale for teaching mothers, caregivers and family members to measure and classify MUAC is to enhance the detection of acute malnutrition cases at community level and to increase the number of referrals for treatment within community or integrated management of acute malnutrition (CMAM/IMAM) programmes. Involving mothers and caregivers in MUAC screening enables them to develop a better understanding of the signs of malnutrition, be engaged in monitoring their children's nutritional status and increases the frequency of child screening at community level. Family MUAC places families at the centre of malnutrition screening strategies, acknowledging they are best placed to detect the earliest signs of malnutrition.

In addition, frequent screenings may also lead to the earlier detection of acute malnutrition, which, if acted upon in a timely manner, can decrease mortality and morbidity related to malnutrition, reduce programme costs due to shorter treatment times and lower the proportion of children requiring expensive in-patient care for severe acute malnutrition (SAM) with complications.

The Family Welfare Division (FWD) of Department of Health Services (DoHS) in the Ministry of Health and Population (MoHP) plans to scale up the family MUAC approach as a family-based component of the Integrated Management of Acute Malnutrition (IMAM) programme in four districts (Sindhuli, Rautahat, Jajarkot and Achham) of Nepal based on the encouraging results of the pilot phase which was conducted from December 2021 to November 2022 in Panchthar, Saptari, Kavre and Jumla districts. After receiving training on family MUAC, the mothers/caregiver of under five children commenced to assess nutritional status of their children using MUAC tape and testing for bilateral pitting oedema every month. During the pilot period, total 2664 SAM cases and 2142 MAM cases were identified, referred to the Integrated Management of Acute Malnutrition (IMAM) programme and received treatment.

Early detection and management of SAM cases increased in the pilot districts, but early detection referral for treatment remains a challenge for IMAM program. The Ministry of Health and Population therefore is planning to scale up Family MUAC (community-based screening modality), to improve early detection of wasting and to increase treatment coverage.

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Through the family MUAC approach, in the selected four districts mothers or caregivers will be taught how to use the mid-upper arm circumference (MUAC) tape to detect if their child/children are wasted. Caregivers will be empowered to monitor their own children and they will be supported by FCHVs and other volunteers to better understand what factors led to their child being wasted. It is expected that with the knowledge of how to measure and monitor their own children, early detection will result in timely access to treatment, shorter recovery time and prevention of morbidity and mortality. The female community health volunteers (FCHV) and health workers in the four target districts will be critical for supporting mothers or caregivers whose children are wasted, with follow up in the community and through OTCs. The health facility is expected to support the role of FCHVs to capacitate mothers or caregivers to regularly screen for wasting and to support mothers to take appropriate actions if their child/ren is wasted.

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### **2. OBJECTIVE:**

The objective of the assignment is to support the MoHP / FWD scale-up implementation, monitoring of family MUAC approach in two target districts of Nepal. It is expected to increase identification of children with wasting at the household level by the family, early referral for treatment and recovery rate. Building mothers/caregivers capacity in using MUAC tape for nutritional assessment of their 6-59 months children.

- Increase knowledge of health workers and Female Community Health Volunteers (FCHVs) on Family MUAC approach so that they adopt this approach in their regular programmes.
  - Support the implementation, monitoring of the program, address bottleneck and document lessons learned.
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### **3. SCOPE OF WORK:**

The assigned consulting agency will be responsible for supporting the implementation, monitoring address bottleneck and document lessons learned of the Family MUAC approach in the targeted districts.

The scope of the assignment encompasses a series of interrelated tasks - consultative meetings at federal, province, district and local levels, capacity building of the health workers and FCHVs on Family MUAC approach, capacity building of the caretakers/mothers on use of MUAC tape, identification children with wasting, their referral for treatment and follow up and monitor the overall process and progress.

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### **4. METHODOLOGY:**

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- a) Perform a rigorous desk review of all pertinent documents related to use of family MUAC approach and link with the IMAM program. This includes but not limited to use of family MUAC, IMAM protocols, guidelines, programme progress documents, the recording of IMAM programme activities (Health Management Information System or HMIS data), and lessons on scale-up of family MUAC Nepal in the region and other countries . This comprehensive review will serve as the foundation for understanding the programme's structure, implementation modality, potential barriers, and results to be achieved.
- b) Coordinate with FWD, NuTeC, relevant Technical Working Groups under NuTeC along with province, district and local level stakeholders with support from the FWD and UNICEF.
- c) Organize the consultative meetings at federal, province, district and local levels regarding the family MUAC scale-up programme planning and implementation.
- d) Prepare all the required tools for Family MUAC approach such as-training materials for health workers and mothers /caregivers, recording and reporting tools.
- e) Organize capacity building activities for the health workers, FCHVs and caretakers/mothers on Family MUAC approach, measurement by using MUAC, referral, follow-up, recording and reporting.
- f) Monitor the implementation and progress closely with the province, district and local levels and provide quarterly update to UNICEF and MoHP/ FWD.

**5. ACTIVITIES, TASKS, AND EXPECTED TIMELINE**

S.N.	Activities	Tasks	Timeline/Working days	Remarks
1	Prepare approach paper – concept note how they will undertake the tasks describe in the ToR	Prepare and present an approach paper to UNICEF and FWD	7 days (23 May 2024)	
2	Consultative meetings at federal, province, district and local levels	- Hold an inception meeting with MoHP, FWD/Nutrition Section and UNICEF to gain conceptual clarity of the assignment (The meeting will be organized by consultancy agency, will pay for it and will be held at FWD, 20-25 participants participate).	23 days (18 June 2024)	

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		- organize the consultative meetings at province, district and local levels (The meeting will be organized by consultancy agency, will pay for it and will be held at Provincial Health Directorate, Health Office and local levels, 20-25 participants participate in each level).		
3	Capacity building of health workers and FCHVs on Family MUAC	-organize the training events to build the capacity of the health workers and FCHVs	60 days (28 August 2024)	The details are in the activities plan and budget
4	Training to mothers/caregivers on use of MUAC tape, identification of acutely malnourished children and their referral & follow up for treatment	-organize the training events to build the capacity of mothers/caretakers	60 days (6 November 2024)	The details are in the activities plan and budget
5	Implementation of the program	-support in the implementation of the program.		
5	Monitor the overall implementation processes and produce monitoring and progress reports	-conduct the monitoring visits and submit quarterly programme monitoring and progress report to UNICEF and FWD -produce final programme implementation monitoring and progress reports	210 days (15 June 2025)	

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		with recommendations and action plan.		
		Present the final programme implementation with achievements, barriers and recommendation to key stakeholders.		
6	Final report incorporating feedback/suggestions	-submit the final report by incorporating the feedbacks		
		Total	360 days	

**6. DURATION:**

The Contract duration is 12 months from signing of contract.

**7. WORKING LOCATIONS:**

The contractor can work from its office/workstation and should be in close contact with MoHP, FWD/Nutrition Section and UNICEF physically when required.

The program will be implemented in 2 districts of Nepal (Sindhuli, Rautahat,).

**8. DELIVERABLES:**

<b>No</b>	<b>Deliverable</b>	<b>Estimated number of days required</b>	<b>Estimated Completion Date</b> <i>(will be adjusted prior contract creation)</i>
1	Inception or approach paper on implementation of the task.	7 days	23 May 2024
2	Consultative meetings at federal, province, district and local levels	23 days	18 June 2024
3	Capacity building of health workers and FCHVs on Family MUAC	60 days	28 August 2024
4	Training to mothers/caregivers on use of MUAC tape, identification of acutely malnourished	60 days	6 November 2024

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	children and their referral & follow up for treatment		
5	Implementation of the program including the referral, treatment and follow-up of cases.	210 days	15 June 2025
6	Monitor the overall implementation processes and produce quarterly monitoring and progress reports and final programme implementation report and share with key stakeholders.		
7	Final report incorporating feedback/suggestions		
	<b>Total</b>	<b>360 days</b>	

**9. PROPOSED PAYMENT SCHEDULE:**

No	Deliverable	Percentage of payment
1	Submission of consultative meetings reports ( <b>Deliverable#1 &amp; 2</b> )	15%
2	Submission of the report of capacity building of health workers. ( <b>Deliverable#3</b> )	15%
3	Submission of the report of capacity building of FCHVs and caretakers ( <b>Deliverable#3 &amp; 4</b> )	30%
4	Submission of implementation, monitoring reports and first draft report and final report ( <b>Deliverable#5-7</b> )	40%

*The payment schedule must be based on completed deliverables which are accepted by Contract supervisor. Billing and Payment terms is mentioned in Purchase Order (30 days net upon receipt of approved invoice).*

**10. CONTRACT SUPERVISION:**

The entity will work with MoHP, FWD/Nutrition Section and UNICEF, however the day-to-day Supervision will be by Nutrition Specialist.

**11. QUALIFICATIONS AND EXPERIENCE REQUIRED:**

**Experience of undertaking similar assignments:**

- 3-5 years experiences of working in nutrition or public health in Nepal
- Experience and knowledge of family MUAC approach and its implementation
- Experience (3-5 years) of undertaking capacity building of D/PHO staff, health workers and female community health volunteers

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- Experience (3-5 years) in conducting social mobilisation/community outreach activities for nutrition program.
- Strong network of adolescents and young people with experience supporting and delivering community-based nutrition education, counselling and other outreach activities
- Capacity to provide supportive supervision for training and community-based nutrition activities.
- Nepali institution linked with international institutes/universities.
- Strong documentation, monitoring and evaluation capacity.

#### **Experience and skills of the proposed key personnel**

- At least 4 full time experienced staff members with postgraduate degrees in public health or nutrition. The staff must have at least 3 years professional experience in implementing nutrition and public health programmes in Nepal. They must possess good planning, analytical, capacity building, negotiating, communication and advocacy skills. Prior experience with Integrated Management of Acute Malnutrition (IMAM) programme and knowledge of family MUAC approach in Nepal.

#### **Proposed approach to the assignment and capacity to carry out work.**

- Documented capacity to carry our similar assignments.
- Ability to work effectively on short time bound assignments.
- Experience working with Department of Health Services of MoHP at national level and provincial health directorates.
- The level of understanding to maintain organizational secrecy, well discipline and honesty.

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## **12. APPLICATION AND EVALUATION PROCESS:**

In making the final decision, UNICEF considers both technical and financial aspects'-Screening will be done by UNICEF and then the Evaluation Team first reviews the technical aspects of the offer, followed by review of the financial offers of the technically compliant vendors. The proposal obtaining the highest overall score after adding the scores for the technical and financial proposals together, that offers the best value for money will be recommended for award of the contract.

Each valid proposal will be assessed by an evaluation panel first on its technical merits and subsequently on its price. The weight allocated to the technical proposal is 70% (i.e., 70 out of 100 points). To be further considered for the financial evaluation, a minimum score of 49 points is required. i.e., only proposals with a score of 49 or more points in the technical evaluation will be financially evaluated (i.e., the financial proposal will be opened). The further details and the distribution of points are clearly mentioned to section 14. Evaluation Weighting Criteria of this ToR.

The weight allocated to the financial proposal is 30% as per the following: the maximum number of 30 points will be allotted to the lowest technically compliant proposal. All other price proposals will receive points in inverse proportion to the lowest price. Commercial proposals should be submitted on an all-inclusive basis for providing the contracted deliverables as described in the TOR.

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The proposal(s) obtaining the overall highest score after adding the scores for the technical and financial proposals is the proposal that offers best value for money and will be recommended for award of the contract.

**Pre-screening/Responsiveness Evaluation:**

The proposals will be reviewed on the basis of completion for following documents:

- Submission of Proposal (Technical & financial) in two separate file/ attachment. And to assure that Vendors have not including any financial price in their technical proposal.
- Legal Company Registration / Business Registration
- VAT registration (only for national firm/NGO/INGO (legally authorized to provide business services)
- Tax clearance certificate of last Fiscal Year or extension of timeline for VAT clearance certificate
- Power of Attorney to submit proposal- (applies when joint partner)
- Vendor Registration form (for new vendor)
- Declaration Form (page 3 -5 in the bid form) filled in. (all boxes must be ticked / answered)
- Financial Audit Report for last 2 years.
- Validity of Proposal is provided as per UNICEF Solicitation requirement.

**Proposals who have passed the pre-screening process** will be forwarded for Technical Evaluation.

**The Technical Proposal should include but not be limited to the following:**

- **Methodology**  
Detailed Methodology / approach to requirement detailing how to meet or exceed UNICEF requirements for this assignment.
- **Company Profile**  
- *Ensure to include information related to the experience of the company as required (Copy of the company registration)*
- **References**  
Details of similar assignments undertaken in last *three* years including the following information:
  - o Title of Project
  - o Year and duration of project
  - o Scope of Project
  - o Outcome of Project
  - o Reference / Contact persons



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#### - **Work Plan**

Proposed work plan showing detailed sequence and timeline for each activity and person days of each proposed team member. The proposed work plan should be consistent with the technical approach and methodology, showing your understanding of the TOR and ability to translate them into a feasible working plan. A list of the final documents (including reports) to be delivered as final output(s) should be included here. **(See attached Annex for sample of template)**

#### - **Team Composition**

Title and role of each team member. It is estimated a team of 4-5 core members and additional non-key staffs to complete this assignment within stipulated timeline.

#### - **CV's**

CV of each core team member (including qualifications and experience)

Ensure to include information related to the qualifications and experience of each proposed team member as required.

#### - **Recent Financial Audit Report**

Report should have been carried out in the past 2 years and be certified by a reputable audit organization.

#### **Work Experience/ Reference Documents:**

Please, mention and attach the relevant work experience and Reference documents as per technical evaluation Criteria.

#### - **Any project dependencies or assumptions**

### **The Financial Proposal should include but not be limited to the following:**

Bidders are expected to submit a lump sum financial proposal to complete the entire project (as per instruction given under Section Financial Proposal). In order to arrive at the lump sum, the firm may work out the budget detail as below:

#### - **Resource costs**

Daily rate multiplied by number of days of the experts involved.

#### - **Conference or workshop costs (if any)**

Indicate nature and breakdown if possible.

#### - **Travel Costs**

All travel costs should be included as a lump sum fixed cost/ as per actual.

For all travel costs, UNICEF will pay as per the lump sum fixed costs provided in the proposal.

A breakdown of the lump sum travel costs should be provided in the financial proposal. Please note that i) travel costs shall be calculated based on economy class fare regardless of the length of travel and ii) costs for accommodation, meals, and incidentals.

#### - **Any other costs (if any)**

Indicate nature and breakdown.

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Full marks are allocated to the lowest priced proposal. The financial scores of the other proposals will be in inverse proportion to the lowest price.

Bidders are requested to provide a detailed cost proposal – Financial Proposal, factoring in all cost implications for the required services. A special discount or lower rates can be offered for this specific assignment, if applicable.

**13. EVALUATION WEIGHTING CRITERIA:**

Cumulative Analysis will be used to evaluate and award proposals. The evaluation criteria associated with this TOR is split between technical and financial as follows:

- Weightage for Technical Proposal = 70 %
- Weightage for Financial Proposal = 30 %
- Total Score = 100%

**a. Technical Proposal:**

The technical proposal should address all aspects and criteria outlined in this Request for Proposal.

<b>The Technical Proposals will be evaluated against the following:</b>		
<b>REF</b>	<b>CATEGORY</b>	<b>POINTS</b>
1	<b>Overall response:</b> <ul style="list-style-type: none"> <li>• Completeness of response- mandatory (failure of submitting required documentation mentioned in the ToR lead to incompleteness)</li> <li>• Overall concord between RFP requirements and proposal</li> </ul>	Pass/Fail  Pass/Fail
2	<b>Institutional Capacity (Company/key personnel/Individual Consultant):</b> <ul style="list-style-type: none"> <li>• Range and depth of experience (matching with the ToR requirements is must).</li> <li>• Samples of previous work (supplementing Request for Proposal is mandatory. Please attach the relevant samples with RFP and references of the agencies and personnel to be given clearly).</li> <li>• Key personnel: relevant experience and qualifications of the proposed team for the assignment.</li> <li>• financial Capacity (specially for high value contract, where vendor has to manage cash flow for execution/completion of contract).</li> <li>• Institution who has done similar surveys in the past in South Asia Region – particularly experience in Nepal.</li> <li>• Established mechanism for quality assurance from known international research and think tank institution who have presence in Nepal.</li> </ul>	10  5  10  15  5  5
3	<b>Proposed methodology and approach:</b> <ul style="list-style-type: none"> <li>• Detailed proposal with main tasks, including sound methodology to achieve key outputs (Annex B has to be fully understood and reflected in the proposal)</li> <li>• Proposal presents a realistic implementation timeline</li> </ul>	10  5

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<b>4</b>	<p><b>Service Provider’s accountability towards Sustainable Procurement:</b></p> <ul style="list-style-type: none"> <li>• Employment Generation by maintaining Gender balance (more than 50% female staffs (1.5 points)</li> <li>• Having Policy regarding Labour rights (1 points)</li> <li>• Rules/ policy regarding social inclusion including disable (1 points)</li> <li>• Rules/ policy regarding Waste Management (1.5 points)</li> </ul> <p>Bidder has to provide supporting documents to specific initiatives that they have undertaken in the area of environmental protection, employee welfare and community development.</p>	<b>5</b>
<b>Total Technical</b>		<b>70</b>
<p><b>Only proposals which receive a minimum of 49 (including bonus) points (70% of technical scores) will be considered further.</b></p>		

**b. Financial Proposal**

The total amount of points allocated for the price component is **30**. The maximum number of points will be allotted to the lowest price proposal that is opened and compared among those invited firms/institutions which obtain the threshold points in the evaluation of the technical component. All other price proposals will receive points in inverse proportion to the lowest price, e.g.:

$$\text{Score for price proposal X} = \frac{\text{Max. Score for price proposal} * \text{Price of lowest priced proposal}}{\text{Price of proposal X}}$$

**Template fo Financial Proposal**

**Title: Coordination and Implementation Support for Family MUAC in four districts  
(Rautahat, Sindhuli) of Nepal**

**Project Period: May 1, 2024 to April 2025**

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No.	Activities	Unit	Time	Unit	Qty	Unit Cost	Total Budget
<b>Activity 1</b>	<b>Capacity building of Health Workers (HWs), Female Community Health Volunteers (FCHVs), CSO staffs and key stakeholders on Family MUAC approach</b>						
<b>Act 1.1</b>	<b>Capacity building for project staffs</b>						
	Refreshments	Days	4	Persons	15		
	Stationery for participants	Days	1	Persons	15		
	Remuneration for Resource Person	Days	4	Persons	2		
	Materials	Time	1	Time	1		
	Hall rent	Days	1	Time	4		
<b>Sub Total Act 1.1</b>							
<b>Act 1.2</b>	<b>Orientation to HWs (1 day) at municipal level</b>						
	Per diem	Day	1	Persons	252		
	Transportation Cost	Day	1	Persons	180		
	Refreshments	Day	1	Persons	300		
	Stationery and Training Materials	Time	1	Persons	252		
	Rental (Hall and LCD)	Day	1	Event	20		
<b>Sub Total Act 1.2</b>							
<b>Act 1.3</b>	<b>Orientation to FCHVs (1 day) at municipal level</b>						
	Refreshments	Day	1	Persons	1,300		
	Stationery, Training Materials	Day	1	Persons	600		
	DSA (HWs)	Day	1	Persons	80		
	DSA (FCHV)	Day	1	Persons	1,300		
	Local transportation cost	Time	2	Persons	80		
<b>Sub Total Act 1.3</b>							
<b>TOTAL ACTIVITY 1</b>							

Activity 2	Capacity building of mother/caregivers for early detection and referral of acute malnutrition	Unit	Time	Unit	Qty	Unit Costs	Total Budget
<b>Act 2.1</b>	<b>Consultative meeting at municipal level</b>						
	Refreshments	Event	30	Persons	17		
	Stationery for participants	Time	1	Persons	443		
	Per diem for Nutrition Officer	Day	1	Persons	30		
	Transportation cost for Nutrition Officer	Days	2	Persons	20		
<b>Sub Total Act 2.1</b>							
<b>Act 2.2</b>	<b>Training to mothers/caregivers of under-five years children on family MUAC at community level</b>						
	Per diem for FCHV's	Day	1	Persons	1,300		
	Per diem for Healthworkers	Day	1	Persons	500		
	Local transportation cost	Day	2	Persons	350		

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Sub Total Act 2.2							
Act 2.3	<b>Technical human resource for conducting training and implementation of family MUAC</b>	<b>Unit</b>	<b>Time</b>	<b>Unit</b>	<b>Qty</b>	<b>Unit Costs</b>	<b>Total Budget</b>
	<b><u>Salary and wages</u></b>						
	District Coordinator	Months	12	Persons	2		
	Nutrition Officer	Months	12	Persons	6		
	<b><u>Fringe benefit</u></b>						
	Dashain Allowance						
Sub Total Act 2.3							
Act 2.4	<b>District Review for 2 districts</b>	<b>Unit</b>	<b>Time</b>	<b>Unit</b>	<b>Qty</b>	<b>Unit Costs</b>	<b>Total Budget</b>
	DSA for Health Coordinator	Day	1	Persons	30		
	DSA during travel	Day	2	Persons	30		
	Travel Cost for Health Coordinator	Day	2	Persons	30		
	Refreshments	Day	1	Persons	50		
	Stationery for participants	Day	1	Persons	40		
	Facilitation fee for District Resource Person	Day	1	Persons	2		
	Helper	Day	1	Persons	2		
	Workshop Materials	Day	1	Persons	2		
Sub Total Act 2.4							
TOTAL ACTIVITY 2							

Activity 3	Documentation of Family MUAC program	Unit	Time	Unit	Qty	Unit Costs	Total Budget
Act 3.1	<b>Technical human resource for assessment and documentation of family MUAC Piloting Program</b>						
	<b><u>Salary and wages</u></b>						
	Information Management Officer	Months	12	Persons	1		
	<b><u>Fringe benefit</u></b>						
	Dashain Allowance						
Act 3.2	<b>Planning, monitoring, evaluation and communication, pro-rated to their contribution to the programmed (venue, travels, etc.)</b>						

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	DSA for Govt. staff (Federal)	Day	30	Persons	2		
	Transportation cost for Govt. staff (Federal) Family Welfare Division	Day	6	Persons	2		
	DSA for Govt. staff (Provincial)	Day	20	Persons	2		
	Transportation cost for Govt. staff (Provincial)	Day	12	Persons	2		
	DSA for Govt. staff (District and Municipal)	Day	40	Persons	2		
	Transportation cost for Govt. staff (District and Municipal)	Day	6	Persons	2		
	Per diem (Central team)	Day	30	Persons	2		
	Transportation (Central Team)	Day	8	Persons	2		
	Per diem for District Coordinator and Nutrition Officer	Day	4	Persons	25		
	Transportation cost for District Coordinator and Nutrition Officer	Day	4	Persons	20		
	Information Management Officer	Day	10	Persons	2		
<b>Sub Total</b>							
<b>Act 3.3</b>	<b>CSO Staff meeting at district</b>						
	Refreshments	Months	12	Persons	10		
	Local transportation cost for CSO Nutrition Officer	Times	12	Persons	10		
<b>Sub Total</b>							
<b>Act 3.4</b>	<b>End of project review meeting (FWD, UNICEF AND CSO, District Coordinators)</b>						
	Refreshments	Day	1	Pieces	30		
	Stationeries for meeting	Time	1	Pieces	25		
	Hall rent	Day	1	Pieces	1		
	Printing cost (fact sheet, infograps)	Time	1	Time	1		
<b>Sub Total</b>							
<b>Act 3.5</b>	<b>Data Collection, analysis and evidence generation</b>						
	Printing cost (form, formats etc.)	Time	1	Time	1		
<b>Sub Total</b>							
<b>Act 3.6</b>	<b>Final report writing</b>						
	Report Writing Cost	Time	1	Time	1		
	Printing Cost	Time	1	Time	1		
<b>Sub Total</b>							
<b>TOTAL ACTIVITY 3</b>							

Activity 4	Effective and efficient programmed management	Unit	Time	Unit	Qty	Unit Costs	Total Budget
<b>Act 4.1</b>	<b>In-country management &amp; support staff pro-rated to their contribution to the programmed (representation, planning, coordination, logistics, admin, finance)</b>						
	Program Manager	Month	12	Person	1		
	Finance Officer	Month	12	Person	1		
	Admin and HR Officer	Month	12	Person	1		
	Receptionist	Month					
	Office Assistant	Month	12	Person	1		
	Driver	Month	12	Person	1		
	Guard	Month	12	Person	1		
	Cleaner	Month	12	Person	1		
	<b>Fringe benefit</b>						
	Dashain Allowance						
<b>Sub Total</b>							
<b>Act 4.2</b>	<b>Operational costs pro-rated to their contribution to the programmed (office space, equipment, office supplies, maintenance)</b>					<b>0</b>	
	Office supplies	Month	12	Time	1		
	Office rent	Month	12	Time	1		

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	Utilities	Month	12	Time	1	
	Communication (Internet, Telephone, Cell Phone Virtual Meeting etc. , Cost Sharing )	Month	12	Time	1	
	Insurance	Time	32	Time	1	
	Laptop	Month	5	Time	1	
	Printer					
	Scanner					
	Advertisement cost	Month	1	Time	1	
<b>Sub Total</b>						
<b>TOTAL ACTIVITY 4</b>						
<b>TOTAL PROGRAM COSTS - NPR</b>						
<b>TOTAL PROGRAM COSTS - USD (@ 132.5/ March 2024)</b>						

**TEMPLATE OF  
WORK SCHEDULE AND PLANNING FOR DELIVERABLES**

SN	Deliverables	Months												
		1	2	3	4	5	6	7	8	9	.....	n	TOTAL	
D-1														
D-2														
D-3														

**TEMPLATE FOR  
TEAM COMPOSITION, ASSIGNMENT, AND KEY EXPERTS' INPUTS**

SN	NAME	Expert's input (in person/month) per each Deliverable							Total time-input
		POSITION		D-1	D-2	D-3	D-4	D-5	
			HOME						
			FIELD						

**TERMS OF REFERENCE (TOR)  
OF**

**Institutional consultancy to scale up Family MUAC Program in two districts of Nepal**


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