

# INTERNATIONAL CALL FOR TENDER

## ACTED LIBYA/TUNISIA

### PART A- INSTRUCTIONS TO BIDDERS

Date: 17/09/2021

Tender N°: T/FWA/14ENS/PSS/Consultant-Services/TUN/PROG/17-09-2021

To support the ongoing operations, ACTED through this International Call for tender is requesting PSS consultants to provide detailed written bids for the supply of the following services as below:

#### **SERVICE SPECIFICATIONS:**

1. Description: *Provision of PSS Consultancy service: a programmatic and technical evaluation of ACTED Libya's PSS capabilities and generating a way forward report, which includes suggested resources and a training plan to be implemented across child protection and protection teams in ACTED Libya.*
2. Product class / category: Services
3. Terms of delivery: A final report will have to be sent as per the Terms of references
4. Location: Tunisia or online.
5. Date of delivery: 2 months of services until 30/12/2021
6. Validity of the offer: Six (6) Months

#### **RESPONSIBILITIES OF THE CONTRACTOR:**

The answers to this tender should include the following elements:

- An original and one copy of the bid including the price in USD and in EUR **attached, filled, signed and stamped** by the supplier on every page or on the last page (**compulsory**)
- Instructions to Bidders attached, filled, **signed and stamped** by the supplier on every page or on the last page (**compulsory**)
- Bidders Questionnaire Form is attached, filled, **signed and stamped** by the supplier on every page or on the last page (**compulsory**)
- Bidder's Ethical Declaration is attached, filled, **signed and stamped** by the supplier on every page or on the last page (**compulsory**)
- ACTED General Conditions of Purchase is attached, filled, **signed and stamped** by the supplier on every page or on the last page (**optional**)
- Proofs of past performances in a similar field of activity are provided (For professionals : Previous contract, Invoice, and for Individuals: Staff Curriculum Vitae with work experience in NGOs) (**compulsory**)
- A valid copy of Company registration documents and license for Companies or Diploma Certificate or Professional Certification for Individuals (**compulsory**)
- Professional References (minimum 4) (**recommended**)
- A Copy of the ID of the company's legal representative (**compulsory**)
- The TORs signed (**compulsory**)
- Kind reminder that the Bidding documents must be filled **in English**.

**GENERAL CONDITIONS:**

1. The **closing date** of this tender is fixed on **1/10/2021 at 5.00PM** (Tunisian local time) to be submitted by email to [libya.tender@acted.org](mailto:libya.tender@acted.org) Cc: [tender@acted.org](mailto:tender@acted.org) with the mention “  
*T/FWA/14ENS/PSS/Consultant Services/TUN/PROG/17-09-2021- **Not to be opened before 1/10/2021**” as the subject of the email.*
2. Bidders are requested to fill in, sign, stamp and return all pages or only the last page of Instructions to bidders, Offer Form, bidder’s questionnaire, Ethical Declaration and bidder’s checklist according to ACTED format below.
3. Tenderers will sign and return all pages of the Terms of reference of the Consultant Service for which they apply.
4. The tender opening session is fixed in **01/11/2021 at 4:00 PM Libya time**
5. The offer to the call for tender will not result in the award of a contract.
6. Unsealed envelope and late offers will not be considered.
7. ACTED will not be responsible for any costs or expenses incurred by the Bidders in connection with the preparation and submission of the bids to ACTED
8. To ensure that funds are used exclusively for humanitarian purposes and in accordance with donors’ compliance requirements, all contract offers are subject to the condition that contractors do not appear on anti-terrorism lists, in line with ACTED’s anti-terrorism policy. To this end, ACTED reserves the right to carry out anti-terrorism checks on contractor, its board members, staff, volunteers, consultants, financial service providers and sub-contractor.

**SPECIFIC CONDITIONS:**

1. The offers must be submitted in **English** and prices must be expressed in **USD and EUR with all taxes included.**
2. Duration of the contract will be until 31/03/2022
3. A copy of the legal representative ID has to be provided with the tender documents.
4. All suppliers will receive a written notice after the selection process either a rejection notice if their offer hasn’t been preselected, or a preselection notice in case their offer has been preselected
5. The payment will be made by bank transfer

**SELECTION CRITERIA:**

- Method:
  - i. Suppliers will be first ranked by price from the cheapest to the more expensive.
  - ii. Pass/fail: ranked by price, the suppliers will be technically reviewed following a pass/fail method. For each criterion, it will be stated whether the offer or the supplier matches ACTED requirements and expectations (PASS) or does not (FAIL). The cheapest supplier to pass all technical criteria for each batch will be awarded a contract. If the cheapest fail the technical criteria check, ACTED will pass to the second cheapest and so on.
- Technical criteria

CRITERION	PASS	FAIL
Experience	3-5 years' experience in humanitarian development or similar organizations with direct experience working on PSS programming; working directly on providing PSS to people having mild or high level of distress, including children	The Company/individual cannot provide any proof of past experience; The past experience provides testimony of bad past experience
Time of payment	At least thirty (30) days after signature of service completion certificate	Less than thirty (30) days after signature of service completion certificate. Any advance payment
Capacity	The PSS specialist should have knowledge and practical skills to support the psychosocial support workers and the PSS Specialist in the field to carry out focused psychosocial support activities with children experiencing psychosocial difficulties, including emotional difficulties resulting from the conflict and COVID-19 pandemic.	The company doesn't have the capacity within two months to do:  1 evaluation report (where needs for staff training are identified)  1 PSS capacity building curriculum gender and age sensitive (6 to 18 years old)  1 baseline assessment for PSS  1 guideline for minimum standards for focused and non-focused PSS interventions  3 AME tools developed in order to assess the impact of PSS/recreational activities

*NOTE: ACTED adopts a zero tolerance approach towards corruption and is committed to respecting the highest standards in terms of efficiency, responsibility and transparency in its activities. In particular, ACTED has adopted a participatory approach to promote and ensure transparency within the organization and has set up a Transparency focal point (Transparency Team supervised by the Director of Audit and Transparency) via a specific e-mail address. As such, if you witness or suspect any unlawful, improper or unethical act or business practices (such as soliciting, accepting or attempting to provide or accept any kickback) during the tendering process, please send an e-mail to [transparency@acted.org](mailto:transparency@acted.org).*



I undersigned, \_\_\_\_\_, the Bidder, agree with the instructions and general conditions of this National Call for Tender.

Name of Bidder's Authorized Representative: \_\_\_\_\_

Authorized signature and stamp: \_\_\_\_\_

Date: \_\_\_\_\_



Form PRO-06 Version 1.3

## PART B- OFFER FORM ACTED **Libya/Tunisia**

Date: \_\_\_\_\_ (to be filled by the supplier)

Tender N°: T/FWA/14ENS/PSS/Consultant-Services/TUN/PROG/17-09-2021

### To be Filled by Bidder (COMPULSORY)

#### Details of Bidding Company:

1. Company Name: \_\_\_\_\_
2. Company Authorized Representative Name: \_\_\_\_\_
3. Company Registration No: \_\_\_\_\_  
No/Country/ Ministry
4. Company Specialization: \_\_\_\_\_
5. Mailing Address: \_\_\_\_\_  
Country/Governorate./City/St name/Shop-Office No
  - a. Contact Numbers: (Land Line: \_\_\_\_\_ / Mobile No: \_\_\_\_\_)
  - b. E-mail Address: \_\_\_\_\_

I undersigned \_\_\_\_\_, agree to provide ACTED, non-profit NGO, with items answering the following specifications, according to the general conditions and responsibilities that I engage myself to follow.

**PLEASE FILL IN THE FOLLOWING TABLE, KNOWING THAT THE NUMBER OF WORKING DAYS CAN CHANGE :**



The main objective of the Psychosocial Consultant, as a part of a Child Protection project, is to provide specific support to the project in order to improve the competences of all Psychosocial Workers, PSS Facilitator and community mobilizers who are supporting conflict affected children and families through Psychosocial Support Activities and case management services in targeted areas and schools.

The objective of this position is to support in adapting and integrating the needs identified in the CP Assessment to the recreational and PSS package as well as support in adapting the PSS Assessment tool of UNICEF's SoPs on Baity Centres to the specific context of Derna.

Furthermore, the Psychosocial Consultant will be responsible for conducting a programmatic and technical evaluation of ACTED Libya's PSS capabilities and generating a way forward report, which will ensure tools and trainings are adapted and created based on the needs identified.

No.	Item Specifications & product stage	Supplier's Specification (if different)	Measuring Unit	Quantity	Unit Price EUR	Unit Price USD
1	Provision of PSS Services (Refer to the annexed TORs)		Days	1		

**BIDDER'S COMMENTS/REMARKS:**

1. \_\_\_\_\_
2. \_\_\_\_\_

**BIDDER'S TERMS AND CONDITIONS:**

1. Validity of the offer: \_\_\_\_\_ (recommended: 6 months or more)
2. Terms of delivery: From \_\_\_\_\_ Days to \_\_\_\_\_ Days after receiving call from ACTED staff. (5 working days recommended)
3. Terms of payment: \_\_\_\_\_ (within 30 days after completion of work recommended)

Name of Bidder's Authorized Representative: \_\_\_\_\_



# ACTED

*T/FWA/14ENS/PSS/Consultant-Services/TUN/PROG/17-09-2021*

Authorized signature and stamp: \_\_\_\_\_

Date: \_\_\_\_\_

*NB: in case of Request for Tender, please attach the service proposal to the present offer form*

**PART D- BIDDER'S QUESTIONNAIRE**  
**ACTED Tunisia/Libya**

Date: \_\_\_\_\_ (to be filled by the supplier)

Tender N°: T/FWA/14ENS/PSS/Consultant-Services/TUN/PROG/17-09-2021

**PART I: INFORMATION**

**A. Company Details and General Information**

Name of Company		Trading As	
Address (headquarters)		Telephone	
Zip Code (headquarters)		Fax	
City (headquarters)		E-mail address 1	
PO Box		E-mail address 2	
Country (headquarters)		Website address	
Parent Company or name of owner		Subsidiaries/ Associates/ Overseas Representative	
Sales Person's Name		Sales Person's Position	
Sales Person's phone		Sales Persons' E-mail	
<i>Management of the company: CEO, Executive Director, Deputy Director, President or Vice-President</i>			
Name (as in passport or other government-issued photo ID)		Date of birth (mm/dd/yyyy)	
Government-issued photo Identification Document (ID) number		type of ID	
ID country of issuance		Rank or title in organization	
Other names used (nicknames or pseudonyms not listed as "Name")		Gender (e.g. male, female)	





Current employer and job title:		Occupation	
Address of residence		Citizenship(s)	
Province/Region		E-mail addresses	
Is the individual a U.S. citizen or legal permanent resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Professional Licenses – State Issued Certifications	
<b>Company's staff &amp; insurance</b>			
No. Full Time Employees:		Employee average work wage per hour:	
% of Men to Women:		Any employee(s) with relatives working with ACTED?	<input type="checkbox"/> Yes <input type="checkbox"/> No
No. of Children:		Legal minimum wage paid?	
In what capacity?		Paid vacations are offered?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What are their ages?		Are flexible working hours offered?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of insurance company:		Staff covered by health insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Description of the Company</b>			
Type of Business (multiple choices possible):	<input type="checkbox"/> Manufacturing <input type="checkbox"/> Authorized Agent <input type="checkbox"/> Trader <input type="checkbox"/> Consulting Company <input type="checkbox"/> Other (Please Specify)		
Sector of Business (multiple choices possible):	<input type="checkbox"/> Goods/Supp <input type="checkbox"/> Services <input type="checkbox"/> Equipment <input type="checkbox"/> Works <input type="checkbox"/> Other (Please Specify)		
Year Established:		Country of registration:	
Licence number:		Valid until:	
Working languages:	<input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Spanish <input type="checkbox"/> Russian <input type="checkbox"/> Arabic <input type="checkbox"/> Chinese <input type="checkbox"/> Other (Please Specify)		
Technical documents available	<input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Spanish <input type="checkbox"/> Russian <input type="checkbox"/> Arabic <input type="checkbox"/> Chinese <input type="checkbox"/> Other (Please Specify)		



in:	_____
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## B. Financial Information

VAT Number:		Tax Number:	
Bank Name:		Bank Account Number:	
Bank Address:		Account Name:	
Swift/BIC number:		Standard Payment Terms:	
Has the company been audited in the last 3 years?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Please attach a copy of the company's most recent Annual or Audited Financial Report			<input type="checkbox"/> Attached
Annual Value of Total Sales for the last 3 Years:			
Year:	USD:	Year:	USD:
Year:	USD:	Year:	USD:
Annual Value of Export Sales for the last 3 years			
Year:	USD:	Year:	USD:
Year:	USD:	Year:	USD:

## C. Experience

Company's recent business with ACTED and/or other International Aid Agencies or United Nations Agencies:

	Organisation	Contact person	Phone/E-mail	Goods/Works/Services	Value (USD)	Year	Destination
1							
2							
3							
4							
5							

What is your company's main area of expertise?			
What is your company's business coverage area?	<input type="checkbox"/> National <input type="checkbox"/> Restricted to (specify location)		
To which countries has your company exported and/or managed projects in the last 3 years?			



Provide any other information that demonstrates your company's qualifications and experience (eg. awards)		
List any national or international Trade/Professional Organisations of which your company is a member		
<b>D. Technical Capability</b>		
Type of Quality Assurance Certificate		<input type="checkbox"/> Attachec
Type of Certification/Qualification Documents		<input type="checkbox"/> Attachec
International Offices/Representation		
List below up to 10 of the core Goods and/or Services your company sells:		
1)	6)	
2)	7)	
3)	8)	
4)	9)	
5)	10)	
List the main assets of your company (trucks & heavy machines, heavy & valuable equipment, premises & warehouses, production sites etc.)		
1)	6)	
2)	7)	
3)	8)	
4)	9)	
5)	10)	
<b>E. Miscellaneous</b>		
Does your company have an Environmental Policy? (Yes/No)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does your company have an Ethical Trading Policy? (Yes/No)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does your company have an Anti-terrorist Policy? (Yes/No)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is your company compliant with the EU General Data Protection Regulation (or equivalent)? (Yes/No)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you answered yes to the above two questions, please attach copies of your policy:	<input type="checkbox"/> Attached	



Has your company ever been bankrupt, or is in the process of being wound up, having its affairs administered by the courts, has entered into an arrangement with creditors, has suspended business activities, is the subject of proceedings concerning these matters, or is in any analogous situation arising from a similar procedure provided for in national law?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered yes, please provide details:	
Has your company ever been convicted of an offence concerning its professional conduct by a judgment which has force of res judicata?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered yes, please provide details:	
Has your company ever been guilty of grave professional misconduct proven by other means?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered yes, please provide details:	
Has your company ever not fulfilled its obligations relating to the payment of social security contributions, or the payment of taxes in accordance with the law of the country in which it is established, or with those of France, or those of the country where the contract is to be performed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered yes, please provide details:	
Has your company ever been the subject of a judgement which has the force of res judicata for fraud, corruption, involvement in a criminal organisation or any other illegal activity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered yes, please provide details:	
Has your company ever been declared to be in serious breach of contract for failure to comply with its contractual obligations, following another procurement procedure or grant award procedure financed by a donor country?	<input type="checkbox"/> Yes <input type="checkbox"/> No



If you answered yes, please provide details:			
Has your company ever been declared to be in serious breach of contract for failure to comply with its contractual obligations, following another procurement procedure or grant award procedure financed by a donor country?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
If you answered yes, please provide details:			
Has your company ever been in any dispute with any Government Agency, the United Nations, or International Aid Organisations (including ACTED)?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
If you answered yes, please provide details:			
Do you agree with terms of payment of 30 days?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you accept visit of ACTED staff & external auditors to your office?	<input type="checkbox"/> Yes <input type="checkbox"/> No

## PART II: CERTIFICATION

I, the undersigned warrant that the information provided in this form is correct, and in the event of changes, details will be provided to ACTED as soon as possible in writing. I also understand that ACTED does not do business with companies, or any affiliates or subsidiaries, which engage in any practices that are in breach of ACTED policies for Child Protection, Conflict of Interest Prevention, Anti-fraud & Anti-Corruption, Anti-terrorism & Anti-Money Laundering, Data Protection, and against Sexual Exploitation.

[\(available on https://www.acted.org/en/about-us/values-and-policies/code-of-conduct-and-policies/ and on request at any ACTED office\).](https://www.acted.org/en/about-us/values-and-policies/code-of-conduct-and-policies/)

Name:	<input type="text"/>	Date:	<input type="text"/>
Title/Position	<input type="text"/>	Place:	<input type="text"/>
E-mail address (for contact for verification purposes):	<input type="text"/>	Signature:	<input type="text"/>
Phone number (for contact for verification purposes):	<input type="text"/>	Company Stamp:	<input type="text"/>



Check list of supporting documents		For ACTED use only	
1) Trading license	<input type="checkbox"/> Attachec <input type="checkbox"/> N/A	<input type="checkbox"/> Checked	
2) VAT registration/tax clearance certificate	<input type="checkbox"/> Attachec <input type="checkbox"/> N/A	<input type="checkbox"/> Checked	
3) Company profile	<input type="checkbox"/> Attachec <input type="checkbox"/> N/A	<input type="checkbox"/> Checked	
4) Proof of trading/dealership/agent	<input type="checkbox"/> Attachec <input type="checkbox"/> N/A	<input type="checkbox"/> Checked	
5) Evidence of similar contracts	<input type="checkbox"/> Attachec <input type="checkbox"/> N/A	<input type="checkbox"/> Checked	
6) References	<input type="checkbox"/> Attachec <input type="checkbox"/> N/A	<input type="checkbox"/> Checked	
7) Particulars of CEO and key personnel	<input type="checkbox"/> Attachec <input type="checkbox"/> N/A	<input type="checkbox"/> Checked	
8) Articles of Association & Certificate of incorporation	<input type="checkbox"/> Attachec <input type="checkbox"/> N/A	<input type="checkbox"/> Checked	
9) Financial statements (latest)	<input type="checkbox"/> Attachec <input type="checkbox"/> N/A	<input type="checkbox"/> Checked	
10) Other (specify):	<input type="checkbox"/> Attachec <input type="checkbox"/> N/A	<input type="checkbox"/> Checked	

**PART III: ASSESSMENT (ACTED use only)**

**Assessors**

Name & Title of Assessing ACTED Staff:	
1)	3)
2)	4)
Findings of Vendor's assessment:	

Vendor's office/ warehouse / works site visited? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date:
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Findings of Site Visit / Works Visit / Consultation with References:

**Decision**

<input type="checkbox"/> To be included in ACTED Datal	<input type="checkbox"/> Rejected	Reason:	Date:
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# ACTED

*T/FWA/14ENS/PSS/Consultant-Services/TUN/PROG/17-09-2021*

**By signing this supplier assessment, I hereby testify that:**

- I do not have any conflict of interest with any of the suppliers listed in the present document (as per ACTED Conflict of Interest Prevention policy)
- I have not taken part into any fraudulent nor corruptive practice for the present procurement (as per ACTED Anti-Fraud & Corruption policy)

Area Logistics Manager's /  
Country Logistics Manager's Name:

Signature:

Authorized Representative Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Stamp:



## PART E- BIDDER'S CHECK LIST

### ACTED Tunisia/Libya

Date: \_\_\_\_\_ (to be filled by the supplier)

Tender N°: T/FWA/14ENS/PSS/Consultant-Services/TUN/PROG/17-09-2021

**BEFORE SENDING YOUR BIDDING DOCUMENTS, PLEASE CHECK THAT EACH OF THE FOLLOWING ITEM IS COMPLETE AND RESPECTS THE FOLLOWING CRITERIA :**

Description	To be filled in by Bidder		For ACTED use only (to be filled in by Purchase Committee)		Comments
	Included		Present		
	Yes	No	Yes	No	
1. An original and one copy of the bid have been provided ( <b>compulsory</b> )					
2. PART A – Instructions to Bidders is attached, filled, <b>signed and stamped</b> by the supplier on every page or on the last page ( <b>compulsory</b> )					
3. PART B – Offer Form is attached, filled, <b>signed and stamped</b> by the supplier on every page or on the last page ( <b>compulsory</b> )					
4. The prices in the Offer Form are in EUR and USD ( <b>compulsory</b> )					
5. PART C – Bidders Questionnaire Form is attached, filled, <b>signed and stamped</b> by the supplier on every page or on the last page ( <b>compulsory</b> )					
6. PART D – Bidder's Ethical Declaration is attached, filled, <b>signed and stamped</b> by the supplier on every page or on the last page ( <b>compulsory</b> )					
7. ACTED General Conditions of Purchase is attached, filled, <b>signed and stamped</b> by the supplier on every page or on the last page ( <b>optional</b> )					
8. The Bidding documents are filled in <b>English</b> .					
9. ANNEXES – Proofs of past performances in a similar field of activity are provided ( <b>compulsory</b> )					
10. ANNEXES – A Copy of Company registration documents and license are included ( <b>compulsory</b> )					
11. ANNEXES – A Copy of the Legal representative ID included ( <b>compulsory</b> )					
10. Staff CV ( <b>compulsory</b> )					





# ACTED

*T/FWA/14ENS/PSS/Consultant-Services/TUN/PROG/17-09-2021*

11. TORs signed ( <b>compulsory</b> )					
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Name & Position of Bidder's authorized representative \_\_\_\_\_

Authorized signature \_\_\_\_\_

Stamp: