

Request for Proposals No: 20-07-2023

Summative Evaluation Issued by Nutrition International

Date of Issue: July 20, 2023

Deadline for receipt of proposals: DATE: September 10, 2023 TIME: 23:59 Ottawa EST (Eastern Standard Time)



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1. Overview and Procedures

1.1. REQUEST FOR PROPOSALS (RFP) - SERVICE NOTICE

1.1.1. Nutrition International invites proposals from competent agencies to conduct a summative evaluation of Nutrition International's programming between 2014 and 2022.

1.2. BACKGROUND

- **1.2.1.** Nutrition International is an international not-for-profit organization dedicated to transforming the lives of vulnerable people, especially women, adolescent girls, and children, by improving their nutritional status.
- **1.2.2.** Nutrition International is working alongside national, state/provincial and local Government, national civil society organizations, industry/private sector and international organizations and not-for-profits.
- **1.2.3.** This Request for Proposals (RFP) and particularly the Guidelines for Preparing Proposals that follow, are designed to help Respondents to produce proposals that are acceptable to Nutrition International, and to ensure that all proposals are given equal consideration. It is essential, therefore, that Respondents provide the complete information that is requested, and in the formats and on the terms specified.

1.3. RFP TIMETABLE

1.3.1. The estimated schedule for the RFP and contract approval is as follows except for the Closing Date and Time, which is a Mandatory Requirement.

Activity	Date Required
RFP available for distribution	Thursday, July 20 th
Deadline for Receipt of Questions	Thursday, July 27 th
	New Date: Sunday, August 13 th
Closing Date and Time	Sunday, September 10 th , 23:59 EST
Evaluation Process Completion	Monday, October 2 nd
Interviews/Proposal Presentations	October 12 th and 13 th
Recommendation and Selection	Monday, October 16 th
Projected Contract Award Date	Within 20 days of Recommendation and Selection

1.4. PROPOSAL COMMUNICATIONS

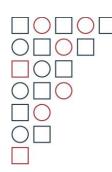
1.4.1. For the purpose of requesting information and clarification or for any other purpose relating to this RFP including the RFP process, proponents are to contact only the Contracting Authority for this RFP.

Correspondence via e-mail sent to: proposals@nutritionintl.org

- **1.4.2.** All communication concerning this RFP is to be in writing, clearly marked with the title and number of this RFP. The request will specify the RFP section and page number as applicable.
- **1.4.3.** All communication concerning this RFP is to be sent to the Contracting Authority by e-mail at the above noted e-mail address. Nutrition International will not be responsible for the delivery of any communication. Nutrition International recommends the Proponent confirm receipt of all communications with the Contracting Authority.

1.5. PROPOSAL PREPARATION AND SUBMISSION PROCESS

- **1.5.1.** Questions from proponents
 - a) All inquiries regarding this RFP must be submitted in writing by the date specified in section 1.3.1
 - **b)** All questions posed and answers provided will be shared by email with all proponents, who confirm their intent to submit a proposal and/or posted on the Nutrition International website without attribution (excluding any proprietary information).
- **1.5.2.** Submission of Proposal
 - **a)** Proponents' complete Technical and Commercial Proposals must be received no later than the date and time specified in section 1.3.1.
 - **b)** Submissions must be sent electronically via email as per section 1.4.1.
 - **c)** All the attachments must be labelled and referenced corresponding to the document type and Annexes accordingly.
 - d) Proposals must be clearly marked in the subject line as follows: **PROPONENT'S NAME: TECHNICAL AND COMMERCIAL PROPOSAL (RFP: 20-07-2023)**
 - **e)** Late proposals will not be accepted under any circumstances. Proposal submissions received after the deadline stated above will be disqualified.
- **1.5.3.** Modifications and withdrawals
 - **a)** All modifications to proposals must be received by Nutrition International prior to the submission deadline. The proponent must clearly state the changes from the original proposal and indicate that the revised proposal supersedes the earlier version.
 - **b)** A proposal may be withdrawn by email by the proponent prior to the submission deadline.



- **c)** Negligence on the part of the proponent confers no right for the withdrawal of the proposal after it has been opened.
- **d)** Modifications and/or withdrawals of proposals must be sent by email as per section 1.4.1.

1.6. BUDGET

1.6.1. The maximum budget allowable for this work is 450,000 Canadian Dollars.

2. Evaluation and Selection

2.1. EVALUATION AND SELECTION PROCESS

- **2.1.1.** The objective of the Evaluation and Selection Process is to identify the Proposal that effectively meets the requirements of this RFP and provides the best value to Nutrition International. A Proposal may be deemed non-compliant if it is not submitted in the requested format or if requested information is not submitted. All determinations are made at the sole discretion of Nutrition International.
- **2.1.2.** Following criteria will be adopted to sort list the proposals and identify suitable agencies for contract award. Out of the total scores 70% of weighting will be assigned to technical and 30% to the commercial proposal.

Scoring of Proposals		
No.	Assessment Category: Technical Proposal	Relative scores
1	Qualification of Firm (A)	
1 . a.	Experience and capability	30
1.b.	Proposed personnel for the evaluation	30
1.c.	Demonstrated understanding of the work and the approach	40
2	Total Score - Technical Proposal 100	
3	Overall weight – Technical:	70%
4	Assessment Category: Commercial Proposal	
4.a.	Demonstrated consideration of all potential expenses (i.e. no major omissions)	40
4.b.	Reasonable estimate for each of the activities	40
4.c.	Reasonable estimate for consultant's administrative & indirect costs	20
5	Total Score - Commercial Proposal	100
6	Overall weight – Commercial:	30%
7	Total Weighted Score (Technical & Commercial) -maximum possible:	100

2.2. THE EVALUATION STAGES

Stage 1: Review of Mandatory Requirements Stage 2: Review of Technical Proposal Stage 3: Review of Commercial Proposal Stage 4: Overall Ranking and Final Selection

- **2.2.1.** Review of Mandatory Requirements, in section 3 Each proposal first will be evaluated for completeness of the submission. Failure to comply with any of the terms and conditions contained in the RFP including, but not limited to, failure to provide all the required information or documentation, may result in disqualification.
- **2.2.2.** Once confirmed that the proponent has met the mandatory submission requirements of the RFP, Technical Proposal will be evaluated by Nutrition International based on their compliance with the requirements set out in Section 4.1 of this RFP.
- **2.2.3.** Commercial Proposals will be evaluated based on their compliance with the requirements as set out in Section 4.2 of this RFP. Evaluation considerations include but are not limited to:
 - a) competitiveness of pricing;
 - **b)** compatibility of delivery schedule with needs;
 - c) prior performance (for previously contracted proponents);
 - d) risk assessment and identification; and
 - e) managerial and financial ability to complete the tasks set out in the RFP.
- **2.2.4.** Proponents may be requested to correct errors or inconsistencies identified by Nutrition International during the proposal evaluation process. Proponents that do not comply with such requests within the timeframe communicated will be disqualified.
- **2.2.5.** All the terms and conditions of this RFP and its Annex, including the proponent's response to this RFP will form a part of the award unless otherwise negotiated. The proponent understands that if it proposes an amendment or additional terms to the award, these must be clearly detailed in the proposal and may affect the evaluation of the proposal.

3. Mandatory Submission Requirements

3.1. MANDATORY REQUIREMENTS

3.1.1. Mandatory Requirements must be met by all Proponents, failing which their Proposals will be disqualified. Where requested, the Proponent must demonstrate compliance to the Mandatory Requirement or submit the substantiating information requested.

3.2. PREPARATION OF PROPOSALS

- **3.2.1.** In response to this RFP, proponents will prepare proposals composed of two proposals: a) a Technical Proposal in accordance with the requirements as stated in Section 4.1 of this RFP; a Commercial proposal, in accordance with the requirements as stated in Section 4.2 of this RFP.
- **3.2.2.** All proposals and required documentation must be provided in English.
- **3.2.3.** Proponents must indicate the validity period of their proposals. Proposal must be valid at least 60 days from the submission deadline.
- **3.2.4.** Proponents are responsible for all costs associated with proposal preparation and submission.
- **3.2.5.** Where any certifications submitted as part of this RFP expire before or during the period of the award, the proponent will be required to submit renewed certificates. Any costs associated with this will be borne by the proponent.
- **3.2.6.** Proponents must disclose any circumstances, including personal, financial, and business activities that will or might give rise to a conflict of interest. This disclosure must extend to all personnel proposed to undertake the work should the proponent receive an award. Where proponents identify any potential conflicts, they must state how they intend to avoid any impact arising from such conflicts.
- **3.2.7.** Proponents must disclose if they are or have been the subject of any proceedings or other arrangements relating to bankruptcy, insolvency, or the financial standing of the proponent including, but not limited to, the appointment of any officer such as a receiver in relation to the proponent's personal or business matters or an arrangement with creditors or of any other similar proceedings.
- **3.2.8.** Proponents must disclose if the company or key management have been convicted of, or are the subject of any proceedings relating to a criminal offence or other offence, a serious offence involving the activities of a criminal organization, found by any regulator or professional body to have committed professional misconduct; corruption including the offer or receipt of any inducement of any kind in relation to obtaining any contract with Nutrition International, or any other contracting body or authority; failure to fulfil any obligations in any jurisdiction relating to the payment of taxes.
- **3.2.9.** The Mandatory documents submitted for this RFP are:
 - Complete Technical Proposal (including all documents specified as part of the Technical Proposal) as per section 4.1.
 - Complete Commercial Proposal (including all documents specified as part of the Commercial Proposal) as per section 4.2.

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4.1. TECHNICAL PROPOSAL REQUIREMENTS

4.1.1. Letter of offer

Proponents are required to submit a letter of offer (using the template in Annex C) expressing:

- **a)** Interest in participating in the RFP.
- **b)** Confirming that all information in their technical and commercial proposal submitted is true and correct,
- **c)** The proponent meets the technical requirements for this RFP and can adhere to the timeline of the Work Plan.
- **d)** The proposal (Technical and Commercial) has been arrived at independently and without consultation, communication, agreement or understanding (for the purpose of restricting competition) with any other Respondent to or recipient of this RFP from Nutrition International.
- e) all the financial information submitted in the proposal is true and correct.
- **f)** Any required disclosures or conflicting interests have been fully described in the proposal.
- **g)** Personnel named in the proposal are aware of this proposal and will be available to undertake the services during the proposed time period.
- **h)** The person submitting has authority for the agency to submit this proposal and to clarify any details on its behalf.

4.1.2. Required Qualifications of the team/ agency

Proponents must be able to demonstrate that they have conducted at least two (2) completed Development Evaluation Assignments, demonstrating their experience in conducting Development Evaluation Assignments of Similar Size, Duration, Scope, and Complexity. The specific criteria are:

- a) contract value of CAD\$ 250,000 or more;
- **b)** an assignment duration of at least six (6) months;
- c) an evaluation value of CAD \$50M or more;
- **d)** an evaluation and Time Period covered by the Development Evaluation Assignment of three (3) years or more; and
- e) where data collection involved at least three different types of stakeholder groups.
- **f)** Where the experience must have been acquired in the role of Team Leader and completed within fifteen (15) years of the closing date of the eventual RFP.

For each Development Evaluation Assignment, the organization will be required to provide a sample of their work and client-signed proof that the work was completed

satisfactorily. Any Evaluation Assignment that does not have a client-signed proof that the work was completed satisfactorily may be deemed non-compliant.

4.1.3. Technical proposal (maximum 5-7 pages)

a) Based directly on the detailed Scope of Work presented in Annex A – Scope of Work.

4.1.4. Team qualifications (maximum 3-5 pages)

b) Details of the proposed team and their qualifications (full CVs)

Evaluation Team Leader (ETL)

Proponents must submit at least one (1) completed Development Evaluation Assignment, demonstrating that the proposed Evaluation Team Leader (ETL) has: Led, managed and fully conducted (design, implementation and reporting) at least one (1) Development Evaluation Assignment of Similar Size, Duration, Scope, and Complexity. That meets the requirements established in section 4.1.2.

Core Evaluation Team Composition

The Proponent must propose a Core Evaluation Team that has demonstrated expertise in nutrition and gender equality, comprising of at least the following members:

- a) Evaluation Team Leader
- **b)** Senior Evaluator

4.1.5. Work Plan with all proposed activities

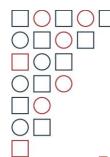
The Proponent must submit a detailed workplan outlining all proposed activities and timeframes.

4.2. COMMERCIAL PROPOSAL REQUIREMENTS

4.2.1. Required Documents

The following documents must be submitted along with the proposal documents. Failure to do so may result in proposal disqualification.

- a) Audited financial Statements for the previous Fiscal year
- **b)** legal corporate registration or any similar official documentation that shows the full corporate name, corporate status, jurisdiction, and date of registration. For individual consultants only a valid CV/Resume, and residential address are required.
- **c)** References Provide 3 current customer references, listing customer, phone number, contact person, contact's e-mail and a description of the product or service provided.
- **4.2.2.** Pricing
 - **a)** Expected budget for accomplishing the complete work with sufficient details and justifications, in spreadsheet format (see format in Annex B.)
 - **b)** All amounts quoted must be in Canadian Dollars.



c) Fees should be inclusive of all insurance and standard business overhead/ indirect costs. Please note that no fees will be paid while en route to or from the place of assignment.

5. Contract Award

5.1.CONTRACT AWARD

- **5.1.1.** Any contract award made pursuant to this RFP is conditional upon the Selected Proponent entering into a contract with Nutrition International and conditional upon formal approval by Nutrition International in accordance with Nutrition International's Decision-Making Practices. The <u>contract terms will be as per the contract template in Annex D. Once the Proponent has been selected, the agreement will be modified, and the contract will be awarded at the discretion of Nutrition International. The Proponent must clarify any concerns with the contract terms before the Deadline for Receipt of Questions.</u>
- **5.1.2.** Nutrition International shall advise the Selected Proponent once Nutrition International is ready to commence negotiations. The negotiations shall be concluded within a timeframe mandated by Nutrition International, acting reasonably. At the conclusion of negotiations, Nutrition International shall endeavour as expediently as possible to prepare and provide to the Selected Proponent the execution copy of the contract, signed by Nutrition International, in PDF format. The Selected Proponent shall sign the contract within a reasonable time frame.
- **5.1.3.** In the event that one or more of the following situations occur, Nutrition International shall invoke one of the options stated in Section 5.1.4
 - **a)** The negotiations with the Selected Proponent are not successful and Nutrition International, in its sole discretion, does not think that a contract on terms satisfactory to Nutrition International can be reached; or
 - **b)** The Selected Proponent fails to employ best efforts to finalize the contract during the timeframe mandated by Nutrition International; or
 - **c)** The Selected Proponent fails or refuses to enter into the contract within the timeframe mandated by Nutrition International.
- **5.1.4.** Nutrition International without liability, cost or penalty, may, in its sole discretion:
 - a) Extend the period for negotiation or execution; or
 - **b)** Cease negotiations with the Selected Proponent; or
 - **c)** Exercise Nutrition International 's rights pursuant to Section 6.1.1 to cancel the RFP; or
 - d) Enter into negotiations with another Proponent.

6. Rights of Nutrition International and Additional Information

6.1. NUTRITION INTERNATIONALS RIGHTS

- **6.1.1.** Nutrition International 's Right to Amend, Supplement or Cancel the RFP without liability, cost or penalty, may in its sole discretion:
 - **a)** Alter any dates in the RFP, as they relate to the RFP Process, at any time prior to or after the Closing Date and Time;
 - **b)** Cancel this RFP at any time, whether prior to or after the Closing Date and Time, and Nutrition International may, but need not, in its sole discretion, issue a new RFP;
 - c) Amend or supplement this RFP at any time prior to the Closing Date and Time.
- **6.1.2.** This is a request for Proposal to supply Nutrition International 's needs for the requirements described in this RFP. Nutrition International is not bound to accept the lowest priced proposal, or any, proposal. While price is an important element in the selection process, Proponents should recognize that there are other criteria in this RFP that Nutrition International will consider in evaluating Proposals and in making its decision as to contract award(s).
- **6.1.3.** Nutrition International, without liability, cost or penalty, may, in its sole discretion, waive irregularities in Proposals or in the submission of Proposals.
- **6.1.4.** Nutrition International, through the Contracting Authority, without liability, cost or penalty, may, in its sole discretion and at any time after Proposal submission, seek clarification from any Proponent, either in writing or during the Oral Presentation, Demonstration or Site Visits as applicable, with respect to its Proposal. Without limiting the generality of the foregoing, Nutrition International may, in its sole discretion, request a Proponent to confirm in writing any statement made by the Proponent during the Oral Presentation, Demonstration or Site Visits in which case the Proponent will promptly provide such written confirmation to Nutrition International, within the time specified by the Contracting Authority.
- **6.1.5.** Any written information received by Nutrition International from a Proponent in response to a request for clarification from Nutrition International will be considered as an integral part of the Proponent's Proposal.
- **6.1.6.** Without prejudice to this right, Nutrition International may request clarification where any Proponent's intent is unclear, or may waive or request amendments where, in the opinion of Nutrition International, there is an irregularity or omission in the information that has been submitted in the Proposal. NI reserves the right to conduct negotiations on any portion of the Proponent's Proposal.
- **6.1.7.** Nutrition International may verify any Proponents statement or claim by whatever means Nutrition International deems appropriate, including contacting references other than those offered by the Proponent, and may reject any Proponent statement or claim if, in the judgment of Nutrition International, the statement or claim is unwarranted or not credible. The Proponent will co-operate with NI in its attempts to verify any such statement or claim.
- **6.1.8.** Nutrition International may, in its sole discretion, visit the proponents' existing place or places of business for purposes of clarification or verification. Such a visit will take place at a date mandated by Nutrition International, acting reasonably.

- **6.1.9.** Nutrition International reserves the right to accept a Proposal in whole or in part, and to split or divide the total requirement among proponents at the sole discretion of Nutrition International.
- **6.1.10.** Nutrition International may negotiate with one or more technically compliant Proponents and seek a best and final offer from technically compliant proponents on any part the technical or price/cost proposals submitted, as part of this RFP process.
- **6.1.11.** Nutrition International may reject any proposal received from a proponent that, in the sole opinion of Nutrition International, has previously failed to perform satisfactorily or complete contracts or purchase orders on time, or that Nutrition International believe is not in a position to meet the requirements of the RFP.
- **6.1.12.** Nutrition International may reject any proposal that, in the sole opinion of Nutrition International fails to meet the requirements and instructions stated in this RFP.
- **6.1.13.** Nutrition International may suspend negotiations or withdraw an award to a proponent at any time up. Nutrition International is not required to provide any justification but will give notice prior to any such suspension of negotiations or withdrawal of award.
- **6.1.14.** Nutrition International will exercise its discretionary rights under this RFP in a reasonable manner.

6.2. DISQUALIFICATION OF PROPOSALS ON GROUNDS OF FAULTY SUBMISSION

- **6.2.1.** Nutrition International, without liability, cost or penalty, in its sole discretion, may disqualify any Proposal at any time during the RFP process if, in the opinion of Nutrition International, one or more of the following events occur:
 - **a)** it contains incorrect information;
 - **b)** it is unresponsive to this RFP;
 - c) the Proponent fails to cooperate with Nutrition International in its attempts to clarify information or evaluate the Proposal;
 - **d)** the Proponent misrepresents any information provided in its Proposal;
 - **e)** it is incomplete;
 - f) the Proposal, on its face, reveals a conflict of interest or unfair advantage; or
 - **g)** a change has occurred in the management or ownership structure of the Selected Proponent.

6.3. COSTS INCURRED BY PROPONENTS

6.3.1. Nothing in this RFP, receipt by Nutrition International of a response to this RFP, or subsequent negotiations by Nutrition International of terms of a contract to supply, shall in any way impose an obligation on Nutrition International to reimburse any Proponent or to pay any compensation for costs incurred in the preparation of a response to this RFP, presentations, or the negotiation of a proposed contract except to the extent that such obligation is contained in the formal written contract containing terms and conditions satisfactory to Nutrition International and executed by the Proponent and Nutrition International .

6.4. NO OBLIGATION TO PURCHASE

6.4.1. Nothing in this RFP, receipt by Nutrition International of a response to this RFP, or subsequent negotiations by Nutrition International of terms of a contract to supply,

shall in any way impose a legal obligation on Nutrition International to make any purchases from any Proponent.

6.5. ADDITIONAL INFORMATION, CLARIFICATION AND ADDENDA

- **6.5.1.** It is the responsibility of the proponent to seek clarification on any matter it considers to be unclear in this RFP, including any attachments. Nutrition International will not be responsible for any misunderstanding on the part of the Proponent concerning this RFP, the RFP process or the attachments.
- **6.5.2.** Proponents who wish to obtain further information and clarification about the RFP, the RFP attachments or the RFP process are to submit their questions in writing to the Contracting Authority at the e-mail address set out in section 1.4.1. of this RFP.
- **6.5.3.** The Contracting Authority will accept written questions no later than the date and time indicated in the RFP Timetable in Section 1.3.1. (the "Deadline for Receipt of Questions"). The request will specify the RFP Section attachment and page number as applicable.
- **6.5.4.** Nutrition International 's responses to the questions will be provided or made available to all who requested or received the RFP, without identifying the source of the question.
- **6.5.5.** Proponents are advised that the deadline for receipt of questions from potential Proponents is the final opportunity for Proponents to seek clarification with respect to this RFP.
- **6.5.6.** If an addendum to the RFP is issued, the Proposal due date may be changed to allow additional time for Proponents to complete their Proposals. Proponents shall be advised of any new Proposal due date by addendum.
- 6.5.7. Communications Contract Authority

The Proponent is put on notice that:

- a) Only the Contracting Authority is authorized by and on behalf of Nutrition International to amend the requirements of this RFP, and that the Proponent is to rely only upon the information provided in writing by the Contracting Authority;
- **b)** Any communication pertaining to this RFP with any employee of Nutrition International, other than the Contract Authority will constitute a breach of Nutrition International 's procedures and may result in the disqualification of the Proponent as a potential supplier.
- **6.5.8.** Any amendments or supplements to this RFP shall be made only by way of addenda issued by the Contracting Authority in the same manner in which this RFP was issued, and any amendments or supplements to this RFP made in any other manner, including any oral or written statement made by Nutrition International , the Contracting Authority, or their respective employees, agents, consultants or advisors, shall not constitute an addendum to this RFP. Where there appears to be a conflict between the RFP and any addendum, the last addendum will prevail. Addenda will not be used to answer Proponent's questions. Answers to questions will follow the process outlined in Sections 6.5.2. to 6.5.4.
- **6.5.9.** The addenda shall be binding on each Proponent, and Nutrition International has the right to assume that the Proponent in its Proposal has taken the information contained in the addenda into account.

6.5.10. The Proponent is solely responsible to ensure that it has received all addendums, if any, issued pursuant to this sub-section.

6.6. LITIGATION

- 6.6.1. If Nutrition International or any of its officers, employees, assigns, independent contractors, subcontractors, agents or representatives is made a party to any litigation arising out of or by reason of or attributable to this RFP, then the applicable Proponent(s) shall indemnify and save harmless Nutrition International and its officers, employees, assigns, independent contractors, subcontractors, agents or representatives in connection with such litigation, except to the extent that such litigation arose from the negligence or wilful act of Nutrition International, or any of its officers, employees, assigns, independent contractors, subcontractors, agents or representatives while acting within the scope of his, her or its employment or engagement. Nutrition International may, at its option, and at the expense of the Proponent, participate in or assume carriage of any litigation or settlement discussions relating to the foregoing, or any other matter for which the Proponent is required to indemnify Nutrition International and its officers, employees, assigns, independent contractors, subcontractors, agents or representatives. Alternatively, Nutrition International may require the Proponent to assume or maintain carriage of and responsibility for all or any part of such litigation or discussion, at the Proponent's expense.
- 6.6.2. This RFP, all referenced materials and all addenda constitute the entire RFP.



Scope of Work

SUMMATIVE EVALUATION

OF

NUTRITION INTERNATIONAL

Request for Proposals No: 20-07-2023 - Summative Evaluation

Image: CA

List of acronyms

CA	Contribution Analysis	
CA DAC	\sim	
_	Development Assistance Committee Department of Foreign Affairs, Trade, and Development	
DFATD		
EEM	Evaluation Evidence Matrix	
EQ	Evaluation Question	
EQA	Evaluation Quality Assessment	
EMG	Evaluation Management Group	
ERG	Evaluation Reference Group	
HQ	Headquarters	
IDRC	International Development Research Centre	
KAP	Knowledge, Attitude, and Practices Survey	
KM	Knowledge management	
MEMI	Micronutrients for Every Meal Initiative	
MN	Micronutrient	
NGO	Non-Governmental Organization	
NI	Nutrition International	
N-LIFT	Nutrition Leverage and Influence for Transformation	
ODA	Official Development Assistance	
OECD	Organization for Economic Co-operation and Development	
PMF	Performance Measurement Framework	
PT	Process Tracing	
РТА	Project Technical Authority	
QA	Quality Assurance	
QC	Quality Control	
SUN	Scaling Up Nutrition	
ТА	Technical Assistance	
TAN	Technical Assistance for Nutrition	
ToR	Terms of Reference	
UNEG	United Nations Evaluation Group	
UNICEF	United Nations Children's Fund	
WHO	World Health Organization	

$O\square O\square$ 1. Rationale, purpose and specific objectives of the evaluation

1.1 Rationale and Purpose of the Evaluation

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This evaluation will assess specific funding to Nutrition International's programming by the Department of Foreign Affairs, Trade, and Development (DFATD).

DFATD has provided the following funds to Nutrition International between 2014 and 2023, which will be covered by the evaluation:

- A \$150 million grant for the period 2014/15 to 2018/19, supporting Nutrition International's core activities to stimulate and support national actions to eliminate micronutrient malnutrition to contribute to a sustained impact on people's health and well-being.
- A \$75 million grant for the period 2015/16 to 2019/20 supporting the Right Start Project to improve the survival and health of pregnant women, newborns and young children through the first '1000 days'.
- A \$293 million grant for the implementation period of 2019/2020 to 2022/23 that supports Nutrition International's core activities as outlined in its global strategy (2018 – 2024) and Investment Case (\$280 million) as well as an expanded set of activities (\$13 million) to provide emergency support during Covid to specific core countries in Asia and Africa. This grant is set to end in March 2025.

The purpose of this summative evaluation is threefold:

- 1. To inform quality improvements to the design and delivery of Nutrition International's nutrition programs and policies;
- 2. To inform DFATD and other donor's nutrition programming and decision-making; and
- 3. To demonstrate accountability for Nutrition International results to Canadian and global stakeholders.

The main users of this evaluation are DFATD, Nutrition International and key stakeholders, including other donors.

1.2 Specific Objectives of the Evaluation

The specific objectives are to evaluate:

- 1. The relevance, and effectiveness, including gender responsiveness, of Nutrition International's nutrition programming.
- 2. The contribution of Nutrition International to nutrition policy, including gender responsive policy, at country and global levels.
- 3. The extent to which gender equality is integrated across Nutrition International programs and its contribution to Nutrition International's women empowerment outcomes.

2. Background Information

The following sub-sections briefly describe the development context, the evaluation object (Nutrition International), the intervention logic and stakeholders.

2.1 Development Context

Globally, two billion people suffer from malnutrition in one form or another. Malnutrition is a leading cause of death, disability, and illness. Nearly half of all deaths in children under five are attributable to undernutrition. Globally, among children under the age of five years, 148 million are stunted and approximately 45 million are wasted, and 40 million children under 5 are overweight. Moreover, one in two children experience hidden hunger and over 340 million children are suffering from deficiencies of essential micronutrients (vitamins and minerals). The 2013 Lancet series on Maternal and Child Nutrition concluded that undernutrition reduces a nation's economic potential by at least 8% due to direct productivity losses, as well losses via poorer cognition, and losses via reduced schooling, and is a cause of 3.1 million child deaths annually.

Women and girls are disproportionately affected by malnutrition - 60% of the world's malnourished people are women and girls. They are more likely to suffer from anemia, leading to chronic fatigue, and increased risk of death during childbirth. Micronutrient deficiencies in women of reproductive age can cause complications in pregnancy and can, in the case of iodine and folic acid deficiencies, cause permanent mental impairment and/or neural tube defect in utero. In many societies, women and girls eat least and last due to systemic gender discrimination.

The 2013 Lancet series on Maternal and Child Nutrition highlighted ten direct evidence-based interventions including several types of micronutrient supplementation programs to improve infant and young child feeding, particularly breastfeeding, and treatment of severe and moderate acute malnutrition. The 2012 Copenhagen Consensus expert review also estimated that every dollar spent on reducing undernutrition yields between \$15 and \$138 in return on investment. Nutrition also provides entry points to address gender equality issues such as household power structures, the distribution and control over resources, including nutrient dense foods.

Although there has been a general decline in the rate of mortality in children under five in the developing world and although much of this decline has been attributed to improvements in micronutrient status, much work remains to be done. While Official Development Assistance (ODA) for basic nutrition has increased by 161% over the period 1999-2011, aid for basic nutrition only accounts for 0.4% of total ODA spending.

2.2 Evaluation Object - Nutrition International

Originally established as part of the International Development Research Centre and becoming an independent organization in 1997, Nutrition International is a Canada-based not-for-profit organization dedicated to eliminating all forms of malnutrition worldwide. Nutrition International supports and promotes micronutrient supplementation and food fortification in Asia, Africa, and provides technical and operational support where micronutrient deficiency is most prevalent. Its activities range from basic research to setting up local fortification projects, to developing and implementing national programs and campaigns. Nutrition International also procures the majority of vitamin A capsules donated worldwide and assists national governments with their work to deliver the capsules. The organization provides zinc treatment for diarrheal disease, iron and folic acid supplementation for pregnant women, infant and young child feeding,

treatment and prevention of acute malnutrition, among other high-impact interventions. Since 1998, Nutrition International has supplied over 75% of the world's vitamin A supplements – this is more than 10 billion capsules of vitamin A for children under five. This low-cost intervention prevents blindness, strengthens immune systems and has helped hundreds of millions of children around the world grow up stronger and healthier. Additionally, it has enabled the production of enough iodized salt to reach close to 300 million people, resulting in approximately 200,000 mental impairments averted each year.

Up until April 2017, Nutrition International's strategic goals included:

- 1. Child Survival: to reduce under-five mortality by increasing and sustaining vitamin A and zinc intake;
- **2.** Child Development: to improve the cognitive development of, and educational outcomes among, children through increased and sustained intake of iron and iodine; and
- 3. Women's Health: to improve the survival and health of women by increasing and sustaining their iron, folic acid and iodine intake and, in turn reducing the consequences of iron deficiency anaemia and of poor pregnancy outcomes.

In 2017, as part of a rebranding and repositioning exercise, Nutrition International updated its mandate to include three specific ways in which they work to transform the lives of vulnerable people, especially women, adolescent girls, and children, by improving their nutritional status:

- 1. Increase coverage by scaling up low-cost, high-impact nutrition interventions, especially for women, adolescent girls, and children in Africa and Asia;
- 2. Integrate nutrition and maximize impact by engaging and leveraging all partners, including private sector, and using a multi-sectoral approach to ensure there are no missed opportunities; and
- **3.** Influence improved policies, programs, and resources for nutrition scale-up by maximizing efforts by forging unique and innovative partnerships with national and global nutrition actors to ensure evidence-based approaches to advance nutrition.

2.2.1 DFATD Funded Projects

Funds for activities have been provided to NI headquarters (HQ) through grant agreements. HQ manages the technical and operational functions of the grants, while country offices provide ongoing support to project partners involved in implementing activities. The following will be covered in the evaluation.

2.2.1.1 DFATD support to Nutrition International activities 2014/15 to

2018/19 (Micronutrient Programs for the Survival and Health of Mothers and their Children (MPSHMC))

DFATD provided a grant of \$150 million (2014-2019) to stimulate and support national actions to eliminate micronutrient malnutrition, contributing to the goal of universal coverage of key micronutrients, providing sustained impact on people's health and well-being. Nutrition International works with country governments, United Nations agencies, private organizations, and other non-governmental agencies (NGO) to provide technical assistance to improve the incountry capacity of service delivery. Nutrition International worked in 10 countries (Bangladesh, India, Indonesia, Pakistan, the Philippines, Ethiopia, Kenya, Nigeria, Senegal, Tanzania). Nutrition International focused on the interventions scientifically shown to provide the highest health impact in relation to resources expended, which include:

1. Increasing vitamin A coverage, especially among the most vulnerable children under five years of age, and assure the availability of supplies of vitamin A supplements to high mortality countries for children under five years of age;

- 2. Increasing the intake of iron and folic acid by women throughout the lifecycle, with a special focus on meeting the needs of micronutrients of women during pregnancy;
- 3. Increasing the iodine intake of populations at risk of iodine deficiency, primarily through increasing the availability of adequately iodized salt;
- 4. Scaling up the use of zinc supplements as adjunct treatment with low osmolality oral rehydration salts for diarrhea;
- **5.** Catalyzing greater global impact of micronutrient interventions by contributing to the evidence base and its translation into policies and programs, strengthening commitment and political will, and ensuring high quality and availability of essential micronutrient commodities; and
- 6. Other micronutrient-related programming in agreement with DFATD.

To accomplish these goals, Nutrition International engaged in specific activities to support country-level programming:

- 1. Direct procurement of micronutrient commodities for delivery to countries;
- 2. Provided support to national supply-chain mechanisms;

- 3. Assistance to help ensure that micronutrient stocks are uninterrupted, timely, adequate, and of sufficient quality at key delivery points;
- 4. Provided technical support to ensure that national public health systems and frontline community based health workers or volunteers are adequately trained and equipped to provide key micronutrient services;
- **5.** Test innovative approaches to reach underserved populations or outside the reach of health services;
- 6. Engaged with private sector to leverage their expertise and innovation in areas such as technology development and commercialization;
- 7. Carried out high-quality scientific research and analysis on intervention and operational issues that contribute to effectively reaching at-risk populations;
- 8. Advocated for the appropriate prioritization of micronutrient programming in public and private health systems; and
- 9. Developed management and training tools to support the successful programming implementation.

2.2.1.2 Right Start (\$75 million) 2015/2016 to 2019/2020:

The Right Start project supported scaled up nutrition for vulnerable populations in 9 countries (Bangladesh, India, Indonesia, Pakistan, the Philippines, Ethiopia, Kenya, Senegal, Tanzania), with a special emphasis on the 'first 1000 days from conception until a child's second birthday" by supporting improved nutrition for 50 million adolescent girls, women of reproductive age, and pregnant women. This included:

- 1. Improving policy commitment for, and support the scale up of, the provision of packages of interventions that include micronutrient supplements and/or fortified foods, and improve their consumption by adolescent girls and women of reproductive age;
- 2. Improving policy commitment for, and support the scale up of, the provision of services and packages of interventions (a) during pregnancy, including micronutrient supplements and their consumption by pregnant women; (b) at birth, including optimally timed cord clamping and cleaning, kangaroo care, etc., and (c) after birth, including micronutrient supplementation for lactating women and the promotion of optimal breastfeeding;
- **3.** Improving policy commitment for, and support the scale up of, the provision of services and packages of interventions to support appropriate infant and young child feeding practices; and
- 4. Providing other related programming based on needs and/or latest evidence in programming interventions, in agreement with DFATD.

2.2.1.3 Institutional Support Grant (\$293 million) – 1 Apr 2019 to 31 Mar 2025

This grant provides continued support to activities and objectives funded under Right Start and MPSHMC as described in Nutrition International's Investment Case (IC)1 and Global Strategy. In the IC, Nutrition International committed to trying to raise \$700 million CAD and to making "a foundational contribution toward the realization of the SDGs by saving the lives of 1.2 million children, averting 4.4 million cases of stunting and preventing 60 million cases of anaemia." The document further notes that, given Nutrition International's focus on improved nutrition for mothers, adolescent girls, and children in the first 1,000 days of life, the bulk of these gains will accrue to women and girls, reinforcing female empowerment and gender equality. The original grant was for \$280 million CAD and supported work in Nutrition International's 10 core countries in Asia and Africa, the vitamin A capsule program that operates in partnership with UNICEF is up to 60 countries as well as global advocacy, research and technical assistance.

In 2021 a costed amendment to this grant was agreed. This added \$13 million to the total for nutrition activities to respond to the impact of the Covid-19 pandemic. Activities were conducted from 1 April 2021 – 31 March 2023 in Kenya, Tanzania, Nigeria, Ethiopia, Senegal, Bangladesh and Pakistan.

2.2.2 Logic Model

The Logic Models and Theory of Change clarify the expected impact/higher level changes and outcomes to be achieved over the periods of each of the three grants noted above. Annex 3 - DFATD Logic Models contains 3 logic models, the first for the DFATD grant for core activities, \$150 million (2014-2019); and the second for the DFATD grant for Right Start, \$75 million (2015-2020); and the third for the DFATD Institutional Support Grant, \$293 million (2019-2025); These logic models and theory of change also identify the key areas of activities expected to be undertaken to achieve them.

2.2.3 Stakeholders

Stakeholder consultation is fundamental to evaluations of development interventions; therefore, the Consultant must ensure that key relevant stakeholders are consulted throughout the evaluation process.

2.2.3.1 Direct beneficiaries

The direct beneficiaries of Nutrition International's programs include:

- 1. Children under the age of five receiving vitamin A, zinc and oral rehydration salts, improved feeding practices, and treatment of acute malnutrition;
- 2. Women of reproductive age receiving iron and folic acid supplements;
- 3. Adolescent girls receiving iron and folic acid supplements and nutrition education;
- 4. National governments benefitting from strengthened health systems and improved procurement mechanisms and operational research findings that can influence decision making;
- 5. Health care workers receiving capacity building training;
- 6. Other international, regional and country-level organizations, non-governmental organizations, and initiatives who may be impacted directly or indirectly by Nutrition International programming and engagement.

¹ Link here: <u>NI Investment Case 2018 - 2024 (nutritionintl.org)</u>

2.2.3.2 Donor organizations

Nutrition International's main donor is DFATD providing more than 80% of the organization's funding. Details on funding from other donors will be provided by Nutrition International during the course of the evaluation.

2.2.3.3 Interested parties

- 1. Existing and other potential donors interested in supporting NI;
- 2. Governments with similar nutrition programs interested in lessons learned within and across countries targeted through NI programming;
- 3. International, regional and country-level organizations engaged in similar programming; and
- 4. International initiatives such as the Scaling Up Nutrition (SUN) movement and the Decade of Action for Nutrition.

2.3 Evaluation Scope

The scope of the evaluation covers the grants described in section 2.2.1 and in the DFATD Logic Models (Annex 4)

2.3.1 Temporal Scope of the Evaluation

The temporal scope of the evaluation extends from April 2014 until the end of the fiscal year (March 31, 2023) of the last project, as described in section 2.2.1.

2.3.2 Geographical Scope of the Evaluation

Nutrition International's programs take place in 10 core countries across Asia and Africa (Bangladesh, India, Indonesia, Pakistan, the Philippines, Ethiopia, Kenya, Nigeria, Senegal, Tanzania). The larger programmatic footprint of the organization's work spans up to 60 countries worldwide and some activities (like advocacy and research) are global in nature. In country evaluation exercises will be focused on India, Pakistan, Indonesia, Kenya and Ethiopia.

2.3.3 Evaluation Criteria and Indicative Areas of Investigation

The Consultant must conduct the evaluation following the guidance provided in this Scope of Work. It is a common practice in the evaluation field to use the word "evaluation" as an entity. Thereafter, in this Scope of Work, "evaluation" is to be considered an entity. Where necessary, the text will specifically use the word "Consultant", "Core Evaluation Team" and "Evaluation Team Leader" to clarify a mandatory requirement; otherwise, the word evaluation will be used.

The evaluation must address the indicative areas of investigation presented in Table 2 below. These will be used as a starting point for developing a specific set of evaluation questions in keeping with the methodological framework during the inception phase. The indicative areas of investigation are intended to give a more tangible format to the evaluation than using the Organization for Economic Co-operation and Development/Development Assistance Committee (OECD/DAC) criteria. They articulate the key areas of interest that have emerged from consultation with stakeholders, thereby optimizing utility of the evaluation.

In this Scope of Work, the word "impact" is not referring to an evaluation methodology or type used to establish statistically significant causal relationships between intervention and observed effects. Rather, the word "impact" in this Scope of Work, and in relation to the evaluation methodology criteria set out in Section 3, refers to the OECD/DAC terminology which defines impact as higher-level change or contribution which may be assessed qualitatively.

For each of the following indicative areas of investigation, the evaluation will consider both Nutrition International's core activities (2014/15 to 2018/19) and Nutrition International's expanded set of activities (2015/16 to 2019/20) (Right Start) and the Institutional Support Grant (2019/2020 up to March 31, 2023) defined in this Scope of Work. It is expected that Nutrition International's Institutional Support Grant will be evaluated with the understanding that the programming in this grant has not yet been finalized and no endline data is available. As such, in addition to assessing the below indicative areas of investigation, the evaluation should assess Nutrition International's ability to adapt and learn within this growing set of activities.

	ve Areas of Investigation	Additional Information/Explanations
1. The Nutr to p geno the targ adap land	riterion/Criteria Covered) extent to which and how rition International's approach program design and delivery is der responsive and responded to needs and priorities of the eted program participants and oted to a changing nutritional lscape. (Relevance, ctiveness)	 Under this issue, the Consultant should investigate to what extent and how: Nutrition International program interventions and outcomes were in line with the priorities and needs of the targeted beneficiaries. This includes the degree to which the scope of activities was selected and prioritized according to demonstrated needs and contextual considerations; Nutrition International's objectives aligned with relevant government policies and plans, and the corresponding governmental priorities in program countries; also, how NI, through their technical leadership, helped shape and influence country policies, plans, and priorities when needed; Nutrition International's objectives aligned with relevant third party analyses of the health situation in program countries; and Nutrition International's objectives adapted within a changing nutritional landscape and/or adjustments were decided/implemented when a course-correction was required; protocols for deciding geographic scope of engagement and/or closing down on engagement were developed and implemented.
Nut: cour activ resp deliv inte: (<i>Eff</i>	extent to which and how rition International, through ntry-level and research vities, improved the gender consiveness and sustainability of very and utilization of nutrition rventions in-country. <i>Ectiveness, Value Added,</i> <i>trainability</i>)	This assessment should look at how Nutrition International's country-level and research activities and technical assistance have been used and what it has helped to achieve, including the extent to which and how Nutrition International programming contributed to: i. national nutrition priorities aligning (with appropriate adaptations) to global best practices and evidence;

Table 2. Indicative areas of investigation for the Summative Evaluation.

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Indicative Areas of Investigation (DAC Criterion/Criteria Covered)	Additional Information/Explanations	
3. The extent to which and how NI influenced, improved and/or	 ii. specific policy changes; iii. increases in funding from domestic resources (including concessional financing); iv. increased capacity of governments and health institutions to deliver key nutrition interventions; v. improved capacity of health service intermediaries for timey provision of quality nutrition services and/or policy; vi. increased and sustained access to and uptake of nutrition commodities, supplies, and services by targeted beneficiaries. This assessment should examine the extent to which and how NI: 	
enhanced the gender- responsiveness of policies, programs, and resources for nutrition scale-up at national and global levels. (<i>Effectiveness, Value</i> <i>Added, Sustainability</i>)	 and how NI: i. forged unique and innovative partnerships with national and global nutrition actors to ensure evidence-based approaches to advance nutrition; ii. brought cutting-edge knowledge (nutrition technical expertise and/or program implementation) to the table in policy and program design discussions; and iii. facilitated learning and exchange of knowledge/skills at the national and global level to foster continued improvement. iv. influenced donors, including Canada, to make nutrition a higher priority. v. used or developed monitoring systems (including with partners) to manage the implementation of activities; and vi. used financial management, forecasting and reporting systems to manage the implementation of activities 	
4. The extent to which and how Nutrition International engaged, worked, coordinated, and collaborated in-country with governments, partners, and stakeholders. (Impact, Value Added, Effectiveness, Efficiency, Relevance, Sustainability)	 This assessment should examine how Nutrition International engaged, worked, coordinated, and collaborated in-country with governments, partners (e.g. multilateral organizations, civil society, private sector, among others), and key stakeholders. In particular this issue should examine the extent to which and how: these interactions have contributed to/hindered results; these interactions contributed to/hindered national ownership; these interactions avoided duplication of efforts and fostered synergies among partners and key stakeholders; 	

Indicative Areas of Investigation (DAC Criterion/Criteria Covered)	Additional Information/Explanations
	 iv. complementarities (each party's organizational mandate and scope of activities) among stakeholders, partners, and NI were respected and/or transparently and inclusively negotiated so as to maximize effectiveness and efficiency; v. decision-making and setting of program and engagement expectations were clearly communicated to partners and stakeholders; vi. Nutrition International engaged technical and non-technical expertise in-country and otherwise in order to deliver quality nutrition interventions; vii. Nutrition International responded and timely adapted to partner and stakeholder needs over time as a result of a variety of contextual changes, including ensuring that information management and sharing processes met the needs of partners and stakeholders ; and viii. NI's decisions to engage in/and or disengage from countries were made, and the extent to which and how these decisions impacted country governments and partners
5. The extent to which gender equality is integrated across Nutrition International programs and its contribution to Nutrition International's women empowerment outcomes. (<i>Relevance, Effectiveness, Impact</i>)	 This assessment should examine how Nutrition International approaches gender equality in nutrition programming, including practices and processes of integration and/or mainstreaming of gender and/or women's empowerment into program design, implementation, and evaluation. Elements to assess include: i. lessons learned by Nutrition International in relation to the methods and process of integrating gender equality and women's empowerment in program design and delivery. ii. the scope of activities (including SGBAs and formative research) used to establish contextual relevance and program effectiveness. iii. information management, knowledge sharing and capacity building. iv. use of innovative partnerships to leverage gender equality work in the nutrition and/or food fortification sector (i.e. women's rights organizations) v. integration of gender equality and women's empowerment outcomes into

	Indicative Areas of Investigation (DAC Criterion/Criteria Covered)	Additional Information/Explanations	
)]		vi.	program performance management frameworks, evaluations, and monitoring. extent to which the Nutrition International programming has led to gender equality outcomes.

3. Evaluation Methodology and Approach

The Consultant is expected to propose a methodological model that best meets the purpose and objectives of this evaluation, and which follows the OECD/DAC (2010) *Quality Standards for Development Evaluation* and best practices in evaluation. Though references are made to the OECD/DAC criteria (effectiveness, efficiency, relevance, impact, and sustainability), the evaluation must not be rigidly structured on the basis of the OECD/DAC criteria but rather on the basis of the Indicative Areas of Investigation detailed in Section 2.

3.1 Minimum criteria for methodology and analytical framework

The methodological model is expected to include the following minimum criteria:

- The methodology must be theory-driven and focused on the careful analysis of the intended outcomes, outputs, activities, and the contextual factors (that may have had an effect on implementation of NI programming) and their potential to achieve the desired results, contributions and/or impacts (as defined by the OECD/DAC criteria). An analysis of the program's theory of change, and the participatory validation/update of its intervention logic, must inform: the design of the evaluation (inception phase), the analysis of the data collected, the reporting of findings, and the development of conclusions and relevant, practical recommendations.
- The evaluation will use a feminist, participatory mixed methods approach and draw on quantitative and qualitative data as well as a mix of country level and remote data collection. See Data Collection Tools in Section 3.3.
- The analytical framework, including GBA+², will allow for the triangulation of all data collected to provide reliable information on the extent of results and benefits for stakeholders especially rights holders, with the results levels (and desired effects) clearly distinguished across immediate, intermediate, and ultimate outcomes and impacts/higher level changes, as defined by OECD/DAC criteria.

² https://women-gender-equality.canada.ca/en/gender-based-analysis-plus.html

- The evaluation will include contribution analyses/develop contribution stories for higher-level results where relevant, such as Areas of Investigation 2, 3 and 4)
- The evaluation will include case studies to maximize the breadth and depth of insights into the evaluation questions and provide a comprehensive and nuanced picture of the actions of NI and its effects. They will be illustrative (rather than statistically representative), exemplifying the range of contexts addressed and interventions undertaken by Nutrition International. Case studies will investigate the design and implementation of Nutrition International's interventions, and the results achieved within the specific context of program countries, mostly at national level. Local contexts will be reflected to the extent possible. Attention will be given to gender equality issues. Case studies should examine the same units of analysis to facilitate cross-case comparison and analysis of results. Each case study will rely on multiple sources and types of evidence (including document review and analysis of both quantitative and qualitative data) to increase the validity of their findings and the resulting conclusions of the final evaluation of Nutrition International.
- The evaluation will apply a gender and intersectionality lens where possible to the criteria across all areas of investigation. The evaluation will endeavor to integrate gender equality principles/feminist approaches throughout the evaluation process, including the Do No Harm principle, inclusivity, and by using a participatory approach when consulting key stakeholders, including adolescents, front line health workers, millers, community-based health workers, etc.
- Data will be disaggregated by relevant criteria (age, sex, geographic area, etc.) wherever possible. The evaluation will also be sensitive to fair power relations amongst stakeholders.

3.2 Evaluation Questions and Assumptions

The Consultant's Evaluation Core Team (ECT) will develop evaluation questions through iterative exchanges with the Evaluation Management Group (EMG; see section 5 Roles and Responsibilities). Evaluation Questions should clearly reflect the indicative areas of investigation listed in Table 2. They should also draw on the findings from the participatory validation/update of Nutrition International's theory of change.

The evaluation questions must be complemented by sets of assumptions that capture key aspects of the intervention logic associated with the scope of each question; this will enable the Consultant's ECT to gauge if preconditions that allow for the contribution to obtained results are fulfilled. Key stakeholders and rights holders as identified by the EMG will be consulted on evaluation questions and assumptions to improve the utility of evaluation findings. The data collection for each of the assumptions will be guided by clearly formulated quantitative and qualitative indicators and/or data collection methods.

3.3 Data Collection Tools

The Consultant's team will review all relevant and available documentation and data from Nutrition International (i.e. survey data, routine data) and collect secondary data related to Nutrition International, including third party documents as well as socio-economic and health-related data (such as those from Demographic and Health Surveys) for program countries. The Consultant's team will also collect primary data by means of tools such as interviews, focus groups questionnaires/survey (see below), as well as through virtual observation via video where possible – e.g. logistics and supply systems, health facilities, training institutes, etc.

Note: it will be expected that the findings will be validated with key stakeholders once the preliminary findings have been compiled and recommendations have been made.

Data collection for the evaluation will utilize a range of different data collection tools, including but not limited to:

3.3.1 Desk Review

The evaluation will include a desk-based review of all country-specific and relevant, existing, and available program documentation, data and information on and from Nutrition International that have been compiled during the inception phase of the evaluation. The Consultant will work with the members of the EMG to solicit further information, documentation and data from Nutrition International country teams as necessary.

To the extent possible, the desk study should produce information on all evaluation questions and associated indicators identified during the inception phase. Based on the available information, the Consultant should form preliminary assessments of the assumptions they set out to test for each of the evaluation questions; the assessments should become the basis for the preliminary answers to the evaluation questions. It will also inform the Evaluation Work Plan and Evaluability Assessment.

The Consultant is also expected to use the desk study as a preliminary, preparatory portion of the data collection and analysis for the in-depth, field-based country case studies, in accordance with the case study design developed during the inception phase of the evaluation. For this purpose, the Consultant should also use the end of the desk-based study as an opportunity to refine the scope of the subsequent inquiry in the field-based case studies.

The Consultant is expected to formulate preliminary findings at the level of the "assumptions for verification". Findings are anticipated at each level: global, national, and subnational. For each evaluation question, associated assumptions and respective indicators, the Consultant is expected to present the evidence that has been analyzed during the desk study with the use of an evaluation matrix (see section 4.5).

If determined that additional information is required to make a summative assessment, the evaluation may also include desk-based case studies for those countries which were not selected. This is to allow evaluators to cover a wider range of country contexts in their data collection and analysis, thus widening the basis for internally and externally valid findings, conclusions and recommendations resulting from the evaluation.

3.3.2 Group interviews and focus groups

Group interviews and focus groups can be conducted in country and virtually by the Consultant's team with members of NI's country office staff, program participants/beneficiaries such as adolescent girls and boys, national and local government officials, service providers, and decision/policy makers as well as other actors, such as participating NGOs, multilateral organizations, and Civil Society Organizations. The initial protocols for focus group discussions must be developed during the inception phase and must be finalized when preparing the field visits. When organizing focus group discussions and interviews, attention will be given to ensure gender balance, geographic distribution, consent and safeguarding, cultural sensitivity, representation of population groups, and representation of the stakeholders/duty bearers at all levels (policy/service providers/target groups/communities). In particular, the Consultant will reflect on the categories of stakeholders targeted by the evaluation as an important component while choosing the type of focus groups (e.g. socially homogeneous groups vs. groups of diverging point of views). The Consultant's team will detail the characteristics of each sample, including:

the selection method, the rationale for the selection, and the limitations of the sample and methodologies for interpreting evaluation results.

3.3.3 Interviews with key informants

Key staff from relevant country offices and headquarters/regional advisors/experts can be interviewed by the Consultant's team during the inception phase to aid in developing and/or piloting the methodological framework. During the Data collection phase, interviews must be conducted with experts and staff involved in managing Nutrition International's interventions incountry. Additional interviews in person and virtually may be conducted with policy makers and actors in relevant countries as well as with beneficiaries. The Consultant's team will detail the characteristics of each sample, including: the selection method, the rationale for the selection, and the limitations of the sample and the methodologies for interpreting evaluation results.

3.3.4 Field based country case studies

The field-based country case studies will serve as the opportunity to carry out in-depth assessment of NIs work and to remotely collect additional information in five core countries (India, Pakistan, Indonesia, Kenya, and Ethiopia). The allotment of countries to a field -based case study results from a consultative process among DFATD, Nutrition International and other stakeholders. The table below presents the results of the case study selection process. The PTA reserves the right to modify the selection of the stated field-based case study countries.

Each field-based country study will be directed by the Evaluation Team Leader, or Senior Evaluator, in coordination with the Country Research Specialists (see Section 7.2). The Country Research Specialists will be consulted regularly in the design of data collection tools and will carry out all data collection remotely via focus group discussions and key informant interviews. They will also help to facilitate working relationships with key stakeholders.

A small budget will be allocated for domestic travel for in-person data collection, only if:

- 1. It is safe to do so, and both national and local regulations allow domestic travel;
- 2. If hard-to-reach groups are identified who may not have easy or equitable access to technology to participate in virtual focus groups or interviews.

The field-based country case studies will be grounded in the desk-based review of all countryspecific and relevant, existing, and available documentation, data and information on Nutrition International that have been compiled during the inception phase of the evaluation. The Consultant will work with the members of the EMG to solicit further information, documentation and data from Nutrition International country teams as necessary.

If determined that additional information is required to make a summative assessment, the evaluation may also include desk-based case studies for those countries which were not selected. This is to allow evaluators to cover a wider range of country contexts in their data collection and analysis, thus widening the basis for internally and externally valid findings, conclusions and recommendations resulting from the evaluation.

3.3.5 Online Surveys

If gaps are discovered during the synthesis of the data collected, or if additional primary data is needed to make a summative judgement/make a finding more robust, online qualitative or quantitative surveys could also be used by the Consultant's Team and be distributed to key stakeholders that are directly or indirectly involved or impacted by Nutrition International programming, including national and global actors.

3.4 Evaluation Evidence Matrix

To ensure that the collection and recording of data and information is done systematically, the Consultant's team is required to develop an Evaluation Evidence Matrix (EEM) during the inception phase, in accordance with Annex 2 – Structure of the Evaluation Evidence Matrix. This matrix will help the Consultant consolidate in a structured manner all collected information corresponding to each evaluation question, and to identify data gaps and collect outstanding information before the end of the data collection phase. The EEM will play important but slightly varying roles throughout all stages of the evaluation process and therefore will require particular attention from the Consultant's team. Owing to the changing role and function of the EEM over the evaluation process. It is essential that the EEM (Field-based Country Case Study Notes and the Final Report) be structured and drafted in a manner that facilitates the easy access of evaluation users to the evidence that support the answer to each evaluation question.

4. Evaluation Process

4.1 Preparatory Phase

Nutrition International will lead the preparatory work, including the:

- 1. Preliminary compilation of documentation
- 2. Preliminary stakeholder mapping.

4.2 Inception Phase

The Consultant will conduct the design of the evaluation in consultation with the Evaluation Management Group (EMG – See section 5.3). This phase will include:

- 1. An inception meeting via videoconference or in Ottawa to engage with EMG members. The Evaluation Team Leader (ETL) along with another member of the Core Evaluation Team (CET) will conduct this meeting. The CET is expected to have previously done an initial review of the documentation compiled by NI during the preparatory phase. (This documentation will be made available to the Consultant shortly after contract signature).
- 2. The compilation and review of all relevant documents (beyond those already provided) available from Nutrition International headquarters and country offices. With the support from the members of the EMG, the Consultant's team will identify informants and information, documentation, and data from Nutrition International country teams.
- 3. The update and completion of a stakeholder mapping (complementing the preliminary mapping prepared by Nutrition International in collaboration with DFATD). The stakeholder mapping will be used to facilitate and illustrate the different (sets of) stakeholders relevant to the evaluation and their relationships to each other.
- 4. The review and update of the intervention logic of Nutrition International programming (i.e. participatory validation/reconstruction/update of an explicit casual theory of change³). This process must be based on programming documents and iterative discussions with key stakeholders defined with the help of the stakeholder mapping.
- 5. The development of a list of evaluation questions addressing the main topics/issues identified in Section 2.3.3 above, and the identification of the assumptions to be assessed and the respective indicators, sources of information and methods and tools for data collection.

³ See Mayne, J. 2018. Developing and Using Useful Theories of Change. Preprint. Available at: https://www.researchgate.net/publication/323868372

- 6. The development of the evaluation evidence matrix (EEM);
- 7. The development of a data collection and analysis strategy as well as a concrete work plan for in country and remote/virtual data collection (desk-based, field-based, online surveys, workshops) and reporting phases.
- 8. The design of the field-based case studies, including case-study questions, theoretical propositions to be tested, and units of analysis and data collection strategies.

NOTE: the Consultant **must not** start developing a Work Plan report based on new purpose(s) unless the Consultant is allowed to do so in writing by Nutrition International. If the Consultant is allowed to develop the Work Plan report based on approved updated purposes, the draft Work Plan report will inform the decision on how the evaluation can proceed. Nutrition International reserves the right to pause or cancel some or all subsequent phases of the assignment after the inception report.

4.2.1 Deliverables for Inception Phase

DELIVERABLE 1: DRAFT WORK PLAN

The Consultant must produce a draft Evaluation Work Plan that follows the structure as set out in Annex A1.1 – Evaluation Work Plan. Where relevant, the Work Plan must also include the pilot plan for the interview questions and tools.

Prior to submission to the PTA, the Consultant must ensure that the draft was internally quality controlled. The EMG will control the quality of the submitted draft work plan. If the quality of the draft Work Plan is satisfactory (form and substance), the draft Work Plan will be approved by the EMG. If the quality is unsatisfactory, the Consultant will be required to produce a new version of the draft inception report.

DELIVERABLE 2: DRAFT WORK PLAN WORKSHOP

The Consultant will conduct a draft inception report workshop with the participation of EMG members through a teleconference to present the Evaluation Work Plan.

DELIVERABLE 3: INTERVIEW QUESTIONS AND TOOLS

The Consultant must produce a draft version of the questionnaires and tools that will be used for the interviews, focus group discussions, online survey questionnaire, and case study guide. The questionnaires and tools may be put through a pilot period where the core features of the data collection tool, or evaluation methodology, may be tested and refined prior to submission of the drafts. This could include a test of whether the evaluation questions and assumptions to be assessed are relevant, specific, measurable, and/or to assess the availability of data and project documentation in specific or all field-based countries. Where relevant, the pilot plan must be included in the Evaluation Work Plan.

Prior to submission to the PTA, the Consultant must ensure that the questionnaires and tools were internally quality controlled. The EMG will control the quality of the submitted draft versions. If the quality of the drafts are satisfactory (form and substance), the EMG will approve. If the quality is unsatisfactory, the Consultant will be required to produce a new version of the questionnaires and tools.

DELIVERABLE 4: FINAL WORK PLAN REPORT AND FINAL DATA COLLECTION TOOLS AND GUIDES

Based on the comments received (both in writing and during the workshop), the Consultant will make appropriate amendments and submit a revised Evaluation Work Plan and revised data collection tools to the PTA. For all comments, the Consultant must indicate in writing how they

have responded ("trail of comments"). The Evaluation Work Plan and data collection tools will be considered final upon approval by the PTA based on the EMG's recommendation for approval.

4.3 Data Collection Phase

In Country and remote data collection will be undertaken according to the PTA-approved inception report.

4.3.1 Deliverables for Data Collection Phase

DELIVERABLE 5: FIELD-BASED COUNTRY CASE DEBRIEFING

At the end of each data collection phase per country, a member of the Core Evaluation Team must provide the EMG as well as in-country stakeholders (e.g., Nutrition International, partner donors, and key governmental and non-governmental organizations) with a virtual debriefing presentation on the preliminary results of the field-based case study, with a view to validating the preliminary findings. Any presentation material is to be submitted to the PTA at least two business days prior to the session.

DELIVERABLE 6: DRAFT FIELD-BASED COUNTRY CASE NOTES

For each field-based country case study, the Consultant must prepare a country case note presenting findings as per the identified evaluation questions. The country case notes must follow the structure as set out in Annex A1.3 – Field-based Country Case Notes. Each of the 5 field-based country cases should then have their own chapter, combining the secondary data from a desk review with the primary data collected for the purposes of this evaluation.

Prior to submission to the PTA, the Consultant must ensure that the document was internally quality controlled. The EMG will control the quality of the submitted draft Field-based Country Case Notes. If the quality of the draft Case Notes is satisfactory (form and substance), the draft Case Notes will be approved. If the quality is unsatisfactory, the Consultant will be required to produce a new version of the draft Field-based Country Case Notes.

DELIVERABLE 7: DRAFT ONLINE SURVEYS ANALYSIS BRIEF (IF RELEVANT)

The Consultant must submit a draft summary of key findings resulting from the analysis of the survey data. The purpose of the brief is to provide the EMG with preliminary findings prior to the Data collection workshop.

4.4 Reporting Phase

The reporting phase will begin with an internal analysis by the Consultant of the results of the data collection phase, including the desk and field studies as well as findings from the online survey if relevant. The purpose of this analysis is to generate a substantive and meaningful comparison between the different case studies. The objective is to help the various team members to deepen their analysis with a strategy for identifying the evaluation's findings, main conclusions, and related recommendations.

4.4.1 Deliverables for the Reporting Phase

DELIVERABLE 8: VIRTUAL CONFERENCE FINDINGS DISCUSSION

The preliminary internal analysis must be followed by a virtual conference with the EMG to present and discuss the preliminary findings of the evaluation. Following the virtual conference, the Consultant may then proceed with the drafting of the report. Any presentation material is to be submitted to the PTA at least three business days prior to the session.

DELIVERABLE 9: DRAFT FINAL REPORT

The Consultant must produce a draft final report. The draft final report must follow the structure as set out in Annex A1.4 – Final Evaluation Report.

Prior to submission, the Consultant must ensure the document was internally quality controlled. The EMG will control the quality of the draft report. If the quality of the draft report is satisfactory (form and substance) it will be approved. If the quality is unsatisfactory, the Consultant must produce a new version of the draft report.

DELIVERABLE 10: RECOMMENDATION WORKSHOP

Approximately two weeks after comments from the EMG have been shared with the Consultant's team, the findings, conclusions, and draft recommendations must be presented by the Consultant during a workshop at Nutrition International HQ in Ottawa, Ontario in person or via teleconference. The workshop will include participants from the EMG. Any presentation material is to be submitted to the PTA at least three days prior to the session.

DELIVERABLE 11: FINAL REPORT

Based on the comments received (both in writing and expressed during the recommendation workshop), the Consultant should make appropriate amendments and submit the final report, as set out in Annex A1.4 – Final Evaluation Report. For all comments, the Consultant must indicate in writing how they have responded ("trail of comments"). The final report should clearly account for the strength of the evidence on which findings are made to support the reliability and validity of the evaluation. The report should reflect a rigorous, methodical, and thoughtful approach. Conclusions must be built upon the findings of the evaluation. Conclusions must clearly reference the specific evaluation findings they have been derived from; recommendations must reference the conclusions they are responding to and lessons must also reference the conclusions they are responding to.

The report is considered final once it is formally approved by the EMG.

DELIVERABLE 12: FINAL FIELD-BASED COUNTRY CASE NOTES

For each field-based country case study, the Consultant must submit a final country case note. Each of the country case notes must follow the structure as set out in Annex A1.3 – Field-based Country Case Notes.

Each of the final field-based country case notes are considered final once it is formally approved by the EMG.

4.5 Management Response

The Consultant is not responsible for this task.

Nutrition International and DFATD will coordinate and oversee the preparation of the management response to the evaluation report. Recommendations will be systematically responded to, including any action to be taken by the stakeholders targeted in each recommendation. The members of the EMG will be responsible for presenting the findings of the evaluation to the appropriate stakeholders in their respective agencies. Nutrition International and DFATD will compile the management responses from the different targeted stakeholders into one single management response report to the evaluation.

4.6 Dissemination

The Consultant is not responsible for this task. The EMG is responsible for the dissemination of the evaluation products. The results, conclusions and recommendations of the evaluation will be

shared with internal and external stakeholders. In accordance with relevant transparency and accountability guidelines, the executive summary (See Annex A1.5) will be made available on NI and DFATDs websites. Additional communications products will be developed and used, as appropriate, to promote the findings of the evaluation.

5. Roles and Responsibilities

The evaluation is managed jointly by an interagency EMG comprised of representatives from Nutrition International, DFATD and the Bill and Melinda Gates Foundation (BMGF). The roles and responsibilities of the EMG are outlined in section 5.3.

Nutrition International is the Project Technical Authority (PTA) and will act as the main interlocutor between the Consultant and other counterparts on the EMG and will facilitate interactions and ensure a smooth implementation process.

5.1 Consultant

The Consultant must carry out the evaluation in conformity with the "*OECD/DAC (2010) Quality Standards for Development Evaluation*" and best practices in evaluation.

The Consultant is responsible for:

- 1. Ensuring that all products adhere to the OECD/DAC (2010) Quality Standards for Development Evaluation;
- 2. Managing the evaluation in accordance with the inception report approved by the PTA;
- 3. Preparing and submitting all deliverables for revision and approval by the PTA;
- 4. Reporting regularly on progress to the PTA;

Stakeholder consultation is fundamental to evaluations of development interventions, thus the Consultant must ensure that stakeholders are consulted throughout the evaluation process. Note: the Consultant must not share draft deliverables with stakeholders without approval by PTA. This is required to ensure a robust quality assurance throughout the evaluation process.

5.2 Nutrition International

Nutrition International is the Project Technical Authority (PTA) for this evaluation. The PTA will chair and provide the secretariat function for the EMG and will thus lead the management of the process and engage in day-to-day management of the evaluation process. The PTA will be supported in the management of the evaluation by the members of EMG.

The PTA is responsible for:

- 1. Managing the Contract with the Consultant;
- 2. Facilitating access to documentation and people deemed of importance to the evaluation process;
- 3. Liaising/coordinating with the EMG to facilitate access to information and documentation, sharing deliverables, convening review meetings with the Consultant's team, etc.
- 4. Reviewing and commenting on deliverables;
- **5.** Collecting EMG members' comments on deliverables (may also include comments from other stakeholders);
- 6. Ensuring unanimous approval each deliverable from all EMG members.
- **7.** Approving the sharing of deliverables with key stakeholders and those who may benefit from the evaluation;
- 8. Including verbatim stakeholders' comments (if applicable); and

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9. Disseminating the evaluation final report and executive summary.

5.3 Evaluation Management Group (EMG)

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The EMG will be the main decision-making body for the evaluation. The main responsibilities are to support and oversee the evaluation management and act as a liaison with the appropriate technical units within their own organizations. The EMG will manage the entire evaluation process, from the selection of the Consultant, through to the dissemination and follow-up of the final evaluation report. The EMG will consist of: i) three representatives from NI; ii) three representatives from DFATD; and iii) one member from the BMGF.

Key roles and responsibilities of the EMG include:

- 1. Lead the recruitment of the Consultant, including the review of proposals and approval of the evaluation team selected;
- 2. Provide technical guidance and support for the Consultant at each step of the evaluation process and facilitate their access to necessary information, documentation and resources for the evaluation process;
- 3. Convene review meetings with the Consultancy team, as needed;
- 4. Identify and ensure the participation of relevant stakeholders throughout the evaluation process;
- 5. Review and provide substantive comments on all deliverables (including draft versions, if applicable);
- 6. Recommend the approval of all deliverables to the PTA on an unanimous basis;
- 7. Design a dissemination plan of the evaluation results;
- 8. Contribute to learning, knowledge sharing, and the dissemination of the evaluation findings;
- **9.** Provide necessary support to ensure full compliance with the Evaluation Statement of Work.
- 10. Develop the Management Response
- 11. Facilitate learning and knowledge sharing on the basis of the evaluation results. Members of the EMG will be responsible for contributing to disseminating the findings of the evaluation, and for follow-up on the implementation of the Management Response.

6. Consultant Profile

The Consultant is to propose a team composed of the following categories:

- 1. Core Evaluation Team
- 2. Country Research Specialists
- 3. Quality Assurance Personnel
- 4. Additional Specialized Personnel
- 5. Additional Non-Specialized Personnel

The roles and responsibilities of the Consultant's proposed team members are to be defined by the Consultant in its Technical Proposal.

6.1 Core Evaluation Team

The Core Evaluation Team is composed of at least an Evaluation Team Leader (ETL) and a Senior Evaluator. It may also include other subject matter experts. The Core Evaluation Team together, in addition to its extensive experience working on similar development evaluation as described in this Scope of Work, also possesses technical expertise in i) Nutrition, ii) Gender Equality,

iii) Quantitative Data Analysis and iv) Qualitative Data Analysis. Note: the ETL and the Senior Evaluator may also cover any of the required technical expertise.

Each member of the Core Evaluation Team must possess the following levels in English: Oral = 4 – Advanced Professional Proficiency Reading = Level 4 – Advanced Professional Proficiency Writing = Level 4 – Advanced Professional Proficiency

At least one member of the Consultant's team must possess the following levels in French: Oral = 4 – Advanced Professional Proficiency Reading = Level 4 – Advanced Professional Proficiency Writing = Level 4 – Advanced Professional Proficiency

The definition associated with the language requirements can be found in Annex 3- Description of Language Scales/Levels.

6.2 Country Research Specialists

Reporting to the Core Evaluation Team, each of the five field-based country case studies must have an assigned Country Research Specialist. The same resource may be proposed for more than one country as long as they have demonstrated experience in each country for which they are being proposed, including working knowledge of the local language.

6.3 Quality Assurance Personnel

As part of the evaluation's quality assurance, the Bidder should hire quality assurance personnel that must be independent from the Core Evaluation Team, the Local Coordinators-Specialists and additional specialized or non-specialized personnel.

6.4 Additional Specialized Personnel

The Core Evaluation Team may draw upon additional intermediate level evaluators and/or resources with specialized technical expertise as necessary to support in the evaluation mandate.

6.5 Additional Non-Specialized Personnel

The Core Evaluation Team may draw upon other non-specialized staff, as necessary. These resources may include, but are not limited to:

- Researchers
- Editorial and communications staff
- Administrative and logistical assistance personnel
- Translators
- Enumeration personnel

7. Quality Assurance

The Consultant must have an Evaluation Quality Assurance System (EQAS) that will be used throughout the evaluation process. Accordingly, the Consultant must dedicate specific resources to quality assurance efforts and must have quality assurance mechanisms which will be applied throughout the evaluation process.

Quality of evaluation deliverables

The first level of quality assurance for evaluation deliverables will be conducted by the Consultant. That is, the Consultant must systematically quality control all deliverables prior to submission to the PTA.

The second level of quality assurance for evaluation deliverables will be conducted by the EMG. Deliverables will be reviewed by the EMG, who is responsible for determining whether the deliverable meets satisfactory standards. As part of DFATD's decentralized EQAS, a Quality Assurance Report (QAR) will be applied in the assessment of deliverables for this evaluation. The QAR uses evaluation quality standards that follow primarily the OECD/DAC Quality Standards for Development Evaluation, as well as the United Nations Evaluation Group Norms and Standards for Evaluation and best practices from the international evaluation community.

To further enhance the quality and credibility of this evaluation, other EMG-identified stakeholders will also comment on the deliverables (factual checks).

8. Location of Work

Location of the work is to be determined by the Consultant, with travel required to Ottawa and field-based study countries, as described below. Opportunities to hold virtual meetings with Ottawa-based staff may be explored, however consultants should budget for travel in the event it is required.

9. Travel

The Consultant is encouraged to take a localized approach that considers carbon footprint and an efficient use of financial resources. Country Research Specialists will be responsible for conducting all in-country data collection and for stakeholder management. The selection of the field-based case study countries will be reviewed during the inception period considering security considerations. The PTA reserves the right to modify the selection of the stated field-based case study countries. In addition, the Consultant may travel to Ottawa, Ontario during the reporting phase for the recommendation workshop. Dates and times for the inception meeting will be confirmed during Contract negotiation and should take place within two weeks of contract signature.

All travel must be preapproved by the PTA, who will keep the EMG informed of travel planning. Where possible local staff should be empowered and supported to conduct evaluation work, and virtual data collection should be used where relevant. These parameters should be considered in the context of localization, environmental sustainability, and financial efficiencies.

Indicative Time Schedule and Deliverables and Milestones

#	Deliverable	Section	Template	Indicative time schedule
INC	CEPTION PHASE			
	Inception Mission in Ottawa or virtual conferences		N/A	Held within 1 week of the start of the contract
1	Draft Evaluation Work Plan Report	4.2.1	A1.1	Submitted within 8 to 10 weeks of the start of the contract
2	Draft Evaluation Work Plan and Data Collection Tools Workshop	4.2.1	N/A	Held around 2 weeks after draft inception report submission
3	Draft Data Collection Tools and Case Study Guidelines	4.2.1	N/A	Submitted 1 week after inception report workshop
4	Final Evaluation Work Plan Report	4.2.1	A1.1	Submitted 1 week after feedback received on Data Collection Tools
5	Interview Questionnaires and Tools	4.2.1	N/A	Submitted within 1 week after Evaluation Work Plan approval by PTA
DA	TA COLLECTION PHASE			
6	Field-based Country Case Debriefing	4.3.1	N/A	Virtual debrief, at the end of each country data collection phase
7	Draft Field-based Country Case Notes	4.3.1	A1.3/A1.2	Submitted within 16 weeks after inception report approval by PTA
8	Draft Online Surveys Analysis Brief	4.3.1	N/A	Submitted within 16 weeks after inception approval by PTA
RE	PORTING PHASE			
9	Findings Discussion (Virtual meeting)	4.4.1	N/A	Held 2 weeks after draft Field-based Country Case Notes
10	Draft Final Report	4.4.1	A1.4	Submitted within 2 weeks after Finding Discussion
11	Recommendation Workshop	4.4.1	N/A	Held 2 weeks after submission of draft final report
12	Final Report	4.4.1	A1.4	Submitted within 3 weeks after reception of comments from the PTA
13	Final Executive Summary	4.4.1	A1.5	
14	Final Field-based Country Case Notes	4.4.1	A1.3	Submitted along with the final report

All deliverables must be prepared in English, and submitted to the PTA. Only the executive summary of the final evaluation report (See Annex A1.5) must be submitted in both official languages. The Consultant must translate the final version of the executive summary into French within 30 days of approval.

Deliverables must be submitted in MS Word or in a compatible software. PDF files are not acceptable. If needed, Nutrition International will convert files into PDF format. Presentations must be submitted in electronic format to Nutrition International prior to delivery.

At Nutrition International's request, the Consultant must submit documents used/created under the current mandate (e.g. questionnaires, focus groups protocols, interview notes, raw data, survey data, databases).

Payment	schedule	by	deliverable
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Milestone #	Deliverable	% of Total budget	Deliverable Date				
INCEPTIO	INCEPTION PHASE						
1	Draft Work Plan Report	5%	Submitted within 8 to 10 weeks of the start of the contract				
2	Draft Work Plan Report Workshop	0%	Held around 2 weeks after draft Work Plan report submission				
3	Final Work Plan Report and	15%	Submitted 1 week after workshop				
4	Draft Questionnaires and Tools	25%	Submitted within 1 week after inception report approval by PTA				
DATA COL	LECTION PHASE						
5	Field-based Country Case Debriefing	0%	Held (online) at the end of each country data collection phase				
6	Draft Field-based Country Case Notes	25%	Submitted within 16 weeks after inception report approval by PTA				
7	Draft Online Surveys Analysis Brief (if relevant)	0%	Submitted within 16 weeks after inception approval by PTA				
REPORTIN	IG PHASE						
8	Virtual Conference Findings Discussion		Held 2 weeks after draft Field-based Country Case Notes				
9	Draft Final Report with draft Executive Summary	10%	Submitted within 2 weeks after Finding Discussion				
10	Recommendation Workshop	5%	Held 2 weeks after draft final report submission				
11	Final Report with final Executive Summary	10%	Submitted within 3 weeks after reception of comments from the PTA				
12	Final Field-based Country Case Notes	5%	Submitted along with the final report				

Annex 1: Reporting Templates

A1.1 Evaluation Work Plan INSTRUCTIONS AND OUTLINE OF THE EVALUATION WORK PLAN

A. INSTRUCTIONS

The Contractor must prepare a work plan that operationalizes and directs the evaluation. The work plan must follow the outline provided in Annex A-2. Once approved by the TA, the work plan must serve as the agreement between the parties on how the evaluation is carried out. It is important to note that the work plan completes, but does not contractually replace, the Statement of Work in the Contract.

The work plan must be elaborated based on the information presented in this SoW to bring greater precision to the planning and design of the evaluation. It must include an evaluability assessment conducted as part of the work plan and be based on a preliminary review of development intervention documentation, discussions with key stakeholders, literature review, etc.

The following paragraphs provide guidance on how to address some sections of the work plan. However, all sections and annexes indicated in the outline of the work plan provided in Annex A-2 must be completed.

Evaluability Assessment

The work plan must include an evaluability assessment that will assess the feasibility of conducting the evaluation and guide the evaluation design. The Contractor will:

1. Examine the following key factors:

- existence (available and accessible) and quality of data (specifically including genderdisaggregated data);
- availability and accessibility of key informants: list of stakeholders and their respective roles in the intervention must be completed;
- the timing of the evaluation;
- identification of whether key stakeholders are open to or resist having the development intervention evaluated (e.g., the level of resistance to the evaluation and its reasons);
- ethical and safeguarding risks and considerations, including whether proceeding with the evaluation is likely to make an overall positive contribution and not result in substantial harms.

2. Review the logic of the intervention to:

- assess the immediate, intermediate and ultimate outcome statements and propose measures to address evaluability
- confirm a shared interpretation among key stakeholders of the development intervention's expected immediate and intermediate outcomes;
- validate indicators and targets to assess each outcome (NOT output)
- 3. **Review the evaluation questions**. Evaluation questions can be revised or withdrawn if they are impossible to answer, overly difficult or if there is a need to reduce the focus of the evaluation. Questions may be further elaborated, modified or added.

4. **Explain and note any factors** that compromise the independence of the evaluation and address possible conflicts of interest openly and honestly.

As a final step of the evaluability assessment, the Contractor will assess the independence of the evaluation and conflicts of interest by explaining which factors that may compromise the independence of the evaluation and by identifying and proposing resolutions of possible conflicts of interest or confirming that no such conflicts exist.

Approach and Methodology

The purpose, scope and evaluation questions are to be used by the Contractor to determine the most appropriate approach for the evaluation, to ensure that women and marginalized groups are meaningfully included throughout the evaluation. The methodology must be developed in line with the evaluation approach chosen and support the answering of evaluation questions using credible evidence.

The methodology section is the most important section of the work plan. In this section, the Contractor must explain and justify the selection of the proposed evaluation approach and must also specify and justify the overall evaluation design.

To describe and explain the evaluation methodology and its application, the Contractor must detail the proposed techniques for both data collection and data analysis and specific details on techniques for gender-sensitive data must be provided. The rationale for choosing those techniques must be provided and potential limitations and shortcomings must be explained. The methodology must take into consideration any data collection limitations and propose alternative data collection methods, for example through remote data collection and the use of local consultants where appropriate and necessary.

The Contractor must include a list of stakeholders involved in this development intervention and their respective role within the development intervention. The Contractor must describe the proposed strategy for stakeholder consultation and participation. This strategy will, among other things, explain how, when and why each stakeholder group will be contacted for this evaluation. In doing so, the Contractor must also describe the plan to safeguard evaluation participants (i.e. ensure that no participant or stakeholder group suffers any harm), including a discussion of any ethical issues and, if applicable, any Ethics Review Board approvals.

Given that data must be collected from various samples (people, locations, etc.), it is important that each sample methodology be explained. Thus, in the methodology section the Contractor must detail the characteristics of each sample: how it is selected, the rationale for the selection, and the limitations of the sample for interpreting evaluation results. If a sample is not used, the rationale for not sampling and the implications for the evaluation should be provided.

Where data is collected during the evaluation stakeholder consultation process, the Contractor must explain how the information collected is organized, classified, tabulated, interrelated, compared and displayed relative to the evaluation questions, including what will be done to integrate multiple sources.

The Contractor must set up and maintain an Evaluation Evidence Matrix (EEM) (see Annex A-4) to ensure that the collection and recording of data and information is done systematically. This matrix helps the Contractor consolidate in a structured manner all collected information corresponding to each evaluation question and to identify data gaps and collect outstanding information before the end of the data collection phase. It is essential that the final (published) version of the EEM is structured and drafted in a manner that facilitates the easy access of evaluation users to the evidence that support the answer of each evaluation question. Finally, elements of the evaluation evidence matrix which are "not applicable" or "not available" are

identified as such and the matrix establishes the evaluation criteria, questions, relevant and measurable indicators, data sources and methods for data collection.

B. OUTLINE

Table of Contents List of Acronyms List of Tables List of Figures

1. Rationale, Purpose and Specific Objectives of the Evaluation

Should include: rationale, purpose and specific objectives of the evaluation.

2. Development Context

Should include: a description of key contextual elements, specific to the development intervention (development context, including socio-economic, political, cultural factors, GBA+, context of the development intervention, including development agency, local government and partners' policies, objectives and strategies; and key issues pertaining to DFATD's former cross-cutting themes or FIAP Action Areas).

3. Evaluation Object and Scope

Should include: a brief description of the development intervention (e.g. the time period; budget; geographical area; programming; intervention logic, stakeholders; organizational set-up; implementation arrangements)

4. Evaluability Assessment

Should include: a review of previous evaluation(s), a review and an analysis of the logic of the development intervention, an assessment of the evaluation questions, an analysis of the evidence (existence and quality of data and availability of key informants), an analysis of key factors that compromise the evaluation, and a presentation of ethical and safeguarding risks and considerations.

5. Evaluation Questions

Should include: the evaluation questions or revised evaluation questions with the explanatory associated comments. Note that if Areas of Investigation are provided in the SoW, the contractor will be required to develop evaluation questions.

6. Evaluation Approach and Methodology

Should include:

1. The evaluation approach (conceptual framework) which needs to be gender-responsive and ensure the meaningful participation of women and marginalized groups throughout the evaluation;

2. The evaluation methodology (taking into consideration budget, time, data and constraints):

- i. description and explanation of indicators for collecting and analyzing data, disaggregated by gender and other relevant attributes to assess power relations and intersectionality;
- ii. description of proposed data sources;
- iii. explanation of how data sources will be cross-validated;
- iv. description of the design(s)⁴ chosen to answer questions, and why they were selected;

⁴ Type of Designs for Descriptive, Normative or Cause-and-Effect Evaluation Questions: Experimental, Quasi-Experimental and Nonexperimental.

- v. description of the proposed techniques/instruments for data collection, including tools that promote participation and inclusion;
- vi. description of the methods of data collection (desk and field-based)—including data collection plan; preparation of interviews and guides for focus groups; surveys; etc.
- vii. description of the data analysis strategy;
- viii. description and explanation of the stakeholder consultation and participation process, including sampling approach and description of each sample (e.g. stakeholders, numbers and gender of stakeholders, countries, regions, sites, sub-projects), including their representativeness and potential limitations. (A summary of the above is presented in the methodology section, while a complete and detailed explanation is provided in an annex);
- ix. a description of a strategy to safeguard evaluation participants (i.e. ensure that no participant or stakeholder group suffers any harm), including a discussion of any ethical issues.
- x. Limitations

7. Evaluation Management

Should include: team composition and distribution of tasks, roles and responsibilities and level of effort; the Contractor's approach to ensure quality assurance of all evaluation deliverables.

8. Deliverables, Milestones and Schedule

Should include: an explanation of the debriefing session and preliminary findings presentation, a detailed plan for the next phases of the evaluation; including detailed plans for field visits, preparation process and logistics, recruitment of field teams, etc.

9. Annexes

- Intervention Logic Model or Theory of Change;
- PMF;
- SoW;
- List of Stakeholders and their Respective Roles in the Intervention;
- Proposed Evaluation Evidence Matrix;
- Explanation of Sampling and Proposed Samples;
- List of Documents Consulted for the Work Plan;
- List of Individuals Consulted (Disaggregated by Affiliation and Gender);
- Proposed Work Schedule;
- Proposed Data Collection Tools/Protocols;
- Proposed Table of Contents for the Evaluation Report.

Table of Contents List of Acronyms

 $| \cup | | \cup \rangle$

Methodology of the Country Case Review

Should include: scope of the country case review; data collection and analysis including limitations.

Country Name

1. Context

Should include: country background; country health sector; health indicators; NI programming in the country

2. Main Findings

Should include: Brief answers to the case study questions (Note: the purpose is to answer the more specific case-study questions; not to answer the broader evaluation questions).

This section is divided by evaluation question. Each of these sections is divided into two subsections:

i) Assumptions verification. Each of the assumptions is presented along with an analysis of the data that supports the validation of the assumptions. The text provides sufficient detail on the sources of data so that the adequacy of the information can be assessed. It is also structurally presented in a way that eases cross-referencing to the Evaluation Evidence Matrix located in the annex while never referencing to the annex. Finally, the text discusses the validity and reliability of the data, as well as any weaknesses in the analysis. Where necessary, it states data gaps where a finding could not be triangulated.

ii) Contribution analysis. This section is structured by contribution statements. Each statement is explained and supported by a summary of the data analysis on which it is based.

3. Annexes

- Evaluation Evidence Matrix (for each country) as per Annex 2
- List of documents consulted for desk-based country case-study
- List of persons interviewed (online or in person) for desk-based country case-study

A1.3 Field-based Country Case Notes

Title: [Name of Country] Case Note

Table of Contents List of Acronyms

1. Context

Should include: country background; country health sector; health indicators; GBA+, Nutrition International programming in the country

2. Methodology of the Country Case Study

Should include: scope of the country case study; data collection and analysis during the country case study, including limitations and restrictions

3. Main Findings

Should include: Brief answers to the case study questions (Note: the purpose is to answer the more specific case-study questions; not to answer the broader evaluation questions).

This section is divided by evaluation question. Each of these sections is divided into two subsections:

i) Assumptions verification. Each of the assumptions is presented along with an analysis of the data that supports the validation of the assumptions. The text provides sufficient detail on the sources of data so that the adequacy of the information can be assessed. It is also structurally presented in a way that eases cross-referencing to the Evaluation Evidence Matrix located in the annex while never referencing to the annex. Finally, the text discusses the validity and reliability of the data, as well as any weaknesses in the analysis;. Where necessary, it states data gaps where a finding could not be triangulated.

ii) Contribution or Finding analysis. This section is structured by contribution statements or finding statement. Each statement is explained and supported by a summary of the data analysis on which it is based.

4. Conclusions

Should include: a full set of conclusions. The conclusion section is structured by conclusion statements. Each statement is explained and supported by a discussion that critically analyzes the specific findings which led to the conclusions and ensures a clear link between the conclusions and the recommendations.

5. Annexes

- Evaluation Evidence Matrix (for each country) as per Annex 2
- List of documents consulted for field-based country case-study
- List of persons interviewed for field -based country case-study

A1.4 Final Evaluation Report

Note:

- All information presented in the report must be supported by data and evidence, subjective opinions of evaluators are not accepted, and qualifiers are to be avoided unless clearly defined (i.e. avoid vague language such as "some", "substantial" etc.).
- The suggested length of the report is maximum 40–60 pages excluding the annexes.

Table of Contents List of Acronyms List of Tables List of Figures

Executive Summary

1. Introduction

Should include: rationale, purpose and specific objectives of the evaluation.

2. Development Context

Should include: a description of key contextual elements, specific to the development intervention (development context, including socio-economic, political, cultural factors, GBA+, context of the development intervention, including development agency, local government and partners' policies, objectives and strategies; and key issues pertaining to DFATD's former cross-cutting themes or FIAP Action Areas).

3. Evaluation Object

Should include: a brief description of the development Intervention (e.g. the time period; budget; geographical area; programming; stakeholders; organizational set-up; implementation arrangements).

4. Approach and Methodology

Note: The evaluation report is a standalone document. Key information included in the work plan may be used (synthesized, copied and updated as needed) in this section while never referencing to the work plan report. This section can be complemented in an annex.

Should include: a description and an explanation of the evaluation approaches and methodology (*details of*⁵, and justification for, methodological choices) and its application (*details of* what was done along with limitations). The report provides a description of indicators used for collecting and analyzing data, and sources of information are described. The report presents the instruments/techniques used for data collection and presents the data and information analysis. The report acknowledges any constraints encountered and gaps in the collection of data and how these have affected the evaluation, including the independence and impartiality of the evaluation. The report presents the stakeholder consultation and participation process and selection of case studies or samples is explained. Ethical issues and considerations are presented and described, as well as a strategy for safeguarding/causing no harm to evaluation participants and other stakeholder groups.

⁵"<u>Details</u> of" pertain to: techniques for data collection (including sampling choices/methods, samples and limitations regarding their representativeness for interpreting evaluation results) and data analysis.

5. Main findings and analysis

This section is divided by evaluation questions. Under each evaluation question, key finding(s) are presented as follows:

Finding #—Finding Statement [Findings are numbered successively to ease crossreferences. The length of a finding statement is of 1 to maximum 2 lines in bold character]

1st Paragraph: Explanation detailing the finding statement.

Following Paragraph(s): present the analysis of the evidence on which the finding is based. It provides sufficient detail on the sources of data/information so that the adequacy of the information can be assessed. The text is structurally presented in a way that eases cross-referencing to the Evaluation Evidence Matrix (EEM) located in the annex i.e. a reader can read the text without the need to access the annex.⁶

Following Paragraph: present data gaps where the findings cannot be fully triangulated and/or discuss the validity and reliability of the data, as well as any weaknesses in the analysis used to support the finding.

6. Conclusions

Should include: at least one conclusion for each evaluation issue. Additional conclusions may encompass more than one issue. Conclusions are presented as follows:

Conclusion #—Conclusions Statement [Conclusions are numbered successively to ease cross-references. The length of a conclusion statement is of 1 to maximum 2 lines in bold character]

1st **Paragraphs:** 1) Explain the conclusion in more detail and 2) State the specific findings # to which the conclusion pertains.

Following paragraph: present the analysis of the findings on which the conclusion is based (i.e. critically analyzes the findings which led to the conclusions and ensures a clear link between the conclusions and the recommendations).

7. Recommendations

Recommendations are clear, relevant, targeted and actionable so that the evaluation can be used to achieve its intended purpose(s), thus meeting the needs of the intended users. Recommendations must flow logically from the conclusions. Recommendations should be commensurate to the evaluation purpose and questions. The number of recommendations should be limited to the key ones only. Recommendations are presented as follows:

Should include for each recommendation:

Recommendation #—Recommendation Statement [Recommendations are numbered successively and ranked (prioritized) according to their relevance and importance to the evaluation purpose. The length of a recommendation statement is of 1 to maximum 2 lines in bold character];

Targeted party: [body targeted by the recommendation]; **Link to Conclusion:** [*e.g.* #*X* and #*Y*].

Following paragraph: 1) *Explain the recommendation in more detail and 2) State the specific conclusion # to which the recommendation pertains.*

⁶ See description the Evaluation Evidence Matrix in Annex A-4.

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8. Lessons

Annexes

- SoW;
- Intervention Logic Model or Theory of Change;
- PMF;
- List of Stakeholders and their Respective Roles in the Intervention;
- Evaluation Evidence Matrix (EEM) duly completed, that is, the Contractor must compile and organize the data (source, etc.) in the EEM to facilitate the systematic analysis of all collected information;
- Explanation of Sampling and Samples;
- Methodological Instruments Used (survey, focus groups, interviews, etc.);
- Final List of Documents Consulted;
- Final List of Individual Interviewed (*** the list **must** be removed before submitting the final report);
- Additional Information on Context, Program or Methodology and Analysis as necessary.

A1.5 Outline of the Executive Summary with instructions

(MAXIMUM OF 6 PAGES)

Evaluation Title: Insert the complete name of the evaluation
Evaluation Type: Formative, summative, prospective, thematic, etc.
Commissioned by: The Department's Program Branch (in the case of joint evaluation; list agencies involved)
Contractor: Name of the firm/individual contracted to conduct the evaluation
Date: Month and year submitted

Development Intervention #: Insert the development intervention number

Rationale and Purpose of the Evaluation

As per the SoW.

Specific Objectives of the Evaluation

As per the SoW.

Scope of the Evaluation

As per the SoW.

Development Context

Description of the context, including GBA+, in which the intervention was implemented, including key local government policies and strategies and socio-economic, political and cultural factors of relevance for the intervention.

Intervention

Description of the intervention being evaluated, including ultimate outcome, start and end dates, budget, geographical area covered, main components, and crosscutting issues addressed (i.e. gender equality, environmental sustainability and governance).

Logic of the Intervention

List the ultimate, intermediate and immediate outcomes as per the Logic Model (LM).

Stakeholders

As per the SoW.

Evaluation Approach and Methodology

Description of the (1) Evaluation approach (2) Methodology (3) Techniques for data collection and analysis (4) Sampling, and (5) Limitations of the evaluation.

Key Findings*

Select and list key findings.

Key Conclusions*

Select and list key conclusions.

Key Recommendations*

Select and list key recommendations.

Key Lessons

Select and list key lessons.

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*The findings, conclusions, recommendations and lessons listed above are those of the Contractor and do not necessarily reflect the views of the Department or the Government of Canada. The Department does not guarantee the accuracy of the information provided in this report.

Annex 2: Structure of the Evaluation Evidence Matrix

The table below represents the structure for the evaluation evidence matrix (EEM) in which each evaluation question must be included. This matrix must become the starting point for subsequent versions of the EEM that the Contractor must use to compile and organize data and information throughout the evaluation process. The EEM serves as a working tool throughout the evaluation process and will specifically be useful during the:

- **design of the evaluation (initial phase),** the EEM is to be used to capture core aspects of the evaluation design: (a) what is to be evaluated (i.e. key investigation areas, evaluation questions and related issues to be examined); (b) how to evaluate (sources of information and methods and tools for data collection). In this way, the matrix is to also help check the feasibility of evaluation questions and the associated data collection strategies.
- data collection phase of the evaluation, the EEM helps the Contractor to: (a) approach the collection of information in a systematic, structured way; (b) identify possible gaps in the evidence base of the evaluation; and (c) compile and organize the data to prepare and facilitate the systematic analysis of all collected information. *That is, the Contractor must compile collected information in the EEM indicating for each the data collected, its source, the method/tools used and notes.*
- **analysis and reporting phase**, the EEM helps the Contractor to conduct the analysis in a systematic and transparent way, by showing clear association between the evidence collected and the findings and conclusions derived on the basis of this evidence. *The Contractor must submit the completed EMM containing collected information. Note the EEM must be organized to facilitate the analysis supporting the line of evidence from data (and source) to findings to conclusions.*
- **dissemination phase**, and the actual use of the evaluation, the EEM plays a key role for making sure that users of the report can understand how the Contractor's team interpreted the available evidence to arrive at their findings, so that they are considered credible and valid.

Evaluation Question 1	[Text of Evaluation Q			
Rationale	[Summary of how the main evaluation question [Summary of how the second			
Sub question 1.1	[Text of Sub question			
Data/Indicators	Sources of information	Notes		
Indicator or Data 1.1.1 Indicator or Data 1.1.2 Etc.				(e.g. representativeness of the sample when applicable)
Sub question 1.2				
Etc.				

Outline for Evaluation Evidence Matrix

Annex 3: Description of Language Scales/Levels

Oral Proficiency Rating Scale

Level	Proficiency	Definition
5	Educated Native Proficiency	Functionally equivalent to that of a highly articulate and well-educated native speaker. Reflects the cultural standards of the country where the language is spoken. Language usage and ability to function are superior throughout.
4+	Advanced Professional Proficiency, Plus	Speaking proficiency is regularly superior in all respects and is usually equivalent to that of a well-educated, highly articulate native speaker. Speaks effortlessly and smoothly on all topics. Understands all forms and styles of speech and shows strong sensitivity to social and cultural references. Language usage and ability to function are fully successful. There may be an occasional non-native slip.
4	Advanced Professional Proficiency	Able to use the language fluently and accurately on all levels normally pertinent to professional needs. Language usage and ability to function are fully successful. Can tailor language to audience and discuss in depth highly abstract or unfamiliar topics. Able to speak with a great deal of fluency, grammatical accuracy, complex vocabulary and in an idiomatic fashion. Understands all forms and styles of speech and shows strong sensitivity to social and cultural references. May have some difficulty with some dialects and slang.
3+	General Professional Proficiency, Plus	Able to use the language to satisfy professional needs in a wide range of sophisticated and demanding tasks. Operates at level 4 most of the time but cannot sustain the performance across a variety of topics. Understanding is complete, including idioms, nuances, register shifts and humour or irony. Often matches a native speaker's strategic and organizational abilities. Basic and complex structures are fully controlled except for an occasional error in low-frequency structures. There are no patterned errors.
3	General Professional Proficiency	Able to speak the language with sufficient structural accuracy, vocabulary and cohesiveness in discourse to participate effectively in most formal and informal conversations on practical, social, and professional topics. Understanding is essentially complete. Can discuss with fluency and ease abstract issues and special fields of competence and interest. Can support opinion and hypothesize. Can provide a structured argument that is clear and well organized. While the influence of the speaker's first language can be felt (in pronunciation, grammar and vocabulary), there are no patterned errors and errors never distract the listener or interfere with communication.
2+	Limited Working Proficiency, Plus	Able to satisfy most working requirements with language that is often, but not always, acceptable and effective. Operates at level 3 most of the time but is unable to sustain the performance across all topics, i.e. when called on to perform level 3 tasks, may avoid the tasks altogether or resort to simplification through the use of description or narration instead of argumentation or hypothesis. Also, may give concrete examples to illustrate a point instead of arguing the point abstractly. Often shows remarkable ease of speech but performance is uneven. Vocabulary may still be generic (general) rather than precise. Often strong in either grammar or vocabulary, but not in both. Comprehension of normal native speech is nearly complete. Can be understood by native speakers not used to dealing with foreigners.
2	Limited Working Proficiency	Able to satisfy routine social demands and limited work requirements. Can handle with confidence, but not accuracy, complicated tasks. Speaks with ease and facility on concrete topics – giving facts and talking casually about topics of current public and personal interest – using general vocabulary and linking sentences together smoothly with appropriate connectors. When dealing with more complex or abstract topics or issues, fluency breaks down. Can narrate and describe in major time frames. Can understand main ideas and most details on a variety of topics, and discourse referring to different time frames or aspects. Can be understood without difficulty by native speakers.
1+	Elementary Proficiency, Plus	Can initiate and maintain predictable face-to-face conversations and satisfy limited social demands. Operates mostly at level 2 but cannot sustain the performance across all topics and tasks. Can converse with ease and confidence when dealing with routine tasks and social situations, describe people and places and narrate in present tense. May hesitate and change the intended message due to lack of language resources. Understanding of normal native speech is inconsistent due to failure to grasp details and, sometimes even main ideas. Influence of first language is evident in pronunciation, grammatical structures and vocabulary. However, can be understood by native speakers not used to dealing with foreigners, although repetition and reformulation may be needed.
1	Elementary Proficiency	Able to satisfy courtesy requirements and maintain simple face-to-face conversations on familiar topics. Can ask and answer simple questions and participate in simple conversations on topics beyond the most immediate needs. Speaks in sentences but often hesitates and pauses to search for adequate vocabulary. Able to understand sentence-length utterances on a variety of concrete topics, but understanding is uneven. Can be understood by native speakers used to dealing with foreigners.

Level	Proficiency	Definition
0+	Memorized Proficiency	Able to satisfy immediate needs using mostly rehearsed utterances. Can handle level 1 tasks but cannot sustain the performance at that level. Shows little autonomy of expression, flexibility and spontaneity. Relies heavily on learned phrases or a recombination of these and words used by the interlocutor. Inability to conjugate verbs. Strong influence of first language in pronunciation, grammar and vocabulary (borrowed words, literal translations). Can usually differentiate most significant sounds when produced in isolation, but when combined in words or groups of words, may have difficulty understanding. Can be understood by native speakers used to dealing with foreigners.
0	No Proficiency	Unable to function in the spoken language, except for a few isolated words and phrases.

Note:

- Level 2/2+ is that on which much daily communication and social interactions are handled routinely and effortlessly among native speakers.
- Levels 3 and above entail a much more sophisticated control of the language and a breadth and depth of vocabulary not normally used in everyday exchanges.

Level	Proficiency	Definition
5	Educated Native Proficiency	Reading ability is functionally equivalent to that of the well-educated native reader.
4+	Advanced Professional Proficiency, Plus	Near native ability to read and understand extremely difficult or abstract prose, a wide variety of vocabulary, idioms, colloquialisms, and slang. Strong sensitivity to and understanding of sociolinguistic and cultural references.
4	Advanced Professional Proficiency	Able to read fluently and accurately all styles and forms of the language in any subject as well as those pertinent to professional needs. Understands all sociolinguistic and cultural references. Can follow unpredictable turns of thought readily in editorial, conjectural, and literary texts, as well as in materials in own special field, including official documents and correspondence. Recognizes all professionally relevant vocabulary known to the educated non-professional native reader. Speed and accuracy is often nearly that of a well-educated native reader.
3+	General Professional Proficiency, Plus	Able to read with facility and appreciate a wide variety of texts as well as those pertinent to professional needs. Has a broad active general, specialized and abstract vocabulary. Able to comprehend many sociolinguistic and cultural references, as well as a considerable range of complex structures, low-frequency idioms, and connotations. However, accuracy is not complete, and here again some nuances and subtleties may escape the reader.
3	General Professional Proficiency	Able to read within a normal range of speed and with almost complete comprehension a variety of authentic texts on unfamiliar subjects. Reading ability does not depend on subject matter knowledge, except if the material is highly dependent on cultural knowledge or outside one's general experience and not accompanied by explanation. Text types include news stories, wire service reports, international news items, correspondence, technical material, etc. in one's professional field. Material may include hypothesis, argumentation, and supported opinions. Misreadings are rare. Able to read between the lines and derive the author's implicit intent, but may not detect or understand subtleties and nuances. May experience some difficulties with unusually complex structures and low-frequency idioms.
2+	Limited Working Proficiency, Plus	Able to understand most general factual prose as well as some discussions on concrete topics related to special professional interests. Has a good active reading vocabulary and is able to use the context to make sensible guesses about unfamiliar vocabulary and material. Can get the gist of the information and some secondary ideas. Weaknesses include slowness, uncertainty, inability to discern nuances.
2	>Limited Working Proficiency	Able to read simple and straightforward factual texts written for the general reader that are presented in a predictable sequence and contain high frequency sentence patterns. Persons who have professional knowledge of a subject may be able to scan and summarize texts that are well beyond their general proficiency level. In general, however, the person does not have a broad active vocabulary and is quite slow in reading.
1+	Elementary Proficiency, Plus	Able to read and understand simple texts for informative social purposes, such as biographical information or narration of events, straightforward newspaper headlines. Can guess at unfamiliar vocabulary if highly contextualized. Can locate main ideas and routine information of professional significance in more complex texts and in the professional specialty.
1	Elementary Proficiency	Able to read very simple descriptions of places, things and public events such as those simplified for tourists. Can get some main ideas and locate prominent items of professional significance in more complex texts.
0+	Memorized Proficiency	Unable to read connected prose, but can recognize high frequency elements of a syllabary or a character system. Able to read (but not always interpret accurately) some or all of the following: numbers, isolated words and phrases, street signs, office and shop designations.
0	No Proficiency	No practical ability to read the language.

Reading Proficiency Rating Scale

Writing Proficiency Rating Scale

Level	Proficiency	Definition					
5	Educated Native Proficiency	Writing proficiency is functionally equivalent to that of a highly articulate educated native. There are no non-native errors of structure, spelling, syntax or vocabulary. Writing is both clear, explicit, informative, and imaginative.					
4+	AdvancedAble to write the language precisely and accurately in a wide variety of prose styles pertinent to a variety and professional needs. Varied use of stylistic devices and flexibility within a style. Can both write and evProfessional Proficiency, PlusProficiency, PlusAdvanced Proficiency, PlusProfessional needs. Varied use of stylistic devices and flexibility within a style. Can both write and evProficiency, PlusProficiency, PlusAdvanced 						
4	Advanced Professional Proficiency	Able to write the language precisely and accurately in a variety of prose pertinent to social issues and professional needs. Errors of grammar, syntax, punctuation and vocabulary are rare. Writing is consistently and explicitly organized with appropriate connectors and discourse devices (ellipsis, parallelisms, subordinates).					
3+	General Professional Proficiency, PlusAble to write in a variety of prose styles pertinent to general, social and professional needs. Good control of complex structures, all verb tenses and tense sequence, morphology, syntax and punctuation. Usually uses devices well, but variety is limited. May not be able to express nuances or subtleties very well, nor tailor lan audience.						
3	General Professional Proficiency	Able to use the language effectively in most formal and informal written exchanges on practical, social, and professional topics. Can write reports, summaries, short papers on current events and particular areas of interest, or on special fields with reasonable ease. Control of structure, general vocabulary and spelling is adequate to convey message accurately but style may be obviously foreign. Punctuation is generally controlled. Good control of grammar with occasional errors in complex structures and tense sequence. Consistent control of compound sentences. Relationship of ideas is consistently clear.					
2+	Limited Working Proficiency, Plus	Shows ability to write with some precision and in some detail about most common topics. Can write about concrete topics relating to particular interests and special fields of competence. Often shows surprising fluency and ease of expression, but under time constraints and pressure language may be inaccurate. Can control basic and some complex structures, with some errors in more complex constructions (passives, relative clauses, word order, tense usage and sequence). Generally strong in either grammar or vocabulary, but not in both. Normally controls general vocabulary and some working vocabulary with some misuse. Can handle most social correspondence and take fairly accurate notes on what has been presented orally.					
2	Limited Working Proficiency	Able to write routine social correspondence and prepare documentary materials required for most limited work requirements. Can write simply about a limited number of current events or daily situations. Good control of morphology and basic syntactic structures. Uses a limited number of cohesive devices. However, still makes common errors in spelling, punctuation, and constructions (plurals, articles, gender, prepositions, verb tenses, negatives).					
1+	Elementary Proficiency, Plus	Able to meet most survival needs and limited social demands. Can write short paragraphs related to most survival needs (food, lodging, transportation, immediate surroundings and situations) and limited social demands (greetings, relating personal history, daily life preferences, etc.). Can express fairly accurate present and future time and some past verb forms, but not always accurately. Can control elementary vocabulary and basic syntactic patterns only. Generally cannot use basic cohesive elements of discourse (relative constructions, object pronouns, connectors).					
1	Elementary Proficiency	Able to meet limited practical needs. Writes in simple sentences with errors in spelling, grammar, and punctuation. Writing tends to be a loose collection of sentences or sentence fragments without much organization. At this level, can write simple phone messages, excuses, notes to service people and friends.					
0+	Memorized Proficiency	Writes using memorized material and set expressions. Can produce 50 of the most common characters, write dates, own name, nationality, address, and a few short sentences. Spelling and characters may be incorrect.					
0	No Proficiency	No functional writing ability.					

Annex 4: DFATD Logic Models

A4.1 Logic model for core activities

Annex 4: DFATD Logic Models A4.1 Logic model for core activities									
Title	Saving and improving the increasing micronutrient		ewborns & children by	Budget \$150,00	0,000 Durat	ion 2014- 2015 to 2018- 2019			
ULTIMATE OUTCOME	1000: Increased survival	and health of wom	nen of child bearing age,	newborns and children	under five				
↑						^			
INTERMEDIATE OUTCOMES	1100 Increased implementation of commitments by policy makers to making micronutrient programs effective at scale		1200: Improved quantity, quality and timeliness of the provision of Micronutrient (MN) products and services by public, private and civil society actors		1300: Improved consumption intake of essential Micronut (MN) by women of child bear and children under five				
↑	^	↑	^	^	^	^			
IMMEDIATE OUTCOMES	1110: Increased acceptance by policy makers & policy influencers of recommendations to improve key MN policy instruments and increase resources for MN programs	1120: Improved capacity for planning, tracking and directing of MN programs by policy makers & key policy influencers	1210: Improved awareness by health service intermediaries of the value of prioritizing and integrating the provision of MN to targeted beneficiaries in relevant areas of the health system	1220: Improved capacity of health service intermediaries for timely provision of adequate amounts of quality MN products and services	1310: Improved knowledge by end users of the benefits of MN products, and of how to access them	1320: Improv knowledge by women of child bearing age, pregnant wom and caregivers how to administer / u MN products correctly			

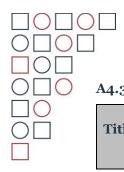
	1111: Increased availability of essential evidence of gaps in MN programming; essential policy relevant demonstration projects or studies completed	1121: Improved plans, tools or systems for steering of program scale up developed for and/or presented to policy makers and influencers	1211: Operations or other research completed and results presented to key intermediaries	1221: Plans, tools and systems for improved provision of products / services developed and presented to key intermediaries	1311 : Evidence- informed behaviour change intervention strategies completed to improve knowledge, attitudes and willingness to pay / uptake	1321: Evidence informed behaviour change intervention strategies completed to improve the use of MN products and the care provided at home
OUTPUTS	1112: Recommendations for changes in policy instruments received by policy makers	1122: Training or briefing completed by policy makers on how to use plans, tools or systems	1212: Recommendations for changes in practice received by key intermediaries	 1222: Curricula and training designed and/or delivered by MI for key intermediaries on provision or quality assurance of micronutrient products and associated services 1223: Supplies of micronutrient supplements, equipment or other inputs received by key intermediaries 	1312 : Evidence- based key messages delivered and received by target audience	1322 : Guidance on correct MN product use and good practice / care received by end users

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A4.2 Essential Indicators for core activities

EXPECTED RESULTS	INDICATORS (2)					
ULTIMATE OUTCOME						
	# of deaths averted of children under five years (VAS and Zinc + LO-ORS) 5					
MATE OUTCOME	# of mental impairments averted in newborns 6					
newborns and children under five 4	# and % of pregnant women with (altitude adjusted) Hb below 110 g/L					
1100: Enabling environment: Increased implementation of commitments	# of areas and/or countries with in-country MI prograr 27 pport that have improved their monitoring policy, strategy, plans or guidelines for MN programs (VAS; USI; IFA; and Zinc / LO-ORS). (Denominator = all areas / countries supported by MI with this objective in mind) 10					
by policy makers to making micronutrient programs effective at scale 🧐	# of areas and/or countries with in-country MI program support that have increased expenditures from nationally controlled budgets for MN supplies & programs (VAS; IFA Zinc/ LO-ORS and USI) (Denominator = all areas / countries supported by MI with this objective in mind)					
1200: Provision: Improved quantity, quality and timeliness of the provision of MN products and services by public, private and civil society actors	Availability of iodized salt: # of MT of edible salt which are adequately iodized at production level per year by MI supported processors 13					
1300: Consumption:Improved consumption/intake of essential micronutrients by women of child bearing age and children under five	# and % of target groups who received the recommended course ¹ of MN supplements in the past year (data to be sex disaggregated where possible) (Denominator = # of target groups living in areas / countries supported by MI with this objective in mind)					
	# of target groups who consumed the recommended daily amount of iodine (via iodized sail) 16					
IMMEDIATE OUTCOMES 1						
1320: Improved knowledge by women of child bearing age, pregnant	Care seeking (how): In areas targeted by MI, % of caregivers who know how to use zinc and ORS in treating childhood diarrhoea according to the national standard 19					
women and caregivers of how to administer / use MN products correctly 18	Skills and Capacity (beneficiaries): % of all pregnant women consulted in a KAP survey who can explain how to overcome at least one typical barrier to IFA consumption 20					
OUTPUTS 21						
1222: Curricula and training designed and/or delivered by MI for key intermediaries on provision or quality assurance of micronutrient products and associated services (22)	# of front-line health workers, supervisors and managers who completed training in the past year 23					
1312: Evidence-based key messages delivered and received by target	# and % of people from target audiences reached with key messages 25					

audience
¹ Recommended courses of supplements: for children aged 6-59m, two annual doses of an age-appropriate vitamin A supplement (VAS); for pregnant women, at least 90 tablets containing Iron and Folic
Acid (IFA) as a benchmark; for children aged 1-59m presenting with diarrhoea, at least 1 x 20mg zinc supplement for 10 days and Low Osmolarity-Oral Rehydration Salts for at least 2 days
26

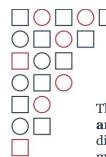


A4.3 Logic model for expanded activities

TitleRight Start and N-LIFT (Better nutrition for better lives for women, newborns, children and girls)I		Budget	\$100,000,000	Duration	2015-2016 to 2019-2020		
ULTIMATE OUTCOME	1000: Improved surviv	al and/or health of v	women, newborns, children and girls (target groups)				
↑	^		•	↑		^	
INTERMEDIATE OUTCOMES	1100 Increased commitment by global and country level policy and decision makers to scaling up and extending the delivery of packages of interventions to target groups		1200: Improved quantity, quality and timeliness of the provision of packages of interventions to target groups		1300: Improved demand for, uptake and use of packages of interventions and/or healthy care behaviours by target groups		
↑	^	^	^	↑	↑	↑	
IMMEDIATE OUTCOMES	1110: Increased acceptance by global and country policy and decision leaders of recommendations to increase the resources they make available for the delivery to target groups of packages of interventions	1120: Improved capacity among policy and decision leaders for planning, tracking and steering the scale up of the delivery to target groups of packages of interventions	1210: Improved awareness by key intermediaries of the value of integrating and prioritizing the provision to target groups of packages of interventions	1220: Improved capacity of key intermediaries for timely provision and tracking of the delivery to target groups of adequate packages of interventions	1310: Improved awareness and knowledge of target groups and their social influencers of the benefits of, and how to access packages of interventions	1320: Improved knowledge on the part of target groups and their social influencers re appropriate care practices and the correct use / intake of MN products within packages of interventions	

1	^	^	^	^	^	^
OUTPUTS	1111: Policy relevant implementation	1121: Recommendations	1211: Practice- relevant	1221: Plans, tools, protocols	1311: Evidence-	1321: Evidence informed behaviour

research, surveillance, program evaluation or other studies completed 1112: Recommendations provided to key policy and decision leaders for changes to resourcing levels, policies, standards, and/or other policy instruments, and evidence re costs, feasibility, benefits of and opportunities for; delivery of integrated packages of interventions 1113 Joint design with global partners of co- financed initiatives on the inclusion of MN products &/or services within delivery platforms for packages of interventions completed	for changes to plans, tools or systems presented to policy and decision leaders for planning, tracking and steering the scale up of the delivery of packages of interventions 1122: Training or briefing provided to policy makers on how to use plans, tools or systems for planning, tracking , steering and oversight of the scale up of the delivery of packages of interventions to target groups	implementation research, surveillance, program evaluation (including baseline assessments, Knowledge, Attitude, and Practices (KAP) studies of intermediaries, and other gap analyses and needs assessments) and/or other research completed 1212: Recommendations and evidence provided to key intermediaries about why and how to prioritize and/or integrate the provision of MN interventions to target groups within their routine work	and guidelines re delivery of packages of interventions developed and presented to key intermediaries 1222: Curricula and training designed and/or delivered for key intermediaries involved in the delivery of packages of interventions that include MN products &/or services 1223: Supplies of MN supplements, premixes, equipment or other inputs procured for/ supplied to key intermediaries where appropriate	informed behaviour change intervention strategies completed to improve knowledge of products, net benefits, costs if any, and where and how to obtain them, attitudes and willingness to pay / uptake on the part of target groups and their social influencers 1312: Messaging, guidance and motivational information provided to target groups and their social influencers in line with strategy	change intervention strategies completed re appropriate care practices and the correct use / intake of products at home by target groups and their social influencers 1322: Messaging, guidance and motivational information provided to target groups and their social influencers in line with strategy
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The relevant **key intermediaries** are identified in each country and may include but are not limited to: **(A) Vitamin A, Iron and Folic Acid and Zinc Supplementation:** Frontline community health volunteers; frontline health workers; supervisors; trainers; trainers of trainers; district and state managers; procurement officials, warehouse managers etc **(B) Salt iodization** / food fortification: operations / processing managers; quality control staff; their supervisors; food inspection agency staff, chemists; food technologists and their managers

"**Target groups**" here include but may not be limited to: adolescents girls; women of reproductive age; pregnant women and their newborns; infants and young children (and their caregivers); their social influencers are defined as including household/family and community members who influence target groups' behaviours and practices

"**Packages of interventions**" in the Right Start component are defined as two or more interventions, including at least MN product &/or service &/or promotion of healthy care behaviours, delivered through public, private sector and/or community based delivery platforms to relevant target groups (defined above). For N-LIFT these include platforms that did not previously include delivery of MN interventions at scale. Illustrative examples are provided at the end of this PMF.

Key intermediaries are identified in each country and may include but are not limited to: **(A) health systems, social protection programs, education and other social sector programs**: frontline community volunteers and workers; supervisors; trainers; trainers; district and state managers; procurement officials, warehouse managers **(B) food systems:** operations / processing managers; quality control staff; their supervisors; food inspection agency staff, chemists; food technologists and their managers.

A4.4 Essential Indicators for expanded activities

*These essential indicators are those agreed upon by DFATD and NI.

Expected results	Glob al Indicato is
	mate Ou toomes
1000: Improved survival and/or health of women, newborns, children and girls (largetgroups)	1000-1: # of deaths in targeted groups 1 1000-2: # of sturting cases in targeted groups 2 1000-3: # of gregnancies grobeted from neural tube detects 3 1000-4: # of low birth weight in newborns 4 1000-5: # of cases of anenia in addes centigins and pregnet and ron-pregnant women (based on WHO definitions of anenia)
Intern	rediate Outcomes
1100: Increased commitment by global and country level policy and decision makers to scaling up and extending the delivery of packages of interventions to target groups	1100-1:#/ bibl of targeted geographies that have improved one or more key policy instruments (policies, plans, guidelines etc) for packages of interventions that include IVN goods and services. 1100-2 National expenditures in USD on supplies and delivery costs of relevant packages of interventions in the pasty ear.
1200: Improved quantity, quality and imminiss of the provision of packages of interventions to target groups	1200-1 A) Percentage of facilities that experienced a stock out at any point in the period under study. (8) 1200-18) Does the NN product available at facilities adhere to local standards?
	1200-2: # of NT of staple bods and/or condiments which are appropriately for fied at production level per year by MI supported food processors 10
1300: Improved demand for, uptake and use of pockages of interventions and/or healthy care behaviours by target groups	1300-1: # /bbi of brget groups who (a) received packages of interventions in the pastylear (data to be sex disaggregated where possible) that contained the recommended course of NINs and the promotion of healthy care behaviours (b) received a package of interventions for care at bit in including the promotion of healthy care behaviours (Denominator = # of brget groups living in geographies brgeted with this objective in mind) [1]
	1300-2:% / Tobl of briget groups who consumed the recommended daily amount of NNs via for tied bods
	Outputs
1111: P dicy relevant implementation research, surveillance, program evaluation or other studies completed	1111-2: # of surveys / studies / demonstration projects et: completed by MI 12
1122: Training or briefing provided to policy makers on how to use plans, tools or systems for planning, tracking, steering and oversight of the scale up of the delivery of packages of interventions to target groups	1122-2: # of briefings It kinings / workshops conducted for policy makers in the pastycer (total and per country) 13
1221: Plana, bola, probools and guidelines re delivery of packages of interventions developed and presented to key intermediaries	1221-1: # /bbil of (a) front-line workers, supervisors and/or managers (b) food processors, buyers and quality controllers who have received relevant bols 1221-2: # of plans, bols, and systems designed by Milfor (a) font-line workers, supervisors and/or managers or (b) bod grocessars, buyers and/or quality controllers
1222: Curricula and haining designed and/or delivered for key intermediaries involved in the delivery of packages of interventions that include NN products &/or services	1222-1.# of private sector processors who completed training in the pastveer 100 1222-2:# of forthine workers, supervisors and managers who completed training in the pastveer 100
1321: Evidence informed behaviour change intervention strategies completed re appropriate care practices and the correct use / inteke of products at home by target groups and their social influencers	1321-1: # /bbl of behaviour change intervention strategies that Millhas developed or amended 18

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A4.5 Logic model for Institutional Support Grant 2019

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DIATE MES	

MPACT	adolescent girls					
т			COV	T TERAGE		
	INFLUENCE	Enabling Environment	Provision	Consumptio	on and Practice	LEVERAGE
INTERMEDIATE OUTCOMES	Enhanced use of gender-sensitive evidence by global, regional and national actors for policy development and decision making relevant to health and nutrition.	Improved gender sensitive and/or responsive nutrition and health policies and programs at national and sub-national levels.	Improved quantity and quality provision of gender-sensitive or responsive health and/or nutrition interventions particularly for vulnerable people including women, newborns, children and adolescent girls.	Improved adherence to the recommended practice of health and/or nutrition interventions particularly by vulnerable people including adolescent girls and women and caregivers of newborns and children.	Increased equitable participation of women in decision-making on issues related to their health and nutrition.	Increased integration of and resources for nutrition into non- nutrition platforms and enhanced technological and financial innovation for gender-sensitive nutrition programming.
^	<u>↑</u>	↑	^	^		↑
IMMEDIATE OUTCOMES	Increased demand for technical assistance for gender-sensitive nutrition programming for global, regional and national policy-makers.	Improved capacity and political will to plan, track, scale and direct quality gender-sensitive or responsive health and/or nutrition interventions among national and sub- national policy-makers.	Improved capacity to provide and track quality gender-sensitive or responsive health and/or nutrition interventions among key intermediaries.	Improved knowledge and skills of appropriate care practices related to health and/or nutrition interventions to benefit vulnerable people, especially women, newborns, children and adolescent girls.	IncreasedIncreasedawarenesscapacity ofamongcommunitywomenmembers toon theirpromote andrights toprotectaccesswomen's righthealthto health andandnutritionnutritionservices.services.	Improved capacity among partners for planning, tracking and steering integration of gender- sensitive nutrition interventions.
↑	↑	^	↑	↑	1	^

Technical leadership and representation in global fora Advocacy leadership and representation in global fora, events and campaigns Research undertaken Policy briefs, peer reviewed publications and other knowledge products created Technical assistance provided to global, regional and national actors	Evidence and sex and gender-based analysis- informed advocacy plans developed Policy-relevant evidence produced Advocacy conducted for proposed changes identified on resourcing, legislation, policies, standards, guidelines, tools, plans, systems and demonstration projects with national and sub- national policy-makers Training conducted for policy makers on how to use plans, tools or systems for planning and tracking the interventions	Evidence generated to inform improvements in the supply and/or delivery of gender- sensitive health and/or nutrition interventions Advocacy conducted for proposed changes to delivery and monitoring of health and/or nutrition interventions with key intermediaries Gender-sensitive plans, tools, protocols, systems, guidelines and curricula for the delivery of interventions developed and shared with key intermediaries Training and/or supportive supervision conducted for key intermediaries Inputs procured / supplied to key intermediaries	 Sex- and gender-based analysis conducted (including sex/age disaggregation as applicable) and gender action plans developed Evidence-informed gender-responsive behaviour change intervention strategies on health and/or nutrition interventions completed Gender-sensitive and responsive messaging, tools and training provided to target audiences as determined by the BCI strategy Women's civil society organizations supported in gender equality and nutrition 	Program design workshops and ongoing technical assistance provided to new non-nutrition partners Resources provided for the development of innovative financing models and nutrition technologies
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OUTPUTS

Annex B - Pricing Template Cost Centers Unit of measures

	Cost Centers	Unit of measure	Quantity	Per Unit Cost (currency)	Total (currency)
Α	Fees				
A1	Lead consultant				
A2	Evaluations team members				
A3					
A4					
	Total				
В	Expenses				
B1					
B2					
B3					
	Total				
С	Cost of evaluation Implementation				
C1					-
C2					
D					
Ε					
	Total				
F	Total costs (A+B+C+D+E)				
G	Overhead (%)*				
Н	Applicable tax, if any				
Ι	Grand Total (F+G+H)				

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Annex C - Letter of Offer

To: NUTRITION INTERNATIONAL

180 Elgin Street, Suite 1000, Ottawa,

Ontario, K2P 2K3, Canada

Letter of Offer - {INSERT TITLE} - {INSERT RFP NUMBER} Re:

We are submitting a Proposal in response to the referenced RFP, and hereby offer to provide the goods and/or services as indicated in the RFP in consideration of payment by Nutrition International.

The Proponent acknowledges that responses to the RFP must be stand-alone documents, complete and integral in their own right, containing everything necessary to allow Nutrition International to evaluate them fully, subject to any need NI may have for clarification in respect of any given response. Previously submitted information cannot be considered.

We have carefully examined the RFP documents and have a clear understanding of the requirements of the RFP and the RFP Process. By submitting the Proposal, we acknowledge that we have read and understood and will comply with all sections of the RFP and have submitted all substantiating information as requested. Failure to submit requested substantiating information or if the substantiating information does not meet the Mandatory Requirements will result in disqualification of the Proposal.

We, or any of our sub-contractors, or any of our employees or any of our sub-contractor's employees do not and will not have any conflict of interest (actual or potential) in submitting this Proposal or, if selected, with our contractual obligations as the vendor under contract.

We are not aware of any potential conflict of interest where an employee or family member of an employee of Nutrition International has an interest in our organization (the Proponent), or in any of our sub-contractors or any Proponent that may be included in the RFP submission.

If we are in a Conflict of Interest (Actual or Potential) we have completed the Declaration of (Actual or Potential) Conflict of Interest document located in this Annex C.

We have no knowledge of or ability to avail ourselves of Confidential Information of Nutrition International other than the Confidential Information, which may have been disclosed by Nutrition International to the Proponents in the normal course of this RFP.

We are not involved in collusion or arrangement with any other Proponents in connection with this RFP. We have no knowledge of and have made no comparison of the information in our Proposal with the information contained in any other Proposal.

We certify that the submitted financial information is true and correct.

We understand that our submitted Proposal may be accepted by Nutrition International in whole or in part, within the Validity Period, and is irrevocable during that period.

In the event Nutrition International selects our Proposal, in whole or in part, we agree to finalize and execute the Agreement in accordance with procedures stated in the RFP. We understand that the Proposal must be a standalone document complete in its own right containing everything necessary to allow Nutrition International to evaluate us fully.

We hereby consent to Nutrition International performing checks with the references listed in the Proposal.

We acknowledge and understand that Nutrition International may disqualify the Proposal of any Proponent where the Proponent fails to provide information or makes misrepresentations regarding any of the information included in the Letter of Offer. Further, we acknowledge and understand that Nutrition International will have the right to rescind any contract resulting from this RFP with the Selected Proponent in the event that Nutrition International, in its sole discretion, determines that the Selected Proponent has failed to provide information or made misrepresentations regarding any of the information in the Letter of Offer or the Proponent, in addition to or in lieu of any other remedies that Nutrition International has in law or in equity.

SIGNED

Company Name

Print Name and Title

Signature of Proponent

Date

I have authority to bind the Proponent



Attachment to Letter of Offer

Declaration of (Actual or Potential) Conflict of Interest:

Annex D – Draft Contract Template

THIS AGREEMENT made effective as of the date referred to below (the "Effective Date")

BETWEEN:

 $\begin{array}{c} 0 \square 0 \square \\ \square 0 \square \\ 0 \square 0 \\ 0 \square 0 \end{array}$

NUTRITION INTERNATIONAL (formerly known as The Micronutrient Initiative), a corporation under the laws of Canada, having its head office at 180 Elgin Street, Suite 1000, Ottawa, Ontario, K2P 2K3, Canada

(herein called "NI")

- and -

XXXX having its head office at XXX

Singly or jointly hereinafter called "the Party" or "the Parties".

WHEREAS NI has requested the Firm to provide certain consulting services related to XXXXXX as more particularly described in this Agreement;

THEREFORE in consideration of the terms and conditions set forth in this Agreement, the Parties agree as follows:

SECTION 1 - INTERPRETATION

1.1 <u>Definitions</u>

The words in this Agreement that are capitalized have the following meanings:

- a) "Agreement" means this agreement including all attachments referred to herein;
- b) "Completion Date" means the last day of the Term described in Section 2.2;
- c) "Effective Date" means the date on which the Firm signs this Agreement;
- d) "Services" means the services and deliverables described in Attachment A;
- e) "Personnel" means persons hired or engaged by the Firm and assigned to the performance of the Service or any part thereof, the names/designations of whom are set out in Attachment B.1.
- f) "Intellectual Property" includes, without limitation, any right, or associated right to all copyrights, trade-marks, services marks, database rights, design rights, trade secrets, and patents.
- g) "Force Majeure" includes without limitation decrees of Government, acts of God, strikes or other concerted acts of workers, inability to procure materials or labour, fires, floods, explosions, riots, war, rebellion, sabotage and atomic or nuclear incidents.

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<u>Attachments</u>

The following Attachments referred to in, and appended to this Agreement form a part of this Agreement.

Attachment A – Description of Services

Attachment B – Personnel and Expenses

Attachment C – Schedule of Deliverables and Payments

Attachment D – Banking Information Form

Attachment E – Travel Policy

1.3 Working Currency of the Agreement and Canadian Dollar Liability

The working currency of the Agreement is (XX). Notwithstanding the working currency of the Agreement, NI limits its Canadian dollar liability with respect to this Agreement to CAD \$XX.

SECTION 2 – Services

2.1 <u>Services to Perform</u>

The Firm agrees to perform the services and provide the deliverables set out in Attachment A. Any change in the Services shall be mutually agreed in writing.

2.2 <u>Term</u>

The Services shall start on XX and continue until XX unless terminated earlier by either Party in accordance with this Agreement. The term of this Contract may be extended by mutual written agreement.

2.3 <u>Personnel</u>

The Firm will assign performance of all work under this Agreement to the Personnel described in Appendix B.1. Written authorization of NI must be obtained in advance for any substitution of Personnel. The Firm will take any steps necessary to ensure such Personnel are bound by the provisions of this Agreement.

SECTION 3 – Financial Arrangements

3.1 <u>Fees</u>

NI shall pay the Firm the daily rates of the Personnel as set out on Attachment B.1, on the basis of time actually spent by such Personnel in the performance of the Services after the Effective Date. No fees will be paid while en route to or from the place of assignment. The maximum amount payable for fees under this Agreement is XXX, i.e., the "Total Payment". NI has no responsibility to pay the Firm for work performed by the Firm that would result in any payment in excess of the Total Payment.

3.2 **Expenses**

While performing the Services, the Firm shall be entitled to be reimbursed for the expenses listed in Attachment B.2 up to the maximum amounts described therein.

Tax 3.3

It is the Firm's responsibility to comply with the applicable tax laws in its country of domicile. NI is in no way responsible for any tax related issues.

Advance 3.4

Upon the Firm's request and following the signature of this Agreement, NI will provide the Firm with an advance of XXX to cover a portion of the expenses detailed in Attachment B. The Firm will account for this advance on its first invoice (and if the advance exceeds the amount of the first invoice, any subsequent invoices) and will show all amounts that have been spent using the advance as required by the NI under Section 3.5 (invoicing). Subsequent advances may also be provided once the amount of the preceding advance has been fully adjusted.

3.5 <u>Invoicing</u> The Firm shall submit invoices to NI in accordance with the Schedule of Deliverables and Payments in Attachment C. Each invoice shall:

- (a) show the NI Contract number as shown in the subject header of this agreement;
- (b) show the amount of any advance by NI;
- (c) show the number of days worked, on each task or project (if applicable), as well as the total number of days worked during the period covered by the invoice, and the corresponding fees;
- (d) and list all recoverable expenses for which the Firm is claiming reimbursement in accordance with Attachment B (attaching all original and/or copies of receipts where applicable).

Payment of Invoices 3.6

NI agrees to pay the Firm within 30 days after receipt in NI's office of the Firm's invoice provided that:

- (a) the invoice includes all required information as described above; and
- (b) NI is completely satisfied with the deliverables to which the invoice relates.

NI shall set off any amount owed by the Firm to NI against any amount owing to the Firm under this Contract. If any advance has been paid by NI, it will be deducted by NI from the total amount due to the Firm under the Contract. If, for any reason, the amount of any payment is found to exceed the total amount due to the Firm under this Agreement, the Firm shall refund the amount of the overpayment to NI no later than 30 days following the expiration or earlier termination of the Agreement.

It is understood that NI is not responsible for differences related to exchange rate fluctuations or bank charges. NI's liability is limited to the amounts quoted in the contract currency. (Section 3.1/Attachment B.1).

Banking Information

3.7 <u>Banking Information</u> The Firm will complete the bank information form in Attachment D and return it with the Firm's signed copy of this Agreement. This will facilitate electronic payment to the Firm's account.

3.8 Inspection And Audit of Books And Records

3.8.1 The Firm shall keep accurate and systematic accounts, files and records ("the Records"). The Firm shall keep the Records throughout the duration of this agreement and for seven years following its termination.

3.8.2 NI may, at its cost, inspect and audit the Firm's work in furtherance of the assignment and other matters relating to the Firm's obligations under this Agreement for the purpose of determining compliance with the terms of this Agreement. The Firm will make available for inspection by NI's auditor, those of its documents and records which contain information regarding the Firm's performance of its obligations under this Agreement. NI shall provide reasonable notice of an audit to the Firm and conduct the audit during regular business hours.

SECTION 4 - REPRESENTATIVES AND NOTICES

Any notice or request required under the Agreement shall be deemed to be given when it has been delivered by hand, registered mail, email or facsimile to the attention of the designated representatives of the Parties identified below. The Parties shall notify one another of any change in their representatives.

For NI:

For the Firm:

SECTION 5 - REPRESENTATIONS AND WARRANTIES

The Firm represents and warrants that it:

- (a) has the status, capacity and authority to enter into this Agreement and that is it unaware of any facts which would prevent it from performing its obligations under this Agreement;
- will perform all services under this Agreement in a competent manner that (b) meets or exceeds the standards for such work as are generally accepted in the industry.

SECTION 6 - CONFIDENTIAL INFORMATION

6.1 <u>Confidential Information</u>

The Firm will keep confidential any and all information, trade secrets, data or material belonging to NI and which the Firm acquires from NI as a result of this Agreement and will not disclose the same to others without the prior written approval of NI. The Firm will not use any information or data acquired from NI as a result of this Agreement for any other purpose than to carry out the Agreement.

6.2 <u>Maintenance of Confidential Information</u>

The Firm's employees, permitted sub-contractors, successors and assignees will not, without authority, use or disclose, or assist the use or disclosure of any such confidential information belonging to NI. The Firm will at all times use all reasonable precautions (and in any event, efforts that are no less than those used to protect its own confidential information) to protect confidential information from disclosure, unauthorized use, dissemination or publication. The Firm shall, on request, promptly return to NI any information or material provided by NI and in the Firm's possession.

6.3 Limitation

The obligations of confidentiality assumed by the Firm here do not apply to any information: (i) that was known by the Firm before disclosure to the Firm by NI as evidenced by prior written records; (ii) which becomes part of the public domain through no fault of the Firm; (iii) which was obtained by the Firm from a third Party under no obligation to NI not to disclose the information, (iv) which is developed by the Firm independently of disclosures made hereunder as shown by written documentation, or (v) which is required to be disclosed by law, court order or audit standards. This confidentiality provisions in this section shall survive the termination of this Agreement for a period of 5 years.

6.4 <u>Accuracy of Information</u>

The Firm is responsible to NI for the accuracy and completeness of any statements made by it in any documents, articles, reports or other material prepared by it for delivery to NI or to a third party at NI's request. NI or any third party authorized by NI to receive this information is relying on the accuracy of the information provided by the Firm and shall not be required to make any independent verification of this information.

Notwithstanding the foregoing, NI shall notify the Firm in writing of any errors, omissions or clarification required in any report, and the Firm shall remedy such errors or omissions or provide such clarification with 10 days of receiving such notification from NI. NI may withhold any further payments until it is satisfied with the content of the report submitted by the Firm.

6.5 <u>Intellectual Property</u>

Design documents, specifications, reports and all relevant data such as maps, diagrams, plans, statistics and supporting records and materials compiled or prepared in the course of the Services shall remain the property of NI. The Firm may retain a copy thereof, provided that such copy shall not be used for purposes unrelated to the Agreement without the approval of NI.

One copy of any training materials, manuals, curricula and other materials compiled or prepared for training purposes under this Agreement shall always be sent to NI. NI shall be entitled to use such material for any purpose related to its operations. In cases where the copyright of material rests elsewhere the Firm shall be responsible for securing the approval of the holder of the copyright for use of this material.

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SECTION 7- TERMINATION

7.1 <u>Termination at End of Term</u>

In the event that the parties do not extend the term as provided for in Section 2.2, this Agreement shall terminate and be of no further force or effect at the end of the term.

7.2 <u>Termination for Cause</u>

If the Firm fails to perform or fulfill any material obligation or condition required under this Agreement (including, without limitation, the failure to submit a deliverable by the date specified in Attachment C) and if the Firm fails to remedy the default or to provide a plan satisfactory to NI to remedy the default within five (5) days after written notice thereof from NI specifying the nature of the default, NI shall have the right at the end of the said five (5) day period to terminate this Agreement immediately. In the event of any such termination, NI is not liable to the Firm for any undelivered work and may request the repayment of any advance payments related to that work.

7.3 <u>Termination without Cause</u>

Either NI or the Firm may terminate this Agreement at any time by giving 30 days written notice. Upon termination of the Agreement, the Firm shall take immediate steps to conclude the Services in a prompt and orderly manner, and to reduce losses and keep further costs to a minimum. Upon termination of the Agreement, the Firm shall be entitled to payment for fees and reimbursable expenses that have been incurred prior to the date of the termination.

SECTION 8 - SAFEGUARDING, SOCIAL RESPONSIBILITY AND HUMAN RIGHTS

8.1 <u>Responsibilities of the Firm and the Firms' Downstream Partners</u>

Safeguarding, social responsibility and respect for human rights are central to NI's expectations of the Firm and the Firms' downstream partners supporting this agreement. It is the responsibility of the Firm to ensure that its downstream partners comply with Section 8 in its entirety. The Firm must ensure that robust procedures are adopted and maintained to eliminate the risk of poor human rights practices within their delivery chain environments. These practices include: sexual exploitation, abuse and harassment; all forms of child abuse; inequality or discrimination on the basis of race, gender, age, religion, sexuality, culture of disability.

The Firm and their downstream partners supporting any NI activities must place an emphasis on the control of these and further unethical and illegal employment practices, such as modern-day slavery, forced and child labour and other forms of exploitative and unethical treatment of workers and aid recipients.

8.2 <u>Child Protection</u>

The Firm fully acknowledges the duty of care to protect and promote the welfare of children and young people. The Firm will be committed to ensuring child protection practice reflects statutory, legal, legislative responsibilities, as well as current guidance and advice, and complies with the Recipient's child protection policy. Should the Firm not have a child protection policy, then <u>NI's Child Protection Policy</u> shall be the guiding document, taking into consideration best practices and any specific local requirements. The Firm will promptly notify NI of any changes to any specific statutory, legal, legislative child protection responsibilities or organizational child protection policy changes.

- 8.3 <u>Anti-Terrorism</u>
- a) The Firm hereby certifies that consistent with Local and International, including Canadian and United Nations Security Council resolutions, both NI and the Firm are fully committed to the international fight against terrorism and that the Firm does not advocate, support, assist or engage in, and has not advocated, supported, assisted or engaged in, any terrorist activity.
 - b) The Firm will seek to ensure that none of the funds or assets provided under this Agreement are made available or used to provide support to individuals, groups or entities associated with terrorism including those named on the following lists as updated from time to time.

Government of Canada – Office of the Superintendent of Financial Institutions: <u>http://www.osfi-bsif.gc.ca/Eng/fi-if/amlc-clrpc/atf-fat/Pages/default.aspx</u>

Government of Canada – Public Safety Canada: <u>https://www.publicsafety.gc.ca/cnt/ntnl-scrt/cntr-trrrsm/lstd-ntts/crrnt-lstd-ntts-en.aspx</u>

UnitedNations:https://www.un.org/sc/suborg/en/sanctions/un-sc-consolidated-list

c) The Firm shall immediately notify NI in writing if it becomes aware of any breach of section 8.3, or has reason to believe that it has or any of the Firms' Personnel, servants, agents or sub-contractors, or any person acting on their behalf have:

(i) been subject to an investigation or prosecution which relates to an alleged infringement of section 8.3;

ii) been listed by any government department or agency as being debarred, suspended, proposed for suspension or debarment, or otherwise ineligible for participation in programs or contracts.

- d) In the event of material breach of this section, NI will reserve the right to terminate this Agreement in accordance with section 7.2, suspend payment to the Firm or sanction the Firm and any of its related or affiliate parties or take any other corrective action as necessary, including reimbursement of funds utilized in contravention of this section of the Agreement.
- e) The Firm shall include a corresponding provision related to Anti-Terrorism in any sub-contract or sub-agreement that the Firm enters into for the purposes of this Agreement.

8.4 <u>Anti-Fraud and Corruption</u>

a) Nutrition International has zero tolerance for fraud and corruption and expects the Firm to share NI's values of integrity and transparency as a trusted partner. The Firm therefore commits to preventing and detecting corruption and bribery in accordance with Nutrition International's Anti-Fraud and Corruption Policy.

b) The Recipient, through its employees, agents, representatives or subcontractors, will not make or cause to be made, or receive or seek to receive, any offer, gift or payment, consideration or benefit of any kind, which would or could be construed as an illegal or corrupt practice, either directly or indirectly to any party, as an inducement or reward in relation to the execution of this agreement or any arrangement or provision of funds in relation to its operations.

Information with respect to any actual or suspicious corrupt or fraudulent practice in relation to this Agreement can be forwarded at <u>confidential@nutritionintl.org</u>

- c) In the event of actual or suspected fraud and corruption, the Firm will notify NI within five (5) business days of such occurrence and any remedial actions or steps taken.
- d) The Firm will fully co-operate with any investigation into events covered under this section, whether led by NI or their authorized agents in accordance with Section 3.8 Inspection and Audit of Books and Records.
- e) The Firm will use its best endeavors to ensure that any employee, agent, representative or other entity it is responsible for will comply with this section.
- f) Any actual or proven amounts of fraud and corruption will be considered an ineligible expenditure under this Agreement. The Firm is required to reimburse NI any amount misappropriated through Fraudulent and Corrupt Activities.
- g) In the event of an actual or suspected fraudulent or corrupt practices, NI will reserve the right to terminate this Agreement in accordance with clause 7.2, suspend payment to the Firm or sanction the Firm and any of its related or affiliate parties or take any other corrective action as necessary.
- h) The Firm shall include a corresponding provision related to Anti-Fraud and Corruption in any sub-contract or sub-agreement that the Firm enters into for the purposes of this Agreement.

8.5 <u>Gender Equality</u>

The Firm acknowledges that it has a Gender Equality Policy which aims to promote gender equality in all its operations to prevent gender discrimination. Should the Firm not have a Gender Equality Policy, then <u>NI's Gender Equality Policy</u> shall be the guiding document. The Firm will promptly notify NI of any changes to any specific statutory, legal, legislative responsibilities in relation to gender equality or organizational Gender Equality Policy changes.

8.6 <u>Whistleblower Protection</u>

The Firm will ensure that it has a Whistleblower Protection Policy in place that supports its employees, whereby acting in good faith and on the basis of reasonable belief, it employees becomes aware of actual, suspected or intended misconduct, unlawful activity, suspicious financial management, or other accountability concerns, are given the opportunity to report such misconduct or incidents without reprisal to their senior management. Should the Firm not have a Whistleblower Protection Policy, then <u>NI's Whistleblower Protection Policy</u> shall be the guiding document.

8.7 <u>Sexual Harassment</u>

The Firm acknowledges that it has a Sexual Harassment Policy which provides and maintains a work environment in which all employees are free from sexual harassment. Furthermore, the Firm is committed to creating a healthy and safe work environment that enables its employees to work free from unwelcome, offensive and discriminatory behaviour. Sexual harassment at the workplace is a form of discrimination. Protection against sexual harassment and right to work with dignity are universally recognized human rights by international conventions and instruments. The Firm will ensure that its rules and procedures for the prevention, prohibition and punishment of sexual harassment of women at the workplace are strictly enforced. Should the Firm not have a Sexual Harassment Policy, then <u>NI's Sexual Harassment Policy</u> shall be the guiding document.

8.8 <u>Sexual Exploitation</u>

The Firm acknowledges that it has a Sexual Exploitation Policy, and any such policy will ensure that any person working for, or representing, the Firm must respect the rights and dignity of the individuals and communities in which the Firm serves. In upholding these rights, the Firm will promote an environment free of sexual exploitation and sexual abuse. Sexual exploitation includes, but is not limited to:

- a) Any act or type of harassment that could cause physical, sexual or psychological harm or suffering to individuals, especially women and children.
- b) Any act or behaviour that exploits the vulnerability of beneficiaries or that allows them to be put in compromising situations.
- c) Engaging in sexual activity with persons under the age of 18.
- d) Engaging in sexual exploitation or abuse of beneficiaries under any circumstances.
- e) Any act or behaviour that seeks sexual acts or favours in exchange for access to participate in or to receive benefit from any Nutrition International program or activity.

The Firm will use its best endeavors to ensure that any employee, agent, representative or other entity it is responsible for will comply with this paragraph. The Firm will promptly notify NI of any suspected or detected exploitation or abuse and the actions taken by the Firm in response. Should the Firm not have a Sexual Exploitation Policy, then <u>NI's Sexual</u> <u>Exploitation Policy</u> shall be the guiding document.

SECTION 9 - BRAND VISIBILITY

At no additional cost to Nutrition International, the Firm agrees to take specific measures to ensure the visibility of Nutrition International in all communications activities related to the activity, project, program or social marketing campaign being funded. This will include, inter alia, the compulsory use of Nutrition International logo on all relevant print and electronic communications materials, as well as on product packaging for various commodities provided and paid by Nutrition International. It also includes the explicit and direct acknowledgement of Nutrition International funding at public facing activities.

The complete Brand Visibility Guidelines are available at:

https://www.nutritionintl.org/content/user_files/2018/12/Nutrition-International-Brand-Visibility-Guidelines-for-Grantees.pdf

SECTION 10 - LIMITATION OF LIABILITY

10.1 <u>Limitation</u>

NI shall have no liability with respect to any accident to any person causing personal injury or death or any loss or damage to any person or property arising out of the Firm's performance of the Services under this Agreement. The Firm is responsible for any third party liability that might arise due to the Firm's activities, acts, or omissions. The Firm's insurance should be sufficient to cover any third party claims resulting from work performed by the Firm in carrying out the Services.

10.2 <u>Indemnification</u>

The Firm shall indemnify NI against all actions, proceedings, claims, demands, loss, costs, damages and expenses whatsoever which may be bought against or suffered by NI or which it may sustain, pay or incur as a result of or in connection with the performance, purported performance or non-performance of this Agreement by the Firm but excluding any such actions, proceedings, claims, demands, loss, costs, damages and expenses to the extent that they are sustained, paid or incurred by reason of, or are otherwise attributable to, the negligence of NI, its servants, agents, or employees.

SECTION 11 – GENERAL TERMS

11.1 <u>Domestic Travel Policy</u>

The Firm will only travel as is necessary to carry out the Services. Prior written approval from NI representative for this Contract is required in order to carry out any travel contemplated under Attachment A. Furthermore, the Firm will abide by NI's air travel policy as described in Attachment E. Furthermore, the Firm will abide by NI's domestic air travel policy as described in Attachment E.

11.2 Information Systems and Electronic Communication Networks

During the course of this Agreement, the Firm may be provided with access to NI information systems and electronic communication networks. The Firm will abide by NI policies concerning use of its information systems and networks. NI will provide the Firm with any such policies at the start of this Agreement, or when policies are put into effect, and the Firm will take the necessary steps to ensure compliance with these policies.

11.3 <u>Independence of Parties</u>

There is no relationship of joint venture, partnership or agency between the Parties. Neither Party will have any right or authority to assume, create, or incur any liability or other legal obligation of any kind, express or implied, in the name of, or on behalf of, the other Party.

11.4 <u>Conflict of Interest</u>

The Firm shall not engage, directly or indirectly, in any other work, business or professional activities that may conflict with the performance of the Services. The Firm warrants that to the best of its knowledge at the date of signing this Agreement no conflict

of interest exists. If during the course of this Agreement, a conflict or risk of conflict of interest should arise, the Firm will notify NI immediately in writing.

11.5 <u>Assignment or Subcontracting</u>

The Firm may not, except with the prior approval of NI, assign or transfer the Agreement or any part of the Services nor may it engage any sub-consultant to perform any part of the Services. NI's approval of the assignment or transfer of any part of the Agreement, or of the engagement of any sub-consultant to perform any part of the Services, shall not relieve the Firm of any of its obligations under the Agreement.

11.6 Force Majeure

If the performance of this Agreement, in the reasonable opinion of either Party, is made impossible by force majeure, then either Party shall so notify the other in writing and NI shall either (a) terminate the Agreement, or (b) authorize the Firm to complete the Services with such adjustments as are required by the existence of the force majeure and are agreed upon by the Parties.

11.7 <u>Compliance with Laws, Applicable Law and Jurisdiction</u>

In carrying out the work under this Contract, the Parties shall be responsible for complying with all applicable laws and regulations of the locations/countries in which the work will be carried out and to which the Personnel may have to travel to as part of the Services. This Agreement shall be interpreted in accordance with, and governed by, the law of the Province of Ontario and the laws of Canada applicable thereto. Any claim under this Agreement shall be filed and tried within the jurisdiction of the courts of the Province of Ontario.

11.8 <u>Dispute Resolution</u>

If there is a dispute between NI and the Firm regarding any matter, prior to the initiation of any formal proceedings, the Parties shall first attempt to resolve any dispute or controversy informally, If the dispute cannot be resolved informally, the matter shall be referred for arbitration by a single arbitrator in Ontario pursuant to the *International Commercial Arbitration Act* (Ontario) whose decision shall be final.

11.9 <u>Transmission by Facsimile or Other Electronic Means</u>

Delivery of this agreement by facsimile or electronic transmission constitutes valid and effective delivery.

11.10 <u>Survival</u>

The following provisions survive the termination or expiry of this agreement and continue in full force and effect for an additional two (2) years: Section 3.8 - Inspection and Audit of Books and Records, Section 6 - Confidential Information, Section 10 – Limitation of Liability, Section 11.7 - Compliance with Laws, Applicable Law and Jurisdiction, and Section 11.8 - Dispute Resolution

11.11 <u>Entire Agreement and Amendments</u>

This Agreement constitutes the entire agreement between NI and the Firm with respect to the subject matter contained herein and supersedes all prior oral and written communications not specifically referred to herein. This Agreement may be amended or modified only by means of a written agreement executed by authorized signatories of the Parties.

11.12 Execution

This Agreement may be executed in counterparts and such counterparts together shall constitute a single instrument. Delivery of an executed counterpart of this Agreement by electronic means, including, without limitation, by facsimile transmission or by electronic delivery in portable document format (".pdf"), shall be equally effective as delivery of a manually executed counterpart thereof.

The undersigned agree to all the terms and conditions herein. Please sign the electronic copy of this Agreement.





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