

**Request for Proposal (RFP) - Baseline Study for the
Project: Baseline Behavioural Pattern Assessment Study in NCD patients at Alwar (Rajasthan)
and Palghar (Maharashtra)**

Lupin Human Welfare and Research Foundation (LHWRF) invites proposals from organisations to conduct a baseline study for a project in Alwar (Rajasthan) and Palghar (Maharashtra) titled "Baseline Behavioural Pattern Assessment Study in NCD patients".

Last date of submitting proposals: December 10, 2025, by 12.00 pm

About LHWRF

Lupin Human Welfare & Research Foundation (LHWRF) is the social responsibility arm of Lupin Limited, founded by Dr. Desh Bandhu Gupta in 1988. In its journey spanning over three decades, the foundation has impacted more than 2.02 million beneficiaries across 5400 villages in 26 districts, spread across eight states in India.

Throughout its journey, the foundation has primarily focused on creating sustainable livelihood opportunities and fostering economic growth in some of the most underdeveloped districts in India. It adopts a family-centered approach and initiates measures to help break the cycle of poverty, thus making a positive impact on the lives and livelihoods of the beneficiaries.

The Livelihoods Program has been a critical and instrumental element of our development efforts for the last decade. With a drive to create a profound impact, the livelihoods program focuses on establishing sustainable solutions for the disadvantaged and vulnerable communities. Capacity building, natural resource management, livestock development, strengthening grassroots value chains, and improving farmers' market access are vital components of our Livelihoods strategy.

The Lives Program focuses on enriching the quality of life within communities and ensuring better access to healthcare services. A strategic engagement aimed at strengthening health systems to address Chronic Obstructive Pulmonary Disease (COPD) and cardiovascular diseases (CVDs) stands as an irreplaceable building block of our Lives strategy.

About Lives Program

Accessing healthcare services in rural India remains a significant challenge, particularly for managing long-term illnesses such as Non-Communicable Diseases (NCDs). The high cost of treatment and prolonged medication use result in significant out-of-pocket expenditures (OOPE) and high reliance on private healthcare institutes, imposing a substantial financial burden on affected individuals and their families. The interventions of the Lives program focus on enhancing health systems to tackle the risk

factors and determinants associated with Chronic Obstructive Pulmonary Disease (COPD), Cardiovascular Diseases (CVDs), and Diabetes, serving as a cornerstone of our strategic approach.

Vision

Improve health outcomes and quality of life while strengthening the healthcare system

Mission

To serve local communities through preventive, curative, and support-based solutions for curing diseases in the short term and reducing their prevalence in the long term.

Project Context

Non-communicable diseases (NCDs) such as hypertension, diabetes, and chronic respiratory conditions are becoming the leading causes of illness and early death across India. In rural and underserved regions, even when diagnosis and treatment are available, many patients continue to struggle with everyday behaviours that are essential for disease management. These include unhealthy eating habits, low levels of physical activity, substance use, and inconsistent medication adherence. Despite their clinical importance, such behavioural risk factors are rarely tracked or addressed systematically within routine healthcare delivery.

Health camps and outpatient services typically focus on symptom management and prescribing medication. Structured follow-up on lifestyle behaviour, which is vital for controlling chronic diseases, is often overlooked. Additionally, several factors that affect patient well-being—such as fatigue, pain, emotional distress, reduced mobility, and social isolation—remain undocumented. These factors significantly influence patient motivation, health outcomes, and long-term engagement with care, yet they are not consistently captured in medical records or follow-up formats.

To address these gaps, the Lives Program is initiating a baseline assessment in the interventional blocks of Alwar (Rajasthan) and Palghar (Maharashtra). This assessment aims to generate robust evidence on lifestyle-related behaviour, psychosocial health, and clinical indicators among patients living with NCDs.

Scope of Work

The overall aim of this baseline assessment is to understand lifestyle-related behavioural risks and self-reported quality of life among adults enrolled in the Lives Program for NCD care. The assessment will provide actionable insights to strengthen personalized counselling, improve follow-up planning, and guide overall program strategies. It will also serve as the baseline reference for future comparisons in the endline assessment to monitor progress over time.

The specific objectives are as follows –

- 1) To document existing patterns related to diet, physical activity, tobacco and alcohol use, and medication adherence among patients diagnosed with NCDs
- 2) To calculate behaviour risk scores for each patient using a standardised assessment tool adapted for field settings
- 3) To measure self-reported quality of life using the SF-12 tool across physical, psychological, social, and environmental dimensions
- 4) To explore how behavioural risks and quality of life vary by demographic characteristics such as age, gender, and specific NCD diagnosis
- 5) To classify patients into different risk segments and quality-of-life categories in order to support tailored counselling and follow-up
- 6) To build a combined behavioural and well-being profile for each patient that can be used for future comparisons during the endline

Sample size and Methodology

The study will adopt a mixed methods design to set the baseline. The overall sample should be representative of all patients who benefited from the project.

The qualitative component will include **Key Informant Interviews (KIIs)**, **In-Depth Interviews (IDIs)**, and **Focus Group Discussions (FGDs)**, which will be conducted across the two implementation districts—**Alwar (Rajasthan)** and **Palghar (Maharashtra)**. The baseline study will be conducted in select blocks of Alwar (Govindgarh and Umren) and Palghar (Jawahar and Wada). A purposive sampling strategy will ensure diversity by **geography, gender, disease profile, and program exposure**.

Deliverables

The research agency will provide LHWRP with a specified set of deliverables. The deliverables include a detailed study design, work plan/chronogram draft (finalized in collaboration with LHWRP), study tools (including pre-testing and translation), IRB approval, training materials, draft baseline scoping report for LHWRP's feedback, raw data and processed data in STATA/R/Python and with proper labelling and coding of variables, final report & slide deck incorporating suggestions from LHWRP.

Ethical protocol:

As the selected agency will be working on behalf of the Lupin Human Welfare and Research Foundation, they will be required to adhere to the ethical guidelines. The Agency and the researchers engaged in the review will receive orientation on the proposal. Background checks will be undertaken for all applicants. The agency will make clear to all participating stakeholders, especially respondents of all categories, that they are under no obligation to participate in the process. All participants will be assured that there will be no negative consequences if they choose not to participate. The Agency must obtain informed consent from all adult participants. The Agency must receive prior permission for

taking and using visual still/moving images for specific purposes. The Agency will ensure the anonymity and confidentiality of participants' data and will ensure the visual data is protected and used for agreed purposes only. As the shortlisted Agency needs to interact with respondents, s/he needs to sign and abide by the Lupin Human Welfare and Research Foundation. Data protection protocols must be developed for the storage and analysis of household data and respondents' profile data. All transcripts must be anonymized.

Terms of payment:

- 20% on signing of the contract
- 20% on the submission of the Inception Report
- 40% on completion of fieldwork and top-line findings
- 20% on submission of Final Report incorporating comments from LHWRF

Ownership of materials

The agency may note that all outputs, including the study data, reports, sets of tools, training manuals, any other allied materials, etc., produced as part of this study will fully remain the exclusive property of LHWRF. The raw data and filled-in interview schedules would become the property of LHWRF.

Timeline

It is anticipated that the consultancy period will be a period of over **4-8 months**, tentatively starting from **December 2025 to March 2026**, and it is expected that the agency will complete all aspects of the project within this period. It is recommended that the Consultant/agency provide a Gantt chart showing clearly the steps of the study and the time assigned to each step.

Sr. No	Deliverables	Deadline
1	Introductory Meeting	T+2
2	Inception Meeting and Discussion on Study Framework	T+4
4	Incorporating LHWRF inputs on Tool+ Study Plan Development	T+7
5	IRB approval	T+37
5	Training of field team for the study	T+44
6	Data Collection	T+59
7	Data Processing & Data Analysis	T+199
8	Draft slide deck 1	T+200
9	Inputs from LHWRF	T+225
10	Submission of final slide deck	T+230
11	Draft report 1	T+233
12	Draft report 2	T+236

Expected Qualifications of the Agency:

The agency should be able to deploy a core team consisting of experts having substantial experience in the field of NCDs research and public health, statistics, and survey management. The team of interviewers and researchers placed in the field by the agency should be well-versed in the techniques of conducting research involving respondents and should be conscious of the ethical issues that may arise during such research.

Support to be extended by the Consortium Members

Lupin Human Welfare and Research Foundation will provide the following information and support to the consultant:

- (i) Copies of the project document and M&E framework (relevant sections) and any other information needed for a more complete understanding of the intervention
- (ii) Baseline tool and reports at various stages
- (iii) Contact details of the project team members positioned at the intervention sites
- (iv) Letters requesting the support of government departments and officials, wherever required
- (v) LFA of the project

Monitoring of Survey

The agency needs to elaborate on the quality control mechanism to be followed during study implementation. This will include the quality control mechanism of Lupin Human Welfare and Research Foundation and selected agencies (management, coordination & reporting lines). The consultant shall be accountable to a joint committee consisting of representatives of both consortium members, who will monitor the progress of the survey.

Application Process

Interested consultants may send their applications electronically with the following details:

1. Details Expected with the Technical Proposal (max: 7 pages)**i. Organizational Profile:**

This RFP is open to both incorporated institutions (companies, universities, etc.) and to groups of individuals who have joined together specifically for this study. Depending on which profile is appropriate, proposers should submit what is called for under either institutions or collaborative groups. The proposer should provide background information to showcase their competency to undertake the said assignment. Provide details of projects of similar scope, complexity, and nature you have worked on previously. This section must include the following two sub-sections;

- a) Overall Research/ Evaluation Experience of the organization;
- b) Specific experience in conducting similar assignments/ studies

ii. Background: Brief background on study-specific objectives and approaches.

iii. Research Methodology: Describe your overall approach and research methodology, including, but not limited to, research questions, research design, and research methodology, which includes technical specifications like an estimate of the sample size, methods to be used for collecting data from households and in data analysis and validation, in ethical considerations. LHWRF will assess the proposal on the following broad parameters:

- a) Demonstrates an understanding of the context in which the study is to be conducted, likely constraints and risks, etc.
- b) Research methodology
- c) Sample design
- d) Proposed tools and data quality protocols (desk work and field monitoring)

iv. Detailed plan for field work: Depending upon the geographical areas wishing to bid for, provide the number of field teams for data collection work, including data entry/validation/analysis, and field movement plan with time allocations.

v. Activity plan: The proposal should clearly mention details of every activity, including the kind of preparatory work, training, sampling and data collection work, data processing and analysis, results, and report writing. The timeline and person(s) responsible for each activity need to be clearly mentioned.

vi. Training activities: The agency will be responsible for the training of supervisors, data collectors, editors, and investigators who need to be indicated in this section. It will be useful to provide a brief background in terms of the experiences of the professionals to carry out training activities under this study and the logistics.

vii. Quality control mechanism: Provide a section detailing the mechanism to ensure data quality by clearly specifying steps for data validation. This section may also include a supervisory mechanism for data quality and the role of field editors. Also include details on how ethical clearance, consent/assent from study participants during data collection, and confidentiality of data during collection will be maintained.

viii. Data entry and processing plan: This section should clearly bring out the mechanism of data entry, validation checks and data processing activities. This must include details about the procedure of data entry (in-house or outsourced) together with the person responsible. This should also include a plan

for collecting filled-in questionnaires from the field and their transportation to the data entry location(s). Also include details of how the confidentiality of data during the analysis will be maintained.

ix. Tabulation and preparation of reports: Provide details about the team carrying out tabulation, report writing, and incorporation of feedback. The experiences of the person(s) involved and expertise should clearly be mentioned.

- a) **Progress update:** This section should clearly indicate the mechanism to communicate with LHWRF officials regularly about the field activities, coverage rate, data entry status etc.
- b) **Time-line for the conduct of the survey:** Prepare and share a Gantt chart for activities against the timeline.

2. Details Expected with the Financial Proposal (This is a template for reference; the agency can submit the financial proposal in a template that suits them)

- Provide a detailed budget for the proposed activity, including all the overheads and GST/service charges. The financial proposal should detail all costs with a breakdown for each. The financial proposals must be submitted in Excel format with formulas.

Sr. No	Expense heads	Amount (INR)	Percentage of total project budget
1	Digitization of the tool		
2	Data collection		
3.	Project Personnel		
4	Data analysis and report drafting		
5	Any additional offering/activities		
6	Admin and Overheads		

- a) Total budget (with applicable taxes): This should include the budget for sub-contractors, hired consultants, temporary staff, etc.
- b) Breakup of the budget: This should show the Professional Fee, out-of-pocket expenses (including the fares, accommodation, communication, transportation, etc.), overheads, etc., separately.
- c) Justification for special costs: Here, the consultant may provide explanations for any hardship allowances charged for visits to difficult areas, costs of highly qualified consultants, etc.
- d) Terms of Payment: The terms of payment should indicate the percentage of the total job value that will be payable with each installment and the deliverables associated with the given installment. These terms may be a matter of negotiation between LHWRF and the successful bidder.

The financial proposal should include a line-item budget and a budget narrative. The agency needs to prepare a financial proposal taking into consideration the following heads of expenses as a broad reference. The agency/consultant is free to add or reduce the heads depending on the nature of the evaluation design. However, it is preferable for the budget to be prepared with more details, taking into account realistic cost estimation.

Proposal Submission Protocol

The proposals should be sent via email. The financial proposal should be on the organization's / agency's letterhead (signed and scanned PDF version). The Application, comprising of technical and financial proposal, should be addressed to:

Dr Nachiket Sule: nachiketsule@lupin.com

Aishwarya Medhekar: aishwaryamedhekar@lupin.com

The submission deadline for the proposal is 10th December 2025. Only short-listed organisations will receive an acknowledgement and will be called for personal interactions. Agency/Consultants who do not hear from us within three weeks may assume that their application has not been successful.

Late submissions shall not be considered. Only short-listed firms/ consultants will be contacted.