Call for Proposals

Alliance Review Centres on Health Policy and Systems Research in Low- and Middle-Income Countries

Issued: 29 February 2016

Deadline for Submission of Proposals: 31 March 2016
1. Introduction

Health policy- and decision-makers, as well as other stakeholders involved in health systems worldwide, routinely face difficult decisions around improving health care and promoting equity. Health policy and system research (HPSR) synthesis supports decision-makers by providing state-of-the-art knowledge and actionable evidence at every step in the decision-making process [1, 2]. Although there is growing recognition of the importance of HPSR synthesis to both inform policy decisions and produce guidance for health systems, capacities of individuals, teams, organisations and knowledge systems remain limited in low-resource settings [3].

Since 2007, the Alliance for Health Policy and Systems research (“Alliance”), has pioneered support for the establishment of systematic review centres (SRCs) in low- and middle-income countries (LMICs). The focus of these centres is to conduct reviews which address questions on how to improve the performance of health systems. The Alliance-supported centres have generated knowledge on key HPSR priorities and more than twenty systematic reviews and protocols have been produced so far. The centres have also been successful in organising a range of capacity strengthening activities focused on the quality of knowledge, as well as dissemination products such as policy briefs and SUPPORT summaries, and more recently, uptake of review findings by policy- and decision-makers. Useful guidance products have also been developed1 to serve as public goods for the HPSR community.

In 2011, an external review of the programme to support the Alliance SRCs highlighted the successes of the SRCs in building South-South and North-South partnerships, while underlining the challenges inherent to conducting reviews on complex health system questions, and engaging with policymakers to foster the use of syntheses. The Alliance has acted on the recommendations to promote greater engagement of the SRCs with decision-makers, and the latest programme, implemented in 2014-2015, was developed with a strong focus on collaborations with health system stakeholders.

Building on this experience and recognising the importance of engaging with a wide range of policy- and decision-makers, the Alliance will continue funding review centres in LMICs, with a stronger focus on engagement of policymakers in demanding and using review findings. To ensure timeliness, responsiveness and relevance of reviews supported under this scheme, the Alliance will work with the centres in developing a service of rapid synthesis stemming from requests by policymakers.

There is a growing interest in rapid syntheses as a means to provide actionable and locally-relevant knowledge synthesis to support the development and implementation of health policies [4-6]. Experience to date has also taught us that decision-makers often pose questions already addressed by existing HPSR reviews, yet they have difficulties identifying, accessing and appraising the relevant syntheses. The rapid response service developed by the Alliance SRCs would address this gap, by responding in a timely fashion to policymakers’ demands for existing reviews, in addition to assessing the scientific quality and confidence/certainty to place in the evidence. To support rapid

1 For instance, the Handbook on how to conduct systematic reviews of health policy and systems research in low- and middle-income countries, http://www.who.int/alliance-hpsr/projects/alliancehpsr_handbooksystematicreviewschile.pdf?ua=1

Alliance Review Centres
synthesis services, the Alliance will also build the capacity of LMIC institutions to produce rapid syntheses in response to the needs of policy- and decision-makers.

For the purpose of this call, health policy and systems research is defined as an emerging field that seeks to understand and improve how societies organize themselves in achieving collective health goals, and how different actors interact in the policy and implementation processes to contribute to policy outcomes. By nature, it is inter-disciplinary, a blend of economics, sociology, anthropology, political science, public health and epidemiology that together draw a comprehensive picture of how health systems respond and adapt to health policies, and how health policies can shape – and be shaped by – health systems and the broader determinants of health.

2. Objectives of this Call

The objectives of this call are to:

- develop rapid synthesis services that are responsive to policy needs and priorities in LMICs;
- develop further institutional capacity in LMICs for conducting and packaging HPSR reviews including systematic reviews and rapid reviews;
- foster the use of reviews and related products to support evidence-informed decision-making.

3. Alliance Review Centers

3.1. Requirements

Eligibility Criteria

The centres need to be based in a low- or middle-income country, as per the World Bank classification of lending groups. Organizations from high-income countries are not eligible to apply.

Essential Requirements

While there are no specific size requirements, the team (proposal) must comply with the following:

a) At least 50% of the team should consist of female researchers
b) Experience/expertise in synthesizing qualitative or mixed methods studies, of particular relevance to the field of health policy and systems research
c) Experience/expertise in engaging with policy- and decision-maker
d) Planned training and mentorship for junior reviewers

Technical and Scientific Quality Criteria

The centres are invited to submit a proposal of work for 2016 and 2017. The proposal should include a description of the following components:

3.1.1. Statement of interest highlighting a strategic vision for the next two years. The organization should describe its major contributions to the field, and its experience in conducting reviews on health policy and systems research. The institution should also describe its vision and experience in engaging with health system decision-makers towards the use of policy-relevant review findings.

3.1.2. A description of current capacity to conduct evidence syntheses and promote the use of review findings to support health system strengthening, taking into account individual capacities of the team members - systematic review methods, evidence synthesis project management and capacities to engage in policy debates with a wide array of decision makers - as well as institutional capacity (access to expert librarian, bibliographic databases, and training in systematic reviewing). The team should have at least one technical member with skills and expertise in synthesising qualitative or mixed methods studies.

3.1.3. A description of how the Centre will develop a service of rapid synthesis of health systems research, stemming from requests by policymakers, and including new rapid reviews and syntheses of existing reviews. The Centre should specifically describe the plans and processes to respond to policymakers’ demands in a timely manner. In responding to requests for existing reviews, due consideration should be provided to scientific quality appraisal and assessment of the confidence/certainty to place in the evidence.

3.1.4. Commitment to produce at least two policy-relevant systematic reviews over the period 2016-2017. The reviews can include (without being limited to) scoping reviews, reviews of qualitative evidence, reviews of the effects of interventions and mixed methods reviews.

3.1.5. Strategy to engage policymakers in the review cycle, particularly in prioritising HPSR review questions (and in refining the question), conducting the reviews, interpreting the review findings, disseminating the results of the review and promoting its use in real world decision-making. The proposal should describe the activities (e.g. workshops) and clearly outline an engagement strategy tailored to the different types of outputs, namely: i) systematic reviews and ii) rapid reviews/rapid syntheses.

3.1.6. Commitment and capacity to prepare policy relevant products such as a policy brief, SUPPORT summary and/or a user friendly summary from each review. The proposal should describe the policy relevant products that will be prepared.

3.1.7. Each Centre will clearly commit to and provide a description of plans to mentor and train in review methods at least two young researchers per year. The plan will also describe how the project will support the development of capacity of other young researchers to undertake HPSR evidence syntheses.

3.1.8. Detailed description of staffing and organizational arrangements, including identification of the Center principal investigator (PI) or co-PIs, credentials of the review team (including curriculum
vitae), proposed responsibilities and proven experience/expertise in HSR synthesis, as well as active engagement with policymakers.

3.1.9. A detailed workplan and budget inclusive of all costs (including travel and related expenses to attend annual meetings/trainings). The host institutes are expected to provide financial and/or in-kind support. The Centres should describe in the proposal the amount of financial and/or in-kind contribution that the host institute will provide.

3.2. Review topics/questions

3.2.1. The review questions should be related to HPSR and identified through a review of the literature (peer reviewed and grey literature) and through discussions with decision makers at national and/or regional level.

The types of reviews that could be considered policy relevant include [7]:

- reviews of effectiveness to identify the benefits and harms of policy options or interventions;
- reviews of economic evaluations to explore the cost-effectiveness of different options or interventions;
- reviews of qualitative studies to help identify alternate framings of a health systems problems, understand why and how a policy or a programme option works or to identify the potential barriers to implementing a preferred option or intervention.

The Centres should make sure that the review they propose is not already registered as on-going work at PROSPERO, the international prospective register of systematic reviews, at http://www.crd.york.ac.uk/prospero/, and then register their own review there.

3.3. Funding

For this phase, the maximum amount of funding available from the Alliance will be USD 180,000 for two years, per centre. The Alliance will fund three (3) Centres for the 2016-2017 period.

The Alliance aims at supporting at least one (1) Center based in a low-income country (LIC).

No further funding will be provided by the Alliance within and beyond the project period of two years.
3.4. Evaluation Criteria

The following point system will be used to evaluate proposals:

A. Statement of interest  
10 points

B. Technical and scientific staffing & capabilities  
15 points

D. Plans to:

- develop a rapid response service  
15 points

- engage decision makers and foster the use of review findings  
15 points

E. Workplan/Gantt Chart for activities  
10 points

F. Plans to develop capacities of young researchers  
10 points

G. Organisational arrangements & financial/in-kind contributions from the host institute  
10 points

H. Budget/value for money  
15 points

4. Technical assistance

The Alliance recognizes the need to support capacity development in conducting HPSR synthesis – specifically in relation to rapid syntheses - and therefore will organise technical support to the Review Centres.

Technical assistance will be provided to the Centers by rapid review experts, in order to support the development of the rapid response services. The support will be provided via ongoing interactions by email and/or telephone; in addition, the support will be provided in the form of training sessions (e.g. webinars) and/or meetings (virtual or in-person).

For low-income institution(s), the level of support to strengthen the review center(s) would be more intensive compared to support provided to MICs.

The progress of the teams on each review will be assessed by the Alliance Secretariat.

Please note that the Centres should not budget for this technical support in the budget proposal.

5. Selection Process

5.1. All proposals must be submitted to the Alliance by email (alliancehpsr@who.int)  
Please use subject: Alliance/WHO Bid Ref. Alliance Review Centres 2016-2017

Proposals must be received no later than 31 march 2016 23:59 GMT.
5.3. Each proposal will be reviewed fairly and independently by external reviewers. The Alliance Secretariat will not directly review the scientific quality of the proposals. The Alliance may choose to pose further clarifying questions to the applicants, either by email or by telephone. The decision to select teams will be done by an independent adjudication committee based on the strength of the proposal.

5.4. Successful applicants will be notified as soon as the selection is completed.

5.5 Communications during the Call Period

A prospective bidder requiring any clarification on technical, contractual or commercial matters may notify the Alliance/WHO via email at the following address no later than 3 working days prior to the closing date for the submission of offers.

Email for submissions of all queries: alkhudril@who.int

The Alliance team at WHO will respond via email to any request for clarification of the call that it receives by the deadline indicated above. A consolidated document of the Alliance’s response to all questions (including an explanation of the query but without identifying the source of enquiry) will be posted on the internet site where the bid itself is posted.

There shall be no individual presentation by or meeting with bidders until after the closing date. From the date of issue of this call to the final selection, contact with the Alliance/WHO officials concerning the call process shall not be permitted, other than through the submission of queries, unless a presentation or meeting is initiated by the Alliance/WHO, in accordance with the terms of this call.

5.6 Amendment of the Call

The Alliance/WHO may, at any time before the closing date, for any reason, whether on its own initiative or in response to a clarification requested by a (prospective) bidder, modify the call by written amendment. Amendments could, inter alia, include modification of the project scope or requirements, the project timeline expectations and/or extension of the closing date for submission.

All prospective bidders that have submitted a proposal with regard to the call will be notified in writing of all amendments to the call and will, where applicable, be invited to amend their proposal accordingly.

5.7 Clarification of Proposals

The Alliance/WHO may, at its discretion, ask any bidder for clarification of any part of its proposal. The request for clarification and the response shall be in writing. No change in price or substance of the proposal shall be sought, offered or permitted during this exchange.

6. Continuation and Award of Contract

The continuation of the contracts beyond the first year will be subject to review of performance by the Alliance. The Alliance may discontinue or amend the programme of work based on the performance of the grantee during the first year.
6.1 Award Criteria
The Alliance/WHO has the right to eliminate bids for technical or other reasons throughout the evaluation/selection process. The Alliance/WHO shall not in any way be obligated to reveal, or discuss with any bidder, how a proposal was assessed, or to provide any other information relative to the evaluation/selection process or to state the reasons for elimination to any bidder.

The Alliance/WHO is acting in good faith by issuing this call. However, this document does not obligate the Alliance/WHO to contract for the performance of any work, nor for the supply of any products or services.

6.2 Right to enter into Negotiations
The Alliance/WHO reserves the right to enter into negotiations with one or more bidders of its choice, including but not limited to negotiation of the terms of the proposal(s), the price quoted in such proposal(s) and/or the deletion of certain parts of the work, components or items called for under this call.

6.3 Signing of the Contract
Within 30 days of receipt of the contract, the successful bidder shall sign and date the contract and return it to the Alliance/WHO according to the instructions provided at that time. If the bidder does not accept the contract terms without changes, then the Alliance/WHO has the right not to proceed with the selected bidder and instead contract with another bidder of its choice.

Only the successful bidder(s) will be contacted

For more information on the Alliance HPSR, please visit: http://www.who.int/alliance-hpsr/en/.

7. References

### PART I. ADMINISTRATIVE INFORMATION

#### 1.1 Name of principal investigator and institutional affiliation:

<table>
<thead>
<tr>
<th>Title</th>
<th>Surname</th>
<th>First name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Name of Department and Institution

Full postal address of team leader to be used for correspondence (170 words maximum):

<table>
<thead>
<tr>
<th>Telephone</th>
<th>Fax</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E-mail</th>
<th>E-mail 2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Name of co-principal investigator (if need be)**

<table>
<thead>
<tr>
<th>Title</th>
<th>Surname</th>
<th>First name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Name of Department and Institution

Full postal address of team leader to be used for correspondence (170 words maximum):

<table>
<thead>
<tr>
<th>Telephone</th>
<th>Fax</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E-mail</th>
<th>E-mail 2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### 1.2 Title of project: (30 words maximum)  ID Number: [LEAVE BLANK]

#### 1.4 Summary: (120 words maximum)
PART II  STRUCTURE OF PROPOSALS

Proposals should be no more than 12 pages in length, plus annexes (12 font size, single spacing).

A. Statement of Interest
Describe why you are interested in conducting reviews of health policy and systems research and developing a rapid response service? What current capacities do you have? What experience do you have in conducting evidence syntheses, building capacities and engaging with policymakers? How do you think evidence syntheses can strengthen policy making in LMIC countries? (Approximately 2 pages)

B. Technical and Scientific Capabilities & Staffing
Describe the nature of your organization and its experience in the field of health policy and systems research. Describe the disciplinary skills available within the organization. Describe how you would organize the work and the team. Describe how different elements of the work (e.g. conducting systematic reviews, developing products derived from reviews, managing a rapid response service, holding workshops/policy dialogues) would be managed, and who would be responsible for what. Would you draw upon groups in your country or other countries or in regions, if so who and how?

Identify specific staff members for different positions in the team. Provide CVs (maximum 4 pages, to be included in an annex) for all staff. If there are specific competencies not currently available in your organization, please identify them and describe how recruitment would be conducted. Furthermore, if staff has specific training needs, please identify them.
(Approximately 2 pages)

C. Develop a rapid response service
Describe the plans to establish a system of rapid response to policymakers’ request for HPSR knowledge. Describe the processes to stimulate demand and ensure timely responsiveness to needs for existing syntheses and new rapid reviews. Describe how the rapid response service will take stock of good methodological practices in the field of HSR synthesis and rapid reviews.
(Approximately 2 pages)

D. Engagement with decision makers and dissemination/knowledge uptake plan
Describe what linkages you have with decision makers at the national/regional/global level. How would you involve decision makers in the conduct and use of systematic reviews? How do you plan to choose systematic review questions that are relevant to decision makers? What policy relevant products will you prepare from each systematic review and how will you disseminate them? Describe your plans to conduct workshops, particularly with decision makers, to present the results of the reviews. How will you promote the uptake and use of reviews for policy impact?
(Approximately 2 pages)

E. Proposed activities
Provide a rough work plan/Gantt Chart for activities during the two years of the project (2016-2017) (1 page)

F. Plans to develop capacities of young researchers
Describe plans to identify and train at least two young researchers in systematic/rapid reviews. Also describe how you will identify and build capacity of other young researchers to undertake systematic reviews. (Approximately 1 page)
G. Organisational arrangements & financial/in-kind contributions from the host institute
Describe how and what support, financial and non-financial, you will get from the host institution in which the Centre is located, and for how long this support will continue. In addition to financial contribution, this includes access to the internet, relevant bibliographic databases and full text reports of studies within the relevant topic as well as support to develop capacity to undertake HPSR reviews.
(Approximately 2 pages)

H. Budget/value for money
Please use the format below to present your budget. The budget for activities during Year 2 should be viewed as indicative and will be renegotiated with the Alliance, once planned activities for these years are clearer. Please also provide a budget justification in the form of a budget narrative, and indicate financial contribution from the host institute.
(Approximately 2 pages)

<table>
<thead>
<tr>
<th>Budget Categories</th>
<th>Total for Year 1 (US$)</th>
<th>Total for Year 2 (if applicable) (US$)</th>
<th>Total (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supplies/Facilities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equipment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communications</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel &amp; Perdiem</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (workshops)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subtotal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indirect Costs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Institutional Overheads)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grand Total (US$)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note on budget
1. For personnel, indicate for each individual staff person proposed as part of the Centre, the position they would have, and the percentage of time they would devote to the project. Justify personnel salaries in relation to institutional remuneration policies.