REQUEST FOR PROPOSAL

Contract type: Technical Service Agreement (TSA)
Closing Date/Time: Friday 23 February 2018 23:59 GMT

Request for proposal: Technical Assistance Center - Embedding RApid Reviews in Health Systems Decision-Making (ERA)

1. Background

As many countries are beginning to demonstrate commitment towards universal health coverage (UHC), coinciding with a global momentum towards the Sustainable Development Goals (SDGs), there is increasing demand for relevant, contextualized evidence to strengthen health policy and systems. This requires the generation and use of research valued and prioritised by health systems stakeholders [1, 2]. Policymakers require and increasingly demand contextualised knowledge to strengthen local health system settings [3]. In turn, context-sensitive and demand-driven research increases its applicability and likelihood of being used to enhance the performance of health systems [4, 5].

A strong facilitator to the uptake of health systems research is the collaboration and interactions between researchers and decision-makers [6, 7]. There is increasing interest globally in co-production of research with decision-makers and embedding of primary research and evidence synthesis within decision-making institutions to support policy and practice [8, 9].

This approach is portrayed in the WHO Strategy on Health Policy and Systems Research, Changing Mindsets (2012), which calls for greater alignment and embedding of research into health systems processes [10]. Building on the importance of engaging policymakers, the World Health Report 2013 on Research for Universal Health Coverage also stresses the need to stimulate demand-driven embedded research to strengthen health systems and move towards UHC [11].

2. Alliance HPSR approach

To tackle this challenge, the Alliance for Health Policy and Systems Research (HPSR) – an international partnership hosted by the World Health Organization - has pioneered a focus on embedding research within health systems [12]. Rapid review is one the most frequently voiced needs of health systems decision-makers in LMICs seeking to address urgent policy and systems priorities [13]. Reviews of health policy and systems evidence support decision-makers by providing relevant and actionable evidence at every step in the decision-making process [14, 15]. To ensure timeliness, relevance and uptake of reviews, the Alliance developed a programme of work focusing on rapid reviews stemming from policymakers’ requests.
Learning from its experience in supporting embedded research and engaging with decision-makers in various settings [12], the Alliance will seek to embed the rapid review services directly within health decision-making bodies in LMICs as part of a broader initiative to be launched in mid-2018.

**Embedding RAPid Reviews in Health Systems Decision-Making (ERA)**

The Alliance is developing an initiative entitled *Embedding RAPid Reviews in Health Systems Decision-Making (ERA)*, to stimulate the production and use of demand-driven and policy-relevant knowledge. As such, the Alliance will support embedded rapid review generation directly within health decision-making bodies in LMICs. The embedded platforms will respond to timely requests for rapid health policy and systems research syntheses, expressed by policymakers and decision-makers. The embedded platforms are thus designed to develop rapid reviews synthesizing and analysing existing research, and not to generate primary research.

The Alliance will support four (4) embedded ERA platforms in 2018-2019. The platforms will benefit from scientific support provided by a technical assistance center, with oversight by the Alliance. They will also make use of the new Alliance publication entitled *Rapid Reviews to Strengthen Health Policy and Systems: A Practical Guide*.

As such, the Alliance invites proposals to establish the ERA technical assistance center and support its programme of work on health policy and systems research evidence synthesis, following the specific objectives below.

### 3. Objective

**Provide technical and scientific assistance to the ERA platforms in LMICs**

Conducting rapid syntheses poses specific challenges pertaining to robustness and transparency of review methods [16]. The Alliance recognizes the need to support the conduct of HPSR synthesis – specifically in relation to rapid syntheses - and therefore will organise technical assistance to the embedded ERA platforms. Technical assistance will be provided to the centres by experts in both rapid review methods and rapid response services tailored to the needs of LMIC health systems.

Ongoing technical support will be provided throughout the course of the programme via interactions by email and/or telephone, as well as in the form of training sessions (webinars, workshops) and meetings (virtual and in-person). The technical assistance centre would organise in 2018 an in-person inception and training workshop in each of the country selected to host an ERA platform. Technical assistance would also include training on good practices in conducting rapid reviews pertaining to health policy and systems research. The technical assistance centre will also assist the Alliance in the upcoming selection process of the embedded ERA platforms.

As such, the Alliance wants to commission a Technical Assistance Center specialised in methods and application of rapid reviews of health policy and systems evidence, to strengthen the activities of the ERA platforms in LMICs.

### 4. Funding

For this phase, the maximum amount of funding available from the Alliance will be USD 100,000. No further funding will be provided by the Alliance within and beyond the project period.
5. Deliverables

Technical and scientific assistance to the ERA platforms in LMICs

- Workplan for training activities for 2018-2019;
- Background material and outputs of the training activities;
- Report on capacity strengthening activities including but not limited to webinars, online training, one-on-one technical/scientific support.

6. Requirements/Competencies

Bidders for this contract should demonstrate the following:

- Relevant experience related to evidence synthesis for health research with a strong emphasis on rapid review methodology;
- Proven experience and expertise in engaging with health systems stakeholders and responding to timely requests by policy- and decision-makers;
- Demonstrated experience of supporting rapid review services in LMIC settings;
- Strong expertise in conducting and supporting rapid evidence assessments pertaining to health policy and systems issues;
- Experience in building capacities and providing technical/scientific assistance in the field of rapid reviews and mixed methods syntheses;
- Extended publication record pertaining to evidence synthesis including rapid reviews.

7. Timeline and Budget

The bidder should submit a detailed timeline and budget for this work. The budget should account for the planned inception workshops in each of the four ERA country.

Alliance staff will periodically review progress on the drafts and provide feedback to the bidder. The final budget will be contingent on the scope of the proposed work. The payments will be linked to satisfactory completion of the deliverables.

8. Instructions to Bidders

Format and Content of the Bid

Bids should be not more than 5 pages and should include the following:

a) Motivation for applying: how this work fits with the bidder’s academic/professional background or interests;
b) Relevant background: Brief description of relevant experience in evidence synthesis for health research including rapid reviews, as explained in section 5, above;
c) Methodology: Proposed methodological approach to carry out the work;
d) Short institutional profile(s) and profiles of anticipated team members, including the main bidder, this should include information on collaborators, if any (full CVs can be annexed to the 5-page proposal);
e) Itemized budget and timeline (Gantt chart);
f) Contact details of the bidder (“project leader”) including email and telephone number.

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

**Contact and email for submissions of all queries:**
alliancehpsr@who.int
(use subject: WHO Bid Ref. Technical Assistance Center - *Embedding Rapid Reviews in Health Systems Decision-Making (ERA)*)

The Alliance HPSR team at WHO will respond via email to any request for clarification of the call that it receives by the deadline indicated above.

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 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 WHO, in accordance with the terms of this call.

**Period of Validity of Proposals**

The offer outlined in the proposal must be valid for a minimum period of 120 calendar days after the closing date. A proposal valid for a shorter period may be rejected by WHO. In exceptional circumstances, WHO may solicit the bidder’s consent to an extension of the period of validity. The request and the responses thereto shall be made in writing. Any bidder granting such an extension will not, however, be permitted to otherwise modify its proposal.

**Closing Date for Submission of Proposals**

Proposals must be received at WHO at the e-mail address: alliancehpsr@who.int
Please use subject: WHO Bid Ref. Technical Assistance Center - *Embedding Rapid Reviews in Health Systems Decision-Making (ERA)*
no later than Friday 23 February 2018 23:59 GMT

WHO may, at its own discretion, extend this closing date for the submission of proposals by notifying all bidders thereof in writing. Any proposal received by WHO after the closing date for submission of proposals may be rejected.

**Amendment of the Call**

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.

**Clarification of Proposals**

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.
9. Award of Contracts

Award Criteria

Contracts shall be awarded based on a combination of criteria including the bidder’s motivation statement, exposure to or experience of, working in the area of evidence synthesis, the content of the proposal in terms of comprehensiveness, and value for money.

However, WHO reserves the right to:

a) Award the contract to a bidder of its choice, even if its bid is not the lowest;

b) Award separate contracts for parts of the work, components or items, to one or more bidders of its choice, even if their bids are not the lowest;

c) Accept or reject any proposal, and to annul the solicitation process and reject all proposals at any time prior to award of contract, without thereby incurring any liability to the affected bidder or bidders and without any obligation to inform the affected bidder or bidders of the grounds for WHO’s action;

d) Award the contract on the basis of the Organization’s particular objectives to a bidder whose proposal is considered to be the most responsive to the Organization’s needs and the activity concerned;

e) Not award any contract at all

WHO has the right to eliminate bids for technical or other reasons throughout the evaluation/selection process. 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.

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

WHO’s Right to enter into Negotiations

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.

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 WHO according to the instructions provided at that time. If the bidder does not accept the contract terms without changes, then WHO has the right not to proceed with the selected bidder and instead contract with another bidder of its choice.

Please apply by email only to alliancehpsr@who.int use subject: WHO Bid Ref. Technical Assistance Center - Embedding Rapid Reviews in Health Systems Decision-Making (ERA)
no later than **Friday 23 February 2018 23:59 GMT**

**Only the successful bidder(s) will be contacted**

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

---

### 10. References


