

CALL FOR PROPOSALS

Technical Assistance to conduct assessment of the Philhealth accreditation status of the birthing facilities and hospitals for each of the SNI Phase 2 (SNIP 2) Project Areas



World Health Organization

Representative Office
for the Philippines

1. Summary

The World Health Organization (WHO) Philippines is looking for an individual or institutional contractual partner to provide technical assistance in the conduct of assessments on the Philhealth accreditation status of the birthing facilities and hospitals in the three (3) different Subnational Initiative Phase 2 (SNIP2) project areas under Agreement for Performance of Work (APW) contract.

The proposals are due by 25 August 2021.

2. Background

The World Health Organization Philippines Country Office is currently implementing the Subnational Initiative Project Phase 2 in collaboration with the Philippines Department of Health and with funding support from the Korea International Cooperation Agency (KOICA).

The project is called “Strengthening Health Care Provider Network (HCPN) with Enhanced Linkage to Community for Reproductive, Maternal, Neonatal, Child and Adolescent Health (RMNCAH). The objective is to improve the health systems of the three (3) regions for better health for maternal, child, and adolescent health. The project will respond based on the following health outcomes; 1) supported communities to develop effective approaches to essential health services for RMNCAH, 2) strengthened governance and management for the responsiveness of HCPN, and 3) sustained and scaled up the initial gains in Region XI from the Subnational Initiative Phase 1 Project. Especially in Phase 2, participation of community level is one of the main activities, especially in demand generation and referral of maternal and newborn cases to facilities within the health care provider network (HPCN).

To ensure that referral will be maximized, health facilities should have been licensed or approved as birthing facilities by the DOH, and hospitals are functioning as BEmONC facilities; both birthing facilities and hospitals should be accredited as maternal and childcare package (MCP) providers by PHILHEALTH.

The DOH earlier issued an order authorizing only skilled and trained midwives, doctors and nurses to assist pregnant women when they give birth. This in turn is supported by the Local Government Units by upgrading the conditions of their health centers/facilities, not only to entice pregnant women to give birth in healthcare facilities instead of at home, but also, to be able to avail of the benefits of PhilHealth for maternity cases.

World Health Organization under SNI Phase 2, wishes to assess the accreditation status, and the reasons for the success and gaps for each of status of all birthing facilities in the project sites and especially, identify the bottlenecks of non-accreditation, if any. The project will be more effective if it is able to work with the DOH and PHILHEALTH to increase the number of accredited health facilities in the project sites. This will also pave way to determine what technical assistance required to accelerate the access to quality health services for the mother and baby through expansion of accreditation.

3. Timeline

The implementation timeline for the project is from **September to November 2021**.

4. Place of Assignment

Each APW holder will be based within the respective place among the three (3) project sites region or province, where the engagement shall be implemented (2 months per area).

5. Scope of Work

The Contractual Partner shall work under contract with the Office of the World Health Organization Representative in the Philippines as part of the Sub-National Initiative Phase 2, under the direct supervision of the SNIP2 National Coordinator and in collaboration with the Field Coordinators, closely collaborating with the respective DOH-Center for Health Development.

In close collaboration with WHO/PHL, DOH CHDs and PHOs, the following activities shall be carried out:

Output 1: Conduct an assessment on the accreditation status of birthing facility in the three project sites.

Deliverable 1.1: Mapping birthing facilities and hospitals in the project sites.

Deliverable 1.2: Analysis of the current status of accreditation of each facility.

Deliverable 1.3: Review and report status of birth occurring in the facility (average per month, outcome of births, payment method, etc).

Deliverable 1.4: Survey and identify issues and gaps for non-accreditation, and the reasons for such.

Output 2: Comprehensive situational analysis reports on the delivery-reimbursement status per region and province.

Deliverable 2.1: Detailed report on the percentage of deliveries per Region and Province.

Deliverable 2.2: In depth analysis of PHIC membership and reimbursement status, or non-reimbursement status of each birth.

Output 3: Generate recommendations to be used in the project to ensure accelerated accreditation and /or sustainability of the accreditation.

Deliverable 3.1: Determine and report the referral status of clients from the community to the birthing facilities, and from birthing facilities to the referral hospitals in case of cases with complication, taking note of the time from admission to detection of complication to the decision to refer and the actual time referred.

Deliverable 3.2: Identify strategies on how to increase demand for birthing services to birthing the facilities

Deliverable 3.3.: Identify facilities with poor service delivery and recommend strategies to improve service provision in these facilities.

Deliverable 3.4: Formulate Monitoring and evaluation tool to be used by CHD and PHO to continually assess the status of facility accreditation, with recommended calendar/schedule of monitoring.

Output 4: End of engagement technical and financial report, to include key recommendations for strategies in sustaining birthing facility and hospital accreditation.

6. Qualifications

The individual contractual partner or team members of the institution must fulfil the following qualifications:

Education and Certifications

- **Essential:** University degree on public health and social sciences from a recognized university.
- **Desirable:** Master's degree on public health and health systems strengthening is an advantage.

Work Experience

Essentials:

- At least 5 years work experience in organizing and conducting surveys, or research studies.
- At least 7 years work experience in monitoring health projects.
- At least 3 years experience working with Local Government Units (LGU).

Desirable:

- Experience with the UN system or other international organizations is an advantage.
- Relevant experience working with in providing similar services to UN agencies, DOH or other government agencies is desirable.

Technical Skills and Knowledge

- Excellent in writing and interpersonal skills and strong communication skills.
- Knowledge and familiarity with WHO and DOH work, relevant policies and operations, especially on RMNCAHN. Knowledge and Expertise in Philhealth accreditation process is an advantage.
- Excellent oral communication and reporting skills.
- Proficient in project strategy and implementation.

Language

- Expert fluency in English and Filipino, both oral and written; and
- Able to understand and speak in Tagalog, Cebuano/Binisaya and Hiligaynon is an advantage, both oral and written.

7. Contract Time

The work to be done under this Agreement for Performance of Work (APW) shall be completed as set out in the Terms of Reference. The contract will be completed in not more than months (2) months from the commencement of the work, or otherwise as agreed in writing among the Owner and the Contractor. The work shall be done in strict compliance with the Contract, Specifications, Schedules, and all other Contract documents and all Instructions. Failure to do so shall be at the Contractor's risk and account. Submission of bid by the Contractor shall constitute acknowledgement by the Contractor that it is aware of and

concurs with all the requirements or conditions incorporated in the Call for Proposal and the other documents.

As time is an essential element for this Contract, for failure to complete all work within the stipulated as set out in the Terms of Reference, the Owner shall charge the Contractor liquidated damages. This shall be in the amount the sum of 0.5% of the total contract amount per day (Saturdays, Sundays and holidays are included) but not to exceed on total 10% (ten percent) of the contract amount. These liquidated damages shall be for the added cost incurred by the Owner for such delay and for the inconvenience caused to the users of the Work. It is understood that this is not a penalty but a fixed sum representing the liquidated damages for each calendar day of the delay. Delay shall be counted from the agreed completion date, considering further time extensions approved by the Owner, to the date of completion of work.

8. Other Requirements

Willingness to travel to the project sites for assessment and submit relevant and acceptable deliverables within timelines.

9. Submission Requirements

Interested individuals or institution should submit electronic copies of the following:

- Cover letter;
- Proposal with financial details (including travel to the project site) and proposed timeline; and
- Company profile and qualifications of team members (if institution) or curriculum vitae (if individual).

Address all cover letter and proposals to:

Dr Rabindra Abeyasinghe

WHO Representative to the Philippines

Ground Floor, Building 3, Department of Health San Lazaro Compound

Rizal Avenue, Sta Cruz, Manila

Please submit the electronic copy of the cover letter and proposals with the title **Technical Assistance to conduct assessment of the Philhealth accreditation status of the birthing facilities and hospitals for each of the SNI Phase 2 (SNIP 2) Project Areas** to wpplwr@who.int. Only shortlisted applicants will be contacted by WHO Philippines.

Deadline of submission of application is on **25 August 2021**.