

CALL FOR PROPOSAL

Technical Assistance to Develop the Electronic Application of Facility Readiness Service Availability Assessment (FReSAA) Tool.



World Health Organization

Representative Office
for the Philippines

1. Summary

The World Health Organization Philippines is looking for an individual or institution contractual partner who will provide technical assistance for developing a computer (digital) application of the Facility Readiness and Essential Services Availability Assessment (FRESAA) tool.

The proposals are due by 30 April 2021.

2. Background

The World Health Organization Country Office, Philippines is currently implementing the Subnational Initiative Project (SNIP), Phase 2 in collaboration with the Philippines Department of Health (DOH) and the Center for Health and Development of Regions Caraga, Davao, and Western Visayas, with funding support from the Korean International Cooperation Agency (KOICA), Philippines.

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; supported communities to develop effective approaches to essential health services for RMNCAH, strengthened governance and management for the responsiveness of HCPN, and sustained and scaled up the initial gains in Region XI from the Subnational-Initiative Phase 1 Project.

With the advent of the Philippine Health Agenda (PHA) 2016-2022 under the Duterte Administration, which was unveiled in December 2016, renewed directions were set for the Philippine healthcare system that aims to attain health-related Sustainable Development Goals (SDGs) by ensuring the best health outcomes for all, financial-risk protection of its population, and a responsive health care delivery system. The PHA also expressed the deliberate attempt to provide the three guarantees of the health system, namely: (1) availability of health services and interventions across all life stages and against the triple burden of disease; (2) access to health services and interventions through functional service delivery networks (SDN); and (3) financial freedom through Universal Health Insurance.

In August 2017, Administrative Order 2017-0014 was released outlining the Framework for Redefining Service Delivery Networks (SDN). However, it was identified that an activity crucial to the establishment of SDN is facility and service mapping. Furthermore, Performance Governance System (PGS), under the FOURmula 1 Plus Strategy of the newly appointed Health Secretary Francisco Duque III, highlights the importance of these activities.

In line with these thrusts, in 2018, the Maternal Newborn Child Health and Nutrition (MNCHN) program of Davao Center for Health and Development XI with the technical support from the World Health Organization (WHO) through the Subnational Initiative Project, Phase 1, created the *MNCHN Facility Readiness and Service Availability Assessment (FRESAA) tool, which now will be renamed Facility Readiness and ESSENTIAL Services Assessment Tool*, since the assessment will evaluate the very basic or essential human resource, equipment, supplies, distance and structure requirements for providing health services. The tool will assess the availability and readiness of services among primary care facilities in the region. Service Availability refers to the inventory of services in a health facility that is made available and accessible to the public. This pertains to the physical access to health facilities and services in a well-defined geographic cluster, while Service Readiness refers to the preparedness and capacity of the facility to provide quality health services based on a set of criteria as defined in the regional metadata of indicators and other instruments available from the regional office. Service Readiness will assess the readiness of the present written guidelines, trained staff, equipment, medicines, commodities, and diagnostics in the facility.

Through the FRESAA tool, primary health care facility of the region will be mapped out in preparation for the Service Delivery Network (SDN) or now called the Health Care Provider Network (HCPN). This has been implemented through a paper-based mechanism in 2018 through 2019 and it took a long period for conducting to collation and analysis of inputs. This is the reason why this proposed undertaking will *aim to develop a digitalized version* of the paper based FRESAA tool. With a digital version time and effort will be more spent efficiently with a more effective result.

3. Timeline

This implementation timeline for the consultancy is from **15 May to 25 October 2021**.

4. Place of Assignment

Davao, Philippines.

5. Scope of Work

Output 1: Accurate and time-bound, properly costed activities related to the consultancy is identified.

Deliverable 1.1: Work and financial plan with detailed budget and timelines for the full consultancy period.

Deliverable 1.2. Written report on initial review and comments on the paper based FRESAA Tool.

Deliverable 1.3: Comprehensive inception report related to the consultancy.

Output 2: Efficiently and effectively functioning software and operating system of the FRESAA tool is completed.

Deliverable 2.1: Develop the digital version/working system of the FRESAA tool.

Deliverable 2.2: Submit a software for initial use (test application) by CHD XI, supervised by the consultant, within the CHD Office.

Deliverable 2.3: Document and report all system related data including designed code.

Output 3: Actual implementation or use in the field plus post implementation evaluation and monitoring of the digital application of the FRESAA Tool.

Deliverable 3.1: Conduct a field test with guidance of KMITS, WHO and the Consultant, and update the system as needed until it is error free.

Deliverable 3.2: Conduct a training for users, and of the system related programmers/technicians for successful turning over of the software and system.

Output 4: Developed a database where inputs into the assessment are uploaded, analysed and organized into a dashboard.

Deliverable 4.1: Design of a data base collection which will enable analysis of assessment inputs presented in a dashboard.

Deliverable 4.2: TA to CHD 11 in presenting collected data from the field through a dashboard.

Deliverable 4.3: Evaluate overall program in use and adjust the system as needed.

Deliverable 4.4: Submit all technical and financial report after the evaluation and acceptance by CHD XI, of the system.

6. Qualifications

The contractual partner must meet the following qualifications:

Education and Certifications

- Bachelor's Degree in Computer Science, Mathematics, Information System or related field. Familiarity with ICT systems and application is an advantage. Knowledgeable of health information system and universal health coverage (UHC) is an advantage.

Work Experience

- With relevant experience in developing or coding systems and applications of the software. Experience in working with the UN system and knowledge of UN system procedures is an advantage.

Technical Skills and Knowledge

- Knowledge of database design, server administration, database implementation, operating systems, computer essentials and fundamentals, information security, and project management.

Language

- With excellent verbal and written communication skills in English and Filipino, verbal skills of the Bisaya language is of advantage, but not an absolute requirement.

7. Other Requirements

The contractual partner must have no direct or indirect interest in the tobacco industry, alcohol industry, arms dealing or human trafficking.

8. Submission of Requirements

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

- Cover letter;
- Proposal with financial details 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 Develop the Electronic Application of Facility Readiness Service Availability Assessment (FReSAA) Tool** to Mrs Ying Chen (cheny@who.int) and wpphlwr@who.int. Only shortlisted applicants will be contacted by WHO Philippines.

Deadline of submission of application is on **30 April 2021**.