

CALL FOR PROPOSALS

Development of a Blended Training Module for Basic Emergency Obstetric and Newborn Care (BEmONC) Separately for Physicians and for Nurses with Training Operational Details, and post-training evaluation (PTE) Methodology



World Health Organization

Representative Office
for the Philippines

1. Summary

The World Health Organization (WHO) Philippines, in collaboration with the Department of Health- Disease Prevention and Control Bureau is looking for an institution contractual partner to carry out an Agreement for Performance of Work (APW) contract on the development of an online training course on Basic Emergency Obstetric and Newborn Care (BEmONC) separately, for a) physicians and b) nurses, and Post-Training Evaluation (PTE) methodology under the Subnational Initiative Project, Phase 2.

The proposals are due by 29 May 2022.

2. Background

The World Health Organization Philippines Country Office is currently implementing the Subnational Initiative Project (SNIP), Phase 2 in collaboration with the Philippines Department of Health and the Center for Health and Development of Regions Caraga, Davao, and Western Visayas, with funding support from the government of Korea through 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; 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.

One of the supports of the project is the improvement of MNH service delivery which focuses on improving the capacity of the health service providers (HSPs). This is to ensure that the health workers can correctly and confidently use the skills and knowledge in maternal and newborn care in dispensing of their duties in delivering MNH services.

It is for this reason that, World Health Organization under SNI Phase 2 and KOICA, finds it necessary to continue to train health personnel on relevant MNH care knowledge and skills to respond to Obstetrical and Newborn emergencies, including of low-birth-weight babies, thereby reducing morbidity and mortality in these population groups, in its catchment areas especially amidst the occurrence of the protracted COVID-19 pandemic.

3. Timeline

The implementation timeline for the project is from **15 June to 15 October 2022**

4. Place of Assignment

5. Scope of Work

In coordination with WHO Philippines the APW provider is expected to develop an online training module with detailed operational instructions on the implementation on Basic Emergency Obstetric and Newborn Care (BeMONC) for a team of doctor, nurse and midwife, incorporated within, is an extensive course on Essential Intrapartum and Newborn Care (EINC). The module must suit the new normal set-up brought about by the protracted COVID-19 pandemic. This is aimed to enhance the skills of birthing attendants (Doctors, nurses and midwives) in assessing and managing conditions, complications and emergencies related to pregnancy, childbirth, puerperium and newborn care and how to appropriately refer as needed to more equipped or more capable facilities within the health care provider network (HCPN) amidst this pandemic and through the new normal situation. The training module to be developed should also incorporate detailed operational instructions on the implementation of the training of BEmONC.

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

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

Deliverable 1.2: List of references and reference materials for additional readings, partner institutions and persons responsible fully identified and submitted, with the WFP.

Deliverable 1.3: Comprehensive Inception Report.

Output 2. Online training module with detailed operational instruction, for Basic Emergency on Obstetric and Newborn Care (BeMONC) + Essential Intrapartum and Newborn Care (EINC) Teams, developed, complete with post-test per module where participants will be unable to proceed to the next session without hitting a passing mark in that previous session. Online training should be pilot tested in at least 1 online batch. Any comments and feedback from the pilot training reviewed and necessary revisions incorporated

Deliverable 2.1: BEmONC + EINC face-to-face for Teams, classroom type Training transformed into an online course, and pilot tested.

Deliverable 2.2: Documented feedback, comments, and suggestions from virtual participants, with actions taken and revisions undertaken based on the suggestions or feedback

Note: The APW partner to be contracted for this module development should involve BEmONC Trainers from DOH-recognized training centers, **Professional Regulation Commission, and specialty societies** in the development process of the training module, and in the conduct of the online and clinical skills training, of the pilot training.

Participants to the pilot training should include 50% technical experts (BEmONC trainers) , and 50% with basic knowledge of the course.

Output 3. Operational details on the implementation of the eModule, and the clinical skills training part, aligned or designed to suit the “new normal”, or feasible to undertake during situations of pandemics or disasters.

Deliverable 3.1: Post training evaluation design that is designed to be carried out in a way that pathogen transmission is maintained to the lowest if at all, and that can be implemented during any emergency or disaster situation.

Deliverable 3.2: Operational instruction on training implementation with documented feedback or suggestions, with its revision or which is redesigned accordingly.

Note: BEmONC trainers and DOH offices should be consulted and involved in the development of the operational details for a standardized implementation process.

Output 4: Detailed implementation plan/strategies, for a highly acceptable training quality assurance.

Deliverable 4.1: Strategic implementation of the blended learning course, to include process of integration of capacity building per cadre of HSPs (physicians and nurses).

Deliverable 4.2: Process of certification or licensing for centers that will avail of the alternative blended learning course.

Deliverable 4.3: Process of updating the modules of each cadre.

Output 5. Submitted final technical and financial report related to the APW.

Deliverable 5.1: Comprehensive narrative report on what transpired during the development of the online training course, with the pilot test and peer review described in detail. The final technical report should include the problems, issues or gaps encountered and the recommendations and ways forward in the utilization of the product/s.

Deliverable 5.2: Financial report which should include a matrix which describes the proposed budget, actual expenses, any alteration in the budget utilization, percent of discrepancy between proposed budget versus the actual expenditure, per item, and explanations for the difference/discrepancy.

6. Qualifications

The team members of the contractual partner must meet the following qualifications:

Education and Certifications

- Educational Degrees or Certificates on any Allied Medical Field or Course with Postgraduate Diploma in either of: Public Health, Health Systems or Health Development and Management.
- Specialization in any Maternal (Obstetrics, Perinatal Care), Child (Pediatrics, Neonatology, etc) or Family Health is of great advantage.

Work Experience

- At least 5 years work experience as a training consultant, training facilitator, training coordinator, or similar role Previous experience with UN is preferred and experience in collaboration with other International Organization is a plus factor.
- At least 5 years' experience delivering or developing training design, modules, or Manuals.
- At least 3 years cumulative experience of leading or implementing post training evaluation and monitoring.

Technical Skills and Knowledge

- Knowledge and familiarity with WHO and DOH work, relevant policies and operations.
- Excellent skills in editing and reading training manuscripts.
- Contractor should have a team of the following: (1) RMNCAH expert, if he or she is not one herself/himself; (2) Social Marketing expert; (3) Information Technology expert; with at least 3 years in developing videos or online training materials (Module content technology development expert); and (4) Health related training Trainer.

Language

- Expert fluency in English and Tagalog, both oral and written.

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. 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 four (4) 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% 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.

Ethical and Professional Standards

WHO prides itself on a workforce that adheres to the highest ethical and professional standards and that is committed to put the WHO Values Charter into practice.

WHO has zero tolerance towards sexual exploitation and abuse (SEA), sexual harassment and other types of abusive conduct (i.e., discrimination, abuse of authority and harassment). All members of the WHO workforce have a role to play in promoting a safe and respectful workplace and should report to WHO any actual or suspected cases of SEA, sexual harassment, and other types of abusive conduct. To ensure that individuals with a substantiated history of SEA, sexual harassment or other types of abusive conduct are not hired by the Organization, WHO will conduct a background verification of final candidates.

Management of Conflict of Interest

Any interest by an entity (organization/company), expert, or member of the project team that may affect or reasonably be perceived to (1) affect the expert's objectivity and independence in providing advice to WHO related to the conduct of a project, and/or (2) create an unfair competitive advantage for the expert or persons or institutions with whom the expert has financial or interests (such as adult children or siblings, close professional colleagues, administrative unit or department).

World Health Organization (WHO) conflict of interest rules is designed to identify and avoid potentially compromising situations from arising thereby protecting the credibility of the Organization and its normative work. If not identified and appropriately managed such situations could undermine or discount the value of the expert's contribution, and as a consequence, the work in which the expert is involved. Robust management of conflicts of interest not only protects the integrity of WHO and its technical/normative standard-setting processes but also protects the concerned expert and the public interest in general.

Confidentiality Statement

All input from participants and all related documents about the project are confidential and must **NOT** be handed over to third parties. The contractual partner should advise the participants on how to opt-out or withdraw their statement(s) if needed. The DOH and WHO have exclusive ownership of all documents, and only DOH and WHO have the right to disseminate any information outside the agreed project's scope.

9. Submission of Requirements

Interested organizations should submit electronic copies of the following:

- Cover letter;
- Technical Proposal with financial details and proposed timeline; and
- Company profile and qualifications of team

Address all cover letter and proposals to:

Dr Rajendra Prasad Hubraj Yadav

Acting WHO Representative in 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

Development of a Blended Training Module for Basic Emergency Obstetric and Newborn Care (BEmONC) Separately for Physicians and for Nurses with Training Operational Details, and Post-Training Evaluation (PTE) Methodology to Mrs Ying Chen (cheny@who.int) and wpphlwr@who.int Only shortlisted applicants will be contacted by WHO Philippines.

The deadline for submission of the application is on **29 May 2022**.