CALL FOR PROPOSALS

Technical Assistance for Capacity Building on Local Drinking Water Quality Surveillance in Agusan del Sur



1. Summary

The World Health Organization (WHO) Philippines is searching for an institutional or individual partner to provide technical assistance for capacity building on local drinking water surveillance in Agusan del Sur under Agreement Performance of Work (APW).

The proposals are due by 27 February 2023.

2. Background

The World Health Organization (WHO) is supporting the Department of Health (DOH) through the Philippines–WHO Country Cooperation Strategy (2017-2022) that focuses on leaving no one behind and enhancing collaboration for health to move the Philippines towards universal health coverage which is also known as the national shared health vision: All for health towards health for all. Protect Health, which is one of the strategic priorities under this collaboration, aims to respond to threats to public health from natural hazards, environmental threats, and emerging infectious diseases. To tackle these threats, the project entitled "Strengthening the quality and sustainability of water, sanitation, and hygiene (WASH) services, including health care facilities" was started, with a duration of four (4) years (2018-2022) and with funding support from the Australian Government through the Department of Foreign Affairs and Trade (DFAT). Specifically, this project aims to improve the sustainability of the drinking-water safety approach ensuring that only quality water is supplied from source to consumers. In addition, WHO supports WASH for Birthing Facilities - a component of the Sub-National Initiatives Project Phase 2 (SNIP2) funded by the Korean International Cooperation Agency (KOICA).

Recognizing the crucial role of safe drinking water on health, economic, and social development at the local level, technical assistance for capacity building on Local Drinking Water Surveillance is needed to improve the sustainability of quality drinking water.

The objective of the technical assistance are as follows:

General Objective:

The overall objective of the technical assistance is to conduct on-site face-to-face training on Local Drinking Water Quality Surveillance.

Specific Objective:

- a. To introduce to the LGUs the regulatory framework concerning drinking-water quality surveillance.
- b. To orient LGUs in conducting independent surveillance of drinking-water quality.
- c. To capacitate the LGUs on assembling a Local Drinking-Water Quality Monitoring Committee (LDWQMC) that will monitor and audit drinking-water quality.

3. Timeline

The implementation timeline for the training is from 1 to 31 March 2023.

4. Place of Assignment

Agusan del Sur, Philippines.

5. Scope of Work

In collaboration with the Provincial Health Office (PHO), CHD-CARAGA, and under the supervision of the WHO/PHL Technical Officer for Health and Environment, the Contractual Partner/Institution/Organization shall perform the following tasks/responsibilities:

Output 1: Inception Report

Deliverable 1.1: The inception report shall contain a work plan with a GANTT chart of activities, specific methodologies, identified offices to be involved, locations of activities, materials needed, and tentative dates

Deliverable 1.2: Discuss the inception report with PHO, DOH-CARAGA, and WHO before finalization.

Output 2: Capacity building on Local Drinking Water Quality Surveillance

Deliverable 2.1: Organize logistics, prepare training design and program, and facilitate the invitation of participants and resource persons for the conduct of training on local drinking water surveillance based on the Joint DOH-DILG Administrative Order on Local Drinking Water Quality Surveillance. Target participants are maximum of forty (40) individuals from CHD-CARAGA, PHO and municipalities/cities of Agusan del Sur.

Deliverable 2.2: Conduct the training (onsite) in Agusan del Sur or in any venue in CARAGA Region with a site visit, pre-test and post-test evaluation.

Deliverable 2.3: Produce photographic and written documentation (including monitoring of attendance consolidated per municipality/city or office) of the training.

Output 3: Final Report

Deliverable 3.1: Submit the Final Technical Report including the final version of Output 2, after responding to comments from WHO, DOH-CARAGA, PHO and partners.

Deliverable 3.2: Final financial report.

6. Qualifications

The contractual partner must fulfil the following qualifications:

Education and Certifications:

• If individual: A graduate of any environmental health, environmental science, public health, environmental and sanitary engineering, or equivalent courses.

 If institution: Team leader has post-graduate degree in any environmental health, environmental science, public health, environmental and sanitary engineering, or equivalent courses.

Experience required:

If individual or institution:

- Preferably with a minimum of 5 years consultancy, project, program, or international
 experience on water safety plan, drinking-water quality surveillance, water and sanitation
 health facility improvement tool, and capacity building
- Familiar with the works of the World Health Organization, Department of Health, and Local Government Units in the areas of water safety plan, drinking-water quality surveillance, and water and sanitation health facility improvement tool
- The current workload will not hinder the progress of the engagement

Skills / Technical skills and knowledge:

- Preferably with environmental or public health background with a good understanding of WASH, drinking-water quality, and water safety plan.
- With skills in conducting training activities.

Language requirements:

Excellent English communication skills (written and oral).

7. Other requirements

7.1 The Contractual Partner shall:

- a. Accept full responsibility for the services to be performed under this TOR including integrity and soundness of the design of the outputs:
- b. Seek DOH consent prior to the conduct of any activity related to the project. DOH shall always be kept in the loop in terms of all communications made during and relative to the project.
- c. Not at any time communicate to any person or entity any information disclosed thereto for the purpose of the Services, nor shall make public any information as to the recommendations formulated in the course of or as a result of the Services, except with the prior written consent of CHD-CARAGA or PHO;

7.2 The Provincial Health Office shall:

- a. Act as the principal client of the TA Provider on behalf of the DOH;
- b. Prepare PHO Personnel Orders for the purpose of identifying the participants who shall be enrolled in the courses;
- c. Oversee the conduct of activities, as well as monitor the progress of the project;
- d. Ensure and facilitate the provision of technical assistance in the conduct of all activities for the project;
- e. Be responsible for the approval of the projects, reports, plan of activities, programs, and documentation submitted by the TA Provider;
- f. Make available relevant references, all existing documents, and/or other necessary information pertaining to the project (e.g., workshop plan, concept note), and, whenever practicable, PHO shall provide assistance to the TA Provider in securing

- data from concerned offices/units.
- g. Ensure that the objectives of the project are achieved;
- h. Ensure compliance and adherence to the guidelines set forth by the PHO pertinent to this project;
- i. In consultation with the WHO, identify and send invitations to training participants.
- j. Ensure the timely submission of reports, outputs, and other deliverables stated in the TOR; and
- k. Following the Minimum Public Health Standards (MPHS), discussions, meetings, and consultations may be conducted via acceptable platforms.

8. Proprietary and intellectual property rights

The WHO shall have the sole proprietary and intellectual property rights of all outputs/ deliverables/ reports/ documents and other files, including raw data gathered and used for and during the project, compiled or prepared in the course of the performance of the services supplied by the TA provider, as stated herein.

9. Data Privacy and Confidentiality

- The TA Provider shall be bound to the confidentiality of data and information accessed during the course of engagement and shall be liable for any breach. The results, products and reports of this APW are to be treated as confidential and must not be handed over to third parties. The WHO have exclusive ownership of the reports and reserve the right to further disseminate relevant information. The contractual partner will also provide disclaimer on the reports: This document has been produced with the assistance of the World Health Organization. The contents of this publication are the sole responsibility of the author, and does not necessarily reflect the opinions, recommendations, or advice of the World Health Organization.
- The TA provider must have no direct or indirect interest in the tobacco or e-cigarette industry, alcohol industry, arms dealing, breast milk substitutes, or human trafficking.

10. Contract Time

The work to be done under this contract shall be the **Technical Assistance for Capacity Building on Local Drinking Water Quality Surveillance in Agusan del Sur** as set out in the Terms of Reference. The contract will be completed 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 of 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.

11. Management of Conflict of Interest

Any interest by entity (individual/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).

WHO's conflict of interest rules are designed to identify and avoid potentially compromising situations from arising thereby protecting the credibility of the Organization and of its normative work. If not identified and appropriately managed such situations could undermine or discount the value of expert's contribution, and as 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.

12. 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 substantiated history of SEA, sexual harassment or other types of abusive conducts are not hired by the Organization, WHO will conduct a background verification of final candidates.

13. Submission Requirements

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

- Cover letter
- Proposal with financial details (itemized) and proposed timeline
- Company profile and qualifications of team members (if institution) or curriculum vitae (if individual)

Address all cover letter and proposals to:

Officer-in-Charge
Office of the 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 proposals with the title **Technical Assistance for Capacity Building on Local Drinking Water Quality Surveillance in Agusan del Sur** under Agreement Performance of Work (APW) to Mr Danilo Ramon Luzentales (luzentalesd@who.int) and to wpphlwr@who.int. Only shortlisted proposals will be contacted by WHO Philippines.

The deadline for submission of proposals is on 27 February 2023.