CALL FOR PROPOSALS
Data Analysis for COVID-19 Emergency Surveillance and Response

World Health Organization
Representative Office for the Philippines

1. Summary

The World Health Organization – Country Office in the Philippines (WCO PHL) is looking for an institutional or individual contractual partner to provide technical support to the ongoing COVID-19 response activities in the Philippines, through an Agreement for Performance of Work (APW) contract.

The proposals are due by 10 September 2022.

2. Background

Since the first notification of a cluster of pneumonia of unknown aetiology in Wuhan City, Hubei Province, China, all levels of WHO have been working closely with the Government of China through the National Health Commission. We note and commend the rapid identification and response to the unusual cluster and subsequent detection and isolation of Coronavirus Disease 2019 (COVID-19) by Chinese authorities. WHO teams have been working non-stop to develop the interim guidance and facilitate meeting obligations under the International Health Regulations (2005). Since, early on, the WHO Western Pacific Regional Office (WPRO) has been immersed in preparedness and response activities in China and neighbouring countries and areas and will continue to do so until the threat posed by COVID-19 is under control.

As cases continue to be reported from new areas, additional preparedness and response efforts are required in the Region. To cope with the situation, the emergency team in the WPRO is being strengthened, in order to provide technical assistance to Member States for preparedness and response efforts, including in the areas of epidemiology, clinical management and public health interventions. The COVID-19 response operations i n the Region are expected to continue for several months.

Given the rapidly evolving COVID 19 situation and strict containment measures, additional technical support is needed at the Department of Health-Epidemiology Bureau (DOH-EB) and WHO Philippine Country Office to respond to epidemiological surveillance needs for COVID-19 as well as ensuring continuity of other essential health services.

3. Timeline

The implementation timeline for the project is from 15 September 2022 to 15 March 2023.

4. Place of Assignment

Can work remotely on an area with good internet access.

5. Scope of Work

Under the overall supervision of the COVID-19 Response Incident Manager (IM) and the direct supervision of the Information and Planning Pillar Lead, the Contractual Partner shall perform the following activities and submit agreed deliverables in a timely manner:

- Provide support in preparing epidemiological outputs from dashboards such as powerpoint presentations and briefing notes to assist in planning and decision-making of the different stakeholders involved in the COVID-19 response;
- To provide technical support and guidance to strengthen the surveillance system for monitoring of trends of COVID-19 cases and health system capacity through the development and updating of Regional dashboards;
- To provide assistance in the analysis of relevant epidemiological information in coordination with the COVID-19 Incident Management Team (IMT), INP Pillar;
- To assist in preparing and disseminating COVID-19 situational updates, technical documents and assessments to key decision-makers and to the national health authorities and contribute to
  risk communications;
- All-cause mortality analysis dashboard;
- To update timely the COVID-19 Laboratory Dashboard in Assessing Testing Capacity, Outputs and Utilization Rates; and
- To perform any other event-related duties, as required by the WHO supervisors

Expected outputs:

a. Daily analysis and bi-weekly situation reports (Sitreps)
b. Final report

CONFIDENTIALITY The results, products and reports of this APW are to be treated as confidential and must not be handed over to third parties. The DOH and WHO have the 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.

6. Contract Time

The work to be done under this contract shall be Data Analysis for COVID-19 Emergency Surveillance and Response as set out in the Terms of Reference. The contract will be completed in not more than 6 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 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 also 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.

7. Qualifications

The contractual partner or institution's members must fulfil the following qualifications:

Qualifications required:

- Essential: University degree in any relevant field of science or public health
- Desirable: Postgraduate studies in public health

Experience required:

- Essential: Minimum 3 years' experience working in scientific research, public health or relevant field
- Desirable: Experience with the UN system or other international organizations is an advantage.

Skills / Technical skills and knowledge:

- Essential: Expert knowledge on technical writing, data management, and analytics
- Desirable: Work experience in the area of disease outbreak, surveillance and response

Language Requirement:

- Written and spoken fluency in English is essential. Working knowledge of other UN languages is an advantage.

Competencies

- Communicating in a credible, effective and culturally competent way.
- Moving forward in a changing environment.
- Fostering integration and teamwork.
- Producing results.

The contractor shall have no direct or indirect involvement or interest, in any form, in arms dealing, drugs, alcohol industry, tobacco industry or human trafficking. The contractor and personnel involved in this work shall have no conflicts of interest in relation to the work being undertaken.

8. 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.

9. 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 conduct are not hired by the Organization, WHO will conduct a background verification of final candidates.

10. Submission Requirements

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

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

Address all proposals to:

Dr Graham Harrison
Officer-in Charge
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 proposals with the title, **Data Analysis for COVID-19 Emergency Surveillance and Response** to Mrs Ying Chen (cheny@who.int) with a copy to wpphlwr@who.int. Only shortlisted applicants will be contacted by WHO Philippines.

The deadline of submission of proposals is on **10 September 2022.**