CALL FOR PROPOSAL

Contractual Partner for the Development of the Universal Health Care Modular Report on Tuberculosis



1. Summary

The World Health Organization (WHO) Philippines is looking for an individual or institutional contractual partner to support the development of the Universal Health Care (UHC) modular report on Tuberculosis (TB) Report under an Agreement for Performance of Work (APW) contract.

The proposals are due by 12 July 2022.

2. Background

The Disease Prevention and Control Bureau (DPCB) of the Department of Health (DOH) is advancing its plans to develop a monitoring, evaluation, and reporting system that functions under the concept of integrated health care, and which would aim at presenting an overview and trends of priority public health conditions and events. As this plan moves forward, it is critical to continue to highlight the status and trends of priority conditions or diseases in a modular approach, timing the release of each module with the reporting needs of the country. Individual annual report modules (e.g. modules on TB, HIV, etc) can therefore be developed in the context of Universal Health Care, highlighting, where possible, coverage indicators for integration of service delivery or bridging any collaborative activities. The modular approach for developing annual reports for priority conditions or diseases would allow to highlight progress, but also reflect any gaps that would require immediate attention by DPCB and other stakeholders, without diluting any efforts.

Timely bridging of data and action is critical to achieving the targets and milestones set to end the tuberculosis (TB) epidemic. The annual TB Report provides a comprehensive and up-to-date assessment of the TB epidemic, and of progress; it is organized as a consolidation and analysis of the core TB program indicators, highlighting data from cohorts in a specific timeframe. The report is written in a technical language to help drive national and sub-national response by program managers at different levels (national, regional, local) as well as further informing implementing partners, academic sector, researchers, and other stakeholders.

3. Timeline

The implementation timeline for the project is from **18 July to 26 August 2022** (in time for the release of the report during the August Lung Month Celebration).

4. Place of Assignment

Manila, Philippines or can be conducted remotely.

5. Scope of Work

In collaboration with the DOH Disease Prevention and Control Bureau (DPCB) Infectious Disease/Adult Health Division, and the Data Management and Partnership Division, and under the supervision and guidance of the Technical Officer from the WHO Country Office for the Philippines, the contractual partner will be responsible for the following tasks and activities:

Output/s and Deliverables

Main Output:

- Develop the UHC modular report on TB, presenting the following sections or chapters:
 (i) burden of disease; (ii) screening; (iii) testing and diagnosis; (iv) treatment outcomes;
 (v) prevention; as well as (vi) regional profiles.
- The 2022 report must be drafted following the structure used in the report published in 2021(Link: https://ntp.doh.gov.ph/download/ntp-annual-report-2021/)

Specific Deliverables:

<u>Deliverable 1</u>: Discuss the development plan and understand the needs of DPCB and the requirements of the annual reports

<u>Deliverable 2:</u> Conduct data analysis and interpret the results on i) burden of disease; (ii) screening; (iii) testing and diagnosis; (iv) treatment outcomes; (v) prevention; as well as (vi) required summaries of regional profiles

<u>Deliverable 3:</u> Develop a UHC modular report on TB for the Philippines for 2021 data, documenting and including visualizations of key epidemiological data, including progress against the targets, at the national and subnational levels, in close consultation with the DPCB and WHO

<u>Sub-deliverable 3.1:</u> Share a preliminary version of the report and conduct edits following feedback from the DPCB Divisions on Adult Health Division and the Droplet and Airborne Transmission Diseases as well as WHO

Sub-deliverable 3.2: Submit a final version of the UHC modular report on TB

Deliverable 4: A final cleaned dataset for further analysis, including:

Sub-deliverable 4.1: List of data checks

<u>Sub-deliverable 4.2:</u> Data cleaned within the information system

Sub-deliverable 4.3: Clean dataset for further analysis

<u>Deliverable 5:</u> Develop a slide set, including graphs and summarizing key findings (maximum 15-20 slides).

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. Documents, other information and/or statistics that are not publicly available and have been provided to the contractor for the purposes of undertaking this work may not be published, further analysed, disclosed to third parties, or used for any other purpose even after the end of the contract.

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.

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).

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 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.

6. Completion of Work

The work to be done under this contract shall be a Contractual Partner to support the Development of the Universal Health Care Modular Report on Tuberculosis as set out in the Terms of Reference. The contract shall be completed in not more than 1.5 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 an acknowledgment 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 fulfill the following educational qualifications and work experience:

Education of staff involved:

- Essential: A graduate degree in epidemiology, public health, health informatics, or other relevant disciplines.
- Desirable: Post-Graduate or Doctorate degree in statistics

Experience required:

- Essential: At least 3 years of relevant experience in public health. Experience in the area of communicable diseases and public health reporting.
- Desirable: Experience in conducting a TB epidemiological review mission or writing of public health policy briefs.

Technical Skills and Knowledge:

Essential:

- In-depth technical knowledge and skills related to data analytics and reporting.
- Proficiency in using MS Excel with various graphic techniques and pivot table.
- Proven ability to work and produce high-quality results under pressure in critical situations.

Desirable:

 Proficiency in the use of STATA, SPSS, R or other statistical packages for data analysis an asset.

Other skills:

- Experience of previously engaging with government officials; diplomacy skills and other soft skills.
- Good writing skills.
- Excellent communication skills (in English)

Language requirements:

Written and spoken fluency in English is essential

Competencies:

Technical competence in the field of communicable diseases

- Skills to respect and promote individual and cultural difference
- Capability of working harmoniously with a positive attitude at work

Other requirements:

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.

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.

8. 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 an individual)
- Link to a portfolio of previous work relevant to the TOR (uploaded on file-sharing services such as Dropbox or Google Drive)

Address all proposals to:

Mr Lluis Vinals Torres

Officer-in-Charge 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 documents with the title, **Contractual Partner for the Development of the Universal Health Care Modular Report on Tuberculosis** to Mrs Ying Chen (cheny@who.int) and wpphlwr@who.int. Only shortlisted applicants will be contacted by WHO Philippines.

Deadline of submission of proposals is on 12 July 2022.