

CALL FOR PROPOSAL

Technical Assistance to assess implementation of the Philippines' National Objectives for Health 2017-2022



World Health Organization

Representative Office
for the Philippines

1. Summary

The World Health Organization (WHO) Philippines is searching for an institutional partner or individual to provide technical assistance to assess implementation of the National Objectives for Health 2017-2022 (NOH), based on the indicators of the NOH.

The objectives of this technical assistance are:

1. To review the set goals, indicators and targets and report the accomplishments of the NOH 2017-2022
2. To identify program implementation gaps and constraints and propose the essential interventions and strategies to address the problems.
3. To improve the process of formulating the succeeding NOH by reviewing the relevance and suitability of the current indicators.

Proposals are due by **15 January 2022**.

2. Background

The National Objectives for Health (NOH) 2017-2022 is the medium-term strategic plan and roadmap for health of the Philippines. It specifies the objectives, targets, and broad strategies in the FOURmula One Plus for Health strategic framework and implementation arrangement. The development of the plan is led by the Department of Health's Health Policy Development and Planning Bureau in consultation with key stakeholders. The NOH is published every administration and is currently in its 3rd edition. The NOH aims to guide how the national government, local governments, and all other health partners, will prioritize its interventions, allocate its resources, and collaborate in order to contribute to the attainment of Universal Health Care.

The NOH includes fifty-five (55) performance indicators to measure its implementation. Each indicator has its baseline and end-term target. These indicators are consistent with the Philippines commitments in the Sustainable Development Goals 2030 and the macro development plan of the government or the Philippine Development Plan 2017-2022. As a practice of the Department of Health, the current NOH will be subjected to an external assessment, the result of which will provide the basis for the updating of the NOH 2023-2028 (4th edition), for the incoming administration later in 2022.

3. Timeline

The implementation timeline for the work is from **20 January 2022 to no later than 30 April 2022**.

4. Place of Assignment

Manila, Philippines.

5. Scope of Work

Under the supervision of the Health Systems Coordinator, WHO Country Office in the Philippines, the contractual partner shall undertake the following work in close collaboration with the Health Policy Development and Planning Bureau, Department of Health, Philippines.

Deliverables:

Deliverable 1: Inception report (within 10 days of the start of the contract): Develop an inception report that includes a work plan with a Gantt chart of activities, and a budget. The report should include a clear plan for interviews/engagement of relevant parties, data that is needed, and identify points where DOH assistance may be needed to engage/gain access to specific parties or sources of data.

Deliverable 2: Draft Report by 15 April 2022

Report on the implementation of the National Objectives of Health 2017-2022, including:

- Progress on the three health system goals based on the NOH 2017-2022 indicators, including:
 - Status of the health sector in attaining its three health system goals based on an assessment of progress against the NOH 2017-2022 indicators, including
 - Indicators where there are baselines presented in the original NOH, and
 - Indicators which were not originally baselined in the published NOH, but for which data is now available
 - Analysis that supplements the findings on the status of the health sector in attaining its three NOH health system goals and indicators, including an analysis of program implementation gaps and constraints and proposed essential interventions and strategies to address the problems. This analysis would assess programs within the scope of the NOH/or its indicators but is not intended to be a full evaluation of individual programmes but rather on its macro policies and resources allocation, and behaviour of stakeholders.
- Assessment of the ongoing relevance/usefulness/issues of the current NOH indicators in demonstrating progress towards the three health system goals. This includes all indicators, including those for which no definition/baseline has been able to be established so far (for these ones, the work would assess whether it is worth pursuing development of the methodology for that indicator (or one similar) if it really would demonstrate progress on an essential part of the health system that would otherwise not be able to be monitored in some other way). Through key informant/focus group discussions the contractor may also identify some alternative indicators, although the aim is not necessarily to increase the number of indicators but to streamline if possible.
- Utilizing the above assessments, recommend improvements in the process of formulating the succeeding NOH
- Annexes as relevant to fully/carefully document all sources of data and information, including meetings, focus group discussions, key informant interviews, etc

Deliverable 3: Final report (by 30 April)

- Following feedback on the draft report, to revise and submit the final report to WHO
- Together with the final report, submit required documentation to support processing of payments according to deliverables in the contract
- Participate in any dissemination activities agreed with DOH and WHO (timeframe for these activities may be after 30 April).

Method(s) to carry out the activities:

- Form a team of qualified and competent individuals with defined roles and tasks as appropriate to fulfil the objectives and deliverables
- Qualitative and quantitative cross-sectional analysis of the performance of different health programs based on the strategies and indicators enumerated in the NOH 2017-2022, through a comprehensive review of the literature and use of available documents/data (primary quantitative data collection for indicators is not expected):
 - Quantitative assessment largely involves a comprehensive review of the literature and the use of routinely collected data, surveys, censuses, researches, reports covering the years 2017-2022 or earlier – where needed, access to such data will be facilitated by the Department of Health.
 - The quantitative assessment will be supplemented by qualitative data generated through focus group discussions, key informant interviews and consultative meetings with key stakeholders, and from publications and administrative reports coming from relevant agencies
- Contractor will largely be responsible for scheduling/organising meetings, focus group discussions, key informant interviews, consultative meetings, etc – if there are situations where it may be necessary for the Department of Health to facilitate/engage with other parties to enable access by the contractor, these matters will be discussed following submission of the inception report and as may be necessary in order to have regular discussions on the progress of the project; all sources of data and information, including meetings, focus group discussions, etc should be fully documented and, where relevant, carefully referenced.
- Write up the relevant reports, providing a draft for review before finalising.
- Present final deliverables to WHO and the Department of Health.

6. Qualifications and experience

The individual contractual partner or institution's members must fulfil the following educational qualifications and work experience:

Education and Certifications

- Essential: Master's level university degree in health sciences- related field from a university recognized in the International Association of Universities' Worldwide Database of Higher Education Institutions, Systems and Credentials (WHED).
- Desirable: Postgraduate qualification or training in public health, health policy and/or health planning and management or program evaluation.

Work Experience

- At least five years of relevant work experience on health policy development, health policy research, and/or health program planning and evaluation. Demonstrable

experience in assessing or evaluating program implementation would be an advantage.

Team qualifications

- The team proposed must possess relevant qualifications and have demonstrable experience for this work.

Language

- The team leader and all team members for an institutional contractor must have excellent English communication skills (writing and speaking).
- Ability to communicate fluently in Tagalog would be an advantage.

7. Contract Time

The work to be done under this contract shall be to provide Technical Assistance to assess implementation of the National Objectives for Health 2017-2022 as set out in the Terms of Reference. The contract will be completed in not more than 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 of 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.

8. Other Requirements

The contractor (both the institution and any individuals engaged on this work) 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.

9. Submission Requirements

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

- Cover letter
- Proposal with financial details, broken down by the main deliverables and proposed timeline
- Company profile and qualifications of team members (if institution) or curriculum vitae (if individual)

Address all cover letters 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 proposals with the title “**Technical Assistance to assess implementation of the National Objectives for Health 2017-2022**” to

Mrs Ying Chen (cheny@who.int) and to wpphlwr@who.int. Only shortlisted applicants will be contacted by WHO Philippines.

Deadline of submission of proposals is on **15 January 2022**.