



REQUEST FOR PROPOSAL

Please quote RFP# **P-GEO- 9139070-003**
in all future correspondences on this

Date: 17 April 2018

UNICEF Tbilisi requests proposals for **Development Oriented Primary Health Care service on a pilot basis in Adjara region and providing recommendations to the Government on feasibility and appropriateness of its extension country-wide**

Submit your proposal with unit price(s) in **GEL** together with vendor registration form, as instructed, **on or before closing time.**

(a) **Note that failure to submit proposal in GEL, or in accordance with the requested terms, will result in automatic invalidation of your application.**

1. In addition, please note that:

- (a) UNICEF and its implementing partners are VAT exempt. Kindly ensure that all price(s) quoted in GEL are excluding VAT;
- (b) For transparency of the process we require that the proposals are received in **the sealed form** (sealed envelopes);
- (c) It is important that you read all of the provisions, to ensure that you understand UNICEF's requirements and can submit an offer in compliance with them. This includes submission of ALL documents requested. **NOTE that your proposals should be submitted in English using the enclosed format. Proposals received in any other manner or after the indicated above deadline will be INVALIDATED.**
- (d) Evaluation criteria will be based on reliability of the organization, suggested methodology and approach, best price and proposal terms. The ratio between the technical and price criteria is 70:30.
- (e) In case of pre-payment request, bank guarantee letter should be submitted

SUBMISSION TERMS:

In order to be considered for an award, your technical and price proposals should be hand delivered in separate sealed envelopes and placed in the locked Tender Box located at the Ground Floor of UN House, 9 Eristavi Street, Vake, Tbilisi 0179, Georgia NO LATER than **15:00 of 01 May 2018.**

While the price proposals remain sealed until the technical evaluation is completed, the technical envelopes will be opened immediately after the closing time and forwarded to the unit designated to manage the selection process. One representative from each bidding company may attend the opening process.

The sealed envelopes should be labeled as follows: (1) P-GEO- 9139070-003 Technical Proposal and (2) P-GEO- 9139070-003 - Price Proposal.

Technical Proposal should include:

Organizational profile and description of its activity, presentation of the organization (address, contact person, experience, partners, portfolio); Documents certifying the requested (In TOR) qualification requirements; CV-s of the key personnel indication of their tasks; detailed methodology/approach to achieve the deliverables; proposed timeline and milestones

Price Proposal should include: Cover letter; proposed budget in GEL

Respectfully,
Vakhtang Akhaladze
Operations Manager, UNICEF Tbilisi

Terms of Reference

Development Oriented Primary Health Care service on a pilot basis in Adjara region and providing recommendations to the Government on feasibility and appropriateness of its extension country-wide

1. Background

Significant progress has been made in the past 10 years in reducing child mortality in Georgia. This progress is remarkable by any metric but as the global health community began considering the transition from the Millennium Development Goals (MDGs) to the Sustainable Development Goals (SDGs) it became increasingly clear that more than simply survival was at stake. Children need to survive, but surviving infants also need to develop and thrive.

For the first time ever, Early Childhood Development (ECD) became part of the UN's global development goals. This recognizes the crucial importance of early childhood as part of a transformative global agenda.

Not long ago early childhood development was considered to be only about education. However, it takes more than education for a child's brain to develop. A developing brain needs multiple inputs – health, nurturing care, protection, and enrichment. Incorporating these multiple inputs into early childhood development efforts can foster the developmental potential of young children and help drive the transformation to be achieved over the next 15 years.

Considering the above, UNICEF is going to support the Government of Georgia in developing a holistic ECD approach in Georgia. For the beginning, UNICEF will support the development and set-up, on a pilot bases, of an ECD service that aims at identifying child development delays or risks factors at the Primary Health Care level as early as possible - through the home visiting approach - and at supporting families with young children to cope with risk factors, build on existing protective factors and involve other services when necessary to provide additional social, psychosocial or medical services, thus linking health and social services.

Identification of developmental disorders is critical to the well-being of children and their families. It is an integral function of the primary care and an appropriate responsibility of all pediatric health care professionals.

UNICEF has presented the respective ECD service concept to all relevant government stakeholders in Georgia and obtained green light for its piloting. The agreed model is based on specifically trained PHC professionals able to identify developmental risk factors while observing the child and family environment during home visits. The process of identifying children who might be at risk of developmental delays will be incorporated at every preventive care visit at the clinic as well (e.g. during immunization sessions).

However, the role of PHC professionals will not be limited to identification of risk and protective factors, but will also include a combination of information and counselling. The PHC professionals will be monitoring young children's growth and development but at the same time will be assessing the responsiveness of care provided to a child, the quality of stimulation and protection from harm, mental health of caregivers, environmental health, social determinants etc. Children identified at risk for developmental, behavioral or social delays and/or with developmental disabilities will be referred to the social system for further follow up.

The proposed ECD service model is divided into three levels: Level I – Village/Community level - provides universal access to developmental surveillance and parent education for families with young children (0-6 years of age); and offers referrals whenever a potential developmental problem is noted. Level II – District level - serves as a referral point for rural children with suspected developmental

delays. District pediatricians trained within the frame of the pilot project further connect the families to additional resources and interventions. Any positive screens of children that will require further evaluation and subsequent care, will be referred to Level III for specialized care (e.g. linked to early intervention services and enrolled in other social programs offered by the State).

The pilot project suggests integrating child development screening services into primary care efficiently at low cost, while ensuring thorough coordination of care. The continuum of developmental care throughout the lifecycle can only be ensured by establishing robust linkages between the health and social systems. Having this in mind, UNICEF has supported the development of 2 electronic platforms:

- The 0-6 child growth and development monitoring electronic module (collecting child development related predefined variables in real-time that is entered in the tablets by PHC doctors and nurses and then forwarded to the database), and
- an electronic management information system for social services (reflecting all business processes related to social services for families, mothers and children).

These platforms enable an information exchange between the health and social systems and thus, create a solid basis for tracking every child's developmental trajectory in Georgia with follow up analyses and informed decision making.

Currently, UNICEF is in the process of developing the web application for the 0-6 child growth and development monitoring electronic module. Upon accomplishment, it will be installed on the tablets and distributed to the rural PHC teams (doctor & nurse) for the implementation of the child development surveillance. In the framework of this pilot project UNICEF has already procured 105 tablets that are envisaged for distribution in the pilot region (Adjara) during 2018.

Given the nature of the pilot (introduction of new practice/service), the actual implementation can only start when the involved professionals (rural PHC teams, district pediatricians etc.) are well trained and ready to deliver the quality child development services. Since, the data collection via tablets is going to become one of the main responsibilities of the involved professionals, this topic should also be fully covered by the training curriculum. UNICEF will connect the selected organization with the company that has developed the above electronic platforms to obtain detailed information.

Once, the training is over, the application of new service delivery model will commence in the pilot sites. The newly trained professionals will benefit from supportive supervision to be established by the project. The supportive supervision is expected to promote dialogue and constructive feedback to help staff and PHC facilities improve their performance in pursuit of the established standards. It will also set goals for growth and development. The supportive supervision is requested to apply an approach that promotes mentorship based on practice observation, joint problem-solving, on-job training and communication between the health teams. It should also identify gaps in knowledge and practical skills. The results of the supportive supervision will identify areas and topics for additional and/or refreshment trainings and in general, will inform the results of the pilot.

The final evaluation of the project is expected to serve as a justification for the country-wide scale up of the proposed service delivery model. At this stage, however, only the necessary child growth and development surveillance tools have been developed by UNICEF. In the next stage, the trainings of PHC professionals will need to be carried out and the implementation of the pilot will need to be started.

For this purpose, UNICEF is recruiting a local partner organization that is best positioned to manage the pilot project.

2. Objectives

Implement the pilot project "Early Childhood Development Oriented Primary Health Care" in the Adjara Region and provide recommendations to the Government on the feasibility and appropriateness of its

country-wide scale-up.

3. Scope of Work – Key Tasks

The organization is requested:

- To act as a facilitator and catalyst for early childhood development and care in the Adjara Region. This entails nurturing a team of champions for the project among policymakers, district officials, community leaders, grassroots organizations and health care workers by organizing discussions, consultations, debriefs etc.;
- To present and discuss the work progress with the broader group of stakeholders and facilitate consensus whenever required;
- To suggest a set of indicators (process & outcome) for monitoring and evaluation of the pilot project with specific emphasis on linkages between health and social systems;
- To develop the pilot project oversight concept (e.g. oversight structure, responsibilities), that will be tasked amongst others to document the challenges and lessons learned throughout the implementation process to better inform the scale-up;
- To develop a detailed training plan;
- To develop a syllabus and curriculum for the training of (i) rural PHC teams (doctor & nurse) and (ii) district developmental pediatricians;
- To carry out the training (upon obtaining green light from UNICEF);
- To establish an enabling environment for the application of the new service delivery approach by developing an Essential Document Binder (new roles and responsibilities of rural PHC team; Early Childhood Development and services pathway; communication package for parents etc.). The list of the binder items is subject to approval by the MoLHSA;
- To develop the concept of supportive supervision for newly trained PHC professionals, develop specific supportive supervision instruments and start its implementation. The supportive supervision is requested to document knowledge and practice gaps identified and to ensure the delivery of appropriate additional trainings;
- To closely monitor the ECD service coverage and implementation of referrals in the pilot sites and to provide short monthly reports;
- To develop the final progress report that will include recommendations for the scale-up and provide inputs for the detailed calculation of required financial resources;
- To collaborate with the external evaluators of the project and share the implementation experience with them.

4. Deliverables and Timelines

No.	Deliverables	Delivery Date
1	Presentation of pilot project with detailed implementation plan to the stakeholders	20 April 2018
2	Pilot project oversight concept (structure, responsibilities, set of indicators)	30 April 2018
3	Syllabus and curriculum for the training of rural PHC teams (doctor & nurse)	20 May 2018
4	Syllabus and curriculum for the training of district developmental pediatricians	20 May 2018
5	Essential Document Binder (new roles and responsibilities of rural PHC team; Early Childhood Development and	15 June 2018

	services pathway; communication package for parents etc.)	
6	Supportive supervision concept and instruments	30 June 2018
7	Final report	10 December 2018

5. Estimated duration of contract

8 months, from approx. 10 April – 10 December 2018.

6. Supervision and reporting responsibility

UNICEF Georgia’s Health Specialist will provide supervision and performance review. The organization’s performance will be evaluated against the following criteria: timeliness, responsibility, initiative, communication, and quality of the products delivered.

7. Remuneration

Applying organizations should submit a project proposal with budget. Payments will be processed as per satisfactory and timely completion of above listed deliverables, as per the following schedule:

- 1st installment - 30% of the contract value will be paid upon completion of deliverables 1 and 2;
- 2nd installment - 50% of the contract value will be paid upon submission of deliverables 3-6;
- 3rd installment – 20% of the contract value will be paid upon submission of the final report.

UNICEF reserves the right to withhold all or a portion of payment if performance is unsatisfactory, if deliverables are incomplete or not submitted at all, or for failure to meet deadlines.

8. Eligibility Criteria

- The organization (NGO) should:
 - ✓ Be a local community organization (based in the Adjara Region) or local branch of a national NGO, working in the field of health and social care;
 - ✓ Have guided village-level community-development programs and prior experience of the implementation of comparable activities at the community level;
 - ✓ Have proven expertise in the field of PHC and MCH, acknowledged as international standard quality;
 - ✓ Have a proven record in delivering effective and professional project results;
 - ✓ Have proven and excellent experience in facilitating policy discussions, developing project presentations and elaborating reports in English language.
- Subject matter experts of the applicant organization should have:
 - ✓ A medical background (doctorate degree or equivalent to a PhD) and more than 10 years of experience in the field of early childhood development;
 - ✓ Knowledge of global policies, development frameworks of the WHO and UNICEF in the field of Maternal and Newborn Care;
 - ✓ Knowledge of concepts, tools and initiatives for measuring health care quality and outcomes;
 - ✓ A minimum of 10 years of experience in developing training curricula and delivering trainings.

**How to apply**

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Price Proposal should include: Cover letter; proposed budget in GEL

Please, do not hesitate to contact us if you have any questions, contact persons: Ia Tchanukvadze nzeinklishvili@unicef.org 2251130 #223



Proposal should be addressed to:

The UNICEF Georgia office Operation Department, Tbilisi Georgia

IMPORTANT – ESSENTIAL INFORMATION

Proposals received after the stipulated date and time will be invalidated. Technical Proposal for the requested services must be enveloped separately and corresponding financial proposal must also be enveloped separately.

The reference LRFP 9139070- 003 must be shown on the envelopes containing the financial & Technical proposals with a label financial proposal or Technical proposal. Proposals Delivered incorrectly will be invalidated, even if received before the stipulated deadline.

It is important that you read all the provisions of the Request for Proposal to ensure that you understand and comply with UNICEF's requirements. Note that failure to submit compliant proposals may result in invalidation.

Price Proposals will only be accepted in the currency stated in the enclosures to this LRPS (GEL). Any Proposal received in any currency other than the stated currency will be invalidated.

All the information provided in response to this RFP are subject to verification