

Overview

NATIONAL AGENCY FOR THE CONTROL OF AIDS (NACA)

ENGAGEMENT OF OPERATIONS RESEARCH FIRM FOR EVALUATION OF CURRENT STRATEGIES AND APPROACHES AIMED AT IMPROVING COMMUNITY RESPONSE AND SUSTAINABILITY OF TB, HIV AND MALARIA INTERVENTIONS

BACKGROUND

The Global Fund to Fight AIDS, Tuberculosis and Malaria provides resources to support resource constrained countries to implement national plans and meet health goals towards achieving the Universal Health Coverage (UHC). The 2021-2023 Global Fund Resilient and Sustainable Systems for Health (RSSH) grant to Nigeria will contribute to making foundational changes to strengthen the health systems in Nigeria by:

- Providing effective leadership and an enabling policy environment that ensures adequate oversight and accountability for the delivery of quality health care for sustainable development of the national health system
- Strengthening the procurement and supply chain management system for efficient health service delivery
- Strengthening the National Health Management Information System (NHMIS)
- Ensuring equitable, safe, appropriate, quality, and effective laboratory services to meet current and future needs
- Promoting community engagement for sustainable health development

The RSSH grant 2021-2023 is supporting community systems strengthening (CSS) interventions that support the development and reinforcement of informed, capable, coordinated and sustainable structures, mechanisms, processes and actors through which community members, organizations and groups interact, coordinate and deliver their responses to the challenges and needs affecting their communities. Many people with HIV/AIDS, TB and Malaria (ATM)-related illness already receive most of their support and care from the community, not from formal institutions. Only through community involvement will programs of sufficient number, scope, coverage and value for resources and effort be achieved. Studies have shown community engagement leads to increased community ownership, leadership, management and sustainability of health interventions. Therefore, introducing community strategies that bring together key players in the area of ATM to work collaboratively with pre-existing community structures may likely improve ATM responses and sustainability. Therefore, the community systems

strengthening is essential for safe, relevant, accessible and high-quality services and structures needed to end the HIV, TB and malaria epidemics and to develop resilient and sustainable systems for health. It also rests at the heart of the integrated, co-produced and people-centered packages that are vital to achieve Universal Health Coverage and progress across all the Sustainable Development Goals.

The CSS interventions supported include

(1) Institutional capacity building, planning and leadership development: Activities that support the establishment, strengthening and sustainability of community-led or community-based organizations and networks, with particular attention to those serving marginalized, under-served and key and vulnerable populations.

Summary of activities: integrated supportive supervision (national, state level), state-level annual review meetings with relevant stakeholders across ATM and RMNCAH+N services, CSO annual roundtable at the state level with policymakers and mass media, operations research, institutional support and capacity building for ATM CSOs

(2) Social mobilization, building community linkages and coordination- Activities to mobilize communities in responses to ATM diseases, address barriers to accessing health and other social services and social determinants of health.

Summary of activities: implementing a referral system for service uptake and linkages between disease programs and community service delivery mechanisms, LGA and ward-level coordination meetings

(3) Community-based monitoring (CBM)- Community-based mechanisms by which ATM service users and/or local communities gather, analyse and use information on an ongoing basis to improve access to, quality and impact of services, and to hold service providers and decision makers to account.

Summary of activities: training of local community actors on coordination, CBM and advocacy, client satisfaction survey, and quarterly community monitoring and stakeholders meeting.

A package of CSS interventions is being implemented in seven states in Nigeria, namely Jigawa, Cross River, Nasarawa, Ekiti, Anambra, Gombe and Kaduna.

Scope of work

The operations research (OR) component of RSSH will conduct targeted studies that focus on specific research question which will help guide the design and implementation of programme interventions for improved community response and sustainability of TB,

HIV and malaria interventions. It is expected that baseline assessment and data will be collected at the beginning of the above highlighted interventions with periodic data collection at specified interval to measure outcomes of specific indicators.

The OR will provide high quality research that is of immediate practical relevance to the programme as well as other health programme implementers. Some of the areas of interest include (but not limited to): CHIPS programme and its contribution to expanding access to HIV, TB, Malaria services as well as COVID-19 testing and vaccination (awareness and demand creation, referrals and linkages to health facilities, improving service coverage). Ward Development Committees and their contributions to improved community coordination, accountability and sustainability of HIV, TB and malaria programmes. Contribution of community-based monitoring mechanism to holding service providers and decision makers to account and increasing quality of services. The findings from the OR studies are expected to continuously guide the implementation of programme interventions and its replicability in other states where the interventions were not piloted.

NACA is looking for an organisation/firm experienced in public health evaluation and operations research to partner with the RSSH programme to implement this activity component. The firm will be engaged for a period of 20 months (April 2022 to November 2023).

Specific scope of Work

A mixed method will be employed in the collection of qualitative, quantitative and cost data. A research firm will be engaged to manage the process. The key methods will include, but not limited to:

- Formative research
- Stakeholder workshop to review the formative research and identify actions to pilot
- Two sets of learning cycles
- An outcome assessment
- Data analysis
- Report writing and publications
- Stakeholders meeting to share findings and recommendations

DURATION

20 months (April 2022 to November 2023)

Location of research:

Research will be carried out in selected sites (to be determined) from the seven intervention states Jigawa, Cross River, Nasarawa, Ekiti, Anambra, Gombe and Kaduna.

Deliverables

- A detailed research plan, which will be described in a report (Month 2- May 2022)
- A short report and presentation on the methods and results of the formative assessment (Month 5- August 2022)
- A detailed report, detailed presentation, and a short presentation on operations research methods and results from the first learning cycle, including descriptions of activities, qualitative results, quantitative results and cost data. (Month 12- Feb 2023)
- A detailed report, detailed presentation, and a short presentation on operations research methods and results from the two learning cycles, including descriptions of activities, qualitative results, quantitative results and cost data. (Month 19- October 2023)
- Dissemination of report (November 2023)

Qualifications/Experiences/Competencies of the firm

The institution or research organization must have the following skills/requirements;

- Previously conducted population-based surveys, public health related evaluations and operations research studies on a large scale. Evidence of at least three jobs conducted in the last five years
- Ability to implement research according to protocol, analyze and present findings in an agreeable format
- Meet deliverables within the agreed timelines
- Willingness to work in resource scarce environment
- Evidence of Familiarity with the state and local government health systems in Nigeria
- Evidence of familiarity with HIV/AIDs, TB, Malaria programmes and community systems and responses is an added advantage
- Excellent writing and presentation skills

Number of Technical staff required

The institution or research organization is required to have at least four technical staff and well-established health research structure. The organisation should take full responsibility of the research and independently deliver the project with minimum intervention from NACA. NACA will provide technical, guidance and oversight. The organisation should be able to interact with key stakeholders to ensure sound and robust research. The minimum qualifications of the key technical staff required for the work are as follows:

Minimum Qualification and Experience required from Technical staff

S/No	Technical staff	Required qualification and experience
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1

Research Lead (1)

MBBS or PhD in demography and other

At least 10 years' experience in public h

Experience leading research design an

Strong leadership and planning skills

Strong understanding of health research

Excellent written and spoken English is

Report writing skills is essential

Evidence of peer review publications in

2

Data analyst (1)

A Masters' degree in biostatistics or an

At least 5 years' experience in managin

research and evaluation

Advanced skills in using modern stati

others

Excellent written and spoken English is

Report writing skills is essential

3

Health systems strengthening specialist (1)

MBBS or Master's degree in Public Health or related sciences or other related fields.

At least 10 years of experience working in health systems strengthening of the national health system

Leadership experience in management and strong relationship with government and civil society at strategic level

Experience in health and community systems

Familiarity with Nigeria health systems

Excellent written and spoken English is essential

Report writing skills is essential

4

Data collectors (5)

Bachelor's Degree in Public Health, Medicine or other related field;

Field-level experience in qualitative and quantitative research

Good understanding of community level health issues

Excellent written and spoken English is essential

Computer skills

Written evidence for experiences claimed in the form of reference letters from the client should be provided in the technical proposal.

Although four technical profiles are presented, the assignment may be completed by more than four personnel. In presenting the proposal, the organisation should indicate clearly the proposed experts for each of the required positions, and how they meet the criteria listed above.

Reporting line

The firm will report to the Senior Technical Specialist (Community Systems Strengthening) on technical matter, and to the RSSH/C19RM Project Coordinator on contractual and operational matters.

(1) General Eligibility Criteria

Other documents required to be submitted with the proposal are:

GENERAL ELIGIBILITY CRITERIA

- (i) Evidence of company registration (certificate of incorporation of the company) including Forms CAC2 and CAC7;
- (ii) Evidence of Company's Income Tax Clearance Certificate for the last three (3) years (2018, 2019 & 2020) valid till 31st December 2021;
- (iii) Copy of Company Audited Accounts for the last 3 years (2018, 2019 and 2020);
- (iv) Evidence of PENCOS Compliance Certificate expiring by December 2021;
- (v) Evidence of ITF Compliance Certificate expiring by December 2021;
- (vi) Evidence of NSITF Compliance certificate expiring by December 2021;
- (vii) Sworn Affidavit disclosing whether or not any officer of the relevant committees of the National Agency for the Control of Aids or the Bureau of Public Procurement is a former or present Director, shareholder or has any pecuniary interest in the bidder and to confirm that all information presented in its bid are true and correct in all particulars;

(viii) The minimum validity period of the Tender should be One Hundred and Twenty (120) Days;

(ix) Evidence of financial capability to execute the contract by submission of Reference Letter from a reputable commercial bank in Nigeria, indicating willingness to provide credit facility for the execution of the project when needed;

(x) Company's Profile;

(xi) Verifiable documentary evidence of at least three (3) similar jobs executed in the last five (5) years by showing copy of either Letters of Awards, or Job Completion Certificates or Contract Agreement.

(xii) All documents for submission must be transmitted with a Covering/Forwarding letter under the Company Letter Head Paper using the Tender Submission Sheet template in Form G-1 and bearing amongst others, the Registration Number (CAC), Contact Address, Telephone Number (Preferable GSM No.), and e-mail address, duly signed by the authorized officer of the firm. An unsigned bid will be disqualified.

(xiii) Copies of staff academic certificates should be provided by firm in their submission

COLLECTION OF REQUESTS FOR PROPOSAL (RFP) DOCUMENT

The Request for Proposal (RFP) can be downloaded from this link;

<https://www.naca.gov.ng/wp-content/uploads/2022/03/SBD-Operational-research-firm-final-copy.pdf>

SUBMISSION OF TENDER DOCUMENTS

Prospective consulting firms are to submit three (3) hard copies (one original & two copies) of the requested documents and financial bid.

Thereafter, the Tenderer shall enclose the original in one (1) envelope and all the copies of the Tender in another envelope, duly marking the envelopes as "Engagement of Operations Research Firm for Evaluation of Current Strategies and Approaches aimed at Improving Community Response and Sustainability of TB, HIV and Malaria Interventions" and "FINANCIAL." The two (2) envelopes shall then be enclosed and sealed in one (1) single outer envelope after registration using the NACA bid register.

(a) Prospective bidders can submit their documents as a Joint Venture with relevant documents provided in line with the requirements stated in the SBD.

(2) DEADLINE FOR SUBMISSION

The deadline for the submission of Tender should not be later than **12 noon of 21 March, 2022**. Clarification can be obtained at the Office of the Head of Procurement, Ground Floor, NACA main building, 3 Ziguinchor Street. Wuse Zone 4. Abuja. The bids will be opened immediately after close of submission.

(3) GENERAL INFORMATION

- Bids must be in English Language and signed by an official authorized by the bidder;
- Bids submitted after the deadline for submission would be rejected;
- NACA reserves the right to evaluate and award per line item and in the event of exigency, NACA may vary the quantities/quality of the items during the time of evaluation, award and execution of contract with respect to this invitation to tender;
- NACA is not bound to shortlist any Consultant, and reserves the right to annul the bidding process at any time without incurring any liabilities or providing reason.

(12.0) ADDRESS FOR INFORMATION AND SUBMISSION OF PROPOSALS

Attention:

Head Procurement

National Agency for the Control of AIDS (NACA)

Ground Floor Room 1.08

No. 3 Ziguinchor Street, Beside AEDC Office, Wuse zone 4, Abuja

Email: procurement@naca.gov.ng

Tel: +234-9-4613726-9 Fax: +234 94613700

(13.0) GLOBAL FUND CODE OF CONDUCT

You shall get acquainted with the global fund code of conduct for suppliers using this link below: https://www.theglobalfund.org/media/3275/corporate_codeofconductforsuppliers_policy_en.pdf

Accepting this invitation shall serve as an acknowledgement and agreement to abide by the Global Fund Code of Conduct for Suppliers.

(14) Notes/Disclaimer

(i) Late submissions will not be accepted.

(ii) NACA shall verify any or all documents and claims made by applicants and will disqualify consultants with falsified documents and claims.

(iii) If it is determined that submitted documents and claims have been falsified, the consultant may face prosecution in a court of Law.

(iv) NACA shall not be held responsible for any disqualified proposal as a result of any omission or deletion relating to the submission guidelines.

(v) This advertisement shall not be construed a contract to any Consultant, nor shall it entitle any Consultant submitting documents to claim any indemnity from NACA.

(vi) NACA is not bound to shortlist any Consultant, and reserves the right to annul the bidding process at any time without incurring any liabilities or providing reason.

SIGNED

MANAGEMENT.