





# Request for proposals

Developing a professional course on embedded implementation research for health managers

**Deadline:** 

6 February 2019

# Call for proposals

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### **Overview**

The Alliance is seeking proposals from an academic institution to develop materials for a professional course on embedded implementation research aimed at health managers in low- and middle-income countries. This course should consist of around ten hours of teaching material and be deliverable both in-person and online. This is not a call for research projects.

# **Background and objectives**

The Alliance for Health Policy and Systems Research (the Alliance) is recognized as a leader and innovator in embedded health policy and systems research (HPSR) and in systems thinking. It published the *Changing Mindsets* strategy in 2012 (World Health Organization, 2012) and has continued to advance the field since then (World Health Organization, 2018). At the same time, the wider HPSR field has matured as it focused on changing policy and practice to strengthen health systems. There has been a 370% increase in publications in the field and funding for HPSR has also grown significantly (World Health Organization, 2016). However, there are still significant gaps in mobilising that knowledge to improve health systems in low- and middle-income countries (LMICs). While the generation of research has increased, it often doesn't answer questions asked by health system decision makers (policymakers, implementers and practitioners) in LMICs. Furthermore, it is often not available to those decision makers when they need it.

Embedded research is an approach pioneered by the Alliance in which research is carried out as an integrated and systematic part of decision-making and implementation processes (Ghaffar *et al.*, 2017). The Alliance has implemented this approach in numerous programmes and partnerships supporting more than 90 research projects in 33 countries in the past five years. Through these efforts, the Alliance, together with its partners, has also developed a significant body of training materials for embedded implementation research.

There has been increasing interest in embedded implementation research among global partners and stakeholders. Gavi, the Vaccine Alliance, has partnered with the Alliance and UNICEF to support several country-level programmes of embedded implementation research on immunization. The Doris Duke Charitable Foundation through the Africa Health Initiative is managing a portfolio of projects to design scalable delivery models using embedded health systems research. Pakistan, Ghana, South Africa, among other countries, have established initiatives at the country level to introduce embedded health systems research to address research priorities and needs in real time. In early 2018, a global meeting on embedded research was held in Geneva, Switzerland during which time many international stakeholders expressed interest and a need for guidance and materials for programme managers in embedded research.

As a next step to support the operationalization and scale-up of embedded implementation research within programmes at the country level, there is a need for a professional course on embedded implementation research. Therefore, the Alliance is seeking to partner with an experienced academic institution to develop such a course drawing on existing resources and materials that have already been developed on the subject. Through this call for proposals, the Alliance is seeking bids from interested academic

institutions with teaching or training capacity in health systems, and expertise in implementation research, to develop a professional course on embedded implementation research.

# Specific tasks of the academic institution

Develop a short course on embedded implementation research aimed at health managers in LMICs: The target audience for the course would be organizations or individuals looking to embed implementation research within their programmes at the country level. Some examples of this audience are ministries of health, programme managers, and other organizations working closely with implementers or supporting implementation at the country level. The course should demonstrate the value of implementation research in solving real world implementation challenges. It should also provide guidance on identifying priority implementation challenges, deriving appropriate implementation research questions, undertaking implementation research, and using the research to strengthen the health system.

The course should entail at least 10 hours of instruction, which could be delivered in-person by facilitators, or online in a self-directed manner. In addition to direct instruction, the sessions will include teaching case studies, discussion and sharing, and activities to engage participants.

The course materials should consist of the following materials at minimum:

- A detailed Module/Session Plan, and a bibliography of relevant resources for participants.
- 2. Presentations for each module/session based on the module/session plan.
- 3. Facilitator's Handbook based on the module/session plan.
- 4. Participant's **Workbook** which could include guides, templates, or worksheets based on the module/session plan.

We are interested in innovative pedagogical approaches and encourage proposals that incorporate a mix of content, including videos or filmed lectures to complement the presentations.

#### **Selection Criteria**

For consideration for this award, the following selection criteria apply:

- 1. Established reputation for teaching or training in health systems
- 2. Established faculty track record in implementation research
- 3. Existing course development experience in health systems
- 4. Experience of teaching and training and/or developing courses for UN agencies

The reviewers will also consider how the proposal responds to following additional factors:

- 5. Value for money
- 6. Monitoring and evaluation of this programme of work

The selected institution will be expected to work independently, regularly completing and reporting on agreed products, while maintaining an ongoing collaborative relationship with the Alliance Secretariat. At least 50% of named team members on the bid should be women.

# **Funding and period**

The maximum amount of funding available from the Alliance will be US\$ 75,000. No further funding will be provided by the Alliance within and beyond the project period. The activities will be implemented in 2019 and the project period must be no more than three months.

# **Application process**

Deadline: 6 February 2019

Bids submitted after this deadline will not be considered.

Successful applicants can expect to be notified within one month of the deadline. WHO may, at its own discretion, extend this closing date for the submission of bids by notifying all applicants thereof in writing.

Submissions of bids should be made at <a href="mailto:alliancehpsr@who.int">alliancehpsr@who.int</a>. Please use the subject: <a href="mailto:WHO Bid Ref">WHO Bid Ref</a>. Call for Proposals (Embedded Implementation Research Course)

Submissions of not more than four pages should include the following:

- 1. Name of the bidding institution including contact details and name of a key contact person.
- 2. Motivation for applying: how this work fits in with the bidder's expertise and aligns with current areas of work in teaching and training in health systems and implementation research
- 3. Composition of the proposed team: names, expertise, function in institution, role in team and experience relevant to the call. CVs may be included as an annex to the submission.
- 4. Description of a three-month plan based on the outlined specific tasks and the selection criteria outlined.
- 5. Itemized budget for three months based on the specific tasks outlined. This call will not fund equipment, or support for hiring new permanent teaching staff.

# Note for applicants

- WHO may, at any time before the closing date, for any reason, whether on its own initiative or in response to a clarification requested by a (prospective) applicant, modify the bid by written amendment. Amendments could, inter alia, include modification of the project scope or requirements, the project timeline expectations and/or extension of the closing date for submission.
- 2. All prospective applicants that have submitted a bid will be notified in writing of all amendments to the bid and will, where applicable, be invited to amend their submission accordingly.

Applicants should note that WHO reserves the right to:

Award the contract to an applicant of its choice, even if its bid is not the lowest;

Accept or reject any bid, and to annul the solicitation process and reject all bids at any time prior to award of contract, without thereby incurring any liability to the affected applicants and without any obligation to inform the affected applicants of the grounds for WHO's action;

Award the contract on the basis of the Organization's particular objectives to an applicant whose bid is considered to be the most responsive to the needs of the Organization and the activity concerned;

Not award any contract at all;

Eliminate bids for technical or other reasons throughout the evaluation/selection process. WHO shall not in any way be obligated to reveal, or discuss with any applicant, how a bid was assessed, or to provide any other information relative to the evaluation/selection process or to state the reasons for elimination to any applicant.

WHO is acting in good faith by issuing this request for bids. However, this document does not obligate WHO to contract for the performance of any work, nor for the supply of any products or services.

WHO reserves the right to enter into negotiations with one or more applicants of its choice, including but not limited to negotiation of the terms of the bid(s), the price quoted in such bid(s) and/or the deletion of certain parts of the work, components or items called for under this bid.

Within 30 days of receipt of the contract, the successful applicant shall sign and date the contract and return it to WHO according to the instructions provided at that time. If the applicant does not accept the contract terms without changes, then WHO has the right not to proceed with the selected applicant and instead contract with another applicant of its choice.

#### References

- Ghaffar, A., E. V. Langlois, K. Rasanathan, S. Peterson, L. Adedokun, and N. Tran. (2017). Strengthening health systems through embedded research. Bull World Health Organ 2017;95:87. doi: http://dx.doi.org/10.2471/BLT.16.189126
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