

Call for technical support centre

Health Systems Impact
Modelling Consortia

~~**Deadline:** 23 February 2024, 23:59 CET~~

Extended deadline: 4 March 2024, 23:59 CET



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Overview

The Alliance for Health Policy and Systems Research is seeking to identify an academic/research institution to serve as a technical support centre to support the Alliance in establishing and operationalizing Health Systems Impact Modelling Consortia in three low- and middle-income countries (LMICs). These consortia will play a critical role in developing learning ecosystems of policy-makers, national- and global-level researchers and development partners to tackle the next frontiers in health systems modelling for impact. These learning ecosystems will serve to understand how the use of modelling approaches can best inform health systems resource allocation decisions towards stronger health systems in LMICs. This is not a call for research projects.

Background

There is a growing appreciation of the utility of examining public health issues from a systems perspective. Yet, global, regional and national stakeholders continue to grapple with how to quantify the impact of investments in and reallocation of health system inputs (including human resources for health, financial resources and pharmaceuticals) on improvements in health service delivery, health outputs and outcomes. Central to this is an understanding of how interventions interact with underlying health systems to inform their sustainability (in terms of their true cost-effectiveness) as well as their scale-up at subnational and national levels.

The Alliance for Health Policy and Systems Research at WHO is proposing to lay the foundation for learning ecosystems of policy-makers, national and global researchers, and development partners to tackle the next frontiers in health systems modelling for impact. The Alliance aims to bring together national- and global-level researchers, development partners and decision-makers to foster the creation of innovative ecosystems at national and global levels to nurture the development of modelling approaches and techniques to measure the impact of health systems strengthening (HSS) interventions on the provision of essential health services, including in primary health care settings. This work is envisaged as an iterative cycle of convening, information gathering, consultation and testing of modelling approaches in real-world contexts and could play a major role in informing health systems resource allocation decisions in select LMICs.

To help execute this programme of work, the Alliance seeks to identify an academic/research institution experienced in the development and use of modelling approaches to inform health policy and practice in LMICs to serve as a technical support team for a three-year period. The technical support team will work closely with the Alliance Secretariat to develop, implement and support the dissemination of this work programme. This will include conducting literature reviews, supporting national and global level convenings, supporting the identification of appropriate research partner institutions within select LMICs, providing technical support to country consortia led by these research institutions as well as developing cross-national learning informed by the experience of the range of supported LMICs. Specific tasks expected of the technical support centre, eligibility and selection criteria and details of the application process are detailed below.

Specific tasks of the technical support centre

- Conducting two scoping reviews to systematically examine the literature related to health systems impact modelling. One of these reviews will focus on examining existing quantitative and qualitative modelling approaches that have sought to understand how investments in health systems strengthening link to desired outcomes. The second review will:
a) identify barriers in leveraging modelling approaches to inform HSS resource allocation decisions in the past and how these might be overcome; and b) assess the types of data available for use at national or subnational levels in LMICs for this purpose.
- Engaging closely with the Alliance Secretariat to facilitate an in-person consultative workshop (currently expected in June 2024) bringing together a range of stakeholders from policy and research at global and national levels. This workshop will enable dialogue with policy-makers to identify what they see as the questions that health systems modelling can help to answer and potential sources of data at national and subnational levels.
- Co-developing a request for proposals with the Alliance Secretariat inviting research institutions from select LMICs to implement modelling exercises to address policy-maker questions identified through the consultative workshop.
- Providing technical oversight and guidance to selected research institutions within three LMICs to implement the modelling exercises over a two-year period. This includes:
 - working with the selected research institutions in-country to identify a consortium of national-level stakeholders (including policy-makers, researchers in health systems and those with modelling expertise) that will provide technical oversight to the modelling exercises and generate country buy-in;
 - co-facilitating an initial in-person meeting of each of the national-level consortia;
 - providing remote technical support to the in-country research institution through regular meetings and webinars; and
 - facilitating virtual meetings across country teams to discuss findings, compare approaches and identify enablers and barriers to the implementation of modelling exercises in each country.
- Engaging closely with the Alliance Secretariat and the country research teams to share findings within countries as well as advocating with global health initiatives to incorporate these approaches within grant applications, including through participation at events at major global health fora.
- Developing research outputs including peer-reviewed papers synthesizing lessons learned across the countries and providing support to country research teams to develop peer-reviewed papers reflecting on their own approaches and findings.

Eligibility and selection criteria

To be eligible for consideration, the proposed technical support centre must:

- Be based in an academic institution/university;
- Have completed all sections of the proposal and adhered to maximum proposal length;
- Have at least 50% of the named team members on the bid be women;
- Have extensive experience in the development and use of modelling approaches to inform health policy and practice in LMICs, particularly around health systems strengthening efforts; and
- The lead investigator must have an established record of peer reviewed journal articles around the use of modelling approaches in the area of health and health systems (minimum 20 articles).

To be competitive, the technical support centre should be able to demonstrate the following in the proposal:

- Have experience of using of modelling approaches in Asia and Africa. This includes involvement in efforts to strengthen capacities of these groups of stakeholders as well as dissemination of findings to them;
- Have experience in the development of modelling applications (including data platforms) that can help policy-makers to better visualize data and potentially apply data to inform decision-making;
- Have a track record of developing policy briefs and reports targeted at policy-makers;
- At least one team member must have a demonstrated ability to bring together qualitative and quantitative research approaches to inform modelling exercises;
- Have previous experience of engaging with United Nations agencies (including WHO), bilateral and multilateral partners and nongovernmental/civil society organizations; and
- Provide a clear project plan outlining how it will support the Alliance Secretariat to implement the tasks outlined as well as how these activities will contribute to developing the learning ecosystems mentioned in the introduction to this document.

The selection committee will also consider how the proposal responds to value for money.

The technical support centre will be expected to engage closely with the Alliance Secretariat throughout the duration of the work programme.

Application process

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Extended deadline: 4 March 2024, 23:59 CET

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 alliancehpsr@who.int. Please use the subject: **WHO Bid Ref. Call for a technical support centre: Health Systems Impact Modelling**

Submissions of no more than eight pages (standard font size 11, 1.15 line spacing, normal margins) should include the following:

- **Contact details:** Name of the bidding institution including contact details and name of a key contact person.
- **Motivation for applying:** A description of how this work fits in with the bidder's expertise and aligns with current areas of research, policy engagement, teaching and training research.
- **Composition of the proposed team:** names, expertise, function in institution, role in team and experience relevant to the call. CVs of key personnel should be included as an annex to the submission.
- **Project plan:** Description of a plan outlining how the technical support centre will work with the Alliance Secretariat to implement the tasks outlined and how these tasks will contribute to the project's larger goals of establishing learning ecosystems.
- **Itemized budget** for 36 months based on the specific tasks outlined. Please note that the travel costs of the technical support centre to in-country and global meetings should be included in the budget. Costs of peer-reviewed research publications / a special Issue will be supported by the Alliance Secretariat and should not be included in the budget. Institutional overheads should not exceed 10%. The budget should be in US\$. Please also provide a **summary budget** of the total costs broken down by the following categories (not all may be applicable): personnel, supplies/facilities, equipment, communications, travel and per diem, and other (meetings, publications, etc.). The Alliance may challenge proposed costs that it does not consider appropriate or as offering optimal value for money.

Notes for applicants

1. 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.
3. Applicants should note that WHO reserves the right to:
 - a. Award the contract to a bidder of its choice, even if its proposal is not the lowest;
 - b. Award separate contracts for parts of the work, components or items, to one or more bidders of its choice, even if their proposals are not the lowest;
 - c. Accept or reject any proposal, and to annul the solicitation process and reject all proposals at any time prior to award of contract, without thereby incurring any liability to the affected bidder or bidders and without any obligation to inform the affected bidder or bidders of the grounds for WHO's action;
 - d. Award the contract on the basis of the Organization's particular objectives to a bidder whose proposal is considered to be the most responsive to the needs of the Organization and the activity concerned;
 - e. Not award any contract at all.
4. WHO has the right to eliminate bids for technical or other reasons throughout the evaluation/selection process. WHO shall not in any way be obliged to reveal, or discuss with any bidder, how a proposal was assessed, or to provide any other information relating to the evaluation/selection process or to state the reasons for elimination to any bidder.
5. WHO is acting in good faith by issuing this RFP. However, this document does not oblige WHO to contract for the performance of any work, nor for the supply of any products or services.
6. WHO also reserves the right to enter into negotiations with one or more bidders of its choice, including but not limited to negotiation of the terms of the proposal(s), the price quoted in such proposal(s) and/or the deletion of certain parts of the work, components or items called for under this RFP.
7. Within 30 days of receipt of the contract, the successful bidder shall sign and date the contract and return it to WHO according to the instructions provided at that time. If the bidder does not accept the contract terms without changes, then WHO has the right not to

proceed with the selected bidder and instead contract with another bidder of its choice.

8. WHO reserves the right, subject to considerations of confidentiality, to acknowledge the existence of the Contract to the public and publish and/or otherwise publicly disclose the Contractor's name and country of incorporation, general information with respect to the work described herein and the Contract value. Such disclosure will be made in accordance with WHO's Information Disclosure Policy and shall be consistent with the terms of the Contract.