

Request for Proposal

Developing Centre of Excellence (CoE) as a reference and training centre for Leishmaniasis in Nepal

Dated: November 10, 2023

Summary

1. DNDi Overview	3
2. Purpose	4
2.1. Requirements	5
2.2. Timeline	6
3. RFP Instructions	8
3.1. General Information	8
3.2. Timeline	9
3.3. RFP Processes and contact information	9
3.3.1. Instructions	9
3.3.2. Confirmation of intent	9
3.4. Format and content of the proposal	10
3.5. Conflict of Interest	11
3.5.1. Criteria for selecting service providers	11
3.5.2. Technical criteria	11
3.5.3. Capacity to deliver	12
3.5.4. Financial criteria	12
4. Annexes	13
4.1. Annex 1: Letter of intent	13
4.2. Annex 2: Q&A Form	13

1. DNDi Overview

Neglected tropical diseases continue to cause significant morbidity and mortality in the developing world. Yet, of the 1,556 new drugs approved between 1975 and 2004, only 21 (1.3%) were specifically developed for tropical diseases and tuberculosis, even though these diseases account for 11.4% of the global disease burden.

Founded in 2003 to address the needs of patients with the most neglected diseases, DNDi is a collaborative, patient's needs driven, not for profit drug R&D organization.

Acting in the public interest, DNDi bridges existing R&D gaps in essential drugs for these diseases by initiating and coordinating drug R&D projects in collaboration with the international research community, the public sector, the pharmaceutical industry, and other relevant partners.

DNDi's primary focus has been the development of drugs for the most neglected diseases, such as Human African Trypanosomiasis (HAT, or sleeping sickness), visceral leishmaniasis (kala-azar), and Chagas disease, while considering engagement in R&D projects for other neglected diseases to address unmet needs that others are unable or unwilling to address.

The primary objective of DNDi is to deliver 16 to 18 new treatments by 2023 for leishmaniasis, sleeping sickness, Chagas disease, malaria, pediatric HIV, filarial diseases, mycetoma and hepatitis C, and to establish a strong R&D portfolio that addresses patient needs. Expanding upon R&D networks built on South-South and North-South collaborations, DNDi aims to bring medical innovation to neglected patients by developing field-adapted treatments.

In doing this, DNDi has two further objectives:

- Use and strengthen existing capacities in disease-endemic countries via project implementation.
- Raise awareness about the need to develop new drugs for neglected diseases and advocate for increased public responsibility.

Since the start of the COVID-19 pandemic DNDi has engaged a rapid response, coordinating a major clinical trial initiative in Africa, Asia and South America (ANTICOV) as well as engaging in major repurposing and novel anti-viral discovery approaches.

For more information, please visit DNDi website: <http://www.dndi.org/>

2. Purpose

Leishmaniasis (Kala-Azar), a neglected tropical disease, continues to pose significant challenges to public health in Nepal. The Karnali province and Madhesh province of Nepal respectively report 37 percentage of visceral leishmaniasis cases in the country.

The Kala-azar Elimination Program in South Asia is having successful achievements, with a sharp decrease in the number of patients with visceral leishmaniasis (VL), moving towards the elimination target. WHO has recently announced elimination of VL as public health problem in Bangladesh. Nevertheless, some challenges remain, as with the decrease in cases, it is likely that knowledge about the disease and case management may decrease among the health workers and front-line workers. Also, it is difficult to maintain several treatment centres active when case load is reduced.

In this context, building ‘Leishmaniasis Centers of Excellence (CoE)’ for complete case management is a cost-effective strategy to ensure patients receive good quality care and contribute to further eliminating visceral leishmaniasis from the region. The CoE is to act as a reference centre, where all types of patients, including those with complications such as case of relapse, VL-HIV co-infection, PKDL and other co-morbidities could be managed. It can also be used as a training centre for conducting training to support surveillance of PKDL and VL in the country.

DNDi has implemented similar Leishmaniasis CoEs in Bihar, India. So far, about 250 health workers (doctors, nurses, laboratory technicians) benefited from training at the CoE and also received hands-on training on invasive diagnostic procedures more than 2600 front line workers (ASHA) have also been trained under the CoE for identifying suspected cases in the community and referring them to health centers / Centers of excellence.

As a commitment to tackling this issue, DNDi is determined to support the establishment of a Leishmaniasis CoE to serve as a reference and training centre in Nepal. DNDi invites esteemed organizations to participate in our Request for Proposal (RFP) process for the implementation of Leishmaniasis CoE to serve as a reference and training centre in Nepal. We are seeking qualified and experienced implementers to collaborate with us on this vital healthcare initiative to do the following:

1. Collaborate with Epidemiology and Disease Control Division (EDCD) of Department of Health Services, Ministry of Health and population, Govt of Nepal for implementing of this complete program.
2. To identify potential institute/health care facility which will be accepted by the EDCD for establishing the CoE as a reference centre for case management of VL, VI-HIV, PKDL, relapse VL and VL with other co-morbidities and as a training centre.

3. To ensure capability building to health care workers from at least 20 **Kala-azar treatment centers** on national guidelines on treatment of Kala-azar. Relevant Trainings are required for Clinicians, nurses, paramedics and medical recorders.
4. To identify the gaps in the lab and ward capacity of the proposed Centre of excellence /s and develop a detailed report.
5. To develop a detailed report in the end on the entire processes and the activities completed, to capture the process and relevant photographs to document the activities.

2.1. Requirements

1. The service provider should possess all necessary approvals as required by Govt of Nepal to function in the country and the approval to receive international funds as being a service provider in the country.
2. Develop a comprehensive Site assessment form to evaluate health care facilities which have the potential to establish the CoE. The assessment form will capture parameters including but not limited to understand the available resources, staff, number of new/relapse-HIV-VL, PKDL cases, institutional capacities, geographies it serves, Diagnostic capacities, drug administration capacities etc. The site assessment form is to be finalised in collaboration with DNDi.
3. Conduct a comprehensive analysis of the health care facilities which can be upgraded to leishmaniasis Centre of Excellence to serve as a reference and training centre in Nepal. The analysis to be done on facilities suggested by Epidemiology and disease Control Division (EDCD), Ministry of Health and population of Nepal:
 - a. Identify healthcare facilities in endemic regions for suitability as Leishmaniasis Centre of Excellence for VL and PKDL case management.
 - b. Assess/evaluate existing facilities, human resources, ability to train and institutional interest for establishing the Centre of Excellence, utilizing the Site assessment form.
4. Collaborate with EDCD, DNDi & local stakeholders to support selection of one centre to be proposed as leishmaniasis Centre of Excellence among the various analysed facilities.
5. Develop a detailed report of the comprehensive analysis of the centre and the selection rationale and acceptance by the EDCD, DNDi and local stakeholders of the selected facility.

6. Develop a comprehensive plan of upgrading the Laboratory and Ward capacity of the shortlisted facility to be upgraded as the Leishmaniasis Centre of Excellence to serve as a reference and training centre in Nepal.
7. Finalise the training modules along with the EDCD for the different level healthcare staffs namely the Clinicians, nurses, paramedics, and medical recorders.
8. The Service providers is responsible for arranging and executing the training sessions. This includes managing the logistics, curriculum development, and ensuring the active participation and attendance of healthcare workers in the specified training programs.
 - a. Training of the Health Staffs for from **20 Kala-azar treatment centers** on national guidelines on Kala-azar (Clinicians, nurses, paramedics, and medical recorders).
 - b. Capacity Building for Healthcare Professionals:
 - Organize one 'training of trainers' program to equip healthcare professionals with the necessary skills to effectively impart knowledge.
 - Provide one training to medical professionals from the Leishmaniasis Centre of Excellence in Nepal on bone marrow aspiration and to laboratory staff on microscopic examination for diagnosing relapse cases.
 - c. Execute a total of eight training sessions to ensure at least 200 Clinicians, nurses, paramedics, and medical recorders get trained.
 - d. The printing and dissemination of training and educational materials to relevant stakeholders.

2.2. Timeline

For the successful implementation of the VL Centre of Excellence program in Nepal is expected to be completed by June 30, 2024 (No extension), with regular reporting and progress updates required throughout the implementation period. The key activities of the project " Developing Centre of Excellence (CoE) as a reference and training centre for Leishmaniasis in Nepal are:

Activity	Timeline for completion
MoU or letter of authorization to carry out the activities with EDCD, Ministry of health and Population, Nepal on collaboration to fulfil the deliverables as required by the RFP	January 2024

Develop a comprehensive Site assessment form to evaluate potential facilities. The assessment form will capture parameters including but not limited to understand the resources, staff, number of new/relapse-HIV-VL, PKDL cases, institutional capacities, geographies it will serve, Diagnostic capacities, drug administration capacities etc. The site assessment form to be finalised in collaboration with DNDi	January 2024
Complete comprehensive analysis of the existing facilities which can be upgraded to Leishmaniasis Centre of Excellence to serve as a reference and training centre in Nepal. The analysis to be done on facilities suggested by EDCD	March 2024
Collaborate with National programme & local stakeholders to select one centre of the various analysed facilities	April 2024
Develop a detailed report of the comprehensive analysis of the facility and the selection rationale and acceptance by the EDCD of the selected centre.	April 2024
Develop a comprehensive plan of upgrading the Laboratory and Ward capacity of the shortlisted centre to be upgraded as the Leishmaniasis Centre of Excellence to serve as a reference and training centre in Nepal	April 2024
Finalise the training modules along with the EDCD for the different level health staffs namely the Clinicians, nurses, paramedics, and medical recorders	January 2024
The implementing agency (Service providers) completes training of 50. Clinicians, nurses, paramedics, and medical recorders	February 2024
The implementing agency (Service providers) completes training of additional 50 Clinicians, nurses, paramedics, and medical recorders to bring the number to 100	March 2024
The implementing agency (Service providers) completes training of 50. Clinicians, nurses, paramedics, and medical recorders to bring the numbers to 150	April 2024
The implementing agency (Service providers) completes training of 50. Clinicians, nurses, paramedics, and medical recorders to bring the numbers of 200	May 2024
Provide training to healthcare professionals in Nepal on Splenic, bone marrow aspiration and microscopic examination for diagnosing relapse cases & training on skin snip and microscopic examination for PKDL patients.	April 2024
Regular monthly report to evaluate the progress and effectiveness of the project in Nepal.	Jan 2024 to June 2024

3. RFP Instructions

3.1. General Information

- a. DNDi invites you as a Service Provider to submit a proposal in regards of this RFP Developing Centre of Excellence (CoE) as a reference and training centre for Leishmaniasis in Nepal, as described above.
- b. This entire RFP and all the related discussions, meetings, information exchanges and subsequent negotiations that may occur are subject to the confidentiality terms and conditions of the Intent to Participate attached as Annex 1.
- c. All bidders are required to complete and send in return the Intent to Participate letter signed.
- d. The issuance of this current Request for Proposal in no way commits DNDi to make an award. DNDi is under no obligation to justify the reasons of its service provider's choice following the competitive bidding. DNDi could choose not to justify its business decision to the participants of the RFP.
- e. DNDi reserves the right to:
 - Reject any proposal without any obligation or liability to the potential service provider.
 - Withdraw this RFP at any time before or after the submission of bids without any advance notice, explanation or reasons.
 - Modify the evaluation procedure described in this RFP.
 - Accept other proposal than the lowest one.
 - Award a contract based on initial proposals received without discussions for best and final offers.
 - Award all services to only one supplier or allocate them to different suppliers according to what DNDi will consider necessary.
- f. Late submission of proposals is subject to rejection.
- g. DNDi reserves the right to request additional data, information, discussions or presentations to support the proposal. All bidders must be available to discuss about details of their proposal during the RFP process.
- h. All offers should be submitted in an electronic format and in English.

- i. A proposed time plan set out below indicates the process DNDi intends to follow. If there are changes to these timelines, DNDi will notify you in writing.

3.2. Timeline

Process steps	Responsible party	Timelines
RFP launch	DNDi	November 13th, 2023
Intent to participate + Q&A sent to DNDi	Service Provider	November 21st, 2023
DNDi responses to Q&A	DNDi	November 24th, 2023
Reception of proposals	Service Provider	December 4th, 2023
Bid defense	DNDi / Service Provider	2 nd week of December
Due Diligence (finalists)	DNDi / Service Provider	2 nd week of December
Supplier selection	DNDi	End of December

3.3. RFP Processes and contact information

3.3.1. Instructions

All bidders may request further clarifications in regards of this current RFP, by addressing questions in writing to the dedicated key contacts identified below in English. These questions should be submitted to DNDi at the date mentioned in the section 3.2. of the RFP.

In order to keep a fair bidding process, all the questions will only be answered in a document shared with all the bidders on the date indicated in section 3.2 of the RFP.

To submit your questions, please use the form attached as Annex 2.

3.3.2. Confirmation of intent

Please transmit your intent to participate by using and signing the document attached in Annex 1.

Each bidder is required to provide DNDi with a written confirmation of intent or decline to participate by the date as indicated in the section 3.2.

Please, note that the "intent to participate letter" is a standard document which DNDi cannot afford negotiating due to project priorities, time and resources dedication.

This template is based on several years of experience working with suppliers and contains widely acceptable terms in RFPs.

Confirmations of intent should be sent by email to Bruno Discini (contacts details below).

Please kindly send any questions to contacts below.

Questions types	Contact person	Title	Contact information
Procurement	Bruno Discini	Procurement Manager	Email: bdiscini@dndi.org
R&D	Amit Malik	Head of Regional Operations, South Asia	Email: amalik@dndi.org

3.4. Format and content of the proposal

Responses to this RFP must be in English and should contain the following information:

- **A cover letter including:**
 - Name and address of the service provider.
 - Name, title, phone number and email address of the person authorized to commit contractually the service provider.
 - Name, title, phone number and email address of the person to be contacted in regards of the content of the proposal, if different from above.
 - Signature of this letter done by a duly authorized representative of the company.
 - Acceptance of the consultation principles as detailed in section 3.1.
- **A technical proposal**
 - Detailed proposal explaining how your organization approach will enable DNDi team to meet project timelines and ensure quality results.
 - If the supplier will use third parties in some of the requested activities, please clarify in the proposal.
- **A financial proposal**
 - Budget with a detailed cost breakdown.
 - All costs expected shall be clearly indicated.
 - Pass-through cost shall be quoted.
- **Administrative information**
 - Business Company information: directors and officers, creation date, corporate headquarters, locations, business turnover of the past 3 years (global and in the field of service provided), headcounts (global and in the field of service provided), general services provided, customer's reference, pricing strategy for NGO.

- Any other relevant information enabling DNDi to assess the opportunity of contracting with your company.

3.5. Conflict of Interest

The Company shall disclose any actual or potential conflicts of interest in the Intent to Participate letter.

3.5.1. Criteria for selecting service providers

The decision to award any contract as a result of this RFP process will be based on Service Providers' responses and any subsequent negotiations or discussions. The decision-making process will consider the ability of each service provider to fulfil DNDi's requirements as outlined within this RFP and the cost of the offer.

- The proposed service provider should possess all necessary approvals as required by Government of Nepal to function in the country and the approval to receive international funds as being a service provider in the country.
- Interested organizations are requested to submit their proposals, including the following details:
 - A brief overview of the organization's experience in implementing healthcare programs in Nepal.
 - A technical approach and methodology outlining how the Leishmaniasis CoE will achieve its objectives as a reference and training center in Nepal. A detailed budget breakdown and cost estimation for each component of the program.
 - Provide information about key personnel actively involved in the project, along with their qualifications.
 - Submit a proposed timeline and work plan for the implementation period.
 - Include references or testimonials from previous clients and partners, if available.
 - Ensure that all necessary prerequisites, such as registration, work permits, eligible to receive foreign fund, and approvals/MoUs/ letter of authorization to carry out the activities from the Ministry of Health, are met.
 - Preference will be given to implementing agencies with a prior Memorandum of Understanding (MoU) with the Ministry of Health (MoH) for any other project. This prior engagement is considered advantageous for the successful execution of the project.

Proposals will be assessed against the main following criteria but not limited to:

3.5.2. Technical criteria

- Project approach, methodology and planning.

- Experiences/skills, level of company representatives assigned to this project.
- Quality and applicability of proposal presentation.
- Customer references.
- Data privacy protection measures in place in accordance with EU regulations.

3.5.3.Capacity to deliver

- Project management and business analysis capabilities.
- All necessary approvals required to function as a service provider in Nepal.
- Demonstrated experience and successful track record in implementing healthcare programs in Nepal.
- Qualifications and expertise of the proposed team members.

3.5.4.Financial criteria

- Realistic costing of the proposal with NGO rates when possible.
- Consider cost-effectiveness and ensure budget alignment with the program objectives.
- All activities listed above to be quoted with detailed costing provided.
- Invoices must be collected and secured, along with supporting documentation that includes a detailed breakdown of expenses.
- The organization should agree to undergo a financial audit for the project.
- Funds will only be released after the implementation agency signs the MoU or obtain letter of authorization to carry out the activities with the EDCD, Ministry of Health and Population, Government of Nepal for implementing this program.

4. Annexes

4.1. Annex 1: Letter of intent

4.2. Annex 2: Q&A Form