



**World Health
Organization**

Evaluating AMR Containment Strategies in Bangladesh: A Health System and Healthcare Facility-Level Assessment of National Action Plan Progress, Barriers, Coordination, and Alignment with Global Targets

Request for Proposals (RFP)

Proposal Reference

RFP-SEARO-Bangladesh-2026-004

Country Office/Unit Name

WCO BAN/HS

Issued on

Tuesday, May 19, 2026

Closing date

Monday, June 8, 2026

Closing Time

12:00 midnight

Time Zone

UTC + 6 hours

Section 1: Cover Letter

Dear Proposers,

The World Health Organization, hereinafter referred to as WHO, hereby invites prospective Proposers to submit a proposal in accordance with the General Conditions of Contract and the Terms of Reference as set out in this Request for Proposal (RFP).

To enable you to submit a proposal, please read the following attached documents carefully.

Contents:

Section 1: Cover Letter.....	2
Section 2: General Instructions to Proposers	3
Section 3: Specific Information to this RFP	9
Section 4: Evaluation Criteria.....	11
Section 5: Terms of Reference -Services	16
Section 6: General Conditions of Contract.....	222
Section 7: Returnable proposal forms.....	233
Annex A: Letter of Intent	244
Annex B: Confidentiality Undertaking.....	255
Annex C: Proposal Completeness Form.....	266
Annex D: Proposer Information.....	277
Annex E: Financial Proposal Form.....	29
Annex F: Self Declaration Form	311
Annex G: Joint Venture/Consortium /Association Information	322

If you are interested in submitting a proposal in response to this RFP:

1. Please acknowledge receipt of this RFP by completing and returning the Letter of Intent in Annex A, indicating your intention to submit a proposal or not, no later than Saturday, May 23, 2026
2. WHO Bangladesh office will organize a virtual Pre-bid meeting/Pre-proposal conference at 3 pm (Bangladesh time), 24 May 2026 with the bidders who would send their “Annex A: Letter of Intent” to WHO in the “Correspondence” tab of UNGM by 23 May 2026. WHO will share the meeting link to the interested bidders through separate e-mail ID (sebanprocurement@who.int) by 1 pm, 24 May 2026.
3. Please submit any requests for clarification no later than Monday, May 25, 2026
4. Please prepare your proposal in accordance with the requirements and procedures outlined in this RFP and submit it no later than Monday, June 8, 2026

All WHO vendors are required to comply with the [United Nations Supplier Code of Conduct](#). We encourage all Proposers to join the [United Nations Global Compact](#) and [support the Women’s Empowerment Principles](#) (WEP).

For guidance on how to register as a supplier in UNGM and use WHO’s e-tendering system, please refer to the following resources: [Instructions on how to register with WHO and access WHO tenders](#) , [UNGM Help Center](#) and [UNGM/In-Tend support](#)

We look forward to receiving your competitive proposals.

Section 2: General Instructions to Proposers

GENERAL	
1. About WHO	The World Health Organization (WHO) was established in 1948 as a specialized agency of the United Nations. The objective of WHO (www.who.int) is the attainment by all peoples of the highest possible level of health. "Health", as defined in the WHO Constitution, is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. WHO's main function is to act as the directing and coordinating authority on international health work.
2. Scope	Proposers are invited to submit a proposal in line with the Terms of Reference (Section 5) and the requirements of this RFP, including any written amendments. A summary of the scope is provided in Section 3: Specific information about this RFP.
3. Interpretation of the RFP	This RFP is conducted in accordance with Policies and Procedures of WHO, a summary of which is accessible at WHO's website: WHO Procurement: principles and processes . Any proposal submitted will be regarded as an offer by the proposer and does not constitute or imply the acceptance of the proposal by WHO. WHO is under no obligation to award a Contract to any proposer as a result of this RFP.
4. Eligible Proposers	<p>Proposers shall have the legal capacity to enter into a binding contract with WHO. All WHO suppliers must abide to the UN Supplier Code of Conduct, which is available at the following link: UN Supplier Code of Conduct. Proposers must submit a signed Self-Declaration form included in this RFP.</p> <p>Proposers will be excluded if:</p> <ul style="list-style-type: none"> • They are bankrupt, undergoing court administration, have suspended business, are under creditor arrangements, or in similar situations under national law. • They or individuals with decision-making power have been found guilty of fraud, corruption, involvement in criminal organizations, money laundering, terrorism-related offenses, child labor, or human trafficking. • They or such individuals have been found guilty of financial irregularities. • They misrepresent or fail to provide required information under this RFP or during evaluation. • They have a conflict of interest, as determined solely by WHO. This includes associations with firms involved in preparing specifications for this procurement or any other conflicting situation. • They appear on sanction or ineligibility lists, including the UN Security Council, UN Ineligibility List, World Bank's non-responsible vendors list, or World Bank ineligible firms and individuals list. <p>WHO may also exclude proposers for other reasons, at its discretion.</p> <p><i>Mandatory Technical Competence:</i></p> <ul style="list-style-type: none"> - Minimum 5 years of experience as a research or public health organization conducting health system assessments, policy reviews, or implementation research in Bangladesh. - Demonstrated experience in completing minimum 1 work/project on national health strategies, communicable disease control, or AMR-related projects with HO, the Directorate General of Health Services (DGHS), or other international development partners within the last 5 years. <p><i>Desirable Technical Competence:</i></p> <p>a) Comprehensive experience in developing or implementing at least one National Action Plan (NAP) or national program assessment, plus completion of one assignment on Antimicrobial Stewardship (AMS) and Infection Prevention and Control (IPC) in public hospitals:</p> <p>b) Comprehensive experience in developing or implementing at least one NAP or national program assessment related to communicable diseases, but without specific AMR assessment experience.</p> <p>c) Experience in developing or implementing at least one NAP or national program assessment in areas unrelated to communicable diseases or AMR.</p>

SOLICITATION DOCUMENTS	
5. Clarification of solicitation documents	<p>Proposers may request clarifications on any of the RFP documents no later than the date and time indicated in Section 3: Specific Information to this RFP. Any request for clarification must be sent in writing in the manner indicated in Section 3: Specific Information to this RFP. Explanations or interpretations provided by personnel other than the named contact person will not be considered binding or official.</p> <p>WHO will provide the responses to clarifications through the method specified in Section 3: Specific Information to this RFP. No individual presentations or meetings with Proposers will be allowed before the proposal submission deadline. From the issuance of this RFP until final selection, contact with WHO officials is not permitted, except through formal queries as outlined, or if WHO initiates a presentation or meeting as per the RFP terms.</p>
6. Amendment of solicitation documents	<p>WHO may, at any time before the closing date for submission of proposals, for any reason, whether on its own initiative or in response to a clarification requested by a (prospective) proposer, modify the RFP by written amendment. Amendments will be made available to all prospective Proposers.</p> <p>If the amendment is substantial or for other reasons, WHO may extend the Deadline for submission of proposals.</p>
PREPARATION OF PROPOSALS	
7. Cost of preparation of the proposal	The proposer shall bear all costs related to the preparation and/or submission of the proposal, regardless of whether its proposal is selected or not. WHO shall not be responsible or liable for those costs, regardless of the conduct or outcome of the procurement process.
8. Language	The proposal, as well as any and all related correspondence exchanged by the proposer and WHO, shall be written in the language(s) specified in Section 3: Specific Information to this RFP.
9. Documents comprising the proposal	The proposal shall comprise of the forms requested in Section 7: Proposal forms as well as any associated documentation requested in the RFP
10. Technical proposal format and content	<p>The proposer must submit a technical proposal addressing all requirements in Section 4 (Evaluation Criteria), attaching the forms provided in Section 7 and responding to RFP requirement as described in Section 5 - Terms of Reference.</p> <p>The technical proposal shall not include any price or financial information. A technical proposal containing material financial information may be declared non-responsive.</p>
11. Financial proposal	<p>The financial proposal shall be prepared using the form provided in Section 7 and taking into consideration the requirements in the RFP. The proposal shall list all major cost components associated with the services, and the detailed breakdown of such costs.</p> <p>Any output and activities described in the technical proposal but not priced in the financial proposal, shall be assumed to be included in the prices of other activities or items as well as in the final total price.</p> <p>Prices and other financial information must not be disclosed in any other place except in the financial proposal.</p>
12. Prices, Duties and taxes	<p>WHO is entitled to tax exemption by reason of the Privileges and Immunities it enjoys, subject to the conditions included in the WHO General Terms and Conditions in Section 6.</p> <p>During bidding, vendors must submit prices excluding taxes. However, in jurisdictions / countries where VAT is mandatory, as evidenced by the vendor, the selected vendor will include VAT on invoices to WHO. The respective Finance team at Headquarters, Regional Office, or Country Office, will handle refund claims with the relevant authorities in accordance with applicable tax laws and procedures in that jurisdiction / country.</p> <p>Any quantity or other discounts (e.g.: volume discounts) shall be clearly indicated. Prices quoted by the Proposer shall be fixed during the proposer's performance of the contract. Any adjustment or revision to the prices shall only be made effective upon agreement based on written amendment signed by both parties.</p>
13. Currencies	Prices may be quoted in BDT, or any currency of the proposer's choice, unless otherwise stipulated in Section 3 Information Specific to the RFP.

	However, for the purposes of comparison of all offers, WHO will convert the currency quoted in the offers to USD, in accordance with the UN Operational Rate of Exchange on the closing date for proposal submission specified in Section 3: Specific information about this RFP.
14. Proposal validity period	Proposals shall remain valid for the period specified in Section 3: Specific information about this RFP commencing on the deadline for submission of proposals. A proposal valid for a shorter period may be rejected by WHO and rendered non-responsive. During the proposal validity period, the proposer shall maintain its original proposal without any change, including the availability of the key personnel, the proposed rates and the total price. In exceptional circumstances, prior to the expiration of the proposal validity period, WHO may request Proposers to extend the period of validity of their proposals.
15. Joint Venture, Consortium or Association	Two or more entities may form a joint venture or consortium and submit a joint proposal offering to jointly provide the services described in the proposal. Such a proposal must be submitted in the name of one member of the consortium hereinafter the "lead organization". The lead organization will be responsible for undertaking all negotiations and discussions with, and be the main point of contact for, WHO. The lead organization and each member of the consortium will be jointly and severally responsible for the proper performance of the contract
16. Only one proposal	Each proposer, including individual members of any Joint Venture, may submit only one proposal—either independently or as part of a Joint Venture. Proposals will be rejected if any of the following apply: <ul style="list-style-type: none"> • They share at least one controlling partner, director, or shareholder. • One has received a direct or indirect subsidy from another. • They have the same legal representative for this RFP. • They are related in a way that gives access to or influence over another's proposal. • They are subcontractors to each other, or a subcontractor also submits a separate proposal as a lead proposer. • Key personnel are proposed in more than one team (this does not apply to subcontractors appearing in multiple proposals).
17. Alternative proposals	Unless otherwise specified in Section 3: Specific information about this RFP, alternative proposals shall not be considered. If submission of alternative proposal is allowed in Section 3: Specific information about this RFP, a proposer may submit an alternative proposal but only if it also submits a proposal conforming to the RFP requirements. Where the conditions for its acceptance are met, or justifications are clearly established, WHO reserves the right to award a contract based on an alternative proposal.
18. Pre-proposal conference	When appropriate, a pre-proposal conference will be held at the date, time, and location specified in Section 3: Specific information about this RFP. If marked as mandatory, non-attendance will result in ineligibility to submit a proposal. If not mandatory, non-attendance will not lead to disqualification.
19. Site inspection	If specified in Section 3: Specific information about this RFP, a site inspection will be held at the indicated date, time, and location, following the given instructions. If marked as mandatory, failure to attend will render a proposer ineligible. If not mandatory, non-attendance will not lead to disqualification. Proposers are responsible for their own visa arrangements. The site inspection is for background information only, and any information provided is not binding unless confirmed by WHO in writing.
SUBMISSION AND OPENING OF PROPOSALS	
20. Instruction for proposal submission	The proposer shall submit a complete proposal in the format and with the documents required in Section 3: Specific information about this RFP, using the delivery method specified therein. Submission of a proposal implies that the proposer has accessed, read, understood, and agrees to comply with WHO's General and Contractual Conditions in Section 6.
21. Deadline for proposal submission	Complete proposals must be received by WHO in the manner, and no later than the date and time, specified in Section 3: Specific information about this RFP. In case of any doubt regarding the time zone, Proposers should refer to Section 3: Specific information about this RFP. It is the sole responsibility of Proposers to ensure their proposal is received by the stated deadline. Late submissions will not be possible or accepted. Proposers are strongly advised to take all necessary steps to ensure timely submission. WHO accepts no responsibility

	<p>for proposals that are delayed due to technical issues and will consider only the actual date and time of receipt.</p> <p>WHO may, at its discretion, extend the proposal submission deadline by amending the solicitation documents in accordance with Clause 6 (Amendment of solicitation documents) of Section 2. In such cases, the new deadline will apply to all Proposers.</p>
22. Withdrawal, substitution and modification of proposals	The proposer may withdraw its proposal any time after the proposal's submission and before the tender closing date of the proposals, provided a written and signed notice of the withdrawal is received by WHO prior to the closing date for the submission of proposals. No Proposal may be withdrawn in the interval between the closing date for submission of proposals and the expiration of the proposal validity period.
23. Proposal opening	<p>Proposals will be opened after the deadline for proposal submission by the proposal opening committee</p> <p>There will be separate proposal openings for technical and financial proposals. The opening panel will open only the financial proposals of suppliers who meet the minimum criteria of the technical evaluation.</p>
EVALUATION OF PROPOSALS	
24. Evaluation of proposals	<p>WHO shall evaluate a proposal using only the methodologies and criteria defined in this RFP. No other criteria or methodology shall be permitted.</p> <p>WHO shall conduct the evaluation solely on the basis of the submitted technical and financial proposals.</p> <p>Evaluation of proposals shall be undertaken in the following steps:</p> <ul style="list-style-type: none"> (i) preliminary examination. (ii) evaluation of minimum eligibility and qualification (if pre-selection is not done) / mandatory requirements (iii) evaluation of technical proposals on weighted scoring; and (iv) evaluation of financial proposals.
25. Preliminary examination	WHO shall examine the proposals to determine whether they are complete with respect to minimum documentary requirements, whether the documents have been properly signed, and whether the proposals are generally in order, among other indicators that may be used at this stage. WHO reserves the right to reject any proposal at this stage. Technical proposals found to contain financial proposal or pricing information will be rejected.
26. Evaluation of eligibility and qualification	Eligibility and qualification of the proposer will be evaluated against the minimum eligibility and qualification requirements specified in Section 4: Evaluation Criteria and in Clause 4 (Eligible Proposers) in Section 2.
27. Evaluation of technical and financial proposals	<p>After the preliminary evaluation, the panel will assess technical proposals based on their responsiveness to the Terms of Reference and other RFP documents, using the evaluation criteria, sub-criteria, and point system in Section 4: Evaluation Criteria. Proposals that do not meet the minimum technical score will be considered non-responsive.</p> <p>Only the financial proposals of technically qualified Proposers will be opened and evaluated in the second stage.</p> <p>If required, WHO may invite technically responsive Proposers for a presentation, with conditions provided in the RFP. Presentations may be held at WHO offices or via tele/videoconference.</p> <p>The applicable evaluation method is indicated in Section 3: Specific information about this RFP, typically the combined scoring method based on both technical and financial scores.</p>
28. Clarification of proposals	WHO may request clarifications or additional information in writing from Proposers at any stage of the evaluation. Responses must not alter the substance or price of the proposal, except to confirm corrections of any arithmetical errors identified by WHO, as outlined in the General Instructions to Proposers.
29. Nonconformities, reparable errors and omissions	Provided that a proposal is substantially responsive, WHO may request the proposer to submit the necessary information or documentation within a reasonable period in order to rectify nonmaterial nonconformities or omissions in the proposal related to documentation requirements. Such omission shall not be related to any aspect of the

	<p>price of the proposal. Failure of the proposer to comply with the request may result in the rejection of its proposal.</p> <p>For financial proposals that have been opened, WHO shall check, and correct arithmetical errors as follows:</p> <ol style="list-style-type: none"> a) if there is a discrepancy between the unit price and the line item total that is obtained by multiplying the unit price by the quantity, the unit price shall prevail and the line item total shall be corrected, unless in the opinion of WHO there is an obvious misplacement of the decimal point in the unit price; in which case, the line item total as quoted shall govern and the unit price shall be corrected; b) if there is an error in a total corresponding to the addition or subtraction of subtotals, the subtotals shall prevail, and the total shall be corrected; and c) if there is a discrepancy between words and figures, the amount in words shall prevail, unless the amount expressed in words is related to an arithmetical error, in which case the amount in figures shall prevail. <p>If the proposer does not accept the correction of errors, its proposal shall be rejected, and its proposal security may be forfeited.</p>
AWARD OF CONTRACT	
30. Award criteria, award of Contract	<p>Before the expiration of proposal validity, WHO will award the Contract to the qualified proposer based on the criteria set out in the tender document.</p> <p>WHO reserves the right to:</p> <ol style="list-style-type: none"> a) award the Contract to any proposer, even if not the lowest. b) award separate contracts for different parts, components, or items to one or more proposers, even if not the lowest. c) accept or reject any proposal or cancel the entire solicitation process at any time before award, without liability or obligation to inform proposers of the reasons. d) award the Contract based on WHO's specific objectives to the proposer whose offer best meets the Organization's needs. e) decide not to award any contract.
31. Right to vary requirements at time of award	<p>At the time the Contract is awarded, WHO reserves the right to revise the scope of the work or to increase or decrease the quantity of services originally specified in Section 5: Terms of Reference / Schedule of requirements, and without any change in the unit prices or other terms and conditions of the proposal and the solicitation document.</p>
32. Notification of award	<p>Prior to the expiration of the period of proposal validity, WHO will notify the successful proposer in writing via email or via a notification from e-tendering system. After signing the contract with successful vendor, the unsuccessful vendors will be sent a regret notification.</p>
33. Payment terms	<p>Full payment of 100% is due within 30 days following receipt and acceptance of services, upon receipt of the invoice.</p>
34. Debriefing	<p>WHO does not routinely offer debriefings to unsuccessful proposers. However, for tenders over \$300,000 or complex tenders, WHO may provide a debriefing upon written request. The request must be submitted within 30 calendar days of receiving the notification of non-award.</p> <p>The debriefing aims to highlight the strengths and weaknesses of the proposer's submission to help improve future proposals. It will not include discussion of other proposals or comparisons. Debriefings will be conducted only through in-person meetings, teleconference, or videoconference.</p>
35. Proposal complaint	<p>When a supplier believes that WHO did not follow its own procurement rules, the supplier may choose to raise a formal complaint. The Procurement Complaint Mechanism is only available to suppliers who:</p> <ul style="list-style-type: none"> • Participated in a competitive procurement process and were not awarded a contract; and • The value of the contract award is higher than US\$ 300,000. <p>A formal complaint must be submitted in writing within one month of the notification of the outcome of the competitive bidding process, to the following email address:</p>

	procurementcomplaint@who.int and must include the minimum information detailed on the WHO website (WHO Procurement: frequently asked questions).
36. Publication of Contract award	WHO publishes on its contract awards webpage the list of contracts for acquired goods and services of a value of USD 25 000 or more. This information is published with due observance of the requirements of confidentiality and security. Further procurement data about WHO can be obtained through WHO's Procurement Report or at UNGM's Annual Statistical Report on UN Procurement ..
37. Performance Security	This is not mandatory; however, if specified in Section 3: Specific information about this RFP, the successful Proposer must provide a performance security in the stated amount and form within the specified timeframe after receiving the contract from WHO.

Section 3: Specific Information to this RFP

The following specific information shall complement, supplement or amend the provisions in [Section 2: General Instructions to Proposers](#). In case there is a conflict, the provisions herein shall prevail over those in [Section 2: General Instructions to Proposers](#).

Instructions to Proposer's article	Specific Instructions / Requirements
Scope of RFP (Article 2)	The reference number of this Request for Proposal (RFP) is RFP-SEARO-Bangladesh-2026-004 The services include the Evaluating AMR Containment Strategies in Bangladesh: A Health System and Healthcare Facility-Level Assessment of National Action Plan Progress, Barriers, Coordination, and Alignment with Global Targets as further described in Section 5 of this RFP. The purpose of this RFP is to establish Contract
Clarification of the RFP (Article 5)	a) Contact details for clarification of solicitation documents should be sent to WHO by: <input type="checkbox"/> Email address Click or tap here to enter text. <input checked="" type="checkbox"/> Via UNGM e-tendering portal: Questions are to be submitted via the UNGM "Correspondence" tab b) Deadline for submitting requests for clarifications / questions: Date: 08 June 2026 Time: 12:00 Midnight City and Country: Dhaka, Bangladesh Responses to requests for clarification will be communicated in writing by WHO to all proposers via same medium as stated above.
Language of the RFP (Article 8)	Language of this proposal shall be in English
Currency of proposal (preferred) (Article 13)	Prices included in the proposal shall be preferably quoted in BDT
Proposal validity (Article 14)	180 days from the deadline for proposal submission.
Alternative proposals (Article 17)	Shall be considered.
Pre-proposal conference (Article 18)	Will be held and is mandatory WHO Bangladesh office will organize <u>a virtual Pre-bid meeting/Pre-proposal conference</u> at 3 pm (Bangladesh time), 24 May 2026 with the bidders who would send their "Annex A: Letter of Intent" to WHO in the Correspondence" tab of UNGM by 23 May 2026. WHO will share the meeting link to the interested bidders through separate e-mail ID (sebanprocurement@who.int) by 1 pm, 24 May 2026.
Site Inspection (Article 19)	A site inspection will not be held.
Instructions for submission of Proposals (Article 20)	Allowable manner of submitting proposals: <input checked="" type="checkbox"/> E-tendering (In-Tend): <input type="checkbox"/> Email: Click or tap here to enter text. <input type="checkbox"/> Other Click or tap here to enter text. <u>ATTENTION:</u> Proposals which do not comply with the selected method of submission may be rejected.
Deadline for proposal submission (Article 21)	Public proposal opening will not be held CLOSING DATE: 08 June 2026 CLOSING TIME: 12:00 midnight

Instructions to Proposer's article	Specific Instructions / Requirements
Evaluation of technical and financial proposals (Article 24)	Evaluation will be based on the combined scoring method using a distribution of 70% : 30% of Technical Proposal to Financial Proposal respectively. To be technically compliant, Proposers must obtain a minimum threshold of 70% of maximum points.

Section 4: Evaluation Criteria

The evaluation criteria are divided into two.

- A- Technical Evaluation Criteria Weighing 70%
- B- Financial Evaluation Criteria Weighing 30%

A- TECHNICAL EVALUATION CRITERIA

The technical evaluation criteria will follow the below process

1. Preliminary examination.
2. Evaluation of minimum eligibility and qualification/mandatory requirements.
3. Technical Proposal Weighted Scoring.

1. Preliminary examination

WHO shall examine the proposals to determine whether they are complete with respect to minimum documentary requirements, whether the documents have been properly signed, and whether the proposals are generally in order, among other indicators that may be used at this stage. WHO reserves the right to reject any proposal at this stage. Technical proposals found to contain financial proposal or pricing information will be rejected

2. Minimum eligibility and qualifications (Mandatory Requirements)

The vendors proposals will be assessed on pass and fail methodology and failure in any of the criteria may exclude the vendor for consideration at next stage of weighted scoring. WHO reserves the right to seek clarification when a proposal contains unclear or ambiguous information that makes it difficult to evaluate the submission fairly against the published technical criteria.

Item	Minimum eligibility and qualifications (Mandatory Requirement)	Required supporting documents	Pass /Fail?
1.	<u>Corporate status of the company:</u> Proposer is a legally registered entity	Vendor to provide proof of registration or accreditation in form of incorporation certificate, trading licences by filling the form in Annex D	
2.	<u>Vendor Eligibility:</u> Vendor is not suspended, nor otherwise identified as ineligible, by any UN Organization, the World Bank Group or any other International Organization in accordance with Section 2: Clause 4.	Vendor to declare that its company is eligible by filling the form in Annex D	
3.	<u>Conflict of Interest:</u> The Proposer must have no conflict or perceived conflict of interest	Vendor to declare that he has no conflict / perceived conflict of interest by filling the form in Annex E	
4.	<u>Bankruptcy:</u> Proposer has not declared bankruptcy, is not involved in bankruptcy or receivership proceedings, and there is no judgement or pending legal action against the vendor that could impair its operations in the foreseeable future	Vendor to declare that he has no conflict / perceived conflict of interest by filling the form in Annex E	
5.	<u>Non-performing contracts and History of Litigation:</u> Vendor must declare that during the last 3 years, that its company has no non-performing contracts because of its company's default and that its company has no consistent history of court/arbitral award decisions against itself.	Vendor to declare that its company is eligible by filling the form in Annex D	
6.	<u>Company / Experience-</u> The proposer must have minimum five years of relevant experience (<i>For Joint Venture/Consortium/Association, all Parties cumulatively should meet the requirement</i>).	Company should provide a list of relevant projects that should demonstrate at least five years of relevant experience. Please fill form D	

7.	Past performance: The proposer must submit at least: a) List of projects/studies relevant/comparable contracts and b) if available, reference letters for related services.	Company / respondent should provide any reference letters related to the current project, Fill form D for the list of relevant projects	
8.	At least 5 years of experience as a research or public health organization conducting health system assessments, policy reviews, or implementation research in Bangladesh	Report/publications/work completion certificate of any work related to health system assessments, policy reviews, or implementation research in Bangladesh with precise information: /name of the organization/purchaser (for which the work was delivered), title of work/project, date of work/year of completion, contract value etc.	
9.	Demonstrated experience in completing minimum 1 work/project on national health strategies, communicable disease control, or AMR-related projects with HO, the Directorate General of Health Services (DGHS), or other international development partners within the last 5 years.	Report/publications of the completed work/project related to national health strategies, communicable disease control, or AMR-related projects with precise information: /name of the organization (for which the work has been done), title of work/project, date of work/year of completion, contract value etc.	
10.	Past performance of the bidder(s) with WHO is satisfactory and without any internal limitation/restrictions for future contracts by WHO (applicable only for bidders who had performed/is performing for WHO under any contract with WHO Bangladesh).	Internal review report (of WHO-bidders are not required to submit any documents).	

N.B Failure in any of the above mandatory criteria will result in the vendors proposal not being considered for weighted Scoring.

3. Weighted Scoring Criteria

Vendors who pass the preliminary and minimum eligibility requirements will have their proposals evaluated using a weighted scoring system, depending on the quality and clarity of the submitted proposal. Each proposal will be assessed against the set criteria, and a weighted score will be calculated to determine the most technically and/or financially advantageous offer.

The number of points which can be obtained for each evaluation criterion is specified below and indicates the relative significance or weight of the item in the overall evaluation process. As indicated, these points or even the criteria can be changed depending on the RFP requirements

The scoring scale per criteria was defined as follows:

Criteria evaluated as:	Based on the following supporting evidence:	Corresponds to the % of maximum score
Excellent and fully detailed	Excellent evidence of ability to exceed requirements	100%
Substantially detailed	Good evidence of ability to exceed requirements	80%
Averagely detailed	Satisfactory evidence of ability to support requirements	70%
Marginally detailed	Marginally acceptable or weak evidence of ability to support requirements	20%
No submission	Information has not been submitted or is unacceptable	0%

Weighted Criteria and maximum Score for each criteria is as follows.

Section 1. Organizational Capacity and Industry Standing		Max Points
1.1	Proven Organizational Capability. <i>The submitted proposal demonstrates a clear and robust organizational structure, effective project management systems, and the capacity to self-finance the assignment.</i>	80

	<p>a. Background of the organization (year of establishment, total number of staff, geographical distribution/presence in the field goal/objectives, ongoing projects, etc.): 30 points</p> <p>b. Profile of the organization with acknowledgement of work, significant achievements and or contribution in the relevant field of work has been made so far: 20 points</p> <p>c. Management structure (Organogram) of the organization, total number of relevant experts and professionals, is capable to ensure effective project implementation as per the timeframe/log frame of the work with putting systematic monitoring, analysis, evaluation and reporting mechanism in place: 30 points</p>	
1.2	<p>Relevant Technical Experience in Similar Contexts: <i>The submitted proposal provides evidence of verifiable evidence of completed projects of comparable scope and complexity, preferably in the same country or region or UN or any comparable International Organizations, delivered in the last XX years. Proposals must demonstrate relevance to the subject matter and include project titles, duration, scope, and outcomes.</i></p> <p>Comprehensive experience in developing or implementing at least one National Action Plan (NAP) on AMR or national AMR program assessment, or completion of one assignment on Antimicrobial Stewardship (AMS) and Infection Prevention and Control (IPC) in public hospitals: 40 points.</p> <p>-No relevant experience: 0 points</p>	40
1.3	<p>Comprehensive experience in developing or implementing at least one NAP or national program assessment related to communicable diseases, but without specific AMR assessment experience: 20 points.</p> <p>-No relevant experience: 0 points.</p>	20
1.4	<p>Experience in developing or implementing at least one NAP or national program assessment in areas unrelated to communicable diseases or AMR: 20 points.</p> <p>-No relevant experience: 0 points.</p>	20
1.5	<p>Quality assurance procedures and risk mitigation measures – the submitted proposal documented quality assurance system (e.g., ISO 9001 or equivalent quality policy), a risk plan with mitigation strategies tailored to this assignment, and clear internal review protocols.</p>	40
Total Section 1		200
Section 2. Proposed methodology approach and implementation plan		
2.1	<p>Clear and Detailed Understanding of the Terms of Reference - <i>The submitted proposal demonstrates a clear grasp of the objectives and scope of the assignment, addresses all key components of the Terms of Reference, and reflects appropriate emphasis on each task area. Responses must refer to specific sections of the TOR and align with stated deliverables.</i></p>	120
2.2	<p>Proposed Approach and Methodology: <i>The submitted proposal presents a structured, realistic methodology that goes beyond repeating the TOR and includes details on resource use, stakeholder engagement (where applicable), innovative practices (if any), and value-added elements. The methodology must show logical progression from planning to execution.</i></p>	200
2.3	<p>Implementation and Operational Management Plan: <i>The submitted proposal provides a comprehensive plan detailing how the assignment will be implemented and managed including a sequenced and time-bound work plan with key activities, timelines, and deliverables (Gantt Chart etc) and an explanation of how tasks will be organized, controlled, and monitored</i></p>	80
2.4	<p>Comprehensive Performance Monitoring and Evaluation Mechanisms: <i>The submitted proposal includes clear performance monitoring and evaluation tools, benchmarks, KPIs, and reporting frequency. It describes how performance will be tracked throughout implementation and how findings will inform adjustments.</i></p>	100
Total Section 2		500
Section 3. Management Structure and Key Personnel		Max Points

3.1	<p>Management structure: <i>The proposal presents a clear and functional team structure that supports effective implementation and contract management. The management roles, reporting lines, and responsibilities are clearly defined and appropriate for the scope of the assignment.</i></p>	100
3.2	<p>Key Personnel Qualifications: <i>The proposal includes qualified individuals for each key role (Team Leader, Senior Expert, Junior Expert), with CVs demonstrating their experience and competencies in line with the assignment requirements.</i></p> <p>1. Project lead (100 points) <i>(A summary of information needs to be provided as per the format in the CV-Annex)</i></p> <ul style="list-style-type: none"> • Educational Background: 15 points <ul style="list-style-type: none"> ○ Master's degree in Public Health, Epidemiology, Medicine, Microbiology, or allied subject and PhD degree: 15 points ○ Master's degree in Public Health, Epidemiology, Medicine, Microbiology, or allied subject: 10.5 points ○ Others: 0 points • Number of years of experience in national policy planning, AMR containment, or communicable disease control: 25 points <ul style="list-style-type: none"> ○ 7 years and above: 25 points ○ 5 to 6 years: 20 points ○ 3 to 4 years: 17.5 points ○ 1 to 2 years: 5 points ○ Below 1 year: 0 points • Specific Experience: Previous work with National Action Plans (NAPs), AMR strategies, or Antimicrobial Stewardship (AMS) assignments: 40 points <ul style="list-style-type: none"> ○ 4 or more national/large-scale AMR assignments: 40 points ○ 3 assignments: 32 points ○ 2 assignments: 28 points ○ 1 assignment: 8 points ○ No experience: 0 points • Number of assignments completed as Team Lead: 20 points <ul style="list-style-type: none"> ○ 4 or more assignments: 20 points ○ 3 assignments: 16 points ○ 2 assignments: 14 points ○ 1 assignment: 4 points ○ No assignment: 0 points 	100
3.3	<p>2. Analytical Lead (100 points) <i>(A summary of information needs to be provided in CV format)</i></p> <ul style="list-style-type: none"> • Educational Background (Medical Degree with Public Health specialization): 15 points <ul style="list-style-type: none"> ○ Medical Degree (MBBS, MD, or equivalent) AND a Master's in Public Health (MPH), Epidemiology, or allied subject: 15 points ○ Medical Degree (MBBS, MD, or equivalent) only: 10.5 points ○ Others: 0 points • Number of years of experience in clinical research, hospital-based public health assessments, or health system research: 25 points <ul style="list-style-type: none"> ○ 5 years and above: 25 points ○ 4 years: 20 points ○ 3 years: 17.5 points ○ 2 years: 5 points ○ 1 year and below: 0 points • Involved in 3 or more AMR/IPC/AMS/ID related qualitative or mixed-methods studies: 40 points <ul style="list-style-type: none"> ○ 4 or more studies: 40 points ○ 3 studies: 32 points 	100

<ul style="list-style-type: none"> ○ 2 studies: 28 points ○ 1 studies : 8 points ○ No studies: 0 points <ul style="list-style-type: none"> ● Specific Experience: conducting minimum 1 qualitative or mixed-methods research (e.g., IDIs, FGDs) with healthcare workers, with prior involvement in AMR, Infection Prevention and Control (IPC), or Antimicrobial Stewardship (AMS) projects: 20 points <p>No experience: 0</p>	
Total Section 3	300
Grand Total	1,000

NOTE

- a) A minimum of 70% is required to pass the technical evaluation. Non-technically compliant proposals will not be opened for commercial evaluation
- b) Rating the Technical Proposal (TP):

$$\text{TP Rating} = (\text{Total Score Obtained by the Offer} / \text{Max. Obtainable Score for TP}) \times 100$$

B- FINANCIAL EVALUATION

Once the technical evaluation is finalized, all evaluation panel members will sign the technical evaluation report. Only financial proposals from proposers who meet the minimum technical score, as indicated above, will be opened and evaluated. Proposals that do not meet the minimum technical threshold will be rejected.

The formula for the rating of the proposals will be as follows:

Rating the Technical Proposal (TP):

$$\text{TP Rating} = (\text{Total Score Obtained by the Offer} / \text{Max. Obtainable Score for TP}) \times 100$$

Rating the Financial Proposal (FP):

$$\text{FP Rating} = (\text{Lowest Priced or Cost Offer} / \text{Price or Cost of the Offer Being Evaluated}) \times 100$$

Total Combined Score:

$$(\text{TP Rating}) \times (\text{Weight of TP } 70\% + (\text{FP Rating}) \times (\text{Weight of FP i.e. } 30\%) = \text{Total Combined and Final Rating of the Proposal.}$$

Section 5: Terms of Reference -Services

5.1 Introduction

WHO is seeking for a qualified, eligible and competent proposer for the Evaluating AMR Containment Strategies in Bangladesh: A Health System and Healthcare Facility-Level Assessment of National Action Plan Progress, Barriers, Coordination, and Alignment with Global Targets

This requirement will lead to an Agreement of Performance of Work (APW) or Contract, WHO deserves the right to award one or several vendors. In case of several awards for this requirement, subsequent streams of work will be awarded after secondary bidding from the LTA Holders.

Background and Rationale

Global and National Burden of AMR

Antimicrobial resistance (AMR) is a major global public health threat, directly responsible for approximately 1.27 million deaths annually and contributing to nearly 5 million deaths worldwide. Low- and middle-income countries (LMICs), including Bangladesh, bear a disproportionate burden due to systemic health system constraints.

Bangladesh is considered a high-risk setting for AMR due to multiple drivers:

- High levels of antibiotic misuse and overuse
- Limited awareness among providers and the public
- Weak infection prevention and control (IPC) and WASH systems
- Limited diagnostic capacity and laboratory quality assurance
- A pluralistic and weakly regulated health system

Recent estimates suggest approximately 26,200 deaths in Bangladesh in 2019 were attributable to AMR. Increasing resistance among common pathogens, particularly in hospital settings, is complicating treatment and increasing morbidity, mortality, and healthcare costs.

National AMR Strategy (2023–2028)

Bangladesh has demonstrated strong political commitment to AMR containment through the development and endorsement of the **National Strategy and Action Plan for AMR Containment (2023–2028)**. The strategy outlines a comprehensive framework aligned with the One Health approach and includes key priority areas:

- Key Strategy 1: Establish integrated surveillance and strengthen laboratory capacity;
- Key Strategy 2: Promoting rational use of antimicrobials and antimicrobial stewardship program;
- Key Strategy 3: Enabling good practices through effective sanitation, hygiene and infection prevention and control;
- Key Strategy 4: Increasing stakeholder awareness and engagement;
- Key Strategy 5: Strengthen multi-sectoral coordination;
- Key Strategy 6: Promote innovation and research on AMR;
- Key Strategy 7: Reduce the environmental spread of AMR;
- Key Strategy 8: Strengthen global collaboration and partnerships;

The strategy defines specific actions and milestones to be achieved over the five-year period, with increasing emphasis on institutionalizing AMS programs, expanding surveillance coverage, and improving accountability mechanisms.

However, while policy frameworks are well established, **systematic evidence on implementation progress—particularly at the healthcare facility level—remains limited**. There is a critical need to

assess whether planned interventions are translating into operational changes in hospitals and other healthcare settings.

Implementation Gaps at Healthcare Facility Level

Despite national-level progress, implementation at the facility level remains fragmented:

- AMS programs are not consistently institutionalized
- Diagnostic services are limited or underutilized
- IPC practices are variably implemented
- Inter-professional coordination (clinicians, microbiologists, pharmacists, IPC teams) is weak
- Monitoring and accountability mechanisms are insufficient

Evidence from recent AMS piloting in public hospitals indicates that while stewardship is feasible, multiple systemic barriers persist, including workforce constraints, supply chain issues, behavioral resistance, and lack of dedicated resources.

Alignment with UNGA and Regional AMR Targets

The **2024 UN General Assembly (UNGA) Political Declaration on AMR** and the **WHO South-East Asia Regional Roadmap (2025–2030)** set ambitious targets, including:

- Increasing the proportion of Access antibiotics
- Expanding AMR surveillance
- Strengthening AMS and IPC implementation
- Improving diagnostic utilization

Achieving these targets requires **translation of global commitments into operational actions at healthcare facility level**, which remains a key challenge in Bangladesh.

5.2 Characteristics of the Contractor is

5.2.1 Status

The Proposer shall be a Profitcompany/entity operating in the field of Antimicrobial resistance (AMR)

5.2.2 Accreditations

An accreditation (ISO 9001 or equivalent; other in a relevant field or specific accreditation/certification) or an on-going accreditation process by a certified accreditation body is required (mandatory) would be an asset (desirable).

5.2.3 Previous experience

Mandatory Past Experience

- Proven experience engaging high-level policymakers, including senior officials at the MOHFW and DGHS, to disseminate research findings and advocate for policy uptake.
- At least 5 years of experience conducting health system assessments, implementation research, or national policy reviews within the Bangladesh context.
- Demonstrated history of successfully completing technical assignments for the WHO or other major international organizations in the field of public health or communicable disease control within the last 5 years.
- Documented experience conducting qualitative research (IDIs/FGDs) specifically targeting multidisciplinary healthcare professionals to identify systemic bottlenecks.

Desirable Past Experience

- Prior experience in the mid-term or end-line evaluation of National Action Plans (NAPs) for AMR or similar national health strategies.
- Direct experience assessing the operationalization of Antimicrobial Stewardship (AMS) or Infection Prevention and Control (IPC) programs within public healthcare facilities.

5.2.4 Staffing

The selected contractor is expected to dedicate the following human resources to the project

This project will need at least two personnel:

- Project lead
- Analytical Lead

1. Project Lead having extensive knowledge of Bangladesh’s national AMR Strategy, AMR surveillance, supply chains, and AMS governance with following qualification and expertise/experience.

- Minimum Master’s degree in Public Health, Epidemiology, Medicine, Microbiology, or allied subject
- Minimum 3 years’ experience in national policy planning, AMR containment, or communicable disease control.
- Experience in conducting minimum 2 assignments/work with National Action Plans (NAPs), AMR strategies, or Antimicrobial Stewardship (AMS) assignments reflecting strategic expertise in health systems, National Action Plans, and global AMR targets (e.g., UNGA 2024).
- Proven leadership as Team Lead in managing minimum 2 public health assessments and high-level engagements.

2. Analytical Lead with expertise with advanced qualitative research skills to seamlessly conduct interviews and FGDs with hospital staff.

- Minimum Medical Degree (MBBS, MD, or equivalent)
- Minimum 3 years’ experience in conducting clinical research, hospital-based public health assessments, or health system research
- Experience in conducting minimum 2 AMR/IPC/AMS/ID related qualitative or mixed-methods studies in hospitals.
- Demonstrated expertise in conducting minimum 1 root-cause analyses to identify behavioral bottlenecks or inter-professional coordination gaps.

- WHO pays utmost attention to the level of qualification and experience of the individuals involved, and to continuity in the services. The profiles (no individual names required) of the personnel proposed for these services should be included in the technical proposal.
- All staff with full professional working proficiency/native or bilingual proficiency in English.

The Proposer is expected to outline the roles and responsibilities of those staff in the technical proposal. Activities will be carried out in normal working hours of Bangladesh time zone.

5.2.5 Work to be performed

Study Objectives

General Objective

To assess the implementation progress of the National AMR Strategy (2023–2028) in Bangladesh and identify health system and healthcare facility-level barriers, coordination gaps, and opportunities to accelerate progress toward national, regional, and global AMR targets.

Specific Objectives

1. To assess progress against key milestones of the National AMR Strategy (2023–2028) using existing data and evidence.
2. To evaluate implementation of AMR interventions at healthcare facility level, particularly AMS, IPC, and diagnostic practices.
3. To identify systemic health system barriers affecting implementation, including governance, workforce, supply chain, and diagnostics.
4. To examine inter-professional coordination mechanisms within healthcare facilities and identify operational gaps.

5. To assess alignment of current implementation with UNGA AMR targets and the WHO SEARO Regional Roadmap.
6. To analyse how AMR interventions can be aligned with current government health system reform priorities.
7. To develop actionable, context-specific recommendations to strengthen implementation, coordination, and progress toward AMR targets.

Study Design

This study will adopt a mixed-methods implementation research approach, primarily based on:

- Systematic desk review and secondary data synthesis of existing reports, policy documents, and published literature
- Targeted qualitative inquiry through key informant interviews (KIIs) and limited focus group discussions (FGDs)

The study will not involve primary quantitative data collection or direct observation of hospital practices and will instead focus on synthesizing existing evidence and validating findings through stakeholder perspectives.

Study Components

(Suggestive, other innovative ways of assessment can be added)

Component 1: Strategy Implementation Review (Primary Component)

This component will constitute the core of the study, involving a structured review of:

- National policy documents, strategies, and implementation plans
- Program reports (AMS, IPC, surveillance, regulatory initiatives)
- Evaluation reports and grey literature
- Published scientific literature

Key Areas of Assessment

- Progress against National AMR Strategy (2023–2028) milestones
- Implementation status of AMS, IPC, and surveillance interventions
- Trends in antimicrobial use (including AWaRe classification, where available)
- Diagnostic capacity and utilization (based on existing evidence)
- Alignment with UNGA AMR targets and the WHO SEARO Regional Roadmap

A Target Mapping Matrix will be developed to compare:

- Global/regional targets
- National commitments
- Reported implementation status

Component 2: Targeted Qualitative Inquiry (healthcare facilities)

To complement the desk review, a limited number of KIIs and FGDs will be conducted with:

- Clinicians
- Microbiologists
- Pharmacists
- Nurses
- Hospital administrators
- Policy-level stakeholders

Purpose

- To validate findings from the desk review
- To explore the underlying reasons (“why”) behind implementation gaps
- To assess inter-professional coordination and clinical engagement
- To identify practical, context-specific solutions

Component 3: Policy and Governance Analysis

This component will assess:

- National AMR governance structures and coordination mechanisms
- Financing and resource allocation patterns
- Monitoring and evaluation systems
- Alignment between national strategies and implementation realities
- Synergies with current government health system reform priorities

5. Analytical Framework

The analysis will integrate:

Health System Analysis

- Leadership and governance
- Health workforce
- Diagnostics and medicines
- Service delivery

Implementation Science

- Barriers vs facilitators
- Root cause analysis
- Policy-to-practice gaps

Coordination Analysis

- Role clarity
- Communication pathways
- Accountability mechanisms

Target Acceleration Lens

- Identification of bottlenecks
- Feasible interventions at facility level
- Prioritization of high-impact actions

Scope Clarification

This study will rely on:

- Secondary data and document review
- Qualitative inquiry

It will not include:

- Primary quantitative data collection (e.g., PPS or AST data collection)

5.3 Key requirements

Expected Outputs

- Consolidated report on AMR strategy implementation
- Implementation progress (including UNGA and regional alignment)
- Facility-level systems analysis (AMS, coordination, clinical engagement)
- Health system barrier matrix
- UNGA and regional target acceleration roadmap
- Policy alignment and integration brief

Dissemination Strategy

A high-level dissemination approach will be adopted to ensure policy uptake, including:

- High level dissemination workshop/meeting
- Policy brief for senior government officials

5.4 Place of Performance

The primary duty station for this assignment will be Dhaka, though the contractor may be required to undertake periodic travel to other locations to facilitate focus group discussions at healthcare facilities. All logistical arrangements and associated travel expenses shall be the responsibility of the contractor. To optimize project efficiency and reduce travel frequency, virtual consultations and online meetings are the preferred mode of coordination whenever feasible.

5.5 Timelines

3 months

Activity and Deliverables	Timeline
Countersigned Contract	30 June 2026
Inception report and work plan submission	15 July 2026
AMR Situation Analysis and NAP Progress Report submission	30 July 2026
Field assessment end and Root-Cause Analysis completion	15 August 2026
Final Technical Report (Acceleration Roadmap) submission and dissemination	30 August 2026

5.6 Reporting requirements

The project manager of the selected contractor will be expected to provide an updated status in a written format on a weekly basis.

Formal reporting (by VC and in the format of a technical report) is expected upon delivery of each deliverable (see above).

Additional reporting activities may be requested by WHO or initiated by the project manager on a need basis.

5.7 Finance and accounting requirements.

Payments will be released by WHO against the satisfactory and timely production of deliverables.

5.8 Performance monitoring

The Contractor will be evaluated on

- their capacity to deliver products of an optimal technical quality within the agreed timelines.
- the control of the costs.
- their proper and smooth project management (including communication with the Technical Officer, the Project Lead and any other stakeholder);
- their service orientation and responsiveness to WHO's needs and expectations.

5.9 Further Capacities

N/A

5.10 Format of the Proposal

The proposal from the Proposer should include among others the following information

5.10.1 Executive Summary

The proposal must be accompanied by an Executive Summary introducing the proposed solution and approach / methodology.

5.10.2 Approach/Methodology

Proposers are invited to describe the methodology of work that will be adopted in the various stages of the workplan, and their proposed approach to satisfy WHO's expectations (in line with Requirements detailed under 5.3 above) including performance indicators and quality control methods.

5.10.3 Proposed Solution

The activity should result in Outputs, according to the description provided under 5.3 above and the proposer should detail its proposal solution in line with requirements in 5.3 above.

Expected Outputs

- Consolidated report on AMR strategy implementation
- Implementation progress (including UNGA and regional alignment)
- Facility-level systems analysis (AMS, coordination, clinical engagement)
- Health system barrier matrix
- UNGA and regional target acceleration roadmap
- Policy alignment and integration brief

Dissemination Strategy

A high-level dissemination approach will be adopted to ensure policy uptake, including:

- High level dissemination workshop or meeting
- Policy brief for senior government officials

5.10.4 Proposed Timeline

A Timeline project plan following the timelines indicated under 5.5 above should be presented either in bidder's Technical Proposal.

Section 6: General Conditions of Contract

6.1 General Conditions of the Contract for the Agreement for the Performance of Work (APW)

In the event of an Agreement for the Performance of Work (APW) is the resultant contract type, the General Conditions attached to the APW will be applicable and can be downloaded on the link below.

<https://www.who.int/publications/m/item/general-and-contractual-conditions>.

6.2 General Conditions of the Contract for the Technical Services Agreement (TSA)

In the event of a Technical Services Agreement (TSA) is the resultant contract type, the General Conditions attached to the TSA will be applicable and can be downloaded on the link below.

<https://www.who.int/publications/m/item/tsa-general-conditions>

6.3 Failure to access the general Conditions of Contract

In case the proposer fails to access and download the above General conditions, please contact us at the email sebanprocurement@who.int and the pdf copy will be sent to you

6.4 General conditions of the contract that will apply to this RFP

For this RFP, the following general conditions of the Contract will apply

- General Conditions of the Contract for the Agreement for the Performance of Work (APW)
- General Conditions of the Contract for the Technical Services Agreement (TSA)

6.5. Acceptance of the general Conditions of Contract

By submitting a proposal in response to this RFP, the proposer confirms that they have accessed, read, understood, and accepted the General Terms and Conditions. The proposer further acknowledges that, if awarded the contract, these General Conditions shall apply.

Section 7: Returnable proposal forms

The following forms A-I (where applicable) must be submitted with the vendor's proposal. Failure to submit the mandatory completed forms may result in proposal rejection.

These forms include.

Nature of Form	Name of the Form
Mandatory	Annex A: Letter of Intent
Mandatory:	Annex B: Confidentiality Undertaking
Mandatory	Annex C: Proposal completeness form
Mandatory	Annex D: Information about the vendor and format of technical proposal.
Mandatory	Annex E: Acceptance form (Format of Financial Proposal)
Mandatory	Annex F Self Declaration Form
Mandatory for joint ventures	Annex G Joint Venture/Consortium/Association Information

Annex A: Letter of Intent

Please acknowledge receipt of this RFP by completing this form and submitting it under the “Correspondence” tab of UNGM by the date specified, in the Letter of Invitation or through the email indicated in the RFP

From: [Company]

UNGM

Number:

[Insert UNGM number]

Subject RFP reference: RFP-SEARO-Bangladesh-2026-004

Check the appropriate box	Description
<input type="checkbox"/>	YES , we intend to submit a proposal.
<input type="checkbox"/>	NO . We are unable to submit a competitive proposal for the requested services at this time.

If you selected NO above, please indicate the reason(s) below:

Check applicable	Description
<input type="checkbox"/>	The requested services are not within our range of supply.
<input type="checkbox"/>	We are unable to submit a competitive proposal for the requested services at this time.
<input type="checkbox"/>	The requested services are not available at this time.
<input type="checkbox"/>	We cannot meet the requested terms of reference.
<input type="checkbox"/>	The information provided for proposal purposes is insufficient.
<input type="checkbox"/>	Your RFP is too complicated.
<input type="checkbox"/>	Insufficient time is allowed to prepare a proposal.
<input type="checkbox"/>	We cannot meet the delivery requirements.
<input type="checkbox"/>	Sustainability criteria/requirements are too stringent (if applicable).
<input type="checkbox"/>	We do not export.
<input type="checkbox"/>	We do not sell to the UN.
<input type="checkbox"/>	Your requirement is too small.
<input type="checkbox"/>	Our capacity is currently full.
<input type="checkbox"/>	We are closed during the holiday season.
<input type="checkbox"/>	We had to give priority to other clients' requests.
<input type="checkbox"/>	The person handling proposals is away from the office.
<input type="checkbox"/>	We cannot adhere to your terms and conditions e.g. payment terms, request for Performance Security etc. <i>(please provide details below)</i> :
<input type="checkbox"/>	We would like to receive future RFPs for this type of service.
<input type="checkbox"/>	We do not wish to receive RFPs for this type of service.
<input type="checkbox"/> Other reasons	Click or tap here to enter text.

Annex B: Confidentiality Undertaking

1. The World Health Organization (WHO), acting through its Department / Business centre of WHO Bangladesh Country Office has access to certain information relating to Evaluating AMR Containment Strategies in Bangladesh: A Health System and Healthcare Facility-Level Assessment of National Action Plan Progress, Barriers, Coordination, and Alignment with Global Targets which it considers to be proprietary to itself or to entities collaborating with it ("the Information").
2. WHO is willing to provide the Information to the Undersigned for the purpose of allowing the Undersigned to prepare a response to the Request for Proposal (RFP) for the Evaluating AMR Containment Strategies in Bangladesh: A Health System and Healthcare Facility-Level Assessment of National Action Plan Progress, Barriers, Coordination, and Alignment with Global Targets Project ("the Purpose"), provided that the Undersigned undertakes to treat the Information as confidential and proprietary, to use the Information only for the aforesaid Purpose and to disclose it only to persons who have a need to know for the Purpose and are bound by like obligations of confidentiality and non-use as are contained in this Undertaking.
3. The Undersigned undertakes to regard the Information as confidential and proprietary to WHO or parties collaborating with WHO, and agrees to take all reasonable measures to ensure that the Information is not used, disclosed or copied, in whole or in part, other than as provided in paragraph 2 above, except that the Undersigned shall not be bound by any such obligations if the Undersigned is clearly able to demonstrate that the Information:
 - a) was known to the Undersigned prior to any disclosure by WHO to the Undersigned (as evidenced by written records or other competent proof);
 - b) was in the public domain at the time of disclosure by or for WHO to the Undersigned
 - c) becomes part of the public domain through no fault of the Undersigned; or
 - d) becomes available to the Undersigned from a third party not in breach of any legal obligations of confidentiality (as evidenced by written records or other competent proof).
4. The Undersigned further undertakes not to use the Information for any benefit, gain or advantage, including but not limited to trading or having others trading in securities on the Undersigned's behalf, giving trading advice or providing Information to third parties for trade in securities.
5. At WHO's request, the Undersigned shall promptly return any and all copies of the Information to WHO.
6. The obligations of the Undersigned shall be of indefinite duration and shall not cease on termination of the above-mentioned RFP process.
7. Notwithstanding any specific provision herein, this Undertaking and any dispute arising therefrom or relating thereto shall be governed by general principles of law, to the exclusion of any single national system of law. Any dispute arising from or relating to the Undertaking, including its validity, interpretation, or application, shall, unless amicably settled, be subject to conciliation. In the event the dispute is not resolved by conciliation within thirty (30) days, the dispute shall be settled by arbitration. The arbitration shall be conducted in accordance with the modalities to be agreed upon by the parties or, in the absence of agreement within thirty (30) days of written communication of the intent to commence arbitration, with the rules of arbitration of the International Chamber of Commerce. The parties shall accept the arbitral award as final.
8. Nothing in this Undertaking shall constitute or be deemed to constitute a waiver of any of the privileges and immunities enjoyed by WHO under any source of law, or as a submission to the jurisdiction of any national court or tribunal.

Acknowledged and Agreed:

Company Name:	Company name
Mailing Address:	Indicate your address.
Name and Title of duly authorized representative:	Indicate name and title of your authorized representative
Signature:	
Date:	Select date from drop down

Annex C: Proposal Completeness Form

To be filled by the vendor and submitted as guided. Please ensure Forms in the technical proposal must be separated from forms to be submitted in the financial proposal.

Form	Requirement	Completed in full (Yes/No)
Annex A	Letter of Intent <i>To be submitted before the closing date either by email or via In-tend Correspondence tab</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Annex B	Confidentiality undertaking form To be part of technical proposal	<input type="checkbox"/> Yes <input type="checkbox"/> No
Annex C	Proposal completeness form To be part of technical proposal	<input type="checkbox"/> Yes <input type="checkbox"/> No
Annex D	Information about Proposer To be part of technical proposal	<input type="checkbox"/> Yes <input type="checkbox"/> No
Annex E	Financial Proposal To be part of financial proposal	<input type="checkbox"/> Yes <input type="checkbox"/> No
Annex F	Self-Declaration Form To be part of technical proposal	<input type="checkbox"/> Yes <input type="checkbox"/> No
Section 4: Technical Evaluation Criteria	Technical Proposal , including: - Executive Summary, - proposed solution, - approach/methodology, - timeline. Please provide all information including relevant attachments to make a robust proposal To be part of technical proposal	<input type="checkbox"/> Yes <input type="checkbox"/> No
Form G	Joint venture Form To be part of technical proposal	<input type="checkbox"/> Yes <input type="checkbox"/> No
Company Name:	Company name	
Mailing Address:	Indicate your address.	
Name and Title of duly authorized representative:	Indicate name and title of your authorized representative	
Signature:		
Date:	Select date from drop down	

N.B Combining or misplacement of proposals i.e. financial documents in technical envelope and technical documents in financial envelope may lead to the rejection of the proposal.

- a) If Submission of proposals is via a dedicated email, please first send the technical proposal only containing forms (B, C, D F and section 5.10) in the first email under the subject "TECHNICAL PROPOSAL". Please send a second email containing the financial proposal only including forms E and H under the subject "FINANCIAL PROPOSAL"
- b) If the submission is via In-Tend, please upload the technical proposal and all technical forms in the Technical Envelope. Upload the Financial proposal and all financial forms. In the Financial Envelope

Annex D: Proposer Information

RFP Reference	RFP-SEARO-Bangladesh-2026-004
Legal name of proposer	Click or tap here to enter text.
Legal address, city, country	Click or tap here to enter text.
Website	Click or tap here to enter text.
Year of registration	Click or tap here to enter text.
Proposer's Authorized Representative information	Name and Title: Click or tap here to enter text. Telephone numbers: Click or tap here to enter text. Email: Click or tap here to enter text.
Legal structure	Choose an item.
No. of full-time employees	Click or tap here to enter number.
No. of staff involved in similar contracts	Click or tap here to enter number.
Are you a UNGM registered vendor?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, insert UNGM Vendor Number
Years of supplying to UN organizations	Click or tap here to enter text.
Are you a WHO vendor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Countries of operation	Click or tap here to enter text.
History of Bankruptcy	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain in a separate sheet

History of Non-Performing Contracts

<input type="checkbox"/> No non-performing contracts during the last 3 years			
<input type="checkbox"/> Contract(s) not performed in the last 3 years			
Year	Non- performed portion of contract	Contract Identification	Total Contract Amount (current value in US\$)
		Name of Client: Address of Client: Reason(s) for non-performance:	

Litigation History and Legal Information

<input type="checkbox"/> No litigation history for the last 3 years			
<input type="checkbox"/> Litigation History as indicated below			
Year of dispute	Amount in dispute (state currency)	Contract Identification	Total Contract Amount (state currency)
		Name of Client: Address of Client: Matter in dispute: Party who initiated the dispute: Status of dispute: Party awarded if resolved:	

Previous Relevant Experience

Please list only previous similar assignments successfully completed in the last 5 years as per the requirements outlined in .

List only those assignments for which your company was legally contracted or sub-contracted by the Client or was one of the Consortium/JV partners. Assignments completed your Company’s individual experts working privately or through other firms cannot be claimed as the relevant experience of the Company, or that of the Company’s partners or sub-consultants, but can be claimed by the Experts themselves in their CVs. The Company should be prepared to substantiate the claimed experience by presenting copies of relevant documents and references if so requested.

The vendors are required also to provide the below details in their proposals in the chronological order indicated.

Project name & Country of Assignment	Client & Reference Contact Details	Contract Value	Period of activity and status	Types of activities undertaken and role (Contractor, sub-contractor or consortium member)

Attached are the Reports/Publications or links with Statements of Satisfactory Performance from the Top 3 (three) Clients or more.

Annex E: Financial Proposal Form (Please submit separately in “Financial envelope” tab)

Note: The inclusion of any financial information in the Technical Proposal may lead to disqualification of the Proposer

Currency of the proposal: BDT

Financial proposal can be requested:

- Either on one of the tables below, in which case (i) tick the first box and (ii) use/customize one of the tables below.
- ~~Or in a separate excel sheet, in which case (i) tick the second box; (ii) customize second table below keeping just the headers; and (iii) keep the second paragraph below:~~

The Undersigned, **Company** confirms to have read, understood and accepted the terms of the Request for Proposals (RFP) No., and its accompanying documents. If selected by WHO for the work, the Undersigned undertakes, on its own behalf and on behalf of its possible partners and Contractors, to perform Title of the RFP in accordance with the terms of this RFP and any corresponding contract between WHO and the Undersigned, for the following sums for the amount(s) below and attached Excel form.

The itemized amounts for each of the deliverables must be completed in the attached Excel form and must be uploaded as part of the financial proposal. The Proposer must ensure that the amount of each Deliverable or of the total amount is identical in the attached Excel sheet and in table below. In case of inconsistency between those two documents, the most favorable terms to WHO in either the Excel sheet or the table below **shall prevail**.

CURRENCY: BDT

ITEM	COST
Deliverable 1: ...	
Project Manager costs	0.00
Team members costs (please itemize by function)	0.00
Other technical costs (please itemize and specify whether there are one-time or recurring costs): Operating System, database, application, license, etc.	0.00
Other Costs (please itemize and specify whether there are one-time or recurring costs)	0.00
Deliverable 1 Costs	0.00
Deliverable 2: ...	
Project Manager costs	0.00
Team members costs (please itemize by function)	0.00
Other technical costs (please itemize and specify whether there are one-time or recurring costs): Operating System, database, application, license, etc.	0.00
Other Costs (please itemize and specify whether there are one-time or recurring costs)	0.00
Deliverable 2 Costs	0.00
Deliverable 3: ...	
Project Manager costs	0.00
Team members costs (please itemize by function)	0.00
Other technical costs (please itemize and specify whether there are one-time or recurring costs): Operating System, database, application, license, etc.	0.00
Other Costs (please itemize and specify whether there are one-time or recurring costs)	0.00
Deliverable 3 Costs	0.00
Deliverable 4: ...	
Project Manager costs	0.00
Team members costs (please itemize by function)	0.00
Other technical costs (please itemize and specify whether there are one-time or recurring costs): Operating System, database, application, license, etc.	0.00
Other Costs (please itemize and specify whether there are one-time or recurring costs)	0.00
Deliverable 4 Costs	0.00
TOTAL COST OF THE PROPOSAL	

The enclosed Proposal is valid for **---** days from the date of this form (Ref. Article 14 of Section).

Agreed and accepted on **Select the date.**

Company Name:	Company name
Mailing Address:	Indicate your address.
Name and Title of duly authorized representative:	Indicate name and title of your authorized representative
Signature:	

Date:	Select date from drop down

Annex F: Self Declaration Form

Applicable to private and public companies

[Company] (the "Company") hereby declares to the World Health Organization (WHO) that:

- a. it is not bankrupt or being wound up, having its affairs administered by the courts, has not entered into an arrangement with creditors, has not suspended business activities, is not the subject of proceedings concerning the foregoing matters, and is not in any analogous situation arising from a similar procedure provided for in national legislation or regulations.
- b. it is solvent and, in a position, to continue doing business for the period stipulated in the contract after contract signature, if awarded a contract by WHO.
- c. it or persons having powers of representation, decision making or control over the Company have not been convicted of an offence concerning their professional conduct by a final judgment.
- d. it or persons having powers of representation, decision making or control over the Company have not been the subject of a final judgment or of a final administrative decision for fraud, corruption, involvement in a criminal organization, money laundering, terrorist-related offences, child labour, human trafficking or any other illegal activity.
- e. it is in compliance with all its obligations relating to the payment of social security contributions and the payment of taxes in accordance with the national legislation or regulations of the country in which the Company is established.
- f. it is not subject to an administrative penalty for misrepresenting any information required as a condition of participation in a procurement procedure or failing to supply such information;
- g. it has declared to WHO any circumstances that could give rise to a conflict of interest or potential conflict of interest in relation to the current procurement action.
- h. it has not granted and will not grant, has not sought and will not seek, has not attempted and will not attempt to obtain, and has not accepted and will not accept any direct or indirect benefit (financial or otherwise) arising from a procurement contract or the award thereof.
- i. it adheres to the UN Supplier Code of Conduct.
- j. it has zero tolerance for sexual misconduct (an all-inclusive term which includes sexual exploitation, sexual abuse, sexual harassment, and all forms of prohibited sexual behaviour), harassment and other types of abusive conduct and has appropriate procedures in place to prevent and respond to sexual misconduct (an all-inclusive term which includes sexual exploitation, sexual abuse, sexual harassment, and all forms of prohibited sexual behaviour), harassment and other types of abusive conduct.

The Company understands that a false statement or failure to disclose any relevant information which may impact upon WHO's decision to award a contract may result in the disqualification of the Company from the bidding exercise and/or the withdrawal of any proposal of a contract with WHO. Furthermore, in case a contract has already been awarded, WHO shall be entitled to rescind the contract with immediate effect, in addition to any other remedies which WHO may have by contract or by law.

Company name	[Company]
Mailing address	Click or tap here to enter text.
Name and Title of authorized representative	Click or tap here to enter text.
Signature	
Date	Click or tap to enter a date.

Annex G: Joint Venture/Consortium /Association Information

Name of Proposer:	[Company]	Date:	Click or tap to enter a date.
UNGM Number:	Click or tap here to enter text.		
RFP reference:	RFP-SEARO-Bangladesh-2026-004		

To be completed and returned with your Proposal if the Proposal is submitted as a Joint Venture/Consortium/Association.

No	Name of Partner and contact information (address, telephone numbers, fax numbers, e-mail address)	Proposed proportion of responsibilities (in %) and type of services to be performed
1	Click or tap here to enter text.	Click or tap here to enter text.
2	Click or tap here to enter text.	Click or tap here to enter text.
3	Click or tap here to enter text.	Click or tap here to enter text.

<p>Name of leading partner</p> <p>(with authority to bind the Joint Venture / Consortium / Association during the RFP process and, in the event that a Contract is awarded, during contract execution)</p>	<p>Click or tap here to enter text.</p>
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We have attached a copy of the below-referenced document signed by every partner, which describes in detail the likely legal structure of and the confirmation of joint and severable liability of the members of the said Joint Venture:

Letter of intent to form a joint venture **OR** Joint Venture / Consortium / Association agreement.

We hereby confirm that, if the Contract is awarded, all parties of the Joint Venture/Consortium/Association shall be jointly and severally liable to [Click or tap here to enter text.](#) for the fulfilment of the provisions of the Contract.

Name of partner:

Signature:

Date:

Name of partner:

Signature:

Date:

Name of partner:

Signature:

Date:

Name of partner:

Signature:

Date:

