
Strengthening the National Action Plan on Elderly Health 2020-2024 to Improve Services for Older Persons

Request for Proposals (RFP)

Bid Reference

RFP 140-2021

Country/Unit Name

WHO Indonesia – / Family Health

Closing Date:

[26 November 2021 at 13:00 Jakarta time]

The World Health Organization (WHO) is seeking offers for strengthening the National Action Plan on Elderly Health 2020-2024 to improve services for older persons.

Your ☒ Company ☒ Institution is invited to submit a proposal for the services in response to this Request for Proposals (RFP).

WHO is a public international organization, consisting of 194 Member States, and a Specialized Agency of the United Nations with the mandate to act as the directing and coordinating authority on international health work. As such, WHO is dependent on the budgetary and extra-budgetary contributions it receives for the implementation of its activities. Bidders are, therefore, requested to propose the best and most cost-effective solution to meet WHO requirements, while ensuring a high level of service.

1. Requirements

WHO requires the successful bidder, to carry out activities to design an effective approach to implementation of the National Action Plan on Elderly Health 2020-2024 to improve services for older persons.

See detailed Terms of Reference in Annex 1 for complete information.

The successful bidder shall be a ☒ for profit / ☐ not for profit institution operating in the field of public health, particularly on environmental health, with proven expertise in air quality issues.

The successful bidder is expected to demonstrate experience and list relevant projects as follows:

Mandatory experience:

- Public Health and service delivery
- Program monitoring and evaluation

Desirable experience:

- Public health interventions for older persons, including design or implementation of services for older persons
- Policy studies and implementation

The bidder is expected to follow the instructions set forth below in the submission of their proposal to WHO.

2. Proposal

The proposal and all correspondence and documents relating thereto shall be prepared and submitted in the English language, apart from copies of legal documents or previous work if accomplished in Indonesian language.

The proposal shall be concisely presented and structured to include the following information:

- Confidentiality Undertaking (*please complete Annex 2*)
- Presentation of your Company / Institution (*please complete Annex 3*) and justification of suitability of the work
- Proposed approach/methodology to design the piloting for the NAP implementation including supporting tools
- Proposed timeline for the completion of the project, with the key milestones
- Composition of the team and CVs of the team members demonstrating required expertise for their designated roles.

- Financial proposal must be submitted in IDR currency with **clear breakdown of budget lines and subtotals for each of the two outputs**. The technical and financial proposal both are subject to final revision and approval after awarding the bid.

Information which the bidder considers confidential, if any, should be clearly marked as such.

3. Instructions to Bidders

The bidder must follow the instructions set forth in this RFP in the submission of their proposal to WHO.

A prospective bidder requiring clarification on technical, contractual or commercial matters may notify WHO via email at the following address no later than Date: Enter last day to received questions – Min. 5 working days prior to the closing date for the submission of offers:

Email for submissions of all queries: jakubiecp@who.int with copy to seinobids@who.int
(use Bid reference in subject line)

A consolidated document of WHO's responses to all questions (including an explanation of the query but without identifying the source of enquiry) will be sent to all prospective bidders who have received the RFP.

From the date of issue of this RFP to the final selection, contact with WHO officials concerning the RFP process shall not be permitted, other than through the submission of queries and/or through a possible presentation or meeting called for by WHO, in accordance with the terms of this RFP.

The bidder shall submit, in writing, the complete proposal to WHO, no later than **26 November 2021 at 12:00 hours, Jakarta time** ("the closing date"), as follows:

The submitted technical and financial proposals shall be in reference to the enclosed Terms of References and budget template.

The technical and financials proposals should be submitted **separately** in 2 emails stating in the subject the following reference number: **RFP 140-2021**.

Due to the current situation of COVID-19, submission of proposals can only be done electronically by email to: seinobids@who.int (including any other email address in the submission will automatically disqualify the bid)

- All information and documentation related to the technical proposal (including the attached Annex 2: "Information about Bidders" shall be submitted to seinobids@who.int stating in the email subject **"Technical Proposal - RFP 140-2021" ONLY**
- All information and documentation related to the financial proposal shall be submitted to seinobids@who.int stating in the email subject **"Financial Proposal - RFP 140-2021" ONLY**.

PLEASE NOTE THAT ANY SUBMISSION OF TECHNICAL AND FINANCIAL PROPOSALS TOGETHER IN 1 FILE WILL BE REJECTED.

Please make sure to include the following documents to ensure your submission is complete:

- A technical proposal, as described under part 2 above Terms of Reference in Annex 1;
- A financial proposal, as described under part 2 above and the budget template provided in Annex 5;

- Annexes 2 & 3, duly completed and signed by a person or persons duly authorized to represent the bidder, to submit a proposal and to bind the bidder to the terms of this RFP Self-Declaration Form
- Legal document for operation permit in Indonesia

Each proposal shall be marked Ref: **RFP 140-2021**

WHO may, at its own discretion, extend the closing date for the submission of proposals by notifying all bidders thereof in writing before the above closing date and time.

Any proposal received by WHO after the closing date for submission of proposals may be rejected. Bidders are therefore advised to ensure that they have taken all steps to submit their proposals in advance of the above closing date and time.

The offer outlined in the proposal must be valid for a minimum period of 90 calendar days after the closing date. A proposal valid for a shorter period may be rejected by WHO. In exceptional circumstances, WHO may solicit the bidder's consent to an extension of the period of validity. The request and the responses thereto shall be made in writing. Any bidder granting such an extension will not, however, be permitted to otherwise modify its proposal.

The bidder may withdraw its proposal any time after the proposal's submission and before the above mentioned closing date, provided that written notice of the withdrawal is received by WHO at the email address indicated above, before the closing date for submission of proposals.

No proposal may be modified after its submission, unless WHO has issued an amendment to the RFP allowing such modifications.

No proposal may be withdrawn in the interval between the closing date and the expiration of the period of proposal validity specified by the bidder in the proposal (subject always to the minimum period of validity referred to above).

WHO may, at any time before the closing date, for any reason, whether on its own initiative or in response to a clarification requested by a (prospective) bidder, modify the RFP by written amendment. Amendments could, *inter alia*, include modification of the project scope or requirements, the project timeline expectations and/or extension of the closing date for submission.

All prospective bidders that have received the RFP will be notified in writing of all amendments to the RFP and will, where applicable, be invited to amend their proposal accordingly.

All bidders must adhere to the UN Supplier Code of Conduct, which is available on the WHO procurement website at <http://www.who.int/about/finances-accountability/procurement/en/>.

4. Evaluation

Before conducting the technical and financial evaluation of the proposals received, WHO will perform a preliminary examination of these proposals to determine whether they are complete, whether any computational errors have been made, whether the documents have been properly signed, and whether the proposals are generally in order. Proposals which are not in order as aforesaid may be rejected.

The evaluation panel will evaluate the technical merits of all the proposals which have passed the preliminary examination of proposals based on the following weighting:

Technical Weighting:	80 % of total evaluation
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Financial Weighting:

20 % of total evaluation

The technical evaluation of the proposals will include:

	X
Quality of the overall proposal, including the timeframe and quality assurance mechanisms	50
Experience of the firm/institution in carrying out related project	15
Qualification and competence of the personal proposed for the assignment	15
	X
TOTAL	80

The number of points which can be obtained for each evaluation criterion is specified above and indicates the relative significance or weight of the item in the overall evaluation process.

A minimum of [50] points is required to pass the technical evaluation.

Please note that WHO is not bound to select any bidder and may reject all proposals. Furthermore, since a contract would be awarded in respect of the proposal which is considered most responsive to the needs of the project concerned, due consideration being given to WHO's general principles, including the principle of best value for money, WHO does not bind itself in any way to select the bidder offering the lowest price.

WHO may, at its discretion, ask any bidder for clarification of any part of its proposal. The request for clarification and the response shall be in writing. No change in price or substance of the proposal shall be sought, offered or permitted during this exchange.

NOTE: Individual contact between WHO and bidders is expressly prohibited both before and after the closing date for submission of proposals.

5. Award

WHO reserves the right to:

1. Award the contract to a bidder of its choice, even if its bid is not the lowest;
2. Award separate contracts for parts of the work, components or items, to one or more bidders of its choice, even if their bids are not the lowest;
3. Accept or reject any proposal, and to annul the solicitation process and reject all proposals at any time prior to award of contract, without thereby incurring any liability to the affected bidder or bidders and without any obligation to inform the affected bidder or bidders of the grounds for WHO's action;
4. Award the contract on the basis of the Organization's particular objectives to a bidder whose proposal is considered to be the most responsive to the needs of the Organization and the activity concerned;
5. Not award any contract at all.

WHO has the right to eliminate bids for technical or other reasons throughout the evaluation/selection process. WHO shall not in any way be obliged to reveal, or discuss with any bidder, how a proposal was assessed, or to provide any other information relating to the evaluation/selection process or to state the reasons for elimination to any bidder.

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

At any time during the evaluation/selection process, WHO reserves the right to modify the scope of the work, services and/or goods called for under this RFP. WHO shall notify the change to only those bidders who have not been officially eliminated due to technical reasons at that point in time.

WHO reserves the right at the time of award of contract to extend, reduce or otherwise revise the scope of the work, services and/or goods called for under this RFP without any change in the base price or other terms and conditions offered by the selected bidder.

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

Within 30 days of receipt of the contract between WHO and the successful bidder (the "Contract"), the successful bidder shall sign and date the Contract and return it to WHO according to the instructions provided at that time. If the bidder does not accept the Contract terms without changes, then WHO has the right not to proceed with the selected bidder and instead contract with another bidder of its choice. The Contract will include, without limitation, the provisions set forth in Annex 3.

Any and all of the contractor's (general and/or special) conditions of contract are hereby explicitly excluded from the Contract, i.e., regardless of whether such conditions are included in the Contractor's offer, or printed or referred to on the Contractor's letterhead, invoices and/or other material, documentation or communications.

We look forward to receiving your response to this RFP.

Yours sincerely,

WHO Indonesia Healthier Populations Unit

Annexes

1. Detailed Term of Reference
2. Confidentially Undertaking
3. Vendor Information Form
4. Contractual provisions
5. Budget Template
6. Evaluation Criteria

Annex 1: Detailed Terms of Reference

Complete below or leave the following wording: See attached document.

1. Purpose of the APW

The purpose of the APW is to design an effective approach to implementation of the National Action Plan on Elderly Health 2020-2024, alongside development of an implementation plan and supporting tools.

2. Background

Ministry of Health has launched the National Action Plan on Elderly Health 2020-2024 last year. In addition, through the 2020-2024 RPJMN, the government has also drawn up a strategy in response to anticipated needs of an ageing population and a goal of ensuring a healthy and productive older population. In order to improve the health status for older persons.

The activities of this work are aimed at guidance for an effective implementation of the National Action Plan (NAP) on Elderly Health 2020-2024 through approaches and mechanisms. Ministry of Health will implement the (NAP) initially in selected districts with a view to revising and refining the implementation approach to ensure that indicators and targets for the NAP will be met. Analysis of the NAP 2016-2019 implementation showed that there were variations in approach and understanding of NAP implementation at the subnational level. Therefore, an implementation design is needed, along with supporting tools, to support the Ministry of Health in ensuring effective implementation, monitoring and evaluation of NAP implementation.

The municipalities/regencies chosen as models in implementing the NAP are those that have a high commitment to their health services through local government support, local regulations, active senior health working groups, older persons public health centers (Posyandu Lansia) and hospitals that have geriatric services with integrated teams.

3. Planned timelines (subject to confirmation)

Start date: 02/01/2022

End date: 31/12/2022

Total duration: twelve months

4. Requirements - Work to be performed

Objective 1: To design the approach to implementation of the National Action Plan 2021-2023 with supporting implementation plan and tools

Output 1: Finalized design of the NAP implementation, with supporting implementation tools.

Objective 2: To provide technical support for the MoH led implementation, and to revise the design accordingly

Output 2: Technical support provided for the MOH led the implementation and revise the design accordingly.

5. Requirements - Planning

Output 1. Finalized design of the NAP implementation, with supporting implementation tools.

Expected timeline for Output 1 is from January to February 2022 (indicative)*

In close collaboration with WHO and the Ministry of Health, the contractor will:

- Identify the district to be selected for initial implementation of the NAP; these districts will have local government commitment to their health services for older persons, local regulations, active senior health working groups,

- elderly integrated services post (Posyandu Lansia), public health centers (Puskesmas) and hospitals that have geriatric services. The bidder is envisioned to further define these criteria for selection of the districts which will be the area of pilot implementation.
- The bidder is expected to conduct situation analysis to measure the indicator achievement in selected districts. The indicators have been developed by the MoH which include 6 strategy indicators at the district level, provincial level, and national level.
 - The bidder is expected to design:
 - The approach for the NAP implementation: the approach can be in the form of guidelines, involvement of key stakeholders, tools and implementation plan, along with clear milestones and long-term timeline.
 - The integration of the monitoring tools of the implementation and reporting mechanisms from community level/districts into relevant systems at the national/higher level.
 - Tools for the monitoring and evaluation including mapping of stakeholders engagement, community involvement, visualization of developed implementation design in the form of videos, animation tutorial, infographics, or posters
 - The bidder is expected to involve multi-stakeholders in every meetings such as Ministry of Social Affairs (MOSA), Ministry of Home Affairs, Ministry of National Planning (Bappenas), academia, professional associations, CSO, and other relevant institutions for consultations and workshops. The meetings preferably will be undertaken through virtual platform due the pandemic.
 - Regular core meetings between contractor, Ministry of Health, and WHO are expected to be conducted to ensure the project progress is on time and in line with the expected output.
 - Summarise all the inputs from MoH and key stakeholders and adequately reflect these in the implementation design.

Output 2. Technical support provided to the MOH-led implementation with revision of design accordingly.

Expected timeline for Output 2 is from March to December 2022 (indicative)*

In close collaboration with WHO and the Ministry of Health, the contractor will:

- Assign one person to provide regular technical assistance to closely work with MOH and WHO during the NAP implementation and evaluation for 2022.
- Allocate 20% of the person's FTE (or approximately 4 days each month for one year) to evaluate the initial implementation and update the design if needed, including the supporting tools.
- Support MoH in discussions and consultations with the selected districts on the experience of implementation of the NAP, as input into the evaluation and redesign.
- Regular consultation with the MOH and WHO for the revision and update of the design.

The bidder will provide detailed work breakdown structure showing how and when all key activities will be undertaken and when the deliverables mentioned in the scope of work will be completed. This plan must be laid out in an implementation timetable that is within the duration of this contract.

6. Inputs

Directorate of Family Health, MOH as beneficiary will closely work with WHO and selected bidder in every steps of work and facilitate the discussions and related meetings. For sustainability, MOH will disseminate and implement the

outputs as results of this project to the relevant stakeholders as well as the national and sub-national users and local government.

In addition, WHO will be involved and monitor the overall process of the project. The selected bidder is expected to actively communicate the process and/or the changes (if any) to WHO on a weekly basis through email as official correspondent for the record.

7. Activity Coordination & Reporting

Administrative Officer:	Mr. Piotr Jakubiec WHO Administrative Officer	Email:	jakubiec@who.int
For the purpose of:	Contractual and financial management of the contract		

8. Characteristics of the Provider

The provider or project team is expected to possess the following minimum expertise. Their CVs and experience relevant to public health, geriatric services, healthy ageing initiatives, implementation of the strategies and action plans, visual communication and animation should be submitted with the proposal.

Information about their roles/responsibilities and the proportionate time they will dedicate to the project should also be included in the submission and in the financial proposal.

Required minimum competencies and experiences are as follows:

- a. Team leader
 - Post graduate degree in public health, preferably related to services for older persons or related field.
 - At least 5 years of experience in public health, preferably on care and services for older persons, having experience on the implementation design and planning the program and services for older persons.
 - Experience in leading public health implementation of the action plan or projects related to public health or a related field.
 - Experience in evaluation of public health programmes and services
- b. Public Health Specialist
 - Graduate medical degree or public health degree
 - At least 3 years of experience in service delivery for older persons
 - Experience in evaluation of public health programmes and services
- c. Program Monitoring and Evaluation Specialist
 - Graduate policy studies or public health degree
 - At least 3 years of experience in policy implementation, program implementation and intervention or related field
 - Experience in evaluation of public health programmes and intervention

* Please clearly specify the proportionate time in terms of percentage of work hours that every team member will dedicate to this project.

9. Place of assignment

Considering the pandemic situation, the institution can be based anywhere in Indonesia and use online and electronic meeting platforms to conduct the work.

It is expected that due consideration will be given to using online and electronic meeting platforms to conduct all phases of this work, due to the COVID-19 pandemic

Annex 2: Confidentiality Undertaking

1. The World Health Organization (WHO), acting through its Department of Healthier Populations., has access to certain information relating to Proposal which it considers to be proprietary to itself or to entities collaborating with it (hereinafter referred to as "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 "Strengthening the National Action Plan on Elderly Health 2020-2024 to Improve Services for Older Persons" ("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. Any dispute arising from or relating to this Undertaking, including its validity, interpretation, or application shall, unless amicably settled, be subject to conciliation. In the event of 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 Undersigned and WHO 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 Undersigned and WHO shall accept the arbitral award as final.
8. Nothing in this Undertaking, and no disclosure of Information to the Undersigned pursuant to its terms, shall constitute, or be deemed to constitute, a waiver of any of the privileges and immunities enjoyed by WHO under national or international law, or as submitting WHO to any national court jurisdiction.

Acknowledged and Agreed:

Entity Name:	.....
Mailing Address:	..... ..... .....
Name and Title of duly authorized representative:	.....
Signature:	.....
Date:	.....

Annex 3: Vendor Information Form

Company Information to be provided by the Vendor submitting the proposal			
UNGM Vendor ID Number: <i>If available – Refer to WHO website for registration process*</i>			
Legal Company Name: <i>(Not trade name or DBA name)</i>			
Company Contact:			
Address:			
City:		State:	
Country:		Zip:	
Telephone Number:		Fax Number:	
Email Address:		Company Website:	
<u>Corporate information:</u>			
Company mission statement			
Service commitment to customers and measurements used <i>(if available)</i>			
Organization structure (include description of those parts of your organization that would be involved in the performance of the work)			
Relevant experience (how could your expertise contribute to WHO's needs for the purpose of this RFP) – <i>Please attach reference and contact details</i>			
Staffing information			

* <http://www.who.int/about/finances-accountability/procurement/en/>

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; and
- j. it has zero tolerance for sexual exploitation and abuse and has appropriate procedures in place to prevent and respond to sexual exploitation and abuse.

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 offer 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.

Entity Name:	.....
Mailing Address:	..... ..... .....
Name and Title of duly authorized representative:	.....
Date:	.....
Signature:	.....

Annex 4: Contractual Provisions

Within 30 days of receipt of the contract between WHO and the successful bidder (the “Contract”), the successful bidder shall sign and date the Contract and return it to WHO according to the instructions provided at that time. If the bidder does not accept the Contract terms without changes, then WHO has the right not to proceed with the selected bidder and instead contract with another bidder of its choice. The Contract will include, without limitation, the provisions set forth below (with the successful bidder referred to below as the “Contractor”):

1. **Compliance with WHO Codes and Policies.** By entering into the Contract, the Contractor acknowledges that it has read, and hereby accepts and agrees to comply with, the WHO Policies (as defined below).

In connection with the foregoing, the Contractor shall take appropriate measures to prevent and respond to any violations of the standards of conduct, as described in the WHO Policies, by its employees and any other persons engaged by the Contractor to perform any services under the Contract.

Without limiting the foregoing, the Contractor shall promptly report to WHO, in accordance with the terms of the applicable WHO Policies, any actual or suspected violations of any WHO Policies of which the Contractor becomes aware.

For purposes of the Contract, the term “WHO Policies” means collectively: (i) the WHO Code of Ethics and Professional Conduct; (ii) the WHO Policy on Sexual Exploitation and Abuse Prevention and Response; (iii) the WHO policy on Preventing and Addressing Abusive Conduct; (iv) the WHO Code of Conduct for responsible Research; (v) the WHO Policy on Whistleblowing and Protection Against Retaliation; and (vi) the UN Supplier Code of Conduct, in each case, as amended from time to time and which are publicly available on the WHO website at the following links: <http://www.who.int/about/finances-accountability/procurement/en/> for the UN Supplier Code of Conduct and at <http://www.who.int/about/ethics/en/> for the other WHO Policies.

2. **Zero tolerance for sexual exploitation and abuse.** WHO has zero tolerance towards sexual exploitation and abuse. In this regard, and without limiting any other provisions contained herein:

(i) each legal entity Contractor warrants that it will: (i) take all reasonable and appropriate measures to prevent sexual exploitation or abuse as described in the WHO Policy on Sexual Exploitation and Abuse Prevention and Response by any of its employees and any other persons engaged by it to perform any services under the Contract; and (ii) promptly report to WHO and respond to, in accordance with the terms of the Policy, any actual or suspected violations of the Policy of which the contractor becomes aware; and

(ii) each individual Contractor warrants that he/she will (i) not engage in any conduct that would constitute sexual exploitation or abuse as described in the WHO Policy on Sexual Exploitation and Abuse Prevention and Response; and (ii) promptly report to WHO, in accordance with the terms of the Policy, any actual or suspected violations of the Policy of which the Contractor becomes aware.

3. **Tobacco/Arms Related Disclosure Statement.** The Contractor may be required to disclose relationships it may have with the tobacco and/or arms industry through completion of the WHO Tobacco/Arms Disclosure Statement. In the event WHO requires completion of this Statement, the Contractor undertakes not to permit work on the Contract to commence, until WHO has assessed the disclosed information and confirmed to the Contractor in writing that the work can commence.

4. **Anti-Terrorism and UN Sanctions; Fraud and Corruption.** The Contractor warrants for the entire duration of the Contract that:

- i. it is not and will not be involved in, or associated with, any person or entity associated with terrorism, as designated by any UN Security Council sanctions regime, that it will not make any payment or provide any other support to any such person or entity and that it will not enter into any employment or subcontracting relationship with any such person or entity;
- ii. it shall not engage in any illegal, corrupt, fraudulent, collusive or coercive practices (including bribery, theft and other misuse of funds) in connection with the execution of the Contract; and
- iii. the Contractor shall take all necessary precautions to prevent the financing of terrorism and/or any illegal corrupt, fraudulent, collusive or coercive practices (including bribery, theft and other misuse of funds) in connection with the execution of the Contract.

Any payments used by the Contractor for the promotion of any terrorist activity or any illegal, corrupt, fraudulent, collusive or coercive practice shall be repaid to WHO without delay.

5. **Breach of essential terms.** The Contractor acknowledges and agrees that each of the provisions of paragraphs 1, 2, 3 and 4 above constitutes an essential term of the Contract, and that in case of breach of any of these provisions, WHO may, in its sole discretion, decide to:

- i. terminate the Contract, and/or any other contract concluded by WHO with the Contractor, immediately upon written notice to the Contractor, without any liability for termination charges or any other liability of any kind; and/or
- ii. exclude the Contractor from participating in any ongoing or future tenders and/or entering into any future contractual or collaborative relationships with WHO.

WHO shall be entitled to report any violation of such provisions to WHO's governing bodies, other UN agencies, and/or donors.

6. **Use of WHO Name and Emblem.** Without WHO's prior written approval, the Contractor shall not, in any statement or material of an advertising or promotional nature, refer to the Contract or the Contractor's relationship with WHO, or otherwise use the name (or any abbreviation thereof) and/or emblem of the World Health Organization.

7. **Assurances regarding procurement.** If the option for payment of a maximum amount applies, to the extent the Contractor is required to purchase any goods and/or services in connection with its performance of the Contract, the Contractor shall ensure that such goods and/or services shall be procured in accordance with the principle of best value for money. "Best value for money" means the responsive offer that is the best combination of technical specifications, quality and price.

8. **Audit.** WHO may request a financial and operational review or audit of the work performed under the Contract, to be conducted by WHO and/or parties authorized by WHO, and the Contractor undertakes to facilitate such review or audit. This review or audit may be carried out at any time during the implementation of the work performed under the Contract, or within five years of completion of the work. In order to facilitate

such financial and operational review or audit, the Contractor shall keep accurate and systematic accounts and records in respect of the work performed under the Contract.

The Contractor shall make available, without restriction, to WHO and/or parties authorized by WHO:

- i. the Contractor's books, records and systems (including all relevant financial and operational information) relating to the Contract; and
- ii. reasonable access to the Contractor's premises and personnel.

The Contractor shall provide satisfactory explanations to all queries arising in connection with the aforementioned audit and access rights.

WHO may request the Contractor to provide complementary information about the work performed under the Contract that is reasonably available, including the findings and results of an audit (internal or external) conducted by the Contractor and related to the work performed under the Contract.

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

**Strengthening the National Action Plan on Elderly Health 2020-2024 to
Improve Services for Older Persons**

ANNEX 6 - EVALUATION CRITERIA

No.	Category		Max Points	Min. Pass Points
1	QUALITY OF THE TECHNICAL PROPOSAL		50	
	1.1	The proposal provides sufficient detail of a technically sound methodology to design an effective approach to implementation of the NAP including development of supporting tools, with key consultations and stakeholders identified (output 1)	20	
	1.2	The proposal clearly indicates allocation of human resource support for evaluation of the initial implementation of NAP and update of the design accordingly (output 2)	20	
	1.3	The activity Gantt chart with implementation timeline is realistic and includes specific tasks for each deliverable along with the person responsible	5	
	1.4	The proposal describes the anticipated projects risks and mitigation measures, as well as quality assurance mechanisms	5	
2	TEAM COMPOSITION		15	
	2.1	Overall team composition is in alignment with the skills and experience required to fulfill the terms of reference	7	
	2.2	Structure of the team, including the role, responsibilities and time dedicated to the project for each team member is specified	3	
	2.3	CVs of each team member demonstrate required expertise to fulfill their designated role	5	
3	EXPERIENCE OF THE INSTITUTION/COMPANY		15	
	3.1	Institution/company profile indicates previous major work related to strategy, policy and/or action plan development including monitoring and plan tools, preferably related to the services for older persons	7	
	3.2	References/links to previous relevant work provided and indicate high quality of work	3	
	3.3	List of clients in the last five years, including contact details (name, email address, and phone numbers that can be used as reference)	2	
	3.4	The institution/organization has demonstrated experience of working with government counterparts	3	
TECHNICAL PROPOSAL			80	50
PRICE PROPOSAL			20	
TOTAL MARKS			100	