



**World Health
Organization**

Digital Transformation of Indonesia's Clinical Research Registry (INA-CRR)

Request for Proposals (RFP)

Proposal Reference

RFP 038-2026

Country Office/Unit Name

WHO Indonesia/HSR

Issued on

Tuesday, June 2, 2026

Closing date

Tuesday, June 16, 2026

Closing Time

12:00 mid-day

Time Zone

Jakarta time

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:

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|--|-------------------------------------|
| Section 1: Cover Letter..... | Error! Bookmark not defined. |
| Section 2: General Instructions to Proposers | 3 |
| Section 3: Specific Information to this RFP | 8 |
| Section 4: Evaluation Criteria | 10 |
| Section 5: Terms of Reference -Services | 13 |
| Section 6: General Conditions of Contract..... | 21 |
| Section 7: Returnable Forms | 22 |
| Annex A: Letter of Intent | 25 |
| Annex B: Confidentiality Undertaking..... | 26 |
| Annex C: Proposal Completeness Form..... | 27 |
| Annex D: Proposer Information | 28 |
| Annex E: Financial Proposal Form..... | 30 |
| Annex F: Self Declaration Form | 32 |
| Annex G: Joint Venture/Consortium /Association Information | 33 |
| Annex H: Sustainable Procurement Questionnaire | 34 |
| Annex I: CV Template | 36 |
| Annex J: Government Standard Rate 2026 | 38 |

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 Thursday, June 11, 2026
2. Please submit any requests for clarification no later than Thursday, June 11, 2026
3. Please prepare your proposal in accordance with the requirements and procedures outlined in this RFP and submit it no later than **Tuesday, June 16, 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 to 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 Annex F: Self-Declaration form included in this RFP. 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> |
| 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. |

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| 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 bidders' proposal | The proposal shall comprise of the forms requested in Section 7: Returnable 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 Returnable Forms 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. 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.</p> <p>Procurement team in the Country Office will handle the tax exemption recommendation with the relevant authorities in accordance with applicable tax laws and procedures in Indonesia.</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 bidder'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 | <p>Prices may be quoted in US Dollar, or any currency of the bidder's choice, unless otherwise stipulated in Section 3 Information Specific to the RFP.</p> <p>However, for the purposes of comparison of all offers, WHO will convert the currency quoted in the offers to IDR, in accordance with the UN Operational Rate of Exchange on the closing date for bid submission specified in Section 3: Specific information about this RFP.</p> |
| 14. Proposal validity period | <p>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.</p> <p>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.</p> |
| 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: |

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| | <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 to 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 bid. |
| 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 to 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 to 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 to 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 | <p>Complete proposals must be received by WHO in the manner, and no later than the date and time, specified in Section 3: Specific information to this RFP. In case of any doubt regarding the time zone, Proposers should refer to Section 3: Specific information to this RFP. It is the sole responsibility of Proposers to ensure their proposal is received by the stated deadline.</p> <p>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 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 | Proposals will be opened after the deadline for proposal submission by the bid opening committee 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. |
| EVALUATION OF PROPOSALS | |
| 24. Evaluation of proposals | WHO shall evaluate a proposal using only the methodologies and criteria defined in this RFP. No other criteria or methodology shall be permitted. |

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| | <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 | <p>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.</p> |
| 26. Evaluation of eligibility and qualification | <p>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.</p> |
| 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 | <p>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.</p> |
| 29. Nonconformities, reparable errors and omissions | <p>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 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> <ul 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> |

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| | <p>WHO reserves the right to:</p> <p>a) award the Contract to any proposer, even if not the lowest.</p> <p>b) award separate contracts for different parts, components, or items to one or more proposers, even if not the lowest.</p> <p>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.</p> <p>d) award the Contract based on WHO's specific objectives to the proposer whose offer best meets the Organization's needs.</p> <p>e) decide not to award any contract.</p> |
| 31. Right to vary requirements at time of award | 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. |
| 32. Notification of award | 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. |
| 33. Payment terms | Full payment of 100% is due within 30 days following receipt and acceptance of services, upon receipt of the invoice. |
| 34. Debriefing | <p>WHO does not routinely offer debriefings to unsuccessful bidders. 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: procurementcomplaint@who.int and must include the minimum information detailed on the WHO website (WHO Procurement: frequently asked questions).</p> |
| 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 to 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 Bidders article | Specific Instructions / Requirements |
|---|---|
| Scope of RFP and Intention to Bid (Article 2) | The reference number of this Request for Proposal (RFP) is RFP 038-2026 The services include the Digital Transformation of Indonesia's Clinical Research Registry (INA-CRR) 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: Select which applies <input checked="" type="checkbox"/> Email address wpinobids@who.int with copy to wpinoprocurement@who.int b) Deadline for submitting requests for clarifications / questions: Date: 11 June 2026 Time 4:00 PM City and Country: Jakarta, Indonesia Responses to requests for clarification will be communicated in writing by WHO to all bidders 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 IDR |
| Proposal validity (Article 14) | 180 days from the deadline for proposal submission. |
| Alternative proposals (Article 17) | Shall not be considered. |
| Pre-proposal conference (Article 18). | Will be held but not mandatory A Pre-proposal conference will be held on: Date/Time: Wednesday, June 10, 2026 / 10:00 AM (Jakarta, Indonesia Time) Location: Online via Microsoft Teams Meeting Registration Link (required): Pre-Proposal Conference RFP 038-2026 – Fill in form Contact/email: Procurement team / wpinoprocurement@who.int |
| 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"/> Email: wpinobids@who.int The submitted technical and financial proposal shall be in reference to the enclosed Terms of References and budget component. A technical and financial proposal should be submitted separately in 2 emails stating in the subject the following reference number: RFP 038-2026. Submission of proposal can only be done electronically by email to: wpinobids@who.int (including any other email address in the submission may disqualify the bid): |

| Instructions to Bidders article | Specific Instructions / Requirements |
|--|---|
| | <ul style="list-style-type: none"> o All information and documentation related to the technical proposal only containing forms (B,C,D, F and section 5.10) in the first email under the subject "TECHNICAL PROPOSAL – RFP 038-2026". o Please send a second email containing the financial proposal only including form E and H under the subject "FINANCIAL PROPOSAL – RFP 038-2026" <p>The bidder must ensure that the content of all copies is identical. If at any time a difference is discovered between any copies of the proposal then the "Master Copy" will prevail as the official copy.</p> <p><u>ATTENTION</u>: Proposals which do not comply with the selected method of submission may be rejected.</p> |
| Deadline for proposal submission (Article 21) | Public proposal opening will not be held CLOSING DATE: 16 June 2026 CLOSING TIME: 12:00 mid-day |
| 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. This means that Technical Proposal will take 70%. and Financial Proposal will take 30% |
| Performance Security (Article 37) | Not Required |

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 F | |
| 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 F | |
| 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 (5) 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 within the past five years of relevant experience. Please fill form D | |

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| 7. | Past performance: The proposer must submit at least: a) List of two (2) relevant/comparable contracts and b) two (2) reference letters for related services. | Company / respondent should provide at least two (2) reference letters related to the current project, Fill form D for the list of relevant projects | |
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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 | 50% |
| Marginally detailed | Marginally acceptable or weak evidence of ability to support requirements | 20% |
| Very minimally detailed | Lack of evidence to demonstrate ability to comply with requirements | 10% |
| 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 | | Max Points |
|--|---|------------|
| 1.1 | Demonstrated institutional experience in health information systems, health data management, clinical research data, indicators, data standards, particularly working with government institutions in Indonesia. Experience in registry data consolidation, harmonization, or governance will be considered an advantage, as well as prior collaboration with WHO or other international organizations. | 8 |
| 1.2 | Clarity of the institution's rationale for undertaking this assignment and how its background and strengths align with the objectives of strengthening health clinical research data within the INA-CRR and Indonesia's Clinical Research Registry (INA-CRR) context. | 4 |
| Total Section 1 | | 12 |
| Section 2. Quality of the Technical Proposal | | |
| The proposal should address and reflects the quality of following item: | | |
| 2.1 | Demonstrated understanding of the objectives, scope, and expected outputs, including clinical trial registry strengthening, data harmonization, and ICTRP alignment | 10 |
| 2.2 | Proposed methodology and technical approach for system development, including microservices architecture, interoperability, and data harmonization | 16 |
| 2.3 | The likelihood proposal design meeting the project requirements | 5 |
| 2.4 | Clarity and completeness of workplan and deliverables aligned with project outputs | 6 |

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| 2.5 | Realistic and feasible timeline (Gantt chart) aligned with project duration and sequencing | 6 |
| 2.6 | Stakeholder engagement approach (MoH, INA-CRC, CRUs, and relevant stakeholders) | 6 |
| 2.7 | Risk management and quality assurance approach, including mitigation measures | 6 |
| 2.8 | Clarity, structure, and coherence of the proposal | 5 |
| Total Section 2 | | 60 |
| Section 3. Resources and Key Personnel | | Max Points |
| 3.1 | Proposed team meets all qualifications specified in TOR and demonstrates relevant experience. | 18 |
| 3.2 | Team structure and allocation of responsibilities aligned with timeline and deliverables | 5 |
| 3.3 | Institutional technical capacity, including tools, infrastructure, and technical support | 5 |
| Total Section 3 | | 28 |
| Grand Total | | 100 |

NOTE

- a) A minimum of 60 points is required to pass the technical evaluation. Non-technically compliant proposals will not be opened for financial evaluation
- b) Rating the Technical Proposal (TP):

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

The proposal should address the criteria in the 3. Weighted Scoring Criteria

B- FINANCIAL EVALUATION

Once the technical evaluation is finalized, all evaluation panel members will sign the technical evaluation report. Only financial proposals from bidders 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 Digital Transformation of Indonesia's Clinical Research Registry (INA-CRR) initiative. The Contractor shall provide the necessary technical expertise, project management, and operational support required to deliver the scope of work as outlined in this Request for Proposal. The Contractor shall prioritize reuse, integration, and optimization of existing system components over replacement, unless replacement is technically unavoidable

Purpose

The overarching goal of this initiative is to realize an integrated, transparent, and globally recognized national clinical research ecosystem through digital transformation.

The general objective from this activity is to establish a secure, harmonized and digitally (interoperable, microservices-based) national clinical research registry platform aligned with ICTRP dataset standards and national digital health governance principles, that supports high-quality, efficient, and transparent research governance in Indonesia.

The specific objectives:

- Standardization & integration: Formulate data harmonization protocols and build a unified, quality-oriented clinical research registry system aligned with ICTRP national standards.
- Interoperability: Develop an API-based interoperability framework and microservices-based architecture to enhance data exchange between health agencies, BPOM, and clinical research portals.
- Data Flow: Establish a structured CRU-to-INA-CRR data flow to ensure accurate, consistent, and traceable movement of clinical research data across the system.
- Feature Development: Implement digital modules for registration, real-time monitoring, secure reporting, and data analytics to modernize clinical research operations.
- Pilot Implementation: Deploy and validate the system through pilot implementation in three selected vertical Type A hospitals prior to national rollout.
- Capacity Building: Strengthen the technical proficiency of human resources in digital data management to support effective and sustainable system adoption.
- Governance & Sustainability: Develop a sustainability, DevOps, and operational governance model to ensure long-term system resilience and institutional continuity.
- Policy & Guidelines: Facilitate national policies on digital governance of clinical research and deliver comprehensive technical guidelines and SOPs from INA-CRC to CRUs.

Background

Clinical trials are a critical component of health innovation and evidence generation for improving health systems, medical treatments, and public health interventions. Ensuring transparency, accountability, and accessibility of clinical trial information is essential to strengthen research governance and promote public trust in scientific research.

Globally, the World Health Organization established the International Clinical Trials Registry Platform (ICTRP) to provide a centralized platform that aggregates information on clinical trials from registries worldwide. The ICTRP serves as a single point of access to information on ongoing and completed clinical trials, enabling researchers, policymakers, and the public to access trial registration data from multiple countries and registries.

The platform promotes the prospective registration of clinical trials based on the WHO Trial Registration Data Set, supporting transparency in research, reducing duplication of studies, strengthening ethical accountability, and improving the reliability of scientific evidence.

In line with these global principles, many countries have established national clinical trial registries to systematically capture information on clinical studies conducted within their jurisdiction. National registries serve as an important mechanism to:

- improve transparency of ongoing and completed clinical trials,
- strengthen national oversight of research activities,
- support ethical governance and regulatory monitoring,
- facilitate collaboration between research institutions, and
- contribute national data to global clinical trial registries.

In Indonesia, the Indonesia Clinical Research Center (INA-CRC) was established by the Ministry of Health to strengthen the national clinical research ecosystem and coordinate clinical research units across hospitals in the country. Through its mandate, INA-CRC aims to enhance coordination, improve research infrastructure, and facilitate collaboration among stakeholders involved in clinical research.

As part of this effort, the Indonesia Clinical Research Registry was developed as a national online registry for clinical research conducted in Indonesia. The platform provides a publicly accessible system where investigators and research institutions can register clinical trials and make study information available to stakeholders and the wider public.

The establishment of INA-CRR represents an important step in strengthening Indonesia's clinical research governance and improving transparency of clinical trial activities conducted within the country. However, several challenges remain in the current clinical research data ecosystem in Indonesia. At present, real-time and comprehensive information on ongoing and completed clinical trials remains limited, making it difficult for policymakers, research institutions, and sponsors to obtain a clear overview of the national clinical research landscape.

In addition, the integration of clinical trial information across Clinical Research Units (CRUs) in hospitals is still evolving, and differences in data formats, reporting standards, and system architectures require further harmonization. Strengthening interoperability between institutional research systems and the national registry is therefore essential to ensure consistent and reliable clinical trial information.

To address these challenges, continued development of the INA-CRR platform is required to enhance system functionality, improve data harmonization, and strengthen interoperability with institutional research systems across Indonesia. Importantly, strengthening the interoperability of INA-CRR with global clinical trial registries will enable Indonesia to contribute national clinical trial data to the global research ecosystem.

In this context, this activity aims to support the continuity, enhancement, and interoperability of INA-CRR, including the alignment of registry data with international standards and the potential integration with the WHO ICTRP global clinical trial registry network. Strengthening this connectivity will support Indonesia in improving transparency of clinical research, strengthening research governance, and positioning the country as an active contributor to the global clinical research landscape.

5.2 Characteristics of the Contractor is

5.2.1 Status

The Proposer shall be a Profit or not profit company/entity operating in the field of relevant institution to the scope of this project, including but not limited to: digital health systems development, health information systems and data platforms, clinical research management systems, health data interoperability and integration, health informatics and data governance, or software development for health sector applications

5.2.2 Accreditations

An accreditation (in the relevant field) or an on-going accreditation process by a certified accreditation body) or an on-going accreditation process by a certified accreditation body would be an asset (desirable).

5.2.3 Previous experience

To undertake the mentioned key tasks listed under # 5.3, the consultant should have a strong understanding of health information systems and data governance within the context of Indonesia's health system, including digital health, and Indonesia's Clinical Research Registry (INA-CRR).

Mandatory:

- Proven experience in the field of digital system development projects with comparable technical complexity and governance requirements
- Proven experience in the development of modular digital platforms, i.e providing design and implementation of modern software architectures, including microservices-based systems or other modular architectures that enable scalability, maintainability, and integration with external platforms.
- Proven experience in system interoperability and data integration, designing and implementing interoperable systems, including the development of APIs, system integration layers, and structured data exchange mechanisms between multiple institutional platforms.
- Proven experience in data architecture and database engineering, development and management of robust database infrastructures, including data modeling, data migration strategies, and management of large

structured datasets. Bidders should demonstrate experience in data transformation, migration, and integration processes in the context of digital system implementation

- Proven experience in implementing secure digital platforms, including security architecture, vulnerability assessment, and system protection measures. Experience applying recognized cybersecurity standards and practices, such as OWASP security principles or ISO 27001-aligned approaches, is required.
- Previous work with WHO, other international organizations and/or major institutions in the field of digital system development project;

Desirable:

- Demonstrated experience in implementing structured testing frameworks, including system testing, integration testing, and user acceptance testing for digital platforms. Experience producing technical documentation of testing results and validation processes is required.
- Experience implementing DevOps practices for digital platforms, including version control, automated deployment pipelines, and system environment management. Bidders should demonstrate experience producing technical documentation related to system deployment and operational management.
- Experience producing comprehensive technical documentation for digital systems, including architecture documentation, API specifications, and development decision records.

5.2.4 Staffing

The Contractor shall propose a qualified multidisciplinary team with demonstrated experience in the development and implementation of complex digital platforms, particularly those involving data integration, interoperability, and secure data management.

At a minimum, the proposed team shall demonstrate the following functional roles, which may be fulfilled by one or more individuals depending on the proposed team structure:

- Project Manager
- Solution Architect
- Backend Specialist:
 - Interoperability
 - Data Engineer / Database
 - Cybersecurity
- Quality Assurance / Testing Lead

The Contractor may propose additional technical personnel if deemed necessary to ensure successful delivery of the assignment. The proposal must clearly demonstrate that the proposed team possesses the technical, managerial, and operational capacity required to implement the scope of work described in this RFP. Detailed qualification requirements for key personnel are provided in Section 3.3.6.

Key personnel qualifications:

- Project Manager (1 person, 100% FTE)
 - Minimum 5 years of professional experience in managing digital system development or digital transformation projects.
 - Demonstrated experience managing complex multi-stakeholder ICT projects.
 - Experience coordinating software development teams and system deployment processes.
 - Experience working with government institutions, research institutions, or international organizations is desirable.
 - The Project Manager will be responsible for overall coordination, delivery, and day-to-day management of the assignment. Where appropriate, the Project Manager may also perform Solution Architect functions, provided that the individual demonstrates the required technical qualifications and experience in system architecture design and implementation.
- Solution Architect (1 person, 100% FTE)
 - Proven experience (min 3 years) designing scalable digital system architectures in the area of health projects (preferable).
 - Demonstrated experience with microservices architecture and modular system design.
 - Experience designing systems that support interoperability and integration with external platforms.
 - Experience producing technical architecture documentation and system design specifications.
- Interoperability/Integration lead (1 person, 100% FTE)
 - Demonstrated experience (minimum 3 years) implementing system integration and data exchange mechanisms.
 - Proven experience developing API-based integrations and interoperability frameworks.
 - Experience working with structured data standards, metadata mapping, or registry datasets.
- Data engineer/ Database specialist (1 person, 100% FTE)

- Experience designing and managing database infrastructures and data pipelines (minimum 3 years).
- Experience in data modelling, data transformation, and migration processes.
- Demonstrated experience working with large, structured datasets or registry systems.
- Quality Assurance/ Testing Lead
 - Demonstrated experience implementing software testing frameworks, including system testing, integration testing, and user acceptance testing.
 - Experience managing quality assurance processes throughout the software development lifecycle.
 - Experience producing testing reports and system validation documentation.

The Contractor must provide the following information for all proposed key personnel:

- Detailed Curriculum Vitae (CV) demonstrating relevant experience.
- Defined roles and responsibilities for each team member.
- Level of Effort (LoE) indicating the percentage of time allocated to the assignment. The Level of Effort (LoE) should reflect the proposed team structure. Where roles are combined, bidders must clearly demonstrate adequate allocation of time and capacity to fulfil both functions.

The Contractor must ensure that the proposed personnel remain available throughout the duration of the assignment. Replacement of any key personnel must possess equivalent or higher qualifications and experience.

The bidder is expected to outline the roles and responsibilities of those staff in the technical proposal. Activities will be carried in normal working hours of West, Central, and East time zone.

CVs and relevant experience to the above characteristics should be submitted with the proposal. Information about the roles/responsibilities and the proportionate time that will be dedicated to the project should also be included in the submission and in the financial proposal

The bidder is expected to outline the roles and responsibilities of those staff in the technical proposal. Activities will be carried in normal working hours of WIB/Jakarta time zone.

5.2.5 Work to be performed

Clinical trials are a critical component of health innovation and evidence generation for improving health systems, medical treatments, and public health interventions. Ensuring transparency, accountability, and accessibility of clinical trial information is essential to strengthen research governance and promote public trust in scientific research.

Globally, the World Health Organization established the International Clinical Trials Registry Platform (ICTRP) to provide a centralized platform that aggregates information on clinical trials from registries worldwide. The ICTRP serves as a single point of access to information on ongoing and completed clinical trials, enabling researchers, policymakers, and the public to access trial registration data from multiple countries and registries.

The platform promotes the prospective registration of clinical trials based on the WHO Trial Registration Data Set, supporting transparency in research, reducing duplication of studies, strengthening ethical accountability, and improving the reliability of scientific evidence.

In line with these global principles, many countries have established national clinical trial registries to systematically capture information on clinical studies conducted within their jurisdiction. National registries serve as an important mechanism to:

- improve transparency of ongoing and completed clinical trials,
- strengthen national oversight of research activities,
- support ethical governance and regulatory monitoring,
- facilitate collaboration between research institutions, and
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In Indonesia, the Indonesia Clinical Research Center (INA-CRC) was established by the Ministry of Health to strengthen the national clinical research ecosystem and coordinate clinical research units across hospitals in the country. Through its mandate, INA-CRC aims to enhance coordination, improve research infrastructure, and facilitate collaboration among stakeholders involved in clinical research.

As part of this effort, the Indonesia Clinical Research Registry was developed as a national online registry for clinical research conducted in Indonesia. The platform provides a publicly accessible system where investigators and research institutions can register clinical trials and make study information available to stakeholders and the wider public.

The establishment of INA-CRR represents an important step in strengthening Indonesia's clinical research governance and improving transparency of clinical trial activities conducted within the country. However, several challenges remain in the current clinical research data ecosystem in Indonesia. At present, real-time and comprehensive information on ongoing and completed clinical trials remains limited, making it difficult for policymakers, research institutions, and sponsors to obtain a clear overview of the national clinical research landscape.

In addition, the integration of clinical trial information across Clinical Research Units (CRUs) in hospitals is still evolving, and differences in data formats, reporting standards, and system architectures require further harmonization. Strengthening interoperability between institutional research systems and the national registry is therefore essential to ensure consistent and reliable clinical trial information.

To address these challenges, continued development of the INA-CRR platform is required to enhance system functionality, improve data harmonization, and strengthen interoperability with institutional research systems across Indonesia. Importantly, strengthening the interoperability of INA-CRR with global clinical trial registries will enable Indonesia to contribute national clinical trial data to the global research ecosystem.

In this context, this activity aims to support the continuity, enhancement, and interoperability of INA-CRR, including the alignment of registry data with international standards and the potential integration with the WHO ICTRP global clinical trial registry network. Strengthening this connectivity will support Indonesia in improving transparency of clinical research, strengthening research governance, and positioning the country as an active contributor to the global clinical research landscape.

5.3 Key requirements

The scope of work focuses on the consolidation, updating, and harmonization of health clinical research data, as well as strengthening the INA-CRR Registry Data platform and supporting technical guidance.

The specific objectives according to the study timeline and expected outputs of this survey are as follows:

5.3.1 Objective: Strengthen the national clinical trial registry system architecture

Outputs:

- Review and assess the existing INA-CRR system architecture, including system components, database structure, and integration capabilities (gap assessment analysis).
- Design an enhanced system architecture based on microservices architecture principles to improve scalability, modularity, and interoperability
- Develop technical architecture documentation including system architecture diagrams (structure of CRU-to-INA-CRR data flow
- Develop and document API specifications to enable integration with other national research systems and external platforms.
- Establish DevOps documentation and system deployment procedures to support sustainable system operation.
- Define the technology stack and programming framework for the system development, including backend microservices architecture and frontend/dashboard development, ensuring compatibility with the technical capacity of the Ministry of Health IT team to support long-term system maintenance and sustainability after project handover.

5.3.2 Objective: Harmonize and standardize clinical trial data to align with international registry standards

Outputs:

- Review the existing INA-CRR data structure and assess its alignment with the WHO Trial Registration Data Set (TRDS) and ICTRP reporting requirements.
- Develop a data harmonization framework for clinical trial registration data across institutional Clinical Research Units (CRUs), including standardized data definitions, metadata structure, and reporting formats.
- Develop dataset mapping between INA-CRR and the WHO ICTRP dataset structure, including data transformation and validation rules.
- Pilot the implementation of the data harmonization framework with three selected Clinical Research Units (CRUs) to test the process of clinical trial data submission and harmonization with the INA-CRR platform.
- Document the data harmonization workflow, including procedures for data submission, validation, and integration from institutional CRUs into INA-CRR.
- Develop guidelines and recommendations for scaling up the harmonized data submission process across additional CRUs in Indonesia.

5.3.3 Objective: Strengthen interoperability between hospital Clinical Research Units (CRUs) and the national clinical trial registry

Outputs:

- Assess the current landscape of clinical trial data reporting across Clinical Research Units in hospitals.
- Design interoperability mechanisms to support data exchange between CRUs and INA-CRR.
- Develop integration protocols and data submission workflows for institutional research units.
- Develop guidelines for CRUs to ensure consistent clinical trial data submission and registry reporting.

5.3.4 Objective: Enable integration of INA-CRR with the WHO ICTRP global clinical trials registry platform

Outputs:

- Assess technical requirements for connecting INA-CRR to the WHO ICTRP registry network.
- Develop ICTRP-compliant data export mechanisms.
- Develop automated or semi-automated data submission procedures to the WHO ICTRP.
- Conduct testing and validation of registry interoperability with ICTRP data standards.

5.3.5 Objective: Strengthen system security, reliability, and quality assurance

Outputs:

- Develop cybersecurity safeguards aligned with internationally recognized security practices.
- Conduct system security assessments and vulnerability testing.
- Develop (if necessary) and implement system testing including functional testing, integration testing, and user acceptance testing.
- Produce system testing documentation and quality assurance reports.

5.3.6 Objective: Support sustainable operation and long-term management of the national clinical trial registry

Outputs:

- Develop system maintenance and operational guidelines.
- Provide technical documentation for system administration and future upgrades.
- Conduct knowledge transfer and technical orientation sessions for INA-CRC technical teams.
- Provide final system documentation including architecture, APIs, integration protocols, and data governance guidelines.
- Submit final activity and financial report

5.4 Place of Performance

The services under this contract will be performed primarily remotely, with coordination and technical consultations conducted with the World Health Organization (WHO) Indonesia Country Office and the Indonesia Clinical Research Center (INA-CRC) under the Ministry of Health. Where necessary, the Contractor may be required to participate in in-person or virtual technical meetings, workshops, or consultations with relevant stakeholders, including the Ministry of Health, INA-CRC, Clinical Research Units (CRUs), and other relevant institutions. Pilot activities related to data harmonization and system testing may involve selected Clinical Research Units (CRUs) in Indonesia, as identified by INA-CRC. The Contractor is expected to maintain regular communication with WHO and designated national counterparts throughout the duration of the assignment.

5.5 Timelines

The indicative total duration of the assignment is approximately 17 months, commencing in July 2026 and concluding by November 2027.

The project is expected to be implemented through a series of logically sequenced stages, broadly encompassing system assessment, architecture design, development of data harmonization and interoperability frameworks, platform development and enhancement, pilot implementation with selected Clinical Research Units (CRUs), integration with the WHO ICTRP platform, system testing and validation, and final deployment and handover.

While these stages provide an indicative structure of the assignment, bidders are encouraged to propose an optimized and coherent implementation approach, ensuring that foundational elements—particularly data architecture, harmonization, and interoperability design—are established prior to or in parallel with system development activities.

| Phase | Activity | Timeline | Deliverables |
|---------|---|---------------------|---|
| Phase 1 | Project inception and system assessment | July 2026 | Inception report, assessment of existing INA-CRR architecture |
| Phase 2 | System architecture design and technology stack definition | Aug – Sept 2026 | System architecture design, technology stack documentation, Architecture Decision Records (ADR) |
| Phase 3 | Development of enhanced INA-CRR platform (microservices architecture) | Oct 2026 – Feb 2027 | Core platform modules, API documentation |
| Phase 4 | Development of data harmonization framework and ICTRP dataset mapping | Jan – Mar 2027 | Data harmonization framework, ICTRP dataset mapping |
| Phase 5 | Pilot implementation with 3 Clinical Research Units (CRUs) | Apr – Jun 2027 | Pilot data integration report and harmonization workflow |
| Phase 6 | Development of interoperability with WHO ICTRP | Jun – Aug 2027 | ICTRP integration mechanism and data export module |
| Phase 7 | System testing and security validation | Aug – Sept 2027 | QA testing report, cybersecurity testing documentation |
| Phase 8 | System deployment and operationalization | Sept – Oct 2027 | Operational INA-CRR platform |
| Phase 9 | Capacity building, documentation, and system handover | Oct – Nov 2027 | Training sessions, system documentation, final report |

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 monthly basis. Routine coordination between contractor, WHO, and the Ministry of Health will be expected to conduct in monthly basis or as needed. 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

This section provides the minimum qualification requirements for key personnel. Bidders may propose alternative structures provided that equivalent or higher competencies are demonstrated.

a. **Project Manager (1 person)**

The roles described below represent the expected functional capacities required for the assignment. Bidders may propose a combined role structure (e.g. Project Manager also serving as Solution Architect), provided that the individual meets the qualification requirements for both roles.

Essential qualifications:

- Minimum 5 years of professional experience in managing digital system development projects or national digital platforms.
- Demonstrated experience in leading multidisciplinary technical teams.
- Master's degree in information technology, or related fields where digital health, health informatics is preferable.
- Proven experience managing complex ICT or digital transformation projects involving multiple stakeholders.
- Experience in preparing technical documentation, system implementation plans, and project management reports.

Desirable qualifications:

- Experience supporting national health information systems or digital health platforms.
- Experience working with government institutions, ministries of health, or international organizations.
- Familiarity with clinical research systems, registries, or research governance platforms.

b. **Solution Architect/ Digital Health (1 person)**

Essential qualifications:

- Minimum 3 years of experience in designing and implementing large-scale digital systems.
- Bachelor's or Master's degree in health sciences, health informatics, or related fields, with experience in the digital health sector.
- Demonstrated experience designing digital health system architecture
- Experience designing secure and scalable digital platforms.
- Experience producing technical architecture documentation and system design specifications.

Desirable qualifications:

- Experience designing national registry systems or health information platforms.
- Experience designing interoperable systems integrating multiple institutional data sources.
- Familiarity with government digital health infrastructure frameworks.

c. **Interoperability / Integration Specialist (1 person)**

Essential qualifications:

- Minimum 3 years of experience in system interoperability, data exchange, or systems integration.
- Bachelor's degree in computer science, information systems, or related technical fields.
- Demonstrated experience developing API-based integrations and data exchange mechanisms.
- Experience working with structured datasets and metadata standards.

Desirable qualifications:

- Experience supporting integration of national systems with international platforms.
- Experience working with health data standards or research data registries.
- Familiarity with global registry systems or international reporting platforms.

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d. **Data Engineer / Database Specialist (1 person)**

Essential qualifications:

- Minimum 3 years of experience in database architecture, data engineering, or data pipeline development.

- Bachelor's or Master's degree in computer science, data science, information systems, or related fields.
- Demonstrated experience designing database structures, data models, and data transformation pipelines.
- Experience managing large, structured datasets or registry systems.

Desirable qualifications:

- Experience working with clinical research data or health data systems.
- Experience in data harmonization, data mapping, and metadata standardization.
- Familiarity with registry-based data systems.

e. Cybersecurity Specialist (1 person)

Essential qualifications:

- Minimum 3 years of experience in cybersecurity, system security architecture, or information security.
- Bachelor's degree in information security, computer science, or related fields.
- Demonstrated experience implementing security safeguards for digital platforms.
- Familiarity with recognized cybersecurity frameworks.

Desirable qualifications:

- Familiarity with ISO 27001 principles, OWASP security practices, or similar standards.
- Experience conducting security assessments and vulnerability testing for digital systems.

f. Quality Assurance / Testing Lead (1 person)

Essential qualifications:

- Minimum 3 years of experience in software quality assurance and testing.
- Bachelor's degree in computer science, information systems, or related fields.
- Experience implementing system testing, integration testing, and user acceptance testing processes.
- Experience producing testing documentation and validation reports.

Desirable qualifications:

- Experience working with digital health systems or national information platforms.
- Experience testing interoperable systems or multi-institution digital platforms.

5.10 Format of the Bidders Proposal

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

5.10.1 Executive Summary

The bidder's proposal must be accompanied by an Executive Summary (of 2-3 pages maximum) introducing the proposed solution and approach / methodology.

5.10.2 Approach/Methodology

Bidders 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.

The proposed solution should:

- Describe all components of the service;
- describe the steps that will be followed for the development of the service/projects;
- propose a detailed workplan, including work packages, milestones for key deliverables.

5.10.4 Proposed Timeline

A Timeline project plan following the timelines indicated under 5.5 above should be presented either in MS Project MPP, XLS or PDF format.

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 wpino@procurement@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

Select One:

- 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 Forms

The following forms 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: Proposers Information. |
| Mandatory | Annex E: Financial Proposal Form |
| Mandatory | Annex F Self Declaration Form |
| Mandatory for joint ventures | Annex G Joint Venture/Consortium/Association Information |
| Optional | Form H: Sustainable Procurement Questionnaire |
| Optional | Form I: CV Template |

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 (if any)

Subject RFP reference: RFP 038-2026

| 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 Health System Strengthening - Health Information System has access to certain information relating to Digital Transformation of Indonesia's Clinical Research Registry (INA-CRR) 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 Digital Transformation of Indonesia's Clinical Research Registry (INA-CRR) 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</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 5.10: Format of the Bidders Proposal | 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 038-2026 |
| 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 3 years.

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 Statements of Satisfactory Performance from the Top 3 (three) Clients or more.

Annex E: Financial Proposal Form

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

Currency of the proposal: IDR

The Undersigned, [Company] confirms to have read, understood and accepted the terms of the Request for Proposals (RFP) No.022-2026, 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 Digital Transformation of Indonesia's Clinical Research Registry (INA-CRR) in accordance with the terms of this RFP and any corresponding contract between WHO and the Undersigned, for the amount(s) attached Excel form (Budget Template - Cost Breakdown attached).

CURRENCY IDR

Activity:

Digital Transformation of INA CRR

Name of Bidder

please fill in institution/company's name

| Code | Item Budget | Unit Cost | Quantity | Unit | Duration | Unit | Amount (Rupiah) |
|---|--|-----------|----------|--------|----------|-------|-----------------|
| A. Professional Fee (<i>please refer to section 3. Requirement in the RFP for detailed number of person and duration of each person</i>) | | | | | | | |
| | Total | | | | | | |
| | Project Manager | | | person | | month | |
| | Solution Architect | | | person | | month | |
| | Interoperability/integration lead | | | person | | month | |
| | Data Engineer/Database Specialist | | | person | | month | |
| | Cybersecurity Specialist | | | person | | month | |
| | Quality Assurance/Testing Lead | | | person | | month | |
| TOTAL | | | | | | | |
| B. Coordination and Planning of Activity - <i>please refer to section 3. Requirement in the RFP for detailed activities and number of person</i> | | | | | | | |
| | 1. Preparation meeting | | | | | | |
| | Meals | | | | | | |
| | Refreshments | | | | | | |
| TOTAL | | | | | | | |
| C. Situation Analysis & Initial Assessment - <i>please refer to section 3. Requirement in the RFP for detailed activities and number of person</i> | | | | | | | |
| | 1. Technical meeting (3 times): | | | | | | |
| | Meals | | | | | | |
| | Refreshments | | | | | | |
| | Resource person fee (if any) | | | | | | |
| | Local Transport | | | | | | |
| TOTAL | | | | | | | |
| D. Assessment for the 3 selected CRUs - <i>please refer to section 3. Requirement in the RFP for detailed activities and number of person</i> | | | | | | | |
| | 2. Fesibility of INA CRR in 3 CRUs (cities will be pre-determined by INA CRC) | | | | | | |
| | Fullday meeting cost | | | | | | |
| | Resource person fee | | | | | | |
| | Airport fare | | | | | | |
| | Local Transport | | | | | | |
| | Accomodation | | | | | | |
| | Per diem | | | | | | |
| TOTAL | | | | | | | |
| E. Finalization of the INA CRR Blueprint- <i>please refer to section 3. Requirement in the RFP for detailed activities and number of person</i> | | | | | | | |

| | | | | | | | |
|--|--|--|--|--|--|--|--|
| | Technical meeting with INA CRC (2 times): | | | | | | |
| | Meals | | | | | | |
| | Refreshments | | | | | | |
| | Resource person fee | | | | | | |
| | Local Transport | | | | | | |
| F. Dissemination of the SATUSEHAT Logistics Roadmap - <i>please refer to section 3. Requirement in the RFP for detailed activities and number of person</i> | | | | | | | |
| 1. Dissemination meeting (in Jakarta, 1 day) | | | | | | | |
| | Fullday meeting cost | | | | | | |
| | Resource person fee | | | | | | |
| | Local Transport | | | | | | |
| | Total | | | | | | |
| 2. Webinar transfer knowledge (1 time) | | | | | | | |
| | Fullday meeting cost | | | | | | |
| | Resource person fee | | | | | | |
| | Local Transport | | | | | | |
| | Total | | | | | | |
| G. Other (if needed) | | | | | | | |
| | Stationary and photocopies, translation for report (if needed) | | | | | | |
| | Institutional fee | | | | | | |
| TOTAL | | | | | | | |
| GRAND TOTAL | | | | | | | |

** can be specified as deemed necessary*

The enclosed Proposal is valid for 180 days from the date of this form (Ref. Article 14 of Section **Error! Reference source not found.**).

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 038-2026 | | |

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> |
|---|---|

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: _____

Annex H: Sustainable Procurement Questionnaire (delete if not applicable)

Sustainable procurement, which includes environmental, social and economic factors, is one of the [Guiding Principles of WHO Procurement](#) and in order for it to be implemented requires the collaboration of its suppliers.

Suppliers wishing to do business with WHO are expected to read, accept and agree to comply with the WHO Policies and the General and Contractual Conditions as identified in the [WHO Procurement website](#). In addition, suppliers are expected to adhere to the principles, and meet the standards, set forth in the [UN Supplier Code of Conduct](#), the UN's expectations on the areas of labor rights, human rights, environmental standards and ethical conduct.

In order for WHO to have a better understanding of where suppliers stand on these areas, suppliers are required to complete the following questionnaire. WHO understands its suppliers are at different stages of implementing these standards and expects them to progressively be enhanced in line with the Code's continuous improvement principle. As such, while replying to this questionnaire is mandatory, WHO will not be evaluating the input received, unless specifically indicated on the solicitation document's evaluation criteria section. WHO however reserves its right to verify the completeness and accuracy of information provided.

| | |
|--|--|
| <p>1. Environmental Responsibility Does your organization manage and mitigate the impacts of its operations on the environment such as through the maintenance of a formal Environmental Management System, such as ISO14001?</p> | <p><input type="checkbox"/>Yes <input type="checkbox"/>No Additional comments/details:</p> |
| <p>2. Social Responsibility Does your organization manage and mitigate the impacts of its operations on local communities such as through the development of local community outreach programs?</p> | <p><input type="checkbox"/>Yes <input type="checkbox"/>No Additional comments/details:</p> |
| <p>3. Labor Rights Does your organization have policies and processes in place to identify and remediate instances of child and forced labor or discrimination in its operations?</p> | <p><input type="checkbox"/>Yes <input type="checkbox"/>No Additional comments/details:</p> |
| <p>4. Health and Safety Does your organization proactively safeguard the health and safety of its employees such as through the maintenance of a formal health and safety management system, such as OHSAS18001?</p> | <p><input type="checkbox"/>Yes <input type="checkbox"/>No Additional comments/details:</p> |
| <p>5. Equal Opportunity Does your organization have policies and processes in place to eliminate discrimination and promote equal opportunities for men and women at all levels such as through employment and outreach activities to target qualified females and minority community members such as persons with disabilities?</p> | <p><input type="checkbox"/>Yes <input type="checkbox"/>No Additional comments/details:</p> |
| <p>6. Supply Chain Responsibility Does your organization possess a supplier code of conduct that complies with the expectations set out in the UN Supplier Code of Conduct?</p> <p>Does your organization enforce its suppliers' compliance with the code of conduct through regular monitoring and communication, such as through SA8000?</p> | <p><input type="checkbox"/>Yes <input type="checkbox"/>No Additional comments/details:</p> |
| <p>7. Supplier Diversity and Inclusion Does your organization actively promote the inclusion of local small, medium or minority businesses such as those owned by women, youths, ethnic and social minority groups including persons with disabilities?</p> | <p><input type="checkbox"/>Yes <input type="checkbox"/>No Additional comments/details:</p> |
| <p>8. Social and Environmental Regulatory Compliance In the past five years, has your organization ever been cited for non-compliance with any local social and environmental regulations in the countries where you operate?</p> <p>If your organization has been cited, please provide documentation regarding the issue of non-compliance and the country of origin as well as how the issue was resolved and compliance achieved.</p> | <p><input type="checkbox"/>Yes <input type="checkbox"/>No Additional comments/details:</p> |
| <p>9. Ethical Business Behaviour Does your organization have the policies and processes in place to avoid and pro-actively prevent any form of proscribed practices: corruption, fraud, coercion, collusion, unethical practice and obstruction?</p> | <p><input type="checkbox"/>Yes <input type="checkbox"/>No Additional comments/details:</p> |

| | |
|---|---|
| <p>10. UN Global Compact</p> <p>Is your organization a participant of the UN Global Compact (UNGC)? If yes, year in which your organization joined the UNGC UNGC participant #, date of last COP and level of COP.</p> | <p><input type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>Additional comments/details:</p> |
|---|---|

Acknowledged and confirm:

| | |
|---|----------------------------------|
| Company name | [Company] |
| Mailing Address | Click or tap here to enter text. |
| Name and Title of duly authorized representative: | Click or tap here to enter text. |
| Signature: | |
| Date | Click or tap to enter a date. |

ANNEX I: CV Template

In addition to the required information stated in Annex 7 Evaluation Criteria, please refer to below format in preparing CVs of proposed personnel.

| | |
|--|---|
| Name of Personnel | [Insert] |
| Position for this assignment | [Insert] |
| Nationality | [Insert] |
| Language proficiency | [Insert] |
| Year of Experience Related to this RFP | [Insert] |
| Project Experience / Portfolio Related to this RFP | <i>[Describe the position in the project, the time of project assignments, tech stack and the scope of project work]</i> |
| Tech Stack/Technical Skills | [Insert] |
| Education/ Qualifications | <i>[Summarize college/university and other specialized education of personnel member, giving names of schools, dates attended, and degrees/qualifications obtained.]</i> |
| | [Insert] |
| Professional certifications | <i>[Provide details of professional certifications relevant to the scope of services]</i> |
| | Name of institution: [Insert] Date of certification: [Insert] |
| Employment Record/ Experience | <i>[List all positions held by personnel (starting with present position, list in reverse order), giving dates, names of employing organization, title of position held and location of employment. For experience in last five years, detail the type of activities performed, degree of responsibilities, location of assignments and any other information or professional experience considered pertinent for this assignment.]</i> |
| | [Insert] |
| References | <i>[Provide names, addresses, phone and email contact information for two (2) references]</i> |

| | |
|--|--|
| | Reference 1:[Insert] |
| | Reference 2:[Insert] |
| | List of Relevant Publication 1:[Insert] 2:[Insert] |

I, the undersigned, certify that to the best of my knowledge and belief, these data correctly describe my qualifications, my experiences, and other relevant information about myself.

ANNEX J: Government Standard Rate 2026 (attached)