CALL FOR PROPOSALS

Institutional Contractual Partner for the Crafting of the Philippine Cancer Center Scientific Research Data Center Development Plan



1. Summary

The World Health Organization (WHO) Philippines is looking for an institutional contractual partner for the crafting of the Philippine Cancer Center Scientific Research Data Center Development Plan under an Agreement for Performance of Work (APW) contract.

Proposals are due by 18 February 2022.

2. Background

A common problem in research in any institution is the loss of data as a result of missing or data mismanagement. Data is often stored on laptops, private computers, flash drives, or other storage devices which are not part of a central repository system. Even if data is stored on a cloud storage, it is usually stored on personal drives and organized according to individual preferences, which may lead to difficulty in data retrieval. Data can be in many forms depending on the research interest such as source codes, qualitative or quantitative study results, images, and videos, including anecdotal evidence. As research becomes more and more data-driven, data management becomes a major challenge in any organization.

The usual way to facilitate access to collaboration documents is to store data in multiple repositories and shared folders. This structuring of files usually results in a non-uniform data storage locations or worst-data loss. Therefore, a central archiving system is essential. This platform should support internal and external data-sharing data with people from other organizations or to the public. This also helps in accommodating the requirements stated by funding agencies and publishers, adhering to good scientific practice of storing, processing, and sharing research data.

Pursuant to Implementing Rules and Regulations (IRR) of the Republic Act (RA) 11215, also known as the National Integrated Cancer Control Act (NICCA), the Philippine Cancer Center (PCC) shall serve as the Center of Excellence in cancer care, research and development, and capacity development. The PCC shall become the primary archival repository of national cancer research data contributed by the different cancer specialty institutions and other research organizations that focus on cancer control. Under the auspices of the law, PCC shall allocate a resource center to manage, archive, monitor, and facilitate collaboration, sharing and preservation of quality cancer research data among universities, hospitals, and research institutions.

Improving people's lives is PCC's first and foremost reason for the establishment of a Center of Excellence. Data gives power to new knowledge, enabling strategic approaches in finding effective solutions. Thus, less resources are wasted by making informed decisions.

To help achieve the goals of NICCA, WHO supports the Department of Health (DOH) towards the creation of a *Scientific Research Data Center Development Plan* for the Philippine Cancer Center. It will enable PCC in achieving one of their mandates which is to serve as the knowledge and learning center for the institutionalization of best practice models and effective innovations in cancer control. The Data Center will be the knowledge and learning center institutionalization of best practice models and innovations in cancer control. It will also serve a platform for collaboration, partnership, and capacity-building.

3. Timeline

The implementation timeline for the project is from 01 March 2022 to 01 July 2022.

4. Place of Assignment

Metro Manila, Philippines

5. Scope of Work

Under the supervision of the NCD Technical Team of the WHO Country Office to the Philippines, the institutional contractual partner shall accomplish the following outputs and deliverables listed below in close collaboration with PCC, DOH Disease Prevention and Control Bureau (DPCB) - Cancer Control Division (CCD), and related DOH offices.

Objective of the Project:

By 01 July 2022, a print-ready Philippine Cancer Center Scientific Research Data Center Development Plan is available. Specifically, the project aims to:

- 1. Conduct a scoping review on how research data are governed (research data quality, best practices/ models used, management and preservation) in the Philippines.
- 2. Review the kinds of research data collected, status of the research data, versions, data file formats, volume and size limitations.
- 3. Create a Scientific Research Data Center Development Plan.

Expected Output

Output 1: Approved Inception Report (2 weeks)

<u>Deliverable 1.1</u>: A detailed plan of action on how to conduct the project. The report should include the following but not limited to, objectives, significance of the project, implementing framework, methodology, target participants, data collection tool(s), processes for data collection, analysis, validation, consultation, and presentation of findings. The inception report should also include a project management and control plan:

Deliverable 1.2: GANTT Chart, adhering to expected outputs and deliverables.

Output 2: Scoping Review Report (8 weeks)

<u>Deliverable 2.1</u>: Annotated bibliography and review of literature (ROL) and records identifying gaps and needs in research data management, lifecycle and preservation; <u>Deliverable 2.2</u>: Stocktaking on the types (journal article, thesis, book, etc.) or kinds (dataset, image, video) of research data being collected or searched, status of the research data, versions, data file formats, data volume and size, Boolean search codes and filters:

<u>Deliverable 2.3</u>: Contextual PESTLE analysis – political, economic, social, and technological, legal, and ethical, including data-related constraining and hindering factors in conducting research;

<u>Deliverable 2.4</u>: Stakeholders analysis, including but not limited to stakeholders from 13 Basic Comprehensive Specialty Centers for Cancer Care, 11 Advanced Comprehensive Specialty Centers for Cancer Care, 1 National Specialty Center (PCC), 17 DOH Centers for Health and Development, DOH Central Offices, research institutions (Philippine Genome Center, National Institutes of Health, Philippine Nuclear Research Institute), professional medical societies, academic institutions, government agencies, and development partners;

<u>Deliverable 2.5</u>: Data gathering, which may be done through survey, workshop, focus-group discussion or key informant interview, as agreed, to determine the following:

- a. Conceptual models used in research data lifecycle management;
- b. Experiences of stakeholders in research data lifecycle management;
- c. Challenges and resolutions experienced by data center managers on infrastructure management;
- d. Data center's core physical and hardware-based resources and components
- e. Type of research data collected in data centers;
- Type of research data to be collected and deposited in the national archival repository;
- g. Target population and accessibility to the data centers.

<u>Deliverable 2.6</u>: Data analysis and synthesis using the agreed framework, using consistent framework during data presentation;

<u>Deliverable 2.7</u>: Development of materials, and facilitation and coordination of project implementation needs, including provision of virtual meeting platform and tools such as, "Slido" or "Mentimeter" to stimulate active engagement of participants;

<u>Deliverable 2.8</u>: Presentation of findings to WHO, PCC, and DPCB;

Deliverable 2.9: Conduct of validation meetings;

<u>Deliverable 2.10</u>: Recommendations for the Development Plan, clearly stating the goals and objectives of the Data Center in three durations (short, medium, and long-term), monitoring and evaluation plan, and sustainability and financial plan.

Output 3: Print-ready PCC Scientific Research Data Center Development Plan and Roadmap (5 weeks)

<u>Deliverable 3.1</u>: Facilitate the creation and organization of a Strategic and Technical Advisory Group (STAG) composed of representatives from PCC, DPCB-CCD, DOH Cancer Centers, Department of Information and Communications Technology (DICT), National Telecommunications Commission (NTC), Commission on Higher Education (CHED), and professional societies;

Deliverable 3.2: The Development Plan should include the following but not limited to:

- a. Conceptual architecture and interoperability plan. This includes a web-based and onsite collaboration platform, services and interfaces for users
- b. Data lifecycle management plan
- c. Management resources needed, such as hardware and software requirements
- d. Comprehensive financial and sustainability plan
- e. Risk management plan
- f. Quality assurance plan
- g. Research Data Center access pathways, and outline of guides per target user
- h. Special temperature, moisture, and noise control system plan
- i. Back-up power supply system plan
- i. Fire prevention and suppression system plan
- k. Physical and data security system plan

<u>Deliverable 3.3</u>: Draft conceptual architecture of the Philippine Cancer Center – Scientific Research Data Center which includes initiation, implementation, dissemination, monitoring ad evaluation, and financial plan;

<u>Deliverable 3.4</u>: Conduct of consultative meetings, including DOH Central Offices and identified stakeholders;

Deliverable 3.5: Development Plan revisions after consultative meetings;

<u>Deliverable 3.6</u>: Finalization of the PCC Scientific Research Data Center Development Plan.

Output 4: Technical narrative reports and financial statement (2 weeks)

<u>Deliverable 4.1</u>: Overall project management needs from preparation, implementation and documentation, including communication and follow-up with target participants, setting up meetings, logistical requirements, administrative needs, photo and video documentation;

<u>Deliverable 4.2</u>: Store all project materials (raw data, recordings, minutes of meetings, photos, references, etc.) on a cloud folder. All raw data and source documents shall be submitted to WHO;

<u>Deliverable 4.3</u>: Conduct of regular project meetings, submission of meeting notes and monthly progress report;

<u>Deliverable 4.4</u>: Submission of initial draft of the technical narrative report that includes Output 2:

<u>Deliverable 4.5</u>: Submission of final technical narrative report that includes project implementation and financial report.

Method(s) to carry out the activity

- Coordinate with WHO accordingly throughout the duration of the project. All documents and related materials shall be submitted to WHO Philippines and for approval of WHO, PCC and DOH. Any change in the inception report or plan shall be approved by WHO, PCC and DOH;
- Effectively manage and control the project, ensuring that the project timeline will be achieved:
- Support the formation of a steering committee;
- Convene participants/stakeholders describing the approach how to gain support and ensure successful project implementation;
- Ensure that all processes in conducting the project adhere to government laws and ethical practices;
- Establish and maintain collaborative working relationships with co-workers and representatives from other organizations and agencies;
- Attend related national, regional or local meetings, as necessary, and perform other related duties and responsibilities that may be assigned by WHO and DOH.

6. Qualifications

The institutional contractual partner must fulfil the following qualifications: An agency/organization/institution in existence for at least three (3) years in the Philippines; with proven track record in public health and/or health policy (systems, services or policy research and development); background on cancer control and previous work with government agencies or other agencies engaged in research agenda development is an advantage.

EDUCATION

Education of staff involved:

- Essential: Skill mix of experts with university degree in public health, health policy, information technology, health informatics, medicine and allied health sciences, social sciences, development studies, or related field.
- Desirable: Postgraduate degree in the abovementioned field of study.

EXPERIENCE

Experience required for key staff involved:

- Essential: The Project Lead should have at least three (3) years working experience in public health or health policy, and information technology or health informatics. In lieu of, one project staff should have information technology or health informatics experience.
- Essential (Other Staff): At least three (3) years working experience in the health sector demonstrated related experience in the abovementioned field of expertise public health, health policy, medicine and allied health sciences, social sciences, development studies.
- Desirable: Experience working with WHO or any UN agency, Department of Health or any government agency, and cancer control-related advocacies and stakeholders.

TECHNICAL SKILL & KNOWLEDGE

- Excellent coordination, facilitation, good organizational, project planning and management skills.
- Excellent technical writing skills and able to adapt to project demands and submit deliverables within timelines.

LANGUAGE

With excellent verbal and written communication skills in English and Filipino.

COMPETENCY

Consensus building capacity and ability to work harmoniously as a member of a team; adapt to diverse educational and cultural backgrounds and maintain a high standard of personal conduct.

7. Other Requirements

Must not have direct or indirect interest in the tobacco, alcohol or breastmilk substitute.

8. Contract Time

The work to be done under this Agreement for Performance of Work (APW) shall be completed as set out in the Terms of Reference, supported by the approved Inception Report. The contract will be completed in not more than **four (4) months** from the commencement of the Work, or otherwise as agreed in writing among the Owner and the Contractor. The work shall be done in strict compliance with the Contract, Specifications, Schedules, and all other Contract documents and all Instructions. Failure to do so shall be at the Contractor's risk and account. Submission of Bid by the Contractor shall constitute acknowledgement by the Contractor that it is aware of and concurs with all of the requirements or conditions incorporated in the Call for Proposal and the other documents.

As time is an essential element of this Contract, for failure to complete all work within the stipulated as set out in the Inception Report, the Owner shall charge the Contractor liquidated damages. This shall be in the amount of 0.5% of total contract amount per day (Saturdays, Sundays and holidays are included) but not to exceed 10% (ten percent) of the contract amount. These liquidated damages shall be for the added cost incurred by the Owner for such delay and also for the inconvenience caused to the users of the Work. It is understood that this is not a penalty but a fixed sum representing the liquidated damages for each calendar day of the delay. Delay shall be counted from the agreed completion date, considering further time extensions approved by the Owner, to the date of completion of work.

Management of Conflict of Interest

Any interest by an entity (organization/company), expert or member of the project team that may affect or reasonably be perceived to (1) affect the expert's objectivity and independence in providing advice to WHO related to the conduct of a project, and/or (2) create an unfair competitive advantage for the expert or persons or institutions with whom the expert has financial or interests (such as adult children or siblings, close professional colleagues, administrative unit or department).

WHO's conflict of interest Rules are designed to identify and avoid potentially compromising situations from arising thereby protecting the credibility of the Organization and of its normative work. If not identified and appropriately managed such situations could undermine or discount the value of the expert's contribution, and as a consequence, the work in which the expert is involved. Robust management of conflicts of interest not only protects the integrity of WHO and its technical/normative standard setting processes but also protects the concerned expert and the public interest in general.

Confidentiality Statement

All input from participants and all related documents about the project are confidential and must **NOT** be handed over to third parties. The contractual partner should advise the participants on how to opt out or withdraw their statement(s), if needed. The DOH and WHO have the exclusive ownership of all documents, and only DOH and WHO have the right to disseminate any information outside the agreed project's scope.

9. Submission Requirements

Interested institutions should submit electronic copies of the following:

- Cover letter
- Technical proposal with financial details and proposed timeline
- Company profile and qualifications of team members, including a summary of similar assignments undertaken previously

Address cover letter and proposals to:

Dr Rajendra Yadav

Acting WHO Representative to the Philippines Ground Floor, Building 3, Department of Health San Lazaro Compound Rizal Avenue, Sta Cruz, Manila

Please submit the electronic copy of the proposals with the title "Institutional Contractual Partner for the Crafting of the Philippine Cancer Center Scientific Research Data Center Development Plan" to Mrs Ying Chen (cheny@who.int) and wpphilwr@who.int) Only shortlisted applicants will be contacted by WHO Philippines.

Deadline of submission of proposals is on 18 February 2022.