

***EVANGELICAL LUTHERAN CHURCH IN TANZANIA -
DIOCESE OF MBULU***



Haydom Lutheran Hospital

ELCT Mbulu Diocese

TENDER NO. ELCT-MD/HLH/2022/S/02

FOR DATA QUALITY ASSESSMENT

**SAFERBIRTHS BUNDLE OF CARE AT RESEARCH SITES FOR FIVE
REGIONS IN TANZANIA**

TENDER DOCUMENT

JULY, 2022

SECTION I: REQUEST FOR QUOTE (RFQ)

***EVANGELICAL LUTHERAN CHURCH IN TANZANIA -
DIOCESE OF MBULU***



HAYDOM LUTHERAN HOSPITAL

REQUEST FOR QUOTE (RFQ) #	RFQ #
SERVICES REQUIRED	DATA QUALITY ASSESSMENT
DATE OF ISSUANCE	28/07/2022
OFFERS CLOSING DATE	04/08/2022
CLOSING DATE FOR QUESTIONS	02/08/2022
OFFERS BASIS CURRENCY	Tanzanian Shillings (TZS)

PART A: INSTRUCTIONS TO APPLICANTS

1- OFFERS' DEADLINE

Offers must be received no later than **05:00 PM** [Tanzania time] on the closing date and using the correct Reply to methods. Late submissions will not be considered.

2- REPLY TO

Delivery of quotation is requested as follows:

Documents must be e-mailed in English by the deadline to tender@haydom.co.tz and not otherwise. The E-mail subject must contain the **RFQ # "HAYDOM – CONDUCTING DATA QUALITY ASSESSMENT FOR THE SAFER BIRTHS BUNDLE OF CARE"**.

3- OFFERS' VALIDITY

Offers must be signed by an official authorized to bind the offer or to its provisions and be valid for a 7 working days.

4- FORM OF OFFER

The offer must be comprehensive and address all technical requirements included in this RFQ and SOW. The quote must reflect the vendor's most competitive price and include all supplies, materials, labour, applicable taxes, duty, and fees (e.g. bank fees) to accomplish the SOW.



5- QUESTIONS OF CLARIFICATION

Interested bidders should e-mail any questions about the RFQ to ivonykamala@gmail.com .All questions should be received in writing no later than **05:00PM** [Tanzania time] on the date mentioned in the RFQ cover page. Written responses will be distributed to all known bidders of the RFQ.

6- CRITERIA FOR SELECTION

All responses to the RFQ will be reviewed by a selection committee. To finalize the selection, it may be necessary to obtain additional clarification on quotes. If required, scores will be revised based on answers received during the best and final review process.

7- INSTRUCTIONS FOR SUBMITTING TECHNICAL PROPOSAL

Technical Proposals shall be submitted in English, not exceed three (3) pages in length, and shall include the following components:

- A description of the Offeror's capabilities as they relate to the SOW and previous experience with similar assignments demonstrating successful completion of assignments
- Point of contact information (name, affiliation, email address, and telephone number) for references on three (3) assignments the Offeror has completed providing services related to similar assignments
- A description of the Offeror's approach to carrying out the work, including a draft staffing plan to carry out the tasks described in the Statement of Work (SOW). The approach should succinctly describe how this assessment can be conducted by physical visits but also virtually in case Covid-19 situations prevents physical visits
- Proposed number of key personnel and be ready to submit their resumes when needed. Key personnel should have experience of doing similar kind of assignment before.

8- INSTRUCTIONS FOR SUBMITTING COST PROPOSAL

Cost Proposals shall be submitted in English and consist of an Excel sheet detailing proposed costs and accompanying cost narrative in Word detailing those costs. The Offeror's cost proposal should provide sufficient detail to demonstrate reasonableness of costs as it relates to the Offeror's proposed staffing plan and technical approach to carry out the tasks listed in the SOW. The Offeror's price proposals will be evaluated for realism to determine the best value. When technical proposals approach equivalent strength ratings, effectiveness, and efficiency of the cost proposals will be considered in making the subcontract award. The cost proposal should include transport cost for the team within the region. Please submit the Technical proposals and Cost proposals as separate documents. The 3-page limit does not include the Cost Proposal.



PART B: SCOPE OF WORK

Background:

The Global Financing Facility funds the Haydom Lutheran Hospital through the United Nations Children’s Fund (UNICEF) Tanzania office to scale up the “SaferBirths Bundle of Care” SBBC. SBBC is a proven package of innovative clinical tools (Moyo, upright bad, and Neo beat) and Training Tools (Mama Natalie and Neonatalie) coupled with low-dose high, frequency on-job training aimed at reducing perinatal deaths. The SaferBirths Bundle of Care leads to better equipped, better trained, and better supported. This package is implemented in 30 health facilities in the Five Regions of Tanzania (Manyara, Tabora, Geita, Shinyanga, and Mwanza), accounting for more than a quarter of national maternal and neonatal mortality. The project is implementing SBBC in collaboration with the Ministry of Health, the President’s office Rural Authority, the local government, and professional bodies, including the Pediatrics Association of Tanzania (PAT), Association of Gynecologists and Obstetricians of Tanzania (AGOTA), and Tanzania Midwifery Association (TAMA).

Haydom Lutheran Hospital conducted a follow up of health facility providers training and supportive supervision data for SBBC in all regions. From the report, it was recommended that a follow up Data Quality Assessment be done to gauge the data quality which will be used for project evaluation.

Assessment Purpose, Use, and User of the Findings:

Haydom Lutheran Hospital is seeking for an individual consultant or a firm to conduct Data Quality Assessment (DQA) and document the strengths and weaknesses of the data that is collected and reported to Haydom Lutheran Hospital by applying the five data quality standards. This assessment will inform Haydom Lutheran Hospital on how best to improve the Data collection, storage, and reporting system.

This assessment will be conducted in 5 regions, in each region, all six (6) health facilities implementing the SBBC activities will be involved in the assessment. Three outcome indicators of the project will be assessed using the five data quality standards. These indicators include:

Primary outcome indicators

- Perinatal mortality defined as intrapartum stillbirth (i.e., stillborn baby with no signs of life at delivery and 28 weeks of gestation with intact skin and no signs of disintegration in utero) and neonatal death within the first 24 h of life (38).

- Maternal mortality defined as the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management but not from accidental or incidental causes (WHO) (6)


Secondary outcomes indicators

- Proportion of deliveries with fetal heart rate monitoring as per standard protocol
- Proportion of deliveries in which neonates with an abnormal fetal heart rate during labor is followed by neonatal resuscitation
- Proportion of deliveries resulting in emergency cesarean sections and instrumental deliveries by different causes
- Proportion of non-breathing babies who receive bag and mask ventilation within 1 min of births
- Proportion of early neonatal morbidities, i.e., resuscitation, encephalopathy, low Apgar score, and admission to neonatal units
- Proportion of mothers with postpartum hemorrhage managed successfully

Key tasks to be accomplished by the consultant:

- A comprehensive review of all documents related to the SBBC program
- Develop a comprehensive DQA protocol that explains how the assessment will be conducted, how data will be collected, analyzed, interpreted, and reported
- Develop Data Quality Assessment (DQA) tools
- Train data collectors who will assist during the assessment
- Conduct pilot of the assessment tools with Data collectors and finalize tools based on the pilot report/findings
- Verify the quality of reported data for the selected indicators from 30 health facilities
- Assess the capacity of the current data management systems to collect, and report quality data on the selected indicators
- Assess how data is being managed, i.e., collection, process, analysis, use and report both locally and at different levels, i.e., council, region, and national and provide technical guidance on how to improve
- Highlight corrective actions needed to address significant limitations in data quality on the selected indicators.
- Build capacity of the TVCA Monitoring, evaluation, and learning team on the DQA process and development of the data management system
- Provide technical guidance on how best the current TVCA data management system can be improved
- Develop a comprehensive DQA report

Deliverables:

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- Finalized DQA Protocol
 - Inception report
 - Detailed outline of the comprehensive DQA report template
 - Comprehensive DQA report
 - PowerPoint presentation for dissemination of findings

Responsibilities of the Client (HAYDOM LUTHERAN HOSPITAL):

DR. BENJAMIN KAMALA will be the contact during this assignment. Haydom Lutheran Hospital – will be responsible for:

- Conduct a briefing session with the consultant before the start of the assignment
- Provide all the necessary documents to aid the consultant's work
- Review and approve deliverables
- Communicate regularly with the consultant and respond to issues promptly
- Process invoice payments once deliverables have been approved

Approximate Duration of SOW/Timeline for Completion

- Work will commence after fully executing the agreement by both Haydom Lutheran Hospital and the Service Provider. Payment for work completed or costs incurred before receipt of the fully executed contract is not allowable.
- The contract should begin on 01.08/2022 and end on 14.08/2022

Payment Terms, Schedule, and Deliverables

- Payments will be made via wire transfer within 30 days of the invoice date. However, payments usually reach vendor accounts within a week after invoice verification.

Deliverables:

The following are specific deliverables under this scope of work

- Finalized DQA Protocol
- Inception report
- DQA report template
- Comprehensive DQA report
- PowerPoint presentation for dissemination of findings

Payment is contingent and will be made in Tanzania shillings 60% at the beginning of the assignment, and 40% after all deliverables have been reviewed and approved by Haydom Lutheran Hospital.



QUOTE REQUIREMENTS

Vendors are requested to provide their most competitive rates considering the following:

- A full quote to provide the level of effort, and other costs, including travel costs, transportation estimates, MIE, etc., as per the specifications, plus all taxes applicable to the price.
- The quote must include all extra costs not included in the rate (If applicable)
- All rates must be in Tanzanian shillings (TZS).
- Attach copies of business license, proof of physical address, and VAT compliance if applicable.
- Acceptance of payment terms as listed above.
- Provide a certification statement that the service provider can respond in full to the Vendor Responsibilities listed above in this Part C.
- The quote and certification statement must be signed by an authorized officer of the business entity.

Selection will be based on the following table for criteria:

S/N	CRITERIA DESCRIPTION	WEIGHT
1.	Availability of Consultant's Profile,	14%
2.	More than 5 years' experience in the health Area with trackable client database	20%
3.	Trade references, Sample POs and contracts, completion certificates.	12%
4.	Budget currency and price for the goods/service	8%
5.	Entity or Individual Legal Status	11%
6.	Capacity to provide the service as required	25%
7.	Delivery Time	10%
TOTAL WEIGHT OF ALL CRITERIA		100%

**MANAGING MEDICAL DIRECTOR,
HAYDOM LUTHERAN HOSPITAL,
HAYDOM-MBULU DISTRICT.**