



## REQUEST FOR PROPOSAL

1. The Philippine Institute for Development Studies (PIDS) invites all eligible individual consultants to submit proposals for the **Consultant (Monitoring and Evaluation Specialist) for Development of Integrated Service Delivery / Public Health Programs Monitoring and Evaluation Framework and Application of Analysis in Relevant Quantitative Data.**

1. The Approved Budget for the Contract (ABC) is **PhP596,400.**

1. Interested consultants must submit the following documents using PIDS the prescribed forms:

- a) Curriculum Vitae of the proposed Consultant(s)<sup>1</sup>
- b) Technical Proposal Form<sup>1</sup>
- c) Financial Proposal Form<sup>1</sup>
- d) Filled out Data Privacy Notice and Personal Data Protection Form<sup>1</sup>
- e) Statement of Completed contracts<sup>2</sup>
- f) Statement of All Ongoing and Awarded But Not Yet Started Contracts<sup>2</sup>
- g) Notarized Omnibus Sworn Statement (for ABC above PhP50,000.00)<sup>1</sup>
- h) Income/Business Tax Returns (for ABC above PhP500,000.00)<sup>1</sup>
- i) PhilGEPS Registration Number (certificate or screenshot)<sup>1</sup>
- j) Valid Mayor's/Business Permit (Firm) or BIR Certificate of Registration<sup>3</sup> (Individual).

2. Interested consultants may obtain further information from the Procurement Management Division at telephone via email at [procurement@pids.gov.ph](mailto:procurement@pids.gov.ph).

3. The Institute shall adopt the Quality-Based Evaluation procedure in selecting consultants based on the attached Terms of Reference.

4. The deadline for submission of proposals is on **27 May 2024 (5:00 PM)** addressed to:

The BAC Chairperson for Consultancy  
Services c/o The BAC Secretariat  
Procurement Management Division  
18/F Three Cyberpod Centris – North Tower, EDSA cor. Quezon Ave., Quezon City

Proposals may also be submitted through email at [procurement@pids.gov.ph](mailto:procurement@pids.gov.ph) .

5. PIDS reserves the right to reject any or all of the proposals, declare a failure of bidding, or not award the contract if there is evidence of collusion, including any act that restricts, suppresses, or nullifies competition, or if there is a failure to follow the prescribed bidding procedures. PIDS also reserves the right to waive any required formality in the proposals received and select the proposal it determines most advantageous to PIDS.

**DR. VALERIE GILBERT T. ULEP**

Chairperson  
PIDS-BAC for Consultancy Services

Reference No.:2024-179

<sup>1</sup>Applicable for individual consultants and firms

<sup>2</sup>Applicable for firms only

<sup>3</sup> Individual consultants must issue Official Receipt (OR) during payment.

**Philippine Institute for Development Studies  
TERMS OF REFERENCE**

Consultant (Monitoring and Evaluation Specialist)  
for

**Development of Integrated Service Delivery / Public Health Programs Monitoring  
and Evaluation Framework and Application of Analysis in Relevant Quantitative  
Data**

**1. Background and Rationale**

The Universal Health Care Act of 2019 guarantees all Filipinos a comprehensive, quality, equitable, and affordable healthcare system. The Act introduces system-level reforms aimed at ensuring healthy populations and communities. Specifically, the reform focuses on a primary care-oriented, integrated health system that offers Filipinos a wide range of health services with minimal financial risk. To effectively monitor and evaluate these reforms, we must enhance our capacity to collect, measure, analyze, and present data from health facilities. Achieving this requires the implementation of interoperable health information systems (HIS).

HIS refers to systems that produce information for the evidence-informed decision-making affecting all levels of the health system which have four key functions: (1) data generation, (2) data compilation, (3) data analysis and synthesis, and (4) data distribution and the use of data. HIS therefore gathers and shares consolidated and analyzed data mainly from health facilities, providing valuable information to decision-makers responsible for health-related policies. With such a system, we can gain a more longitudinal view of the country's health situation, facilitating the transition to a life-stage-based approach in our health programs. Moreover, it will enable local and national evidence-based decision-making to become more strategic.

However, the current data sources in the Philippines face challenges (such as fragmentation, format integrity, and periodic data collection) which hinder the full realization of the benefits of HIS. To help address these issues, this paper aims to assess the practices and standards of the Philippines' HIS, comparing them with global best practices and considering their impact on key stakeholders, which are the regulators, purchasers, providers, and consumers. The objective is to identify areas of improvement and highlight essential data that decision-makers should focus on to drive effective changes in the country's health policies.

By examining the state of the country's HIS and aligning it with international standards, we can pave the way for a more robust and efficient HIS, supporting the goals of the Universal Health Care Act and ultimately improving the health and well-being of all Filipinos.

**2. Objectives of the Study**

- a. Describe then contextualize the "ideal" health information system (HIS), specifically focusing on its functions across different agents: DOH, PhilHealth, healthcare providers, and consumers.
- b. Critically assess the current state of health information system vis-a-vis ideal, focusing on its functions across the different agents by examining the following elements:
  - i. Policies, laws, and governance structure
  - ii. Technical design and infrastructure

- iii. Acceptability and health human resources
- c. Create a comprehensive data collection framework that will serve as the foundation for determining the necessary data fields to be collected and provide valuable insights for policymaking, clinical decision-making, and research purposes.

### 3. Objectives of the Consultancy

The project is seeking to hire one (1) consultant for the assessment of the current state of Philippine health information systems and the effects of the simultaneous deployment of multiple health information systems across the Philippines to data use and efficiency.

### 4. Scope of Work, Deliverables, and Schedule of Payment Releases

Under the guidance and technical oversight of a PIDS Research Fellow who serves as the Project Director, the Consultant<sup>1</sup> is expected to work with the Project Team and undertake the following tasks/activities<sup>2</sup>

1. Develop an analytical Monitoring and Evaluation Framework that will determine the necessary data fields to be collected from health information systems which will provide insights for policymaking, clinical decision-making, and research.
2. Identify relevant data sources and run preliminary descriptive analysis using the analytical framework.
3. Develop a data collection, processing, and analysis plan for the implementation of the analytical framework using relevant quantitative data from health information systems from select health offices and facilities.
4. Analyze data collected from select health offices and facilities based on the needs of users from all levels.
5. Develop a plan of action for encoding, processing, and quality and integrity checks of data for collection and use in the analytical framework.
6. Sign a Non-Disclosure Undertaking with PIDS. Any information gathered and generated in the implementation of the project shall be processed subject to the applicable provisions of the Republic Act No. 10173, known as the “Data Privacy Act of 2012” and its Implementing Rules and Regulations and relevant issuances of the National Privacy Commission (NPC).
7. Others as may be assigned by the Project Director.

The Consultant will prepare the following outputs based on the schedule below:

<b>Activities and Deliverables</b>	<b>Due Dates</b>	<b>Payment Tranches</b>
<ul style="list-style-type: none"> <li>• <b>Inception Report</b>, including workplan</li> </ul>	July 5, 2024	15%

<sup>1</sup> The consultant may be an individual or a firm.

<sup>2</sup> If the consultant needs to undertake physical/face-to-face interviews and data collection and related activities, the consultant has to ensure compliance with existing and future policies, rules, and resolutions as may be issued by concerned government agencies pertaining to health and safety.

<ul style="list-style-type: none"> <li>• <b>Progress Report</b>, including all updates on scope of work items 1-7</li> </ul>	July 29, 2024	40%
<ul style="list-style-type: none"> <li>• <b>Draft Report/Discussion Paper</b><sup>3</sup>, including preliminary analyses.</li> <li>• Presentation in a Research Workshop</li> </ul>	September 26, 2024	20%
<ul style="list-style-type: none"> <li>• <b>Final Report/Discussion Paper</b>, addressing comments to the Draft Reports and comments from the Research Workshop<sup>4</sup></li> <li>• <b>Terminal Report</b></li> <li>• Turnover of draft and materials used together with Certification indicating the turnover, as well as the deletion, of such data and that it will allow PIDS to verify if the data is complete.</li> </ul>	November 25, 2024	25%

NOTE: Payments will be based on the acceptance and approval by PIDS of the corresponding outputs

<sup>3</sup> For applicable outputs, the draft and final reports submitted by the consultants should be aligned with the following guidelines: PIDS' Guide in the Preparation of Manuscript for Publication and General Guidelines in Preparing and Formatting a PIDS Discussion Paper, Guidelines in the preparation of Policy Notes.

<sup>4</sup> For research outputs that will be released as a PIDS Discussion Paper (DP), the consultant shall prioritize the publication outlets of PIDS, particularly the peer-reviewed Philippine Journal of Development (PJD) and Research Paper Series (RPS). If the DP is not selected by PIDS Management for publication either as a PJD article or an RPS issue, the consultant may identify other dissemination outlets outside of PIDS. Guidelines for Authorship in PIDS Research Projects shall apply.

## 5. Qualifications of the Consultant

<p>Education</p> <ul style="list-style-type: none"> <li>At least Master’s level degree in public health, health management, health policy, health service delivery, information systems, statistics, data science, social sciences, and other relevant disciplines.</li> </ul>
<p>Experience</p> <ul style="list-style-type: none"> <li>At least 5 years of relevant experience in M&amp;E framework design and implementation</li> <li>Five years of relevant experience in data quality assurance, database management, data visualization, data analysis and reporting is desired.</li> </ul>
<p>Skills</p> <ul style="list-style-type: none"> <li>Advanced skills in mixed-methods research, information systems, and monitoring, and evaluation</li> </ul>

## 6. Project Duration

The engagement will commence upon the signing of the contract until December 31, 2024, on a part-time basis. The Consultant’s work must be completed within this period, and no man days will be chargeable after this date.

## 7. Approved Budget for the Contract

The approved budget for this consulting service is up to PHP 596,400 depending on the qualifications. This amount does not include travel and accommodation during fieldwork. PIDS will shoulder the cost of fieldwork. PIDS shall not cover hospitalization and other COVID-related health expenses of the consultant as no employer-employee relationship exists between the PIDS and the Consultant.

## 8. Evaluation Criteria

a. Evaluation Criteria:

Consultants will be evaluated based on the following criteria:

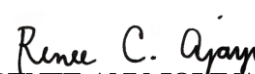
<p>Consultant’s Qualifications:</p> <p>a. Education At least Master’s level degree in public health, health management, health policy, health service delivery, information systems, statistics, data science, social sciences, and other relevant disciplines.</p> <p>b. Experience (minimum). At least 5 years of relevant experience in M&amp;E framework design and implementation</p>	50%
<p>Plan of approach and methodology:</p> <p>a. Clarity, feasibility, innovativeness, and comprehensiveness of the approach</p>	50%

b. Incisive interpretation of problems and suggested solutions	
Total	100%

c. Detailed rating sheet (see attached file)

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