

### **Call for Expressions of Interest and Proposal**

# VN005 – Agreement of Performance of Work holder (firm/ institution) for Data analysis and Assessment result report

The APW holder (firm/ institution) to provide technical support to General Department of Preventive Medicine (GDPM) and four Regional Pasteur/ Hygiene and Epidemiology Institutes (RI) — Viet Nam Ministry of Health (MOH) to conduct data analysis and prepare the final report based on the assessment results of the implementation of national notifiable diseases reporting via Circular 54 (indicator-based surveillance or IBS) and event-based surveillance (EBS) period 2016-2021 in Viet Nam.

### 1. Background:

To meet the requirements of the International Health Regulations (IHR 2005) to detect, alert, report and respond to infectious disease outbreaks and public health events, the World Health Organization (WHO) recommends member countries to consider developing an Early Warning and Response (EWAR) system and, at the same time, providing guidance on the implementation of two mutually complementary types of surveillance: indicator-based surveillance (IBS) and event-based surveillance (EBS). The implementation of these two surveillance systems is expected to facilitate disease monitoring, early detection and effective response to possible disease outbreaks.

In Viet Nam, the national notifiable disease reporting is governed by the Circular No. 54/2015/TT-BYT of the Ministry of Health, which came into force from 1<sup>st</sup> July 2016 and has been implemented via an online reporting system (eCDS). This system is considered a backbone of the IBS system in country over the years. Event-based surveillance has initially been established in Viet Nam in 2014 with a main focus on media reporting. It was not until the period of 2016-2018 when major efforts were made to further standardize its procedures via pilot implementation, both in community and in health care facilities of selected provinces, with support from WHO, the U.S. Centres for Disease Control and Prevention (US CDC) and PATH. The results of such pilot implementation had informed the official issuance of the National Guidelines for Event-based Surveillance by the MOH on 28 March 2018 (Decision No. 2018/QD-BYT).

With the aim to identify strengths, issues and gaps in the system operation and to inform measures for future improvement, GDPM in collaboration with four RIs and with support from WHO, US CDC and PATH had conducted an assessment of IBS/EBS surveillance implementation, period 2016 – 2021. Due to COVID-19 outbreak situation, various components of the assessment were delayed and interrupted. WHO is now seeking APW holder to provide support to GDPM and RIs to complete this work.

### Term of reference

Under the guidance of the WHO Viet Nam country office responsible officer and in collaboration with GDPM, RIs, US CDC and PATH, the APW holder including the team lead and his/her assistant is expected to undertake the following tasks:

- Take an active role in the Technical Working Group (TWG) for the overall IBS/EBS implementation assessment to provide direction, technical advice and support to implementing partners in data analysis and reporting.
- Design data analysis (both quantitative and qualitative components) and reporting strategy based on the objectives of the assessment.



- Guide and support RIs to conduct data analysis and prepare preliminary assessment report for the data under their respective region.
- Support GDPM in consolidation of assessment results and preparation of the final assessment report for the 18 selected cities/ provinces.
- Support the preparation and presentation on the key findings from the assessment to the MOH leaders and relevant stakeholders.
- Play an active role in the TWG discussion to develop a set of recommendations for future improvement of the communicable disease surveillance system in Viet Nam.
- Develop a final consultancy report at the end of the contract.

### Method(s) to carry out the activity

- The APW holder including the team lead and his/her assistant will be working closely with the TWG to develop data analysis strategy for both quantitative and qualitative components; support to perform data analysis, compile analysis results, and write the final assessment report.
- Proposed methods include processing, cleaning and analysing data submitted by respective RIs.
- The findings from the IBS/EBS assessment will be presented to the MOH leaders and will be shared at final dissemination workshops to discuss necessary actions for future system strengthening.
- The APW holder including the team lead and his/her assistant will report to WHO country office responsible officer and supporting partners verbally and in writing the progress on a regular basis.

### **Expected outcome(s)**

Output 1: Data analysis plan and strategy, both for quantitative and qualitative components under the IBS/EBS implementation assessment

- Deliverable 1.1: A plan and stepwise procedures for data analysis, both quantitative and qualitative components based on data collection templates already developed. (5 March 2023)
- Deliverable 1.2: A guidance on data analysis and reporting to be provided to RIs and GDPM. (5
   March 2023)
- Deliverable 1.3: Conducting additional data analysis as needed, consolidating of data analysis and draft report for all the 18 cities/ provinces under the assessment based on the inputs from 4 RIs. (31 March 2023)

<u>Output 2</u>: Presentation of assessment findings and recommendations for future system strengthening (mainly on IBS as PATH is supporting EBS component)

- Deliverable 2.1: Key findings and recommendations from IBS/EBS implementation assessment upon discussion with TWG (15 April 2023)
- Deliverable 2.2: A presentation on the IBS/EBS implementation assessment findings to the final dissemination workshop (31 May 2023)

Output 3: Final consultancy report at the end of contract on activities carried out covering all tasks listed above

Deliverable 3: A final consultancy report summarizing all activities carried out (i.e., meetings, consultations, data analysis strategy and template, presentations, etc.) and proposed the follow-up activities as needed (30 September 2023)



#### 2. Planned timeline:

Start date: 25 February 2023 30 September 2023 End date:

## 3.

Specific requirements		
Requirement	Team Lead	Assistant
Qualification	Essential:	Essential:
Experience	Essential:      Extensive (10-15 years) experiences in public health/ epidemiology research  Desirable:      Experiences in conducting survey/ research on disease surveillance especially in communicable diseases      Prior experience working with WHO in supporting MOH to conduct these activities	Essential:  O Good (5-10 years) experiences in public health, surveillance or epidemiology research  Desirable:  O Experiences in conducting survey/ research on communicable disease surveillance, especially national notifiable diseases  O Prior experience working with WHO in supporting MOH to conduct these activities
Skills/ Technical skills and knowledge	Essential:      Extensive (10-15 years) experiences in research on public health practice and/or disease surveillance and response     Ability to work independently and in a team     Sound knowledge in both qualitative and quantitative research.  Desirable:     Experiences in implementing/managing field communicable disease epidemiology activities or surveillance programs.	Essential:  Good (5-10 years) experiences in research on public health practice and/or communicable disease surveillance  Ability to work in a team  Good knowledge in both qualitative and quantitative research.  Desirable:  Good data analysis skills including qualitative data.
Language	Essential:	Essential:  O Good communication and written skills in Vietnamese and English.  Desirable:  O Good communication skills in Vietnamese and English



### Other skills and competencies

- o Excellent interpersonal and communication skills
- o Ability to plan and prioritise challenging workloads
- o Demonstrated ability to work as part of a team
- Availability to travel

### 4. Place of assignment

Hanoi, Viet Nam

### 5. Medical clearance

NA

### 6. Travel

Travel may be required.

### 7. Budget

The submitted proposal with detailed budget breakdown will be reviewed and decided based on the technical requirements, timeliness and value for money. The budget should include the possible travel cost for a dissemination workshop (1 day workshop in Hai Phong and 1 day workshop in Ho Chi Minh City).

The firms/ institutions that are interested can contact our focal person before/by 15 February 2023

World Health Organization wpvnmhe@who.int

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