

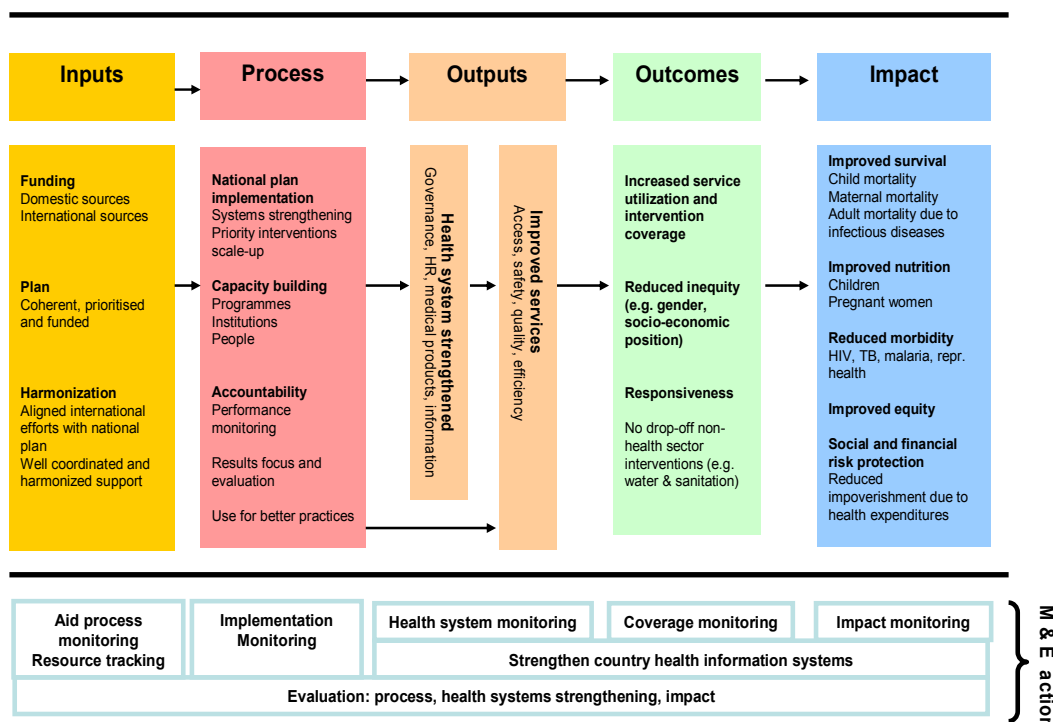
Annual Monitoring and Evaluation of the International Health Partnership & Related Initiatives (IHP+)

Request for Proposals: North-South Consortium

I. Background and Rationale

The International Health Partnership (IHP)¹ was launched in September 2007 with eight developing countries, ten donors, and nine international organizations. All signatories signed a Global Compact to achieve the health-related Millennium Development Goals. The Global Compact further committed that "*civil society will play a key role in holding all partners to account on performance and progress of the Partnership*". In response, **the IHP and related initiatives (IHP+) is requesting proposals for a North-South Consortium² to annually perform a monitoring and evaluation review.** This review will be based on a common evaluation framework (see below diagram and [detailed framework available on the IHP+ website](#)), which was developed by a working group led by the World Health Organization (WHO) and the World Bank and which has received strong buy-in from countries and international partners.

**Framework for monitoring performance and evaluation
of the scale-up for better health**



¹ The IHP is now being administered by the World Health Organization (WHO) and the World Bank and has evolved to become the International Health Partnership and Related Initiatives (IHP+) in recognition of the fact that its launch coincided with a range of other initiatives with similar goals.

² As this Consortium will take some months to be established, a one-off, short-term external review of progress with the IHP+ is currently being undertaken, to be completed by September 2008.

Objectives and Guiding Principles

The **objective** for this North-South Consortium is to annually perform a high-quality, comprehensive and external review of the IHP+³. Specific objectives are threefold:

1. Use the IHP+ common monitoring and evaluation framework to assess progress of the Partnership in supporting implementation of national health plans and strategies in terms of funding inputs, processes, outputs, health outcomes, and health impact. Assessments will be linked with existing independent monitoring and evaluation processes (e.g. academic and parliamentary reviews, etc.).
2. Review adherence to specific commitments made in the Global Compact and individual Country Health Compacts⁴ by national and international stakeholders in terms of resources committed and agreed changes in behaviours and procedures.
3. Make specific recommendations to individual countries and agencies and the IHP+ Scaling-up Reference Group (SuRG)⁵ based on review findings specific to that year in regards to:
 - a. Necessary changes in behaviours and commitments of individual development partners and donor agencies;
 - b. Level of adherence to commitments within individual governments to the agreements made in country compacts;
 - c. Recommendations on how the IHP+ efforts could be strengthened in terms of structure, resources and strategic direction.

The North-South Consortium should be guided by the following **principles**:

- The reviews will use existing data and reports available from national and international institutions. The reviews will *not* involve primary statistical data collection in countries.
- The reviews will link with existing country processes and timetables, such as annual health sector reviews, and keep abreast of and compliment existing inter-agency efforts in the area of monitoring and evaluation.
- The reviews will aim to help empower governments in holding development partners to account against financial and behavioural commitments made globally and in-country, and will engage civil society so as to promote stronger domestic accountability.
- Those performing the reviews will receive the full cooperation of the international agencies involved in the IHP+ and should seek urgent support from those engaged in the SuRG and the IHP+ Core Team should any difficulties arise.
- The final draft annual report will be discussed with country health sector teams, members of the IHP+ Core Team⁶, and members of the SuRG in time for responses to be made before public release of the final report.
- The annual report will be published and made widely available before the end of August each year, in conjunction with a communications strategy to ensure that the key messages are targeted at relevant stakeholders and high-level global political events.

II. Selection and management oversight of the Consortium

The selection of the North-South Consortium will be done for an initial period of three years through a transparent, open bidding process whereby all submitted proposals will be reviewed and a final selection made by a temporary proposal review committee. The SuRG will be responsible for establishing this review committee and will further provide general oversight to the Consortium over the three-year period.

³ At a minimum, monitoring reports must be performed each year but options for full evaluations will be left to the discretion of the North-South Consortium with advice provided by the SuRG. E.g. Impact of some of the components of the IHP+ common monitoring and evaluation framework may not be visible until year 3 and/or are dependent on investments in national health information systems.

⁴ Compact is a generic term, which may vary by country (e.g. Memorandum of Understandings, etc).

⁵ The steering group for the IHP+ which provides oversight and strategic direction to the IHP+ process.

⁶ An inter-agency team focused on the regular business of the IHP+.

The review committee will be composed of:

- 4-8 representatives from across the eight agencies represented in the SuRG⁷
- 2 civil society representatives
- 1 development partner representative

Total membership: 7 to 11

Proposals will be reviewed using the evaluation criteria detailed in Section VI with full results made available to members of the SuRG upon request. The contract for the selected proposal will be managed by the IHP+ Core Team, and funds will be released after each of the deliverables mentioned in Section IV.

III. Deliverables and timeline

The below table suggests **major deliverables against an annual timetable**. Details of deliverables may be modified on an annual basis, as necessary. All deliverables will be initially presented to the SuRG, with the exception of the final report which will be made available to the public immediately.

Deliverable	Timeline
Submission of annual workplan and timetable for performing the review the following year	November
Presentation to the SuRG of plan and methodologies	December
Agreement with the SuRG on a communications strategy covering key messages and recommendations for countries', agencies' and development partners	January
Interim report of findings and a corresponding summary PowerPoint presentation for the SuRG and other stakeholders	May
First draft report in English submitted to the SuRG	July
Final report in French and English (750 copies in English and 300 in French)	August

Specific tasks to be conducted include:

- Maintain the Consortium through regular meetings, on-line discussions forums, occasional face-to-face meetings, and joint publications of review findings and experiences gained through performing the reviews.
- Review documentation and data at national and international levels to reach a sufficient level of knowledge and understanding of the IHP+, harmonization and alignment issues, aid effectiveness and national planning processes.
- Review scope and a methodology of the review to ensure it is both feasible and efficient for completing the work.
- Agree on timetables with a wide cross-section of stakeholders including country health sector teams, SuRG, development partners, representatives of national and international civil society, and academic groups who are engaged in strengthening national health systems in developing countries.
- Collect required quantitative and qualitative information through secondary data gathering, interviews and focus group discussion according to the methodology chosen and perform an analysis of findings using techniques proven to be effective for these methods.
- Present findings and initial conclusions to representatives of the stakeholder groups engaged in the review and provide time for discussion and clarifications.
- Provide final draft report to SuRG and country health sector teams, allowing time for responses to be provided.
- Publish final report in English and French and widely disseminate before the end of August each year. Present findings to high-level events as directed by the SuRG.

⁷ SuRG members may prefer to be represented by fellow SuRG H8 agencies.

IV. Structure of the proposal

The proposal should have **two sections, technical and financial**. The technical section should demonstrate:

- An understanding of the IHP+ (inc. historical origins, objectives, key principles), aid effectiveness, health systems and national health planning processes.
- A description of the proposed methodology for the review so as to achieve the objectives outlined in Section II, drawing on previous experience and making reference to key documents and relevant aspects of evaluation literature.
- A summary of how the review will be managed, providing names and descriptions of individual and institutions engaged in performing the work.

The financial section should delineate two budgets:

- Set-up costs to establish the Consortium for the initial 6-month period
- Annual running costs for the three-year period, 2009 to 2011

V. Qualifications and Selection criteria

The following are required **qualifications** for the consortium:

- 10+ years of experience in performing trans-national qualitative and quantitative evaluations in the area of human development
- Based in a low or middle income country or be part of an established 'north-south' collaboration, with work led by southern-based institutions
- Development experience in the African and Asian regions
- Proven capability to work with national and international institutions across several regions
- Proven ability to prepare timely and succinct reports and other documentation in English and French

All bids received will be assessed for fulfilment of the above qualifications. Following this initial screening, remaining bids will be assessed against the following **criteria for final selection**:

Technical criteria	% of total score
Understanding of the IHP+ and rationale for performing the annual monitoring and evaluation report	20%
Feasibility of methodologies proposed and past experience of performing such work	40%
Consortium arrangements including feasibility of proposed management and communication arrangements	20%
Financial criteria	
Total cost of proposal and value for money	20%

VI. Timetable for selection

	Timeline
Terms of Reference agreed by SuRG	23 June
Request for Proposals announced	12 July
Response to initial queries	14-31 July
Proposal Review Committee established	25 July
Shortlist proposals	18-29 August
Selection completed and contract awarded	1-5 September

Contact

Proposals and clarifications should be directed to **Ms. Justine Hsu**, hsuj@who.int, no later than **15 August 2008**. Only short-listed bids will be contacted.