

TERMS of REFERENCE for FRAMEWORK CONTRACT

Continuous Medical Education (CME) activities focusing on the use of Clinical Guidelines and Protocols (CGP) for 5 Non Communicable Diseases (NCDs) (Diabetes, Hypertension, dyslipidaemia, Asthma and Chronic Obstructive Pulmonary Disease (COP) by Family Doctors and Nurses working in Primary Health Care

Background

Health for All (HAP) is a project of the Swiss Agency for Development and Cooperation (SDC) of the Swiss Government and is being implemented in Albania since 2015. Its overall goal is that the Albanian population benefit from better health due to improved primary health care (PHC) services. As of 1 April 2019, HAP entered the second phase implemented by Swiss Tropical and Public Health Institute (SwissTPH) through HAP Centre.

As part of the strategy to improve the quality of Primary Health Care (PHC) services HAP has developed practical and educational tools helping and guiding the family medicine teams (Family Doctor and Family Nurse) in the everyday use of CGP for the five most common NCDs (Diabetes, Hypertension, dyslipidaemia, Asthma and COPD) the PHC services manage daily. In this context HAP will contract a CME activities provider. A framework contract will be signed with the selected provider, that will encompass provision of CME activities with the purpose of enabling FM teams in Fier and Diber region to routinely use CGP for the above-mentioned NCDs. The training activities will be provided in the period of 12 months from the day the contract becomes effective. The potential providers should submit a proposal answering the requisites as described in these ToRs for implementation of CME activities in Fier and Diber regions.

Main Objective

The main objective of these Terms of Reference (ToRs) is the provision of CME activities, to strengthen capacities of FM (Family Doctor and Family Nurse) teams in Fier and Diber region to routinely make use of CGP for the 5 most common NCDs (Diabetes, Hypertension, dyslipidaemia, Asthma and COPD) they manage in their everyday clinical practice.

Specific objectives

The specific objective of these ToRs are to provide as per the HAP demand the following:

1. Accredited Training of Trainers with the purpose of enabling the future trainers: a) to apply CGP for Diabetes, Hypertension, dyslipidaemia, Asthma and COPD, making use of practical and educational tools developed by HAP; b) to convey this capability to their colleagues via Peer Group at their Health Center.
2. Assistance to operation of Peer Groups dedicated to "Introduction to clinical practice of CGPs for the 5 most common NCDs".
3. Peer supportive supervision as a CME activity at the Diber and Fier health centers regarding the provision of care in compliance with the respective CGP.

Approaches

General aspects

The Provider should be able to deliver the CME activities as defined in the objective's section of these ToRs with its own human resources in Health Center's premises and other venues in Fier and Diber regions.

When appropriate, training courses should have theoretical sessions as well as practical ones applying "hands on" learning techniques. The practical activities may be carried out with models and patients and/or mock patients in the facility where the training is held. Therefore, the team of trainers engaged in the provision of these services should be PHC providers.

The numbers of the trainees in one training session should not exceed 15 (fifteen). The number of trainers present during the training should be no less than two.

HAP will supply the provider with the sets of educational and practical tools for implementation of CGP for Diabetes, Hypertension, Dyslipidaemia, Asthma and COPD, comprising the respective Clinical Guidelines, Protocol and Training Manual.

Peer supportive supervision related to the provision of care in compliance with the respective CGP, will be provided as a CME activity in Diber and Fier health centers. Peer supportive supervision means the clinical observation/supervision of the primary health care doctors and nurses' daily practice and in-service provision of educative feedbacks and guidance by the end of the supervision day/time. The peer supervision will be provided at individual level, while the feedback and guidance will be given to the Family Medicine team and/or to all the HC staff.

For the specific service to be covered by the framework contract, the selected provider will receive a written request from HAP, specifying the details for the CME activity (topics, the number of trainees, names, positions of health professionals to be enrolled in this activity, the venue of the activity, the respective time lines and any additional detail of the activity to be implemented).

Then, the provider will plan the CME activity, and within a week inform HAP about the dates and trainers who will deliver the CME activity. Once the plan is approved by HAP, the provider should be in conditions to implement it as agreed by both parties.

The PPT and any other documents elaborated in the frame of this contract are property of HAP and are submitted to SDC rules on intellectual property.

Specific aspects for the CME activities

The selected provider will take the responsibility to mobilize the trainers who will provide the trainings. The trainers mobilized by the provider, will read, internalize and master the training manuals, practical and educational tools provided by HAP and make use of them to prepare the respective PPT and any other eventual working materials.

The printed sets of educational and practical tools (Clinical Guidelines, Protocol and Training manuals) will be made available to the trainees by HAP during the activity.

The printed power point presentations and any relevant didactic material and any electronic teaching resource will be made available to the trainees from the provider during the activity, therefore the respective printing cost will be under them.

The selected provider will assure the clearance of the trainees when, as part of the training course, they are required to examine or be present during the examination of patients. The provider is also responsible to obtain the consent of the patient, before the examination takes place.

The provider is responsible for the accreditation of the training and peer supervision activity, including the payment of accreditation fee, at the National Centre for Continuing Medical Education. These costs will be reimbursed by HAP against the respective invoices.

Transportation of trainers to Fier and Diber regions will be under the responsibility of the provider.

HAP will be responsible for providing logistic support during the CME activities: accommodation for trainers and trainees, meeting room venue, refreshments, and meals.

During the time of implementation of the contract, the provider will:

1. Closely collaborate with HAP staff in charge of Quality of Health Care *and*
2. Keep HAP informed about any difficulties, change of trainers and/or experts or any hindrances that may affect or delay the provision of the service foreseen by the specific Contract. In case of changing the trainers, the provider should send the CV-s of the new team member(s) proposed and wait for HAP approval.

Deliverables

After the provision of each specific service the provider will submit to HAP:

The Report describing the work done/service provided (**signed and submitted to HAP electronically and in hard copy**), attached with

- PPT, any other eventual working materials/tools, and any electronic teaching resource
- The trainees' evaluation of the course and of trainer's performance.
- List of participants submitted to NCCE and original list of participants.

The interested bidders for participation in the tender should send the following documents:

1. The profile of the organization (CV), proving that it is a PHC provider and has an experience in provision of_CME activities to PHC providers in the last five years (2 to 3 pages);
2. The CV of the trainers (Family Doctors and Family Nurses) the provider will deploy, proving a minimum of 5 years as PHC providers, and a minimum of 5 years of experiences in development training materials for PHC providers and provision of accredited training to them. This mandate is labor-intensive and therefore the minimum number of mobilized trainers should be no less than 10 ones in total and not less than 5 FDs in the total of a 10 Trainer team.
3. The training daily fee, in All, VAT and tax included, if provided for the first time, including the preparatory work to master training materials provided by HAP and development of the respective PPT and any other eventual working materials/tools
4. The training daily fee, in All, VAT and tax included, if training is a repeated one
5. The daily fee, in All, VAT and tax included, for the supportive supervision of PHC providers
6. Transport cost for trainers in All/km, tax included
7. The registration documents of the organization (NIPT,QKB,etc)

The proposals must be delivered within **21st of September 2020**, 4pm, in sealed envelopes, with clearly marked "**CME Activities**" to the address below:

HAP Centre
Rruga "Themistokli Germenji", Pallati Helios, Kati II, Ap.1, Tirana, Albania