EXPRESSION OF INTEREST (EOI): BUSINESS CASE FOR FP INCLUSION IN PUBLIC AND PRIVATE INSURANCE

EOI NUMBER: ICRHK | EOI | 11 | 2022
Vacancy Announcement - Individual Consultancy

Business Case for FP Inclusion in Public and Private Insurance

Vacancy Announcement period  1st November – 11th November, 2022

TERMS OF REFERENCE

Developing a business case on the Incorporation of family planning service provision in the public and private health insurance schemes

<table>
<thead>
<tr>
<th>Hiring Office</th>
<th>International Centre for Reproductive Health - Kenya (ICRHK)</th>
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</table>

Background

In July 2012, partners from across the world including Kenya came together at the London Summit on Family Planning to support the right of women and girls to decide freely for themselves, whether, when and how many children they plan to have. The London Summit on Family Planning (organized by Melinda Gates, UK Gov’t, UNFPA and USAID) on July 11 mobilized global policy, financing, commodity and service delivery commitments to support the rights of an additional 120 million women and girls in the world’s poorest countries to use contraceptive information, services and supplies, without coercion or discrimination.

Family planning has been known to avert maternal and child deaths; it reduces the incidences of unplanned pregnancies, legal or illegal abortions; incidences of illness and improves partner contribution to the economy thus more savings. Studies have shown that for every dollar invested in family planning, there would be US$9 of economic and social benefits (Global Strategy for Women’s Children’s and Adolescent's Health 2016-2030, UN)

Rationale

Despite the immense benefits offered by the inclusion of family planning services into the private and public insurance schemes, the service is often not included in communication of available services. Often it remains a hidden service with the client either expected to request for it or seek for the services outside the insurance cover. It is noted further that where the services are offered in the public health insurance, namely NHIF, the rebate for the service is not timely nor forthcoming.

Objective of the Consultancy

To develop a business case for the inclusion of family planning information and services into the public and private health insurance schemes

Scope of work

a) Prepare a detailed inception report on how the work will be executed;

b) Under ICRH and UNFPA leadership conduct a desk review showing how public
| and private insurance schemes have historically included or not; family planning information and services; |
| c) Provide a business case for the inclusion of family planning information and services in public and private insurance schemes; |
| d) Provide clear, actionable recommendations for successful inclusion of family planning information and services in public and private insurance schemes; |
| e) Facilitate technical review and validation sessions of the draft report with key stakeholders; |
| f) Edit and finalize the draft report based on stakeholders’ input; |
| g) Package the results for high level advocacy meeting and present the findings; |
| h) Submit the final results. |

| Duration and working schedule | The consultancy will run for 25 days spread over a period of not more than 60 days |
| Place where services are to be delivered | Mombasa with some travel for workshop review and presentation meetings |
| How the work will be delivered | The final products of the consultancy will be delivered in both hard and soft copies in a format that is acceptable to ICRH with a copy to UNFPA |

The deliverables are:

a) An Inception Report detailing how the consultancy will be executed with detailed time frame
b) Draft report of the literature review
c) Draft report of the business case
d) Final report incorporating stakeholders’ inputs
e) Slide deck presentation of not more than 15 slides targeting high level policymakers
f) Fact sheet on the business case

| Monitoring and progress control, including reporting | Weekly email and/or calls with ICRH Technical Advisor and UNFPA FP/RHCS technical specialist to discuss progress, share drafts and reports and discuss way forward. |
| Supervisory arrangements | The consulting will work under the ICRH Technical Advisor with support from the ICRH Research Officer |
| Expected travels | No travel is expected outside Nairobi except for the workshops. The cost of the workshops will be taken care by ICRH. |
**Required expertise, technical skills, qualifications and competence, including language requirements:**

<table>
<thead>
<tr>
<th>Competency/Qualification</th>
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</thead>
<tbody>
<tr>
<td>i. Master’s Degree or equivalent level in Social sciences, Health economics or public health.</td>
</tr>
<tr>
<td>ii. Knowledge on population and development issues, Health policy and Health Financing.</td>
</tr>
<tr>
<td>iii. At least 8 years’ knowledge and experience in conducting research/assessments of health financing programmes</td>
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<tr>
<td>iv. Proven experience in FP/SRH</td>
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<tr>
<td>v. Demonstrated experience in health financing including costing tools and methodologies</td>
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<td>vi. Excellent writing skills</td>
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<td>vii. Excellent communication skills</td>
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<td>viii. Fluency in spoken English and excellent writing skills in English</td>
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<tr>
<td>ix. Candidate must be proficient in office software applications.</td>
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<tr>
<td>x. Evidence of relevant experience on the subject matter to be submitted with the application ie. Document(s) developed by the consultant.</td>
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<tr>
<td>xi. Ability to work with a multi-disciplinary team of experts.</td>
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</table>

**COVID 19 protocols shall be observed as per the Ministry of Health guidelines.**

**Other Considerations**

<table>
<thead>
<tr>
<th>Consideration</th>
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<tbody>
<tr>
<td>The Consultancy rates are pegged to national consultancy consideration rates as per the harmonized rates for the recruiting organization</td>
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</table>

Interested candidates are requested to send their **Expression of Interest**, Curriculum Vitae and a Sample of previous written assignment to procurement@icrhk.org by 11th November 2022 at 5pm
## TASKS AND LEVEL OF EFFORT

<table>
<thead>
<tr>
<th>Task</th>
<th>LOE</th>
<th>Deliverable</th>
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<tbody>
<tr>
<td>• Develop a detailed inception report</td>
<td>2 days</td>
<td>a) Inception Report&lt;br&gt;b) Detailed work plan (planned activities alongside set timelines)&lt;br&gt;c) Gantt chart for meetings, workshops</td>
</tr>
<tr>
<td>Include the list of planned activities, workshops or meetings for engaging the public and private insurance schemes, persons responsible and expected timelines</td>
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<tr>
<td>• Conduct desk review of public and private insurance schemes to check for inclusion or non-inclusion of family planning information &amp; services</td>
<td>5 days</td>
<td>a) Situational analysis report&lt;br&gt;b) Draft literature review report</td>
</tr>
<tr>
<td>• Develop a business case for the inclusion of family planning services &amp; information to public and private insurance schemes</td>
<td>5 days</td>
<td>Draft zero of the business case report.</td>
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<tr>
<td>• Provision of clear and actionable recommendations for inclusion of family planning services &amp; information in public and private insurance schemes</td>
<td>2 days</td>
<td>Clear and actionable recommendations</td>
</tr>
<tr>
<td>• Submit draft zero of the business case report</td>
<td>2 days</td>
<td>Technical review of draft report&lt;br&gt;Validation sessions with key stakeholders&lt;br&gt;Workshop report (with key stakeholders input and review)</td>
</tr>
<tr>
<td>• Facilitate technical review and validation sessions of the draft report with key stakeholders in ICRHK, MoH &amp; UNFPA</td>
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<td>• Edit and finalize the draft report based on stakeholders’ input</td>
<td>2 days</td>
<td>Final report</td>
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<tr>
<td>• Results packaging for high level stakeholder advocacy meeting inform of power point or a technical brief</td>
<td>2 days</td>
<td>• High level report</td>
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<td>• Dissemination of findings</td>
<td></td>
<td>• Dissemination meetings with high level stakeholders</td>
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<td>• Submission of the final results</td>
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</table>

**Total number of days**: 20 days
PART ONE – CONFIDENTIAL BUSINESS QUESTIONNAIRE (Mandatory)

Individual | Business | Company Name

(Companies | Business must attach detailed profile indicating organizational structure, key personnel and total number of employees)

Physical Location of Premises (Business | Company) or Physical Location of Residence (Individual | Sole Proprietor)

Country/Town:

Plot No:

Street/Road:

Name of Building:

Floor: Room No:

Branches (if any)

1.

2.

3.

Postal Address:

Postal Code: Town:

Tel No: Mobile Number:

Fax No:

Email Address:
Nature of Main Business

Manufacturer: .................................. Authorized Agent: ................................Trader: ........................................
Consulting Firm | Individual: ......................... Other (Please Specify): ......................................................

(Attach dealership appointment letter)

Number of Years in Business | Number of Years of Experience: .......................... ..............................................................

Registration Details – (Business | Companies)

Certificate of Registration/Incorporation No: ............................................................... (Attach copy)
Trade | Practice License No............................... Expiry date............................... (Attach copy)
PIN No: ......................................................................................................................... (Attach Copy)
TAX Compliance Certificate No: .................................................................................... (Attach Copy)
Valid City/County Council License No: ................................................................. (Attach Copy)

Registration Details – (Individual | Sole Proprietor)

Trade | Practice License No............................... Expiry date............................... (Attach copy)
PIN No: ......................................................................................................................... (Attach Copy)
TAX Compliance Certificate No: .................................................................................... (Attach Copy)
Professional Body Registered to: ....................................................................................... 
Professional Body Membership No: ......................... Expiry date ......................... (Attach copy)

(Must attach copies of professional bodies membership certificates | documents where applicable)
Bankers: ......................................................................................................................................................................

Branch: ......................................................................................................................................................................

For Business | Companies:

Annual Turnover in (Kshs): ........................................................................................................................................

*(Attach certified copies of the last twelve months Bank statement - Mandatory)*

Provide at least three referees from your current clients and their detailed contacts *(Must attach Recommendations | Links)*

<table>
<thead>
<tr>
<th>No.</th>
<th>Organization</th>
<th>Contact Person</th>
<th>Position</th>
<th>Telephone</th>
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<tbody>
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<td>1</td>
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</table>
PART TWO (a) – SOLE PROPRIETOR | INDIVIDUAL

Your Name in Full: ............................................................................................................................................

Age: ...............................................................................................................................................................

ID Number: ....................................................................................................................................................

Nationality: .......................................................................................................................................................

(Attach Copy of ID Card - Mandatory)

PART TWO (b) – PARTNERSHIP

Give details of partners as follows:

<table>
<thead>
<tr>
<th>S/No</th>
<th>Name in Full</th>
<th>Nationality</th>
<th>Citizenship Details</th>
<th>Shares</th>
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</thead>
<tbody>
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**PART TWO (c) – REGISTERED COMPANY (Attach CR 12 - Mandatory)**

Private or public (state whichever is applicable).................................................................

Give details of all Directors as follows:

<table>
<thead>
<tr>
<th>S/No</th>
<th>Name in Full</th>
<th>Nationality</th>
<th>Citizenship Details</th>
<th>Shares</th>
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PART THREE – DECLARATIONS

a) STATEMENT OF SUPPLIERS (Individual | Sole Proprietor | Business | Company)

I/We have completed this form(s) accurately at the time of reply and it is agreed that all responses can be substantiated, if requested to do so, any inaccuracy in the information filled herein will be used as grounds for removal from or termination of the qualification process.

I/We confirm that I/We are not insolvent, in receivership, bankrupt or being wound up, our business activities have not been suspended and we are not the subject of legal proceedings for any of the foregoing.

I/We confirm that I/We have fulfilled our obligations to pay taxes and social security contributions e.g. NSSF and NHIF for your employees.

I/We confirm that we have read and understood and will adhere to the International Centre for Reproductive Health Statement of Suppliers attached (sign and return statement)

Signed | Stamped: ………………………………………………………………………………………………………………………………

For and on behalf of: ……………………………………………………………………………………………………………………

Position in Company: …………………………………………………………………………………………………………………

Date: ………………………………………………………………………………………………………………………………………
b) CONFLICT OF INTEREST (Individual | Sole Proprietor | Business | Company)

If our company is found to be involved in corruption or fraud or arrangements made with fraudulent intentions or any practice involving any threat to use force, we will consent to having any contract with the International Centre for Reproductive Health Kenya cancelled immediately, Irrespective of the contractual terms.

If we are not able to dispel any suspicion of any irregularity within a term of 4 weeks by presenting adequate evidence, we will consent to having the necessary authorities informed of the existing suspicion.

We undertake to compensate the International Centre for Reproductive Health Kenya any damage, loss or other detrimental to their project work caused by such irregularity on our part.

We also confirm that no article provided by our company, whether manufactured under our control or procured from other sources, is produced by means of child labor and that all products we provide are made in compliance with labor and social security legislation of the country of production.

Place: .................................................................

Date: .................................................................

Company: ...............................................................

Signature | Stamp: ............................................................
## IMPORTANT PRE-REQUISITES/EVALUATION CRITERIA – Business | Company

<table>
<thead>
<tr>
<th>S/No</th>
<th>Required Information</th>
<th>Maximum Scores</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Duly Filled Business Questionnaire</td>
<td>3</td>
<td>(Mandatory)</td>
</tr>
<tr>
<td>2</td>
<td><strong>Registration Documentation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a) Certificate of Incorporation</td>
<td>3</td>
<td>(Mandatory)</td>
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<tr>
<td></td>
<td>b) Business Permit</td>
<td>Trade License</td>
<td>3</td>
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<td></td>
<td>c) VAT Certificate</td>
<td>3</td>
<td>(Mandatory)</td>
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<td></td>
<td>d) Pin Certificate</td>
<td>3</td>
<td>(Mandatory)</td>
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<td></td>
<td>e) Valid Tax Compliance Certificate</td>
<td>3</td>
<td>(Mandatory)</td>
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<td></td>
<td>f) CR 12 Form</td>
<td>3</td>
<td>(Mandatory)</td>
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<td>3</td>
<td><strong>Financial Capacity</strong></td>
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<tr>
<td></td>
<td>a) Recent Audited Financial Statements for 12 Months</td>
<td>3</td>
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<tr>
<td></td>
<td>b) Bank Statement for the last 6 months</td>
<td>3</td>
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<tr>
<td>4</td>
<td><strong>Past Experience &amp; Performance</strong></td>
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<tr>
<td></td>
<td>a) Company Profile</td>
<td>10</td>
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<td></td>
<td>b) Referees - Attach Three Reference/Recommendations Letters</td>
<td>5</td>
<td></td>
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<tr>
<td></td>
<td>c) Past work done – attach Links</td>
<td>Documents</td>
<td>6</td>
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<td></td>
<td>d) Experience in conducting desk review (SRH research and extensive literature review) (Attach proof)</td>
<td>12</td>
<td>(Mandatory)</td>
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<tr>
<td></td>
<td>e) Experience in developing of public health business cases (attach proof or cases/reports of similar work done)</td>
<td>12</td>
<td>(Mandatory)</td>
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<td></td>
<td>f) Experience in research and or implementation of FP/Sexual Reproductive Health research/programs</td>
<td>12</td>
<td>(Mandatory)</td>
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population development issues | (Attach proof)

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<th>12</th>
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<tr>
<td>g) Experience in conducting high level stakeholder advocacy sessions</td>
<td>Demonstrated technical capacity to work with different teams &amp; stakeholders consultatively: technical ability to rationalize decisions arrived at, evidenced in business reports developed</td>
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<td>Candidate should have excellent communication, written and stakeholder engagement meetings)</td>
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<table>
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<tr>
<th>5 Declarations</th>
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<tbody>
<tr>
<td>a) Signed Declarations- Statement of Suppliers</td>
<td>2</td>
</tr>
<tr>
<td>b) Signed Declarations-Conflict of Interest</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100</strong></td>
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</tbody>
</table>
### IMPORTANT PRE-REQUISITES/EVALUATION CRITERIA – Individual | Consultant

<table>
<thead>
<tr>
<th>S/No</th>
<th>Required Information</th>
<th>Maximum Scores</th>
<th>Remarks</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Duly Filled Business Questionnaire</td>
<td>5</td>
<td>(Mandatory)</td>
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<tr>
<td>2</td>
<td><strong>Registration Documentation</strong></td>
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<tr>
<td></td>
<td>a) ID Card</td>
<td>Passport</td>
<td>5</td>
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<tr>
<td></td>
<td>b) Business License</td>
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<td>c) KRA Pin Certificate</td>
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<td>d) Valid Tax Compliance Certificate</td>
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<td><strong>Past Experience &amp; Performance (Preferably public health expert with experience in Health Economics)</strong></td>
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<td></td>
<td>a) Master’s Degree in communication, advocacy, Health Economics or any other social sciences</td>
<td>5</td>
<td>Attach Detailed C.V</td>
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<td>b) At least 8 years’ knowledge and experience in conducting research/assessments of health financing programmes</td>
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<td>Attach Detailed C.V</td>
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<td>4</td>
<td><strong>Declarations</strong></td>
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<td>a) Signed Declarations- Statement of Suppliers</td>
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<td>b) Signed Declarations-Conflict of Interest</td>
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<td><strong>Total</strong></td>
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GENERAL INFORMATION

Eligible Tenders

This invitation for Tenders is open to all bidders eligible as described in the tender documents. Successful bidders shall be registered with International Centre for Reproductive Health Kenya to Compete in the provision of goods and services. Tenderers shall provide the Expression of Interest information statement that the tenderer (including all members of a joint venture and subcontractors) is not associated, or have been associated in the past, directly or indirectly, with a firm or any its affiliates which have been engaged by the Tender Committee, to provide consulting services for the preparation of the design, specifications and other documents to be used for the procurement of the services under this request for proposal. Tenderers shall not be under a declaration of ineligibility for corrupt and fraudulent practices.

Eligible Goods

All goods to be supplied to International Centre for reproductive Health Kenya should include county of origin. For purposes of this clause, “origin” means the place where the goods are mined, grown, or produced. Goods are produced when, through manufacturing, processing, or substantial and major assembly of components, a commercial-recognized products results that is substantially different in basic characteristics on in purpose or utility from its components.

The origin of goods is distinct from the nationality of the tendered

Cost of Tendering

The Tenderer shall bear all cost associated with the preparation and submission of its tender, and the Evaluation Committee, will in no case be responsible or liable for those cost, regardless of the conduct or outcome of the tendering process.
The Expression of Interest Document Contents:

The Expression of Interest document comprises the documents listed below:

1) Invitation to Expression of Interest
2) Confidential Business Questionnaire
3) Evaluation Criteria
4) General Information
5) Suppliers Statement

The Tenderer is expected to examine all instruction in the tender documents. Failure to furnish all information required by the tender documents may result in rejection of the tender.

Bidding documents will be made available to those bidders whose qualification are approved after scoring 60 points and above soon after the evaluation process.

The Preparation of Tenders

Language of Expression of Interest Documents

The documents prepared by the tendered, as well as all correspondence and documents relating to the tender exchanged by the tendered and the Evaluation Committee shall be written in English language.

Validity of Expression of Interest Documents

Expression of Interest documents will be evaluated within 90 days from the date of opening.

Format and Signing of Expression of Interest Documents

The original and all copies of the Expression of Interest Documents shall be typed or written in indelible ink and shall be signed by the tenderer or a person or persons duly authorized to bind the tenderer.

The tender shall have no Erasures or Overwriting except as necessary to correct errors made by the tendered, in which case such corrections shall be initiated by the persons signing the tender.
Submission of Expression of Interest Documents

Sealing and Marking Documents

All documents should be clearly scanned into one PDF format document

Duly Filled | Signed | Stamped | Scanned completed Request for Proposal documents in soft copy clearly labeled “ICRHK | EOI | 11 | 2022” and addressed to:-

The Evaluation Committee
International Centre for Reproductive Health
3rd Avenue, off Mahesh Doshi Rd, Nyali
P O Box 91109-80103
Mombasa, Kenya

procurement@icrhk.org
Deadline for Submission of Expression of Interest Documents

Documents must be received by the Evaluation Committee at the address specified hereunder no later than 11th November 2022 at 5pm.

Evaluation Committee
International Centre for Reproductive Health
3rd Avenue, off Mahesh Doshi Rd, Nyali
P O Box 91109-80103
Mombasa, Kenya

procurement@icrhk.org

The Evaluation Committee may, at its discretion, extend this deadline for the submission of tenders by amending the tender documents, in which case all rights and obligation of the Evaluation Committee and candidates previously subjected to the deadline will thereafter be subject to the deadline as extended.