



Date: 14 June 2018

REQUEST FOR QUOTATION RFQ N^o UNFPA/IDN/RFQ/18/009

Dear Sir/Madam,

UNFPA hereby solicits a quotation for the following service:

“Study for Standardization of Family Planning Facilities and Services 2018”

This study is conducted to facilitate the assessment of existing family planning services. The assessment is directed to map family planning facilities registered under (at least) 2 different registration systems, and examine whether the classification of the facilities have met the required standards. Results and recommendations from the assessment will be used for strengthening credentialing system of family planning facilities under the BPJS scheme, and improving quality of family planning care and services. UNFPA is supporting BKKBN and Ministry of Health to conduct the study and call for qualified research institution to submit a proposal to conduct the study for Standardization of Family Planning Facilities and Services.

This Request for Quotation is open to all legally-constituted companies that can provide the requested services and have legal capacity to perform in the country, or through an authorized representative.

I. About UNFPA

UNFPA, the United Nations Population Fund (UNFPA), is an international development agency that works to deliver a world where every pregnancy is wanted, every child birth is safe and every young person’s potential is fulfilled.

UNFPA is the lead UN agency that expands the possibilities for women and young people to lead healthy sexual and reproductive lives. To read more about UNFPA, please go to: [UNFPA about us](#)

Terms of Reference (ToR)

A. Background

i. FP in Indonesia

Indonesia is globally recognized for its pioneering efforts in family planning. BKKBN’s leadership and initiatives has helped the transformation in reproductive behavior resulting in a dramatic drop in total fertility from 5.6 in 1967 to 2.4 in 2017 (IDHS), and increase in contraceptive prevalence from 18.3% in 1976 to 64% in 2017 (IDHS). However, the progress was not sustained. The latest 4 consecutive IDHS reports show some concerns on FP

indicators. Fertility rate and CPR are stagnated; unmet needs continue to be high. The latest 2017 IDHS report even shows reduction of modern contraceptive use (from 58% to 57%).

Discontinuation rates reported as high as 27% after 12 months of use and is mostly among clients of injectable, pills and IUCDs. Of the 9.4% who discontinued, side-effects or health reasons was the major reason. Data on informed choice while adopting the current method showed that only about 36.5% of women were provided information about side effects and what do if they experienced problems. Less than 51.3% of the women were provided information on other methods.

Many analysis reported that health providers are lacking of competencies in family planning services, counseling is not properly done, and choices are not always available. UNFPA monitoring reports in late 2016 showed concerning situation on the contraceptives stock outs. Further observation on the central warehouse records indicates that most of provincial warehouses (34 provinces) did not have sufficient stocks of contraceptives. BKKBN has set the minimum stocks for warehouse to have at least 3 months supplies all the time (stock ratio = 3). A point observation in August showed that stock ratio of 60-85 percent of the provincial warehouses was below the minimum stock ratio. This situation could lead to the limitation of choices given to the client. Anecdotal information indicates that the stalling of family planning indicators were mainly due to low quality family planning programme delivery and non-compliance to the standards that affects quality of services.

ii. FP under the Universal health Coverage

In 2014 the government of Indonesia launched a policy for universal health coverage (UHC) within which the family planning programme is covered. According to the roadmap, the government is aiming for covering all Indonesian people by the public health insurance by 2019. Many of analysis and observations indicate the scheme that Indonesia offers covers wide benefits package (covers almost all health cares and services) with relatively low premium, and fully subsidy of premium for those in the lowest economic quintile. The UHC is operated by the BPJS (Badan Penyelenggaraan Jaminan Sosial), a public agency established following the enactment of the policy, to manage the public health insurance scheme.

Family planning services is fully covered under the scheme, with free provision of contraceptive. According to the policy, the government (BKKBN) is obliged to meet all contraceptive needs of all BPJS's members, of which BKKBN has to increase budget for contraceptives procurement by 3-4 times and put in place a robust supply chain management system.

Despite the good FP benefit package, good political will of the government to meet FP needs of its people, implementation of family planning services under the scheme faces many challenges. Even after almost 4 years of implementation, gaps in regulations and guidelines for family planning are still yet to be addressed. Among the most important issues to be addressed are credentialing of FP facilities and standardization of services for quality of family planning services.

Currently Indonesia maintains (at least) 2 credentialing systems for health facilities providing FP services, one under BKKBN registration that classified FP clinics into 4 classifications

(*Sederhana*¹, *Lengkap*², *Sempurna*³, and *Paripurna*⁴), and the other one under BPJS registration that classified health facilities into 2 types: *FKTP* (primary health care facility) and *FKTRL* (secondary and tertiary health care). Having two registration systems with different criteria and credentialing mechanism could result in inefficient work by both BKKBN and BPJS. Consequently, these situations occur:

- Facilities registered under BKKBN system and not under BPJS's, may receive contraceptive commodities from BKKBN, but they will not be able to claim to / get the reimbursement from BPJS for the family planning services they provided. The situation may demotivate health providers in promoting FP services as they won't be able to get reimbursement from BPJS.
- Facilities registered under BPJS system, but not under the BKKBN's, cannot receive contraceptive commodities from BKKBN. Consequently they may not be able to provide free FP services to BPJS's members. This may result in discontinuation of use or miss-opportunities of new users.
- BPJS credentialing system does not include specific assessment for family planning services, which may lead to non-standardized and less quality of family planning service provision.
- Likewise the registration system under BKKBN. Although it includes classification of facilities, but the assessment for classification is only based on the FP instruments a clinic has and not including assessment of competencies of the providers. Anecdotal observations also indicate that the list under BKKBN system may not be valid anymore. For example, some facilities may be classified as *Sempurna* (advance) but in fact they are no longer meeting the standards for *Sempurna*.

B. Rationale/Justification

The government has been discussing ways to integrate the 2 systems, however, concrete actions to address the issue were yet to be planned; and for a good action plan, relevant evidence and information are needed. Upon request from the government of Indonesia, UNFPA CO has included a plan to conduct a study for standardization of family planning facilities and services in its 2018 AWP. The study is expected to map out existing FP facilities registered under the 2 different registration systems. Results from the study will help BKKBN in their efforts to integrate the registration system. Having a mapping of all existing FP services in the country will inform the government on the magnitude of the problems for integration and therefore can better help BKKBN and BPJS in planning the actions in more effective and efficient ways.

In addition, the study will help the programme managers and the decision makers at BKKBN, BPJS and MOH to better understand the quality of existing FP facilities. The study will provide evidence for moving strategic recommendations towards standardization of the services. With quality and standardized family planning service, will help the country to meeting FP needs of its people that contributes to the acceleration for achieving universal health coverage.

¹ *Klinik sederhana*: health center providing only 3 types of contraceptives: pill, injection, and condom.

² *Klinik lengkap*: health center providing 5 types of contraceptives: pill, injection, condom, IUD, implant, and (or) vasectomy.

³ *Klinik Sempurna*: health center providing all types of contraceptives: pill injection, condom, IUD, implant, vasectomy, and tubectomy.

⁴ *Klinik Paripurna*: health centre providing all types of contraceptives and recanalization

C. Description of services

Objective:

The main objective of the study is to map out family planning facilities registered under 2 different registration systems, namely K/O – BKKBN and BPJS's list of FKTP and FKRTL; and examine whether the classification of the facilities have met the required standards for family planning services.

The study is expected to:

- Produce mapping of all facilities (public and private) providing family planning services registered under BKKBN and BPJS
 - o Identify classification of each facility according to BKKBN's and BPJS's criteria
 - o Identify gaps between the 2 lists and provide recommendation for synchronization of the 2 lists
- Review quality of FP services under the UHC
 - o Review existing standards for credentialing of FP facilities under BKKBN's and BPJS's lists
 - o Conduct field assessment to validate classification of FP facilities; Identify gaps of standards in FP services by the registered facilities
- Provide recommendation to improve standards and credentialing of FP facilities under UHC

Expected Output:

The study is expected to produce:

1. A report on the mapping of FP facilities, with recommendation for synchronization of the 2 registration systems
2. Report on the assessment of FP facilities that includes analysis of the existing standards for FP services, assessment of quality of FP facilities, and recommendation for standardization and credentialing of FP facilities under the UHC.

Description of services and methodology:

- Desk Review – to provide an understanding on the current situations, including policies and regulations related to family planning programme and services under the UHC. The desk review will also assess gaps between existing standards for family planning services used in the country, and the golden standard (WHO).
- Mapping of FP facilities – conduct a thorough assessment of BKKBN's and BPJS's registers; identify facilities by different categories by district
- Field assessment - to validate classification of FP facilities and identify gaps of standards in the provision of FP services.
 - o The field assessment will cover 10 districts that will be selected purposively. Parameters for district selection needs to be developed and agreed upon in consultation with key stakeholders.
 - o A number of Facilities in the 10 districts will be selected from the BKKBN's and BPJS's lists. The selection will have to include all variation of FP facilities under UHC

(private, public, *FKTP*, *FKRTL*, *klirik sederhana*, *lengkap*, *sempurna*, *paripurna*, *jejaring FKTP*, etc).

- The institution will adopt the international tools and instruments to perform the assessment of quality of FP services. The institution is suggested to use (but not limited to) the following tools and instruments for adoption:
 - WHO tools for Service Availability and Readiness Assessment (SARA)
 - WHO - MEASURE evaluation – Health Facility Assessment Methods
 - SEED Assessment Guide for Family Planning Programming

Roles and responsibilities:

The institution is expected to spend a total of 65 working days spread between August and November 2018 to fulfill the following roles and responsibilities:

- Design methodology for the assessment by adopting the given tools, in close consultation with stakeholders: MoH, BKKBN and UNFPA ;
- Conduct desk review and analysis of the health facility lists;
- Perform field visits to conduct mapping, as in to observe and validate the findings from the preceding analysis
- Field data collection will be done in 10 districts. The consultant is expected to suggest district selection criteria for approval by the key stakeholders (MoH, BKKBN, and UNFPA)
- Assess the quality of family planning service provided by the health providers
- Submit final report of the mapping of family planning facilities and quality of care

Activities and timeline:

Tasks/Consultants	# of day	Aug				Sept				Oct				Nov			
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Briefing with UNFPA and Bappenas	1																
Desk Review	5																
Consultation with stakeholders	5																
Submission of draft of assessment methodology, sampling design, and Instruments for the study; and inception report																	
Revision of assessment methodology, sampling design and instruments for the study; and inception report	2																
Submission of the revised assessment methodology, sampling design and instruments for the study; and inception report																	
Preparations to conduct field data collection	5																
Data collection in 10 districts (Paralel team)	30																
Workshop for development of report/consolidation of data collected	2																
Report writing	7																
Submission of draft report																	
Revision of report based on inputs from UNFPA	3																
Validation workshop	2																
Revision of draft report	3																
Submission of final report																	
	65																

Deliverables	Format	Timeline
Draft of study proposal and plan: assessment and sampling methodology, instruments, timeframe, draft of inception report	Electronic copy	4th week of August 2018
Draft of Report	Electronic copy	1st week of November 2018
Final product: 1. A report on the mapping of FP facilities, with recommendation for synchronization of the 2 registration systems 2. Report on the assessment of FP facilities that includes analysis of the existing standards for FP services, assessment of quality of FP facilities, and recommendation for standardization and credentialing of FP facilities under the UHC.	Electronic copy	4th week of November 2018

Specific requirements:

- a. Submission of bi-weekly progress report
- b. Monthly meeting to evaluate the institution's progress and performance
- c. Methodologies for assessment and sampling; all instruments for data collection should be approved by UNFPA, MoH, and BKKBN as required

The institution will work under the overall guidance of the UNFPA Representative and under the direct supervision of the National Programme Officer for Reproductive Health (NPO RH), in close coordination with the key stakeholders (MoH and BKKBN).

The timing of the assignment is expected from August to November 2018, with travel to 10 districts for data collection in 1st-3rd week of October 2018, for 30 effective working days in the field.

D. Required expertise, qualifications, and competencies

The Institution must meet the following criteria to be eligible to apply for the assignment:

1. Advance track record in public health research, particularly in family planning and universal health coverage
2. Experience in conducting researches concerning family planning and reproductive health service
3. Expert in data information on family planning
4. Academic background in study/research design and methodologies
5. Solid expertise in the quality of FP services
6. Employed adequate numbers of experts in the related field with individual qualification of principal researcher as follow:

- a. Advance degree in Public Health, Demography, Social Study or other related field
- b. At least five years of experience in public health/family planning/public policy
- c. Demonstrate proficiency in Bahasa Indonesia as well as English

The roles and responsibilities of each individual of the institution should be clearly defined, including the identification of the designated team leader. The team leader will be responsible for all key deliverables and will coordinate the work of all other team members during all phases of the assignment, ensuring the quality, methodology as well as timely completion of all deliverables.

II. Questions

Questions or requests for further clarifications should be submitted in writing to the contact person below:

Name of contact person at UNFPA:	<i>Ms. Ira Novita</i>
Tel N ^o :	<i>+62 21 29802300</i>
Fax N ^o :	<i>+62 21 31927902</i>
Email address of contact person:	<i>novita@unfpa.org</i>

The deadline for submission of questions is **5 July 2018**. Questions will be answered in writing and shared with parties as soon as possible after this deadline.

III. Content of quotations

Quotations should be submitted in a single e-mail whenever possible, depending on file size. Quotations must contain:

- a) Technical proposal, in response to the requirements outlined in the TOR and include the following:
 - Completed Bidder Identification Form (Annex II) in pdf format;
 - Completed Bidder's Previous Experience (Annex III) in pdf format.
- b) Price quotation in IDR, to be submitted strictly in accordance with the price quotation form.

Both parts of the quotation must be signed by the bidding company's relevant authority and submitted in PDF format.

IV. Instructions for submission

Proposals should be prepared based on the guidelines set forth in Section III above, along with a properly filled out and signed price quotation form, are to be sent by e-mail to indonesia.office@unfpa.org no later than: **Friday, 13 July 2018**.

Please note the following guidelines for electronic submissions:

- The following reference must be included in the email subject line: **RFQ N^o UNFPA/IDN/RFQ/18/009 - Study for Standardization of Family Planning Facilities and Services 2018**. Proposals that do not contain the correct email subject line may be overlooked by the procurement officer and therefore not considered.

- The total e-mail size may not exceed **20 MB (including e-mail body, encoded attachments and headers)**. Where the technical details are in large electronic files, it is recommended that these be sent separately before the deadline.

V. Overview of Evaluation Process

The evaluation will be carried out in a two-step process by an ad-hoc evaluation panel. Technical proposals will be evaluated and scored first, prior to the evaluation and scoring of price quotation.

Technical Evaluation

Technical proposals will be evaluated based on their responsiveness to the service requirements /TORs listed in Section I and in accordance with the evaluation criteria below.

Criteria	[A] Maximum Scores	[B] Scores attained by Bidder	[C] Weight (%)	[B] x [C] = [D] Total Points
Mandatory requirements: <ul style="list-style-type: none"> • Legal documents; • Profile of the company and relevance to the Project; institutional structure: <ul style="list-style-type: none"> ○ Showing the networking capacity; ○ Demonstrating the ability in organizing team members in collecting and analysing information in the field. 	100		5%	
Overall response and level of understanding of the objectives of the project: <ul style="list-style-type: none"> • Understanding of, and responsiveness to, UNFPA Indonesia Country Office requirements; • Understanding of the scope, objectives and completeness of response. 	100		5%	

<p>Technical proposal - work plan/time scales given in the proposal and its adequacy to meet the project objectives:</p> <ul style="list-style-type: none"> • Quality of proposed approach/ methodology (incl. standard methodology, workflow, implementation plan, quality control, time management, and progress report schedule); • Quality of proposed Implementation Plan, i.e. how the institution/ organization will undertake each task in the TOR; • A draft outline of report (maximum 2 pages). 	100		40%	
<p>Organizational experience and capacity, including specific experience and expertise relevant to the assignment, professional experience of the staff that will be employed to the project proving demonstrated expertise in evaluation and related processes (CVs, etc.):</p> <ul style="list-style-type: none"> • Has national recognition for health research particularly in Family Planning and Universal Health Coverage; • Has a principle researcher that has strong experience in Public Health/Family Planning with advance degree in Public Health, Demography, Social Study or other related field; • Has expertise in FP data and quality of FP service. 	100		20%	
<i>Grand Total All Criteria</i>			70%	

The following scoring scale will be used to ensure objective evaluation:

Degree to which the Terms of Reference requirements are met based on evidence included in the Bid submitted	Scores out of 100
Significantly exceeds the requirements	90 – 100
Exceeds the requirements	80 – 89
Meets the requirements	70 – 79
Partially meets the requirements	1 – 69
Does not meet the requirements or no information provided to assess compliance with the requirements	0

Financial Evaluation

Price quotes will be evaluated based on their responsiveness to the price quote form. The maximum number of points for the price quote is 30, which will be allocated to the lowest total price. All other price quotes will receive points in inverse proportion according to the following formula:

$$\text{Financial score} = \frac{\text{Lowest quote (IDR)}}{\text{Quote being scored (IDR)}} \times 30 \text{ (Maximum score)}$$

Total score

The total score for each proposal will be the weighted sum of the technical score and the financial score. The maximum total score is 100 points.

VI. Award Criteria

UNFPA shall award a Professional Service Contract on a fixed-cost basis to the Bidder that obtain the highest total score.

VII. Right to Vary Requirements at Time of Award

UNFPA reserves the right at the time of award of contract to increase or decrease by up to 20% the volume of services specified in this RFQ without any change in unit prices or other terms and conditions.

VIII. Payment Terms

UNFPA payment terms are net 30 days upon receipt of invoice and delivery/acceptance of the milestone deliverables linked to payment as specified in the contract.

IX. Fraud and Corruption

UNFPA is committed to preventing, identifying, and addressing all acts of fraud against UNFPA, as well as against third parties involved in UNFPA activities. UNFPA's policy regarding fraud and corruption is available here: [Fraud Policy](#). Submission of a proposal implies that the Bidder is aware of this policy.



Suppliers, their subsidiaries, agents, intermediaries and principals must cooperate with the UNFPA Office of Audit and Investigations Services as well as with any other oversight entity authorized by the Executive Director and with the UNFPA Ethics Advisor as and when required. Such cooperation shall include, but not be limited to, the following: access to all employees, representatives agents and assignees of the vendor; as well as production of all documents requested, including financial records. Failure to fully cooperate with investigations will be considered sufficient grounds to allow UNFPA to repudiate and terminate the Agreement, and to debar and remove the supplier from UNFPA's list of registered suppliers.

A confidential Anti-Fraud Hotline is available to any Bidder to report suspicious fraudulent activities at [UNFPA Investigation Hotline](#).

X. Zero Tolerance

UNFPA has adopted a zero-tolerance policy on gifts and hospitality. Suppliers are therefore requested not to send gifts or offer hospitality to UNFPA personnel. Further details on this policy are available here: [Zero Tolerance Policy](#).

XI. RFQ Protest

Bidder(s) perceiving that they have been unjustly or unfairly treated in connection with a solicitation, evaluation, or award of a contract may submit a complaint to the UNFPA Representative, Dr. Annette Sachs Robertson at indonesia.office@unfpa.org. Should the supplier be unsatisfied with the reply provided by the UNFPA Representative, the supplier may contact the Chief, Procurement Services Branch at procurement@unfpa.org.

XII. Disclaimer

Should any of the links in this RFQ document be unavailable or inaccessible for any reason, bidders can contact the Procurement Officer in charge of the procurement to request for them to share a PDF version of such document(s).



PRICE QUOTATION FORM

Name of Bidder:	
Date of the quotation:	Click here to enter a date.
Request for quotation N°:	UNFPA/IDN/RFQ/18/009
Currency of quotation :	IDR
Delivery charges based on the following 2010 Incoterm:	N/A
Validity of quotation: <i>(The quotation must be valid for a period of at least 3 months after the submission deadline</i>	

- The Price Quotation must provide a detailed cost breakdown for each item. The components comprising the total price must provide sufficient detail to allow UNFPA to determine compliance of offer with requirements as per Terms of Reference of this RFQ.
- Quoted rates must be **exclusive of all taxes**, since UNFPA is exempt from taxes.
- The format provided shall be used as a model in preparing the Price Quotation. The format includes specific expenditures, which may or may not be required or applicable but are indicated to serve as examples.
- In case of discrepancy between unit price and total price, the lower price shall prevail and the higher price shall be corrected. If the Bidder does not accept the correction of errors, its Proposal will be rejected.

Item	Description	Unit	Qty	No. of days	Unit cost (IDR)	Total (IDR)
1. Professional Fee						
	Principal Investigator	Person				
	Researcher	Person				
	Other (please specify)					
2. Travel and other costs for Data Collection						
	Air ticket	Person				
	Accommodation	Person				
	Other (please specify)					
3. Overhead/management cost						
Total						

Vendor's Comments:

I hereby certify that the company mentioned above, which I am duly authorized to sign for, has reviewed RFQ N° UNFPA/IDN/RFQ/18/009 including all annexes, amendments to the RFQ document (if applicable) and the responses provided by UNFPA on clarification questions from the prospective service providers. Further, the company accepts the General Conditions of Contract for UNFPA and we will abide by this quotation until it expires.

	Click here to enter a date.	
Name and title	Date and place	



United Nations Population Fund
7th Floor Menara Thamrin
Jl. M.H. Thamrin Kav.3, Jakarta 10250
E-mail: indonesia.office@unfpa.org
Website: indonesia.unfpa.org

**ANNEX I:
General Conditions of Contracts:
De Minimis Contracts**

This Request for Quotation is subject to UNFPA's General Conditions of Contract: De Minimis Contracts, which are available in: [English](#), [Spanish](#) and [French](#)



**ANNEX II:
 BIDDER IDENTIFICATION FORM
 UNFPA/IDN/RFQ/18/009**

1. Organizational Information	
Company/Institution Name	
Address, City, Country	
Telephone/FAX	
Website	
Date of establishment	
Legal Representative: Name/Surname/Position	
Legal structure: natural person/Co. Ltd, NGO/institution/other (specify)	
Organizational Type: Manufacturer, Wholesaler, Trader, Service provider, etc.	
Areas of expertise of the organization	
Current Licenses, if any, and permits (with dates, numbers and expiration dates)	
Years supplying to UN organizations	
Years supplying to UNFPA	
Production Capacity	
Subsidiaries (indicate names of subsidiaries and addresses, if relevant to the Bid)	
Commercial Representatives in the country: Name/Address/Phone (for international companies only)	

2. Expertise of Staff	
Total number of staff	
Number of staff involved in similar contracts	



3. Contact details of persons that UNFPA may contact for requests for clarification during Bid evaluation	
Name/Surname	
Telephone Number (direct)	
Email address (direct)	



**ANNEX III:
 BIDDER'S PREVIOUS EXPERIENCE
 UNFPA/IDN/RFQ/18/009**

Order No. & Date	Description ⁵	Client	Contact person, phone number, email address	Date of service		Contract Amount (Currency)	Satisfactory completion
				From	To		

Indicate the description of products, services or works provided to their clients.
 To be attached: Evidence (client's letter or certificate) in support of satisfactory completion of above orders.

Signature and stamp of the Bidder:	
Name and title:	
Name of Company:	
Telephone:	
Email:	
Date:	

⁵ Please indicate relevant contracts to the one requested in the RFQ.