USAID | SOUTHERN AFRICA
FROM THE AMERICAN PEOPLE

REQUEST FOR INFORMATION (RFI)

RFI NUMBER:	**RFI-674-21-Eswatini-Health Information System**
SUBJECT:	**Request for Information and Comment on a Potential Opportunity focused on Strengthening Digital Health in Eswatini**
ISSUANCE DATE:	**October 20, 2021**
RESPONSE DUE DATE:	**November 5, 2021, 5:00 pm Eswatini local**
RESPONSE TO:	**nboayue@usaid.gov, Steffo@usaid.gov, and jramanitrera@usaid.gov**

To: All Interested Respondents/Parties:

The United States Government, represented by the U.S. Agency for International Development (USAID) Mission in Southern Africa is seeking feedback from responsible local (Eswatini) and/or regional[1] non-governmental firms/vendors with the capacity to strengthen, expand and introduce new innovations to health information system and digital health efforts to enhance healthcare delivery in Eswatini. The activity background is attached to this letter.

Under the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), USAID/Southern Africa works to support efforts to reduce HIV infections and make strides towards epidemic control, while tailoring efforts to strengthen health systems in each country in the Region. As a result of PEPFAR investments, USAID/Eswatini has made significant contributions towards HIV epidemic control, with a focus on the provision of quality clinical support and community services underpinned by health system investments to strengthen human resource management, supply chain management, and health information systems.

A key accomplishment has been the support to the Government of the Kingdom of Eswatini (GKoE) and the Ministry of Health (MOH) to establish and implement the country's first Client Management Information System (CMIS). To date, the introduction of CMIS has improved client services and facilitated data use for key programs, including HIV and Tuberculosis (TB). As core CMIS functionality is finalized and nationally deployed, USAID/Southern Africa seeks to amplify the impact of CMIS by further integrating existing health information systems, enhancing data use, and catalyzing new digital health investments.

This is a Request for Information (RFI) and is issued for information and planning purposes only. It does not constitute a Request for Proposal (RFP) or Request for Application (RFA) or a commitment to issue an RFP/RFA in the future. This RFI does not commit the U.S. Government to contract for any

[1] Regional organizations are organizations registered in the Southern African Development Community (SADC) Member States: Angola, Botswana, Comoros, Democratic Republic of Congo, Eswatini, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, Tanzania, Zambia and Zimbabwe.

supply or service whatsoever. Further, USAID/Southern Africa is not at this time seeking application or proposals and will not accept unsolicited applications or proposals. Respondents are advised that the U.S. Government will not pay for any information or administrative costs incurred in response to this RFI; all costs associated with responding to this RFI will be solely at the interested party's expense. Not responding to this RFI does not preclude participation in any future RFP/RFA, if any is issued.

This RFI can be downloaded from the following websites: http://www.grants.gov and http://www.BETA.sam.gov. All responses (feedback, questions and other submissions) regarding this announcement will ONLY be accepted via email to the addresses indicated on the cover page and must use the subject line **"Response to RFI-674-21-Eswatini-Digital Health Strengthening '*Organization name*'"**.

USAID may, at its sole discretion, decide to host a stakeholder consultation meeting. Any such meeting would be conducted virtually and likely occur during the month of November 2021. Respondents to this RFI will be contacted for potential participation in the stakeholder meeting and should provide up to two (2) points of contact that can be contacted (name and email address).

Please note that USAID/Southern Africa does not intend to respond to RFI responses received from interested parties. This notice is part of Government market research. USAID/Southern Africa may use information received from responses to this RFI in the development of a possible RFA or RFP. Proprietary information, if any, should be minimized and must be clearly marked. To aid the US Government, please segregate proprietary information.

Best Regards,

Nya kwai Boayue

Digitally signed by Nya kwai Boayue
Date: 2021.10.19 21:50:08 +02'00'

Nya Kwai Boayue
Contracting/Agreement Officer
USAID/Southern Africa

Attachment A – Draft Activity Description and Requested information

Attachment A - Draft Activity Description and Requested information

Requested Information

USAID/Southern Africa is seeking responses from local and regional entities with the capacity to achieve the objectives outlined in the below draft activity description (Section 2). Local Eswatini entities must meet the OGAC/PEPFAR definition located on page 78 of the COP20 guidance (https://www.state.gov/wp-content/uploads/2020/01/COP20-Guidance.pdf). Regional entities must be legally incorporated in countries with the member states of Southern Africa Development Community (see footnote 1 on the cover page).

Please limit responses to the RFI to a maximum of seven (7) pages. Please provide the following information:

a) General institutional information - up to 4 pages

- Organization/entity name, physical address, and contact information (phone, email).
- Summary of relevant/similar work performed over the past five years. Please include funding sources, program focus, countries of implementation, and total award amount.
- Please highlight any experience or capacity performing the following activities or competencies"
    1. Support to the establishment and implementation of HMIS at the national, sub-national and local levels.
    2. Incorporating innovations into HMIS programming.
    3. Leveraging partnerships and working effectively with governments, the private sector, and other local institutions to introduce innovations.
    4. Achieved results in providing technical assistance to government public health institutions to strengthen health information system maturity and digital ecosystems. Technical assistance would include support to leadership and governance, costed and funded digital health strategies and investment plans, health data and information policy, use of standards and interoperability and managing contractors for development of services and applications.
    5. Supporting evolution of digital health ecosystems in accordance with Digital Investment Principles (https://digitalinvestmentprinciples.org/) and Principles for Digital Development (https://digitalprinciples.org/).

c) Comments on USAID's draft opportunity description - up to 3 pages

USAID would appreciate any feedback or comments on the below draft.

Any feedback on the following areas would be especially welcome:

1. What are the potential game-changing interventions that could support the activity objectives?
2. Are the Activity technical approach and expected outcomes clear and realistic?
3. Does the program description provide potential implementers with sufficient information and guidance about USAID objectives and expectations?
4. 3) What lessons would you like to share with USAID to strengthen its approach?

2) Activity Description

Objectives:

Objective 1 - ENHANCE HEALTH INFORMATION SYSTEMS, DIGITAL PLATFORMS AND OTHER CREATIVE INNOVATIONS TO STRENGTHEN SERVICE DELIVERY, CLIENT MANAGEMENT AND USE OF AGGREGATE AND CLIENT LEVEL DATA TO MONITOR AND CONTINUOUSLY IMPROVE SERVICES ACROSS THE KINGDOM OF ESWATINI TO CONTRIBUTE TO SUSTAINING EPIDEMIC CONTROL.

- Provide technical assistance to Kingdom of Eswatini (GKoE)'s public health institutions, digital health governance structures, and local institutions to build country digital health capacity, advance national digital health strategy, strengthen national digital health architecture and develop and deploy sustainable services and applications that contribute to improved health outcomes.
- Strengthen the capacity of the Kingdom of Eswatini (GKoE)'s Strategic Information Department's Monitoring and Evaluation (M&E) unit and Regional teams to collate, analyze, interpret, visualize and communicate monitoring and evaluation data to all relevant stakeholders at all levels. Support the M&E Unit capacity to enforce and administer data protections, facilitate and manage data sharing and access and to optimize responsible use of data for monitoring, program planning and decision making.
- Support development of national and international partnerships to scale infrastructure enhancements and innovative approaches that improve sustainability and scale of innovative service delivery approaches and information system improvements.

Objective 2 - DEVELOP HEALTH SECTOR CAPACITY TO LEVERAGE DIGITAL HEALTH TO ACHIEVE IMPROVED HEALTH OUTCOMES

- Provide technical assistance support to the Government of the Kingdom of Eswatini (GKoE) to build country digital health capacity and advance a national digital health strategy:
  i) Develop an updated national digital health strategy and support alignment of investments across stakeholders and sources to the digital health strategy.
  ii) Establish Leadership and Governance structures to coordinate digital health investments and activities across health programs, funding sources and implementing organizations.
  iii) Support hiring of additional local/ national personnel responsible for new system enhancements and program/system maintenance where necessary.
  iv) Develop local processes, implemented by governance structures to guide system selection based on functional requirements and clearly documented evaluation criteria that prioritize total cost of ownership and sustainability.
- Collaborating with the Government of the Kingdom of Eswatini (GKoE) and in collaboration with other funding and implementing partners strengthen national digital health architecture
  i) Introduce or strengthen foundational or health information system architecture services that support data exchange.

ii) Support the creation of a health sector identification standard, a master patient index and operating procedures, guidelines and training to improve the ability of health information systems deployed within the Kingdom to uniquely identify clients at point of service and to store, link and share individual client records across services, across sites and over time.

iii) Explore cost, cost-benefit, and viability of a central HIE or interoperability layer, its data governance and its scope, including the possibility of the development and deployment of that system to support data exchange and implementation and enforcement of data security.

iv) Support the development and evolution of registries to support data exchange including a health facility registry, shared health record or specific program health registries like an HIV ART Register to support data exchange and individual tracking of client data across sites and over time.

- Collaborating with the Government of the Kingdom of Eswatini (GKoE) and in collaboration with other funding and implementing partners strengthen digital health services and applications that contribute to improved health outcomes

i) Lead the development and deployment of digital applications to improve patient management, such as a patient tracking/ return to care system with appointment reminders, follow up on missed appointments, that monitors patients exiting and re-entering care and provide insights into patient mobility that helps to prevent interruption in treatment.

ii) Support the evolution and continuous improvement of CMIS according to shifting program needs. Strengthen CMIS ability to different services across a site.

iii) Enhancing electronic medical record system appointment and client tracing functionality, including remote / online appointment systems and real-time missed appointment notifications for service provider follow up.

iv) Scaling integration of electronic medical record and electronic logistics management information systems considering interoperability options and their costs of implementation and ownership.

v) Developing or adopting community health outreach information systems with referral functionality to facility-based CMIS electronic medical records system.

vi) Developing in-patient electronic medical record modules, including COVID case management

vii) Updating facility and community systems to adapt to the health client identification standard including adoption of biometric solutions.

Objective 3 - STRENGTHENING STRATEGIC INFORMATION FOR DATA MANAGEMENT, VISUALIZATION AND DECISION MAKING

- Provide technical assistance support to the Government of the Kingdom of Eswatini (GKoE) to strengthen coordination and governance of M&E Systems and Tools

    - Develop Health Information Guidelines that help define roles and responsibilities and data protections related to access to health information, reporting, monitoring and use of health information.
    - Develop data governance structures to lead, govern and coordinate evolution and strengthening of M&E data.
    - Support efforts to improve data access, including use of training and signed data agreements to support and enforce health information guidelines and encourage responsible use of data.
    - Coordinated structures to support routine review, updating and deployment of new M&E paper tools. Process that considers all program and stakeholder indicator requirements, to help eliminate parallel aggregation or reporting and establish a common source of information for decision making.
    - Elimination of duplicate reporting of similar data to different systems or parallel structures.
- Strengthen data analytics capacity, including:
    - Data dissemination, dashboards and reporting
    - Data science
    - Provide cost-benefit analysis including cost of implementation and ownership of data warehousing, repository, and/or mirroring for data analytics with the goal of examining and improving data quality and indicators, such as IIT (interruptions-in-treatment), HIV prevention and voluntary medical male circumcision cascades
- Analysis and appropriate de-identified use of individual level data to improve client outcomes and facility performance, including:
    - Analytic support for case-based surveillance
    - Empower public health institutions, including the MOH Strategic Information Department units, Regional Health Management Teams to use data repositories to produce and use aggregate indicators from client-level data to improve programs and inform policies.

Objective 4 - PARTNERSHIPS TO SCALE AND SUSTAIN INNOVATIONS AND STRENGTHEN EFFICIENCY OF SERVICE DELIVERY

- Work with regional clinical technical assistance organizations and other stakeholders to establish smart lockers, kiosks, or other automated or semi-automated alternative chronic medication distribution systems
- Facility solar installations, inverter or other alternative energy solutions to deliver cost effective sustainable energy to health facilities to maintain supply chain cold storage and improve use of digital health interventions.
- Implement Internet bandwidth enhancements for public health facilities, schools, or communities, including but not limited to: (a) microwave internet solutions; (b) community WiFi platforms; and (c) satellite internet installations, such as Low Earth Orbit (LOE) satellite networks.

- Provide expert technical support to national stakeholders to explore new technologies and partnerships to enhance client health interactions and provider support, including telehealth and online training systems