Request for Interest (RFI)
April 2020

Support for training site development and national operational planning for PEN-Plus strategies to address severe, chronic NCDs at primary referral facilities

Background

Many low- and lower-middle income countries (LLMICs) are working to decentralize care for chronic conditions that were previously addressed only at a small number of tertiary referral centers. Over the past decade, some countries have begun to provide services at lower level facilities for selected severe chronic NCDs using integrated teams of mid-level providers benefitting from shared infrastructure. In 2019, the World Health Organization in the African Region held a technical consultation in Kigali to discuss a draft regional PEN-Plus strategy to dramatically improve access to chronic care by 2030 based on these experiences.

PEN-Plus is an integrated strategy that builds on the World Health Organization’s Package of Essential Noncommunicable Disease Interventions (WHO PEN) in order to increase the quality of services for severe chronic NCDs at primary referral facilities (e.g. district hospitals). PEN-Plus also seeks to accelerate decentralization of services for common NCDs at primary care facilities (e.g. health centers). Conditions addressed by PEN-Plus providers typically include relatively complex diseases such as type 1 diabetes, advanced rheumatic heart disease, and sickle cell disease. PEN-Plus providers also train and mentor WHO PEN workers addressing conditions such as type 2 diabetes, uncomplicated hypertension, and asthma at health centers.

The Program in Global NCDs and Social Change at Harvard Medical School (HMS), the NCD Synergies project at Partners In Health (PIH), and the Division of Global Health Equity at Brigham & Women’s Hospital (BWH) have been working with WHO, the Leona M. and Harry B. Helmsley Charitable Trust, and other partners to support Ministries of Health (MOHs) in LLMICs to:

1. assess their NCDI priorities through National NCDI Poverty Commissions,
2. identify integrated delivery strategies to implement priority interventions
3. establish PEN-Plus training sites when relevant,
4. develop national operational plans for PEN-Plus, and
5. seek financing for national scale-up of these services.

These partners are now soliciting preliminary letters of interest from countries who have already gone through the process of identifying their NCDI priorities through National NCDI Poverty Commissions and would like support with establishing PEN-Plus training sites and developing national operational plans for national PEN-Plus scale-up. The capacity to support countries is dependent on funding availability.
Application Requirements

1. Eligibility:
   • Applicants are eligible to apply from countries with an established National NCDI Poverty Commission.
   • These countries include: Afghanistan, Chhattisgarh State (India), Ethiopia, Kenya, Mozambique, Nepal, Tanzania, Uganda, Zambia, Zimbabwe. Countries that have already been supported to initiate PEN-Plus implementation are not eligible (Rwanda, Malawi, Liberia, Sierra Leone, and Haiti).
   • Locally registered organizations and institutions, such as non-governmental organizations, academic institutions, non-governmental clinical centers, and UN agencies based in a country with an established NCDI Poverty Commission (as above) are eligible to apply.

2. Applicants should demonstrate the following:
   • A strong relationship with the Ministry of Health and other relevant in-country partners
   • An in-country office that is legally recognized by the local government as a domestic entity able to hire local staff
   • An established record of successful implementation together with the MOH of outpatient care delivery at a rural, first-level hospital(s)

Selection Process

1. Letter of Intent (due July 1, 2020):
   • The first round of the application process will be based on a three-page letter of intent (template provided).

2. Full proposal (due October 1, 2020):
   • Successful applicants from round 1 will be invited to submit a full proposal and will be sent specific questions to answer. Follow up conversations will be set up with the candidates to discuss scope of work, budget allocation, and contractual mechanisms.

Timeline (dates are subject to change)

• Letter of Intent: due July 1, 2020
• Announcement of applicants selected for second round: August 1, 2020
• Full Proposal request release: August 1, 2020
• Full proposal: due October 1, 2020
• Announcement of applicants selected: November 2020

Resources

• PEN-Plus Tool Kit
• PIH Guide to Chronic Care Integration for Endemic Non-communicable Diseases
• Rwanda PEN-Plus Meeting Report
• PEN-Plus Costing Study Publication

Attachments

• Letter of Intent (LOI) Template

For any questions, please contact Kelsey Soderberg – ksoderberg@pih.org.

PEN-Plus activities to date have been supported by the Helmsley Charitable Trust. Awards for the current RFI are contingent on available funding. More details will be available by November 2020.