TERMS OF REFERENCE: CONSULTANCY FOR THE MARKETING / PROMOTION OF REPORTING ADVERSE EVENTS INVOLVING COVID-19 VACCINES OR MEDICINES

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1. **BACKGROUND INFORMATION**

1.1. **Partner country**

The principal beneficiaries are CARICOM Member States particularly the fourteen countries that are not overseas territories: Antigua and Barbuda, Bahamas, Barbados, Belize, Dominica, Grenada, Guyana, Haiti, Jamaica, St. Kitts and Nevis, St. Lucia, St. Vincent and the Grenadines, Suriname, and Trinidad and Tobago.

1.2. **Contracting authority**

Caribbean Public Health Agency

1.3. **Country background**

CARPHA’s mission is to provide strategic direction, in analysing, defining and responding to public health priorities of Member States, in order to prevent disease, promote health and to respond to public health emergencies. To support solidarity in health, as one of the principal pillars of functional cooperation, in the Caribbean Community.

The Caribbean Regulatory System is a subregional mechanism housed at CARPHA that supports Member States in conducting regulation of pharmaceuticals, including market registration and pharmacovigilance. The global pandemic of the novel coronavirus 2019 (COVID-19) has required governments of CARICOM to implement systems of approval of vaccines and medicines to mitigate against COVID-19. With the deployment of vaccines in 2021, CARPHA has supported the response of CARICOM in various areas of work including registration and procurement of vaccines, and pharmacovigilance of deployed vaccines, through the work of the Caribbean Regulatory System (CRS). In collaboration with the Pan American Health Organization and the Government of Canada, CARPHA-CRS will undertake activities to strengthen mechanisms for the market authorisation and safety surveillance of novel COVID-19 vaccines and therapeutics along their entire life cycle.

The project, within the framework of the COVID-19 crisis and its impact on member countries, will have a regional approach to strengthen pharmacovigilance of COVID-19 vaccines and medicines introduced in response to COVID-19.

1.4. **Current situation in the sector**

Safety monitoring of vaccines in several Member States of CARICOM has been done primarily through manual reports collected by immunization programme. While these continue to be applicable and useful, the widespread deployment of vaccines to the population is several times greater than to the infant population and/or mothers. As a result, tracking of adverse events following immunization is expected to pose a greater challenge to systems that rely primarily on manual means of data collection. Spontaneous reporting of adverse events following immunization or use of medicines is not routine among health workers as this function is relatively new to the Caribbean, and is not included in the curricula of health worker education.

The CRS hosts two online reporting interfaces for adverse events following immunization (AEFIs) and for adverse drug reactions (ADRs) to help Member States collect reports from the public, and health workers. A mobile application may be introduced as well. These tools may assist Member States to collect reports from members of the public for further follow-up as needed, and assessment. However, to sensitize the public about available reporting systems, and to support the submission of relevant
reports to the national authorities or to the CRS, users will need to be sensitized about the importance of reporting, avenues for reporting, key details to be included in reports, and actions to take, as needed.

1.5. Related programmes and other donor activities

The CRS manages a regional network for pharmacovigilance (VigiCarib) that produces a monthly newsletter reporting on recently case safety reports to the global or regional databases. Case reports from CARICOM that are transmitted to the global database of the World Health Organization for pharmacovigilance, or directly to CRS via VigiCarib tools, provide information that is shared in the regional network to increase vigilance at the country level. The CRS is supported by a grant from the Bill and Melinda Gates Foundation, and technical / advisory support by the Pan American Health Organization (PAHO) to conduct regulatory support activities, including pharmacovigilance.

The proposed contract will enable the CRS to promote the use of the electronic reporting tools for adverse events following immunization, and for suspected adverse drug reactions, to national authorities or to the CRS.

2. OBJECTIVE, PURPOSE & EXPECTED RESULTS

2.1. Overall objective

The overall objective of the project of which this contract will be a part of, is:

- To contribute to the improved health and protection from COVID-19 for populations in situations of vulnerability in the Caribbean.

2.2. Purpose

The purpose of this contract is:

To strengthen market and safety surveillance systems with attention to planning, passive and active reporting, investigating and analyzing adverse events following immunization (AEFIs) and adverse drug reactions (ADRs).

More specifically, the services of a consultant will be contracted to develop and implement a marketing plan, and materials for the promotion of AEFI / ADR reporting, with appropriate translations.

2.3. Results to be achieved by the contractor

The contractor is expected to achieve the following results:

- **Result 1**: Inception Report developed and submitted for the approval of the Project Manager
- **Result 2**: Marketing plan and materials for the promotion of voluntary reporting using electronic tools, developed and submitted for the approval of the Project Manager
- **Result 3**: Implementation of marketing plan and promotion of voluntary reporting of adverse events (AEFIs / ADRs) using electronic tools
- **Result 4**: Draft Final Report developed, submitted, and reviewed by the Project Manager in accordance with the reporting requirements in section 7.1 of these Terms of Reference
- **Result 5**: Final Report developed based on feedback from submission of the draft final report, submitted and approved in accordance with the reporting requirements in section 7.1 of these Terms of Reference.
3. ASSUMPTIONS & RISKS

3.1. Assumptions underlying the project

The assumptions underlying this project are:

- There are suitably qualified personnel who may be eligible for the project.
- Target groups will have access to communication tools for messages to have the required reach.

3.2. Risks

The risks associated with this contract are as follows:

- Securing suitable suppliers (individuals or consulting firms) in a timely manner, while adhering to the CARPHA and donor procurement guidelines
- Limited availability of suppliers with relevant expertise for the development and execution of the Plan
- Changes in economic, social and political conditions, as well as other exogenous shocks, which may create difficulties for the achievement of the objectives of the project
- The occurrence of major manmade or natural disasters, which can change public health priorities and inhibit the implementation of this project.

4. SCOPE OF THE WORK

4.1. General

4.1.1. Description of the assignment

The consultant will be required to develop a marketing and promotions strategy or plan, and relevant materials to promote voluntary reporting of adverse events following immunization (AEFIs) and adverse drug reactions (ADRs) by the public. Given the presence of non-Anglophone residents and migrant populations in CARICOM, and the need to encourage reporting by these persons, translations of the print-based materials to include a second language (namely Spanish, French and Dutch) are required.

4.1.2. Geographical area to be covered

The geographical area is the Caribbean Region.

4.1.3. Target groups

The target groups for the marketing / promotions will be:

- Members of the public who have received a COVID-19 vaccine or a medicine to treat COVID-19.

4.2. Specific work

Result 1: Inception Report developed and submitted for the approval of the Project Manager.

1.1 Engage in an initial briefing with the Project Manager and other relevant CARPHA personnel to discuss the scope of the work to be undertaken, the approach, and any other issues pertaining to the Project, upon the commencement of the Consultancy.
1.2 Prepare and submit for the approval of the Project Manager, an Inception Report which includes as a minimum, the following:

- The process for project completion
- Project timeline / workplan
- Potential risks and strategies to mitigate risks.

**Result 2: Marketing plan and materials for the promotion of voluntary reporting using electronic tools, developed and submitted for the approval of the Project Manager.**

2.1 Prepare and submit a marketing plan for a campaign to promote voluntary reporting of adverse events following immunization (AEFIs) with COVID-19 vaccines, or adverse drug reactions (ADRs) involving COVID-19 medicines.

The marketing plan should include the following:

(i) A marketing strategy, budget, and promotional plan to support the use of electronic reporting tools for adverse events following immunization, and for adverse drug reactions by health workers and the public

(ii) Draft infographics and captions for CARPHA social media

(iii) Draft designs and/or scripts for advertising in print and/or broadcast media

2.2 Prepare a revised marketing plan and materials with translations for the campaign based on feedback received from the Project Manager for inclusion in the final report.

2.3 Prepare bi-lingual promotional materials for print advertising / social media for the campaign, with English plus a second language, e.g. English + Spanish, English + French, and English + Dutch.

The promotional materials should be diverse in gender and ethnicity to represent the diversity of Caribbean peoples, where applicable.

2.4 Prepare Interim Report 1, in accordance with the reporting requirements in section 7.1 of these Terms of Reference, for approval of the Project Manager.

**Result 3: Implementation of marketing plan and promotion for voluntary reporting of adverse events (AEFIs / ADRs) using electronic tools**

3.1 Implement the social media campaign (based on the marketing plan approved by the Project Manager under Result 2) to promote voluntary reporting of adverse events following use of COVID-19 vaccines or medicines, in collaboration with CARPHA Communications unit

3.2 Promote voluntary reporting of adverse events by the public via advertising in appropriate print and/or broadcast media.

3.2 Create a repository (folder) of the materials developed, and resources used to be submitted to the Project Manager.

**Result 4: Draft Final Report developed, submitted, and reviewed by the Project Manager in accordance with the reporting requirements in section 7.1 of these Terms of Reference.**

4.1 Prepare and submit for the approval of the Project Manager a Draft Final Report, which will include recommendations for future campaigns, and as an Annex, links to electronic versions of all
communication strategies/plans and designs in accordance with the reporting requirements in section 7.1 of these Terms of Reference.

Result 5: Final Report developed based on feedback from submission of the draft final report, submitted and approved in accordance with the reporting requirements in section 7.1 of these Terms of Reference.

5.1 Prepare a final report based on feedback from submission of the draft final report, submitted and approved in accordance with the reporting requirements in section 7.1 of these Terms of Reference.

CARPHA will:

Have full proprietary ownership including copyright of all designs, concepts, generated and included in this contract.

4.3. Project management

4.3.1. Responsible body

The Caribbean Regulatory System (CRS) of CARPHA will be responsible for the management and coordination of the Project.

4.3.2. Management structure

The Programme Manager of the Caribbean Regulatory System, CARPHA, will be the Project Manager and will have overall responsibility for the Project. The Project Manager will retain oversight for the consultancy and will also be responsible for the day-to-day supervision of project activity. The Communications Manager, CARPHA may be consulted from time to time and may review plans or designs of the Contractor and provide recommendations to the Project Manager. External stakeholders such as PAHO Advisors may also be consulted from time to time.

The Project Manager shall be responsible for approving all reports.

4.3.3. Facilities to be provided by the contracting authority and/or other parties

CARPHA shall:

i. Notify participating Member States about the Project

ii. Provide the Contractor with any documentation required for the execution of the Project

iii. Assume responsibility for the logistical and administrative arrangements for document sharing and meetings

5. LOGISTICS AND TIMING

5.1. Location

The operational base for this consultancy is Port of Spain, Trinidad (CARPHA-POS Campus). The contractor will work remotely.

5.2. Start date and period of implementation of tasks
The intended start date is August 2022 and the period of implementation of the contract will be four (4) months from this date.

6. REQUIREMENTS

6.1. Staff

Note that civil servants and other staff of the public administration of the partner country, or of international/regional organisations based in the country, shall only be approved to work as experts if well justified. The justification should be submitted with the tender and shall include information on the added value the expert will bring as well as proof that the expert is seconded or on personal leave.

6.1.1. Key experts

All experts who have a crucial role in implementing the contract are referred to as key experts. The profile of the key expert needed for this contract is as follows:

Qualifications and skills

- At least a University degree in communications, marketing, media, public relations or any other related field

General Professional Experience:

- At least three (3) years of professional experience in media, health communications or public relations work
- At least three (3) years of progressive experience in developing communication campaign material
- Demonstrates strong analytical oral and written communication skills
- Ability to work with teams of professionals and with senior technical officers
- Familiarity and understanding of cultural and political challenges faced by Caribbean territories
- Ability to adapt to diverse cultural and educational backgrounds and maintain a high standard of personal conduct.

All experts must be independent and free from conflicts of interest in the responsibilities they take on.

6.1.2. Other experts, support staff and backstopping

CVs for experts other than the key experts should not be submitted in the tender but the tenderer will have to demonstrate in their offer that they have access to experts with the required profiles. The contractor shall select and hire other experts as required, according to the needs. The selection procedures used by the contractor shall be transparent, and be based on pre-defined criteria, including professional qualifications, skills, and work experience.

The costs for backstopping and support staff, as needed, are considered to be included in the tenderer’s financial offer.

6.2. Office accommodation

Office accommodation for each expert working on the contract is to be provided by the contractor.

6.3. Facilities to be provided by the contractor

The contractor shall ensure that experts are adequately supported and equipped. In particular, he or she must ensure that there is sufficient administrative, secretarial and interpreting provision to enable experts to concentrate on their primary responsibilities. He or she must also transfer funds as necessary to
support their work under the contract and to ensure that its employees are paid regularly and in a timely fashion.

6.4. Equipment

No equipment is to be purchased on behalf of the contracting authority as part of this service contract or transferred to the contracting authority at the end of this contract.

7. REPORTS

7.1. Reporting requirements

The contractor will submit the following reports in English in one electronic copy each:

- **Inception Report** of maximum 12 pages (excluding annexes) to be produced **two (2) weeks after the start of the contract**. In the report the contractor shall describe initial findings, work plan, progress in procedure development, any difficulties encountered or expected in addition to the work programme. The contractor should proceed with his/her work unless the contracting authority sends comments on the inception report.

- **Interim Report 1**: Interim Report of maximum 12 pages (excluding annexes) to be produced and submitted in accordance with the workplan as approved by the Project Manager in the Inception Phase. This report will consist of a detailed summary of progress made with implementation of the specific work set out in Section 4.2, (up to Result 2) including challenges encountered and action taken/proposed to address challenges. It will also include as Annexes, the marketing plan with copies of the accompanying promotional material and translations as per Result 2 (in Section 4.2).

- **Draft final report** of maximum 20 pages (excluding annexes) in the format given below. This report will include a detailed description of the work done, details of challenges encountered, and recommendations (as described in Section 4.1, 4.2). This report shall be submitted no later than **two weeks before the end** of the period of implementation of tasks.

- **Final report** with the same specifications as the draft final report, incorporating any comments received from the parties on the draft report. The deadline for sending the final report is **seven (7) calendar days (one week)** after receipt of comments on the draft final report. The final report must be provided along with the corresponding invoice.

7.2. Submission and approval of reports

The report referred to above must be submitted to the project manager identified in the contract. The project manager is responsible for approving the reports.

8. MONITORING AND EVALUATION

8.1. Definition of indicators

Implementation performance will be measured by:

- Submission of marketing plan, promotional materials and resources to promote voluntary reporting of adverse events

- Marketing and promotions via social media and other approved media

- Compliance with the schedule for the submission of reports on the outputs of the Project as outlined in Section 7.1.
8.2. Special requirements

There are no special requirements to be added.