



TERMS OF REFERENCE

For the designing of an innovative digital tool for continuity of medical care during health emergencies in Albania

PROJECT:	SOLIDAR – TOGETHER IN HEALTH EMERGENCIES
Category:	Subcontract
Corresponding to Outcome:	Outcome 2: Strengthen Emergency Medical Services
Support for Activity:	Activity 2.3: The reporting of medical emergency data at PHC level is modernized and innovative tools for continuity of care during emergencies are tested.
Period of assignment:	03.03.2025 – 31.10.2025

1. BACKGROUND

Albania is a disaster-prone country and occasionally exposed to natural and man-made hazards. Emergency events, such as floods, forest fires, droughts, torrential rains, high snowfalls, heatwaves, landslides, avalanches, earthquakes, and epidemics, are encountered annually. In 2019, Albania experienced a strong earthquake that affected 11 municipalities, with more than 200,000 people directly and indirectly affected, accounting for 51 fatalities and 913 injuries as well. Shortly afterwards, the COVID-19 pandemic hit and put the Albanian healthcare system under considerable pressure, with health services disrupted and many lives lost. Both disasters implied a heavy burden on the country's economy, livelihoods, and human development. The dimension of disasters in Albania are affected by the level of poverty, state of infrastructure, constructions in risk areas due to fast urbanization, and exploitation of natural resources, such as overuse of forests and riverbanks. The lack of medical emergency supplies and resources during disasters plays a key role and gaps in coordination between institutions and agencies involved in emergency preparedness and response. Especially, the primary healthcare level has limited capacities to respond to a health emergency.

In this context, SOLIDAR Project is trying to support the strengthening of health emergency service preparedness and response in Albania. The goal of the project is: People, including the most vulnerable, have improved access to quality emergency care services managed by a more resilient health emergency system at all levels. The project objectives are: 1) Strengthening the Health Emergency System, 2) Strengthening Emergency Medical Services, and 3) Strengthening Community Engagement. The requested services by this invitation to submit a bid feed into the second objective.

Within the sphere of Outcome 2, a critical imperative emerges – the need for continuity of care during health emergencies, especially when roads are blocked and the physical contact of the community with the healthcare staff is not possible. For efficient continuity of care, medical support requires innovative tools that can enable continuous interactions between patients and medical staff especially when it becomes difficult for people to get to health centers/facilities physically. Therefore, it is important to develop new digital tools to ensure continuity of medical care during emergencies, especially at PHC level, the first contact point of the population with health services.



2. RATIONALE

The COVID-19 pandemic underscored the necessity of establishing robust systems for the continuity of care during health emergencies. While some ad-hoc initiatives were taken by the PHC staff during the pandemic, these efforts lacked coordination, sustainability, and proper training. Therefore, there is an urgent need to develop a comprehensive digital solution that easily connects patients with healthcare providers, facilitating real-time interaction and medical guidance even when physical access to healthcare facilities is limited. This initiative aims to address existing gaps in the PHC system and enhance its capacity to deliver emergency medical care effectively.

Robust systems have to be put in place to ensure that there is continuity of care during health emergencies as the COVID-19 pandemic has demonstrated. The PHC staff made some ad-hoc efforts at this period, but they were uncoordinated, not sustained and given the lack of appropriate training those efforts were discontinued soon after. Therefore, there is an urgent need to develop a comprehensive and innovative digital solution that seamlessly connects patients with healthcare providers during health emergencies. Such a tool would ideally facilitate real-time interaction of PHC staff and patients and providing medical guidance to those asking for it and ensuring that the acute condition will be stabilized or kept under control until more specialized help is available, even when physical access to healthcare facilities is limited (as in the case of certain emergency situations such as floods, earthquakes, fires, extreme heat waves or extreme cold, etc.). This call for proposal aims to develop and pilot a novel digital tool that will assure continuous access to medical care during health emergencies in Albania.

3. ASSIGNMENT OBJECTIVE

The primary objective of this assignment is to enhance healthcare access for the Albanian population by establishing a sustainable and innovative digital solution that ensures continuity of medical services during health emergencies. This digital tool aims to empower healthcare staff to provide timely medical guidance, support, and patient monitoring, even in scenarios where physical access to healthcare facilities is restricted, ensuring uninterrupted communication between patients and healthcare providers.

4. SPECIFIC OBJECTIVES

The **specific objectives** of this assignment are as follows:

1. Conduct a comprehensive needs assessment to identify the specific requirements and challenges of the primary health care system regarding continuity of care in times of peace and during emergencies.
2. Design and implement a user-friendly digital innovation (e.g., platform or tool), customized for the Albanian settings, that enables uninterrupted communication between patients and healthcare providers, facilitates real-time medical consultations, and offers professional medical guidance during health emergencies.
3. Develop user manuals and training material for primary healthcare staff (doctors and nurses) on the usage of the proposed innovative digital solution.
4. Conduct training sessions for primary healthcare personnel to ensure that they are proficient and confident in using the innovative digital solution.

5. SCOPE OF WORK

The selected company/organization is expected to:

- Carry out a comprehensive needs assessment to evaluate the existing challenges and requirements at the PHC level for digital continuity of care, focusing on gaps in service delivery, infrastructure, and personnel training.



- Assess the current technological infrastructure at primary health care level.
- Develop a project plan detailing key milestones, activities, and timelines for the development and piloting of the innovative digital tool that will ensure continuity of care during emergencies.
- Design and develop the innovative digital tool, that is user friendly, accessible and compatible with existing digital healthcare systems.
- Prepare a user manual and training materials for the primary healthcare staff (doctors and nurses) on how to effectively operate and use the proposed innovative digital tool, including detailed guidance on digital tool usage, troubleshooting common issues, ensuring patient data security and privacy during remote consultations and emergency scenarios, etc.
- Organize capacity building sessions, i.e. training sessions for PHC personnel who will be using this innovative digital tool in case of health emergencies.
- Pilot the digital tool in selected PHC facilities and systematically collect feedback from both end-users, including healthcare staff and patients, to make necessary adjustments.
- Provide technical support and maintenance services throughout the piloting phase of the developed digital tool.

6. APPROACH

The approach for developing an innovative digital solution for continuity of medical care during health emergencies in Albania should follow a structured, collaborative, and user-centered methodology to ensure the tool meets the needs of primary healthcare settings and patients. Key aspects of the approach are:

- **Stakeholder engagement and participatory process** – Engage key stakeholders, including healthcare professionals, government authorities (central/local level), community representatives, technology experts, and end-users to ensure successful assignment. In addition, participatory workshops, focus group discussions, and interviews are encouraged to gather insights into the specific challenges faced by Primary Health Care (PHC) settings, particularly during emergencies.
- **Comprehensive needs assessment** – A thorough needs assessment to identify gaps in current emergency health service delivery at the PHC level is of critical importance to the success of this assignment. This assessment will include analyzing technological readiness, existing digital infrastructure, human resource capacities, and patient interaction challenges during emergencies. The information gathered from this assessment exercise shall be used to inform the design and functionalities of the digital tool, ensuring it addresses real-world problems such as communication barriers, resource limitations, and accessibility issues.
- **Adherence to digital principles:** To ensure sustainability, accessibility, and impact, the development of the digital tool shall adhere and follow to established principles for digital development, including understanding the existing ecosystem, share, reuse and improve, design with people, design for inclusion, build for sustainability and use evidence to improve outcomes.
- **Iterative design and development** – The process of digital tool design should adopt an iterative process, where the digital solution is developed in stages with regular feedback loops from end-users and stakeholders, allowing for continuous refinement. This approach ensures that the tool is user-friendly, efficient, and adaptable to varying emergency scenarios.
- **User-centered testing and piloting** - Piloting the digital tool in selected 24/7 health centers to test its effectiveness, usability, and impact on continuity of care during emergencies is of



critical importance as well. This phase will involve training healthcare professionals on how to use the tool, followed by real-time application in simulated or actual emergency situations. The feedback from users, data on performance monitoring and identification of challenges faced during the piloting phase will allow for necessary adjustments and improvements to be made before the full-scale implementation of the proposed innovative digital solution.

- **Capacity building and training** – Comprehensive training manuals and materials tailored to the needs of PHC personnel will follow the design and piloting of the digital tool, ensuring the staff is well-equipped to use the digital tool efficiently. Subsequently, a support system to provide ongoing technical assistance and address any challenge encountered by PHC staff while using the tool should be developed.
- **Integration and compatibility** – It is essential to ensure that the digital solution is compatible with existing health information systems and infrastructure within the Albanian healthcare system. The implementing organization should assess whether the tool should function as a stand-alone solution or be seamlessly integrated into existing digital systems, evaluating the pros and cons of each approach. In this process, special attention needs to be dedicated to data security, privacy, and compliance with national health regulations and standards to protect patient information and maintain trust in the digital solution.
- **Monitoring, evaluation, and adaptation** – The development of a monitoring and evaluation framework to assess the tool’s impact on continuity of care, user satisfaction, and overall system efficiency is also of critical importance. This will involve tracking key performance indicators, user feedback, and any challenges faced during implementation. The findings shall be used to adapt and optimize the digital tool, ensuring it continues to meet the evolving needs of healthcare providers and patients during emergencies.
- **Sustainability and long-term integration** – The designing and piloting of the digital tool should also take into account sustainability to ensure its operational and financial viability after the project ends. The bidders should share ideas and/or propose strategies for long-term integration into the national healthcare system, including cost-effective maintenance, scalability, and adaptability to evolving needs.

The regions where the SOLIDAR Project will work during the implementation phase are shown below:

Table 1: Territorial areas of intervention

Nr.	Territorial Area Coverage Approach (TACA)	Regional Operator	Municipality	Name of health facility	Type of health facility
1	Fushë-Kruja – Kruja – Kamza – Vora	Tirana	Fushë-Kruja	Fushë-Kruja HC	24/7 HC
			Kamza	Kamza HC	24/7 HC
			Vora	Vora HC	24/7 HC
2	Puka - Fushë-Arrëz – Luf – Qelëz – Gjegjan	Shkodra	Fushë-Arrëz	Fushë-Arrëz HC	24/7 HC
			Puka	Luf HC	24/7 HC
			Puka	Qelëz HC	24/7 HC
			Puka	Gjegjan HC	24/7 HC
3	Velipoja – Dajç	Shkodra	Shkodra	Velipoja HC	Regular HC
			Shkodra	Dajç HC	Regular HC
4	Tepelena-Përmet-Këlcyra	Vlora	Këlcyra	Këlcyra +Dëshnica HC	24/7 HC
5	Cërrik – Belsh – Gramsh – Peqin	Elbasan	Cërrik	Cërrik HC	24/7 HC
			Belsh	Belsh HC	24/7 HC



7. SERVICE PERIOD

The consultancy service is expected to commence on 1 February 2025 and conclude on 31 September 2025, with a duration of 7 months within this time span.

8. DELIVERABLES

The deliverables outlined below represent tangible outputs and documentation that summarize the progress and outcomes of the consultancy service for designing of an innovative digital tool for continuity of medical care during health emergencies in Albania.

In the context of the services under this assignment, the following deliverables are expected from the winning organization, subject to approval by the SOLIDAR Project:

1. **Needs Assessment Report:** A comprehensive report documenting specific needs, challenges, and recommended functionalities for the digital tool.
2. **Project plan:** A detailed project plan outlining key milestones and activities.
3. Developed and tested (piloted) innovative digital tool prototype (a functional prototype featuring essential consultation and monitoring capabilities).
4. **Report on the piloting** of the innovative digital tool, including evaluation findings and recommendations.
5. **Sustainability plan:** A comprehensive plan that outlines proposed strategies for the long-term operation, maintenance and scalability of the digital tool, addressing financial sustainability, institutional sustainability, technical sustainability, hosting, ownership, etc.
6. **User manual and training materials:** Detailed, user-friendly manual and materials for PHC staff on tool operation, guidance on digital tool usage, troubleshooting common issues, protocols for patient data management, adherence to national health data regulations, ensuring patient data security and privacy during remote consultations and emergency scenarios, etc.
7. **Training session documentation:**
 - A schedule of training sessions, including dates and specific 24/7 HCs (subject to adjustments at a later stage).
 - Delivered training sessions for all target professionals.
 - Reports on the training sessions, including participant attendance, feedback, assessment results.
 - List of participants.
 - Certification for participants who successfully completed the training.
 - Photos of the training sessions/ participant signed approval for photographs.
 - Completion report detailing training sessions conducted and outcomes achieved.
8. **Technical support and maintenance plan:** A structured plan outlining ongoing support, detailing procedures for troubleshooting and technical assistance.
9. **Final Report**

9. QUALITY ASSURANCE

Quality assurance will be a fundamental component of this assignment to ensure that the digital tool meets the highest standards of functionality, usability, and reliability throughout its development and implementation. The quality assurance process must include the following key elements:



- **Comprehensive quality planning** – A detailed Quality Assurance (QA) Plan at the start of the assignment, outlining the standards, procedures, and methodologies that will guide the development and implementation of the digital tool, needs to be developed. This plan will include key performance indicators (KPIs), quality benchmarks, testing protocols, and risk mitigation strategies. Clear quality objectives aligned with the project's goals shall be established, ensuring that each phase of the project meets predetermined quality criteria.
- **Stakeholder involvement and feedback mechanism** – Engaging stakeholders - including PHC staff, patients, local government representatives (or higher level), and technical experts - throughout the development process is essential to ensure that the digital tool meets their expectations and requirements. Consultation and feedback loops will be established, and stakeholder feedback should be incorporated into iterative improvements, ensuring that the tool is user-centered and effectively addresses the identified needs.
- **Rigorous testing and validation** – Multiple levels of testing, including unit testing, integration testing, system testing, and user acceptance testing (UAT), are most likely to be needed, at various stages, to identify and address any technical issues, bugs, or inconsistencies in the digital tool. There is need to pilot test the digital solution in selected PHC facilities to validate the tool's performance, usability, and effectiveness in real-world scenarios, ensuring that the tool operates reliably under emergency conditions and meets the needs of end-users.
- **Quality monitoring and evaluation** – A high quality monitoring framework to continuously assess the digital tool's performance against predefined quality standards and KPIs shall be developed, including regular audits and evaluations, to ensure compliance with the QA plan and to identify areas for improvement. Information from data analytics and feedback from end-users will be used to monitor the tool's effectiveness, functionality, and impact on service delivery. This information will guide ongoing quality enhancement efforts.
- **Documentation and reporting** – It is critical to maintain comprehensive documentation of the quality assurance process, including test results, feedback from stakeholders, and corrective actions taken. Such documentation will serve as a record of the QA activities and support transparency, accountability, and continuous improvement.
- **Training and capacity building for quality assurance** – Training sessions for the project team, PHC staff, and other stakeholders (if needed) will be developed and implemented to ensure they understand the quality standards, protocols, and procedures associated with the digital tool. Also, ongoing support and guidance to ensure that quality standards are maintained throughout the implementation phase should be provided.
- **Adaptability and continuous improvement** – It is important to establish mechanisms for continuous feedback and improvement, allowing the digital tool to evolve in response to user feedback and changing requirements, ensuring that the digital tool remains adaptable, scalable, and aligned with evolving health emergencies and technological advancements.

10. QUALIFICATION AND SELECTION CRITERIA FOR THE ORGANIZATION

The organization should have the following qualifications and/or resources in order to address effectively and timely the specific requirements of the proposed assignment:

- Demonstrated experience in developing digital health care solutions, preferably in low-resource settings.
- Expertise in conducting needs assessments and capacity building activities within the healthcare sector.
- A sound understanding of primary healthcare systems and emergency medical services in Albania and in low- resource-settings.

- Track record of successfully planning and managing within the budget, demonstrating ability to collaborate with diverse stakeholders effectively.
- Excellent written and verbal communication skills, particularly engaging with technology partners or users from different professional backgrounds.

11. PROPOSAL REQUIREMENTS

Interested consultants or companies are invited to submit a detailed proposal, including:

- **Technical Proposal:** A technical approach and methodology outlining: a) understanding of the assignment and its objectives; b) methodology and approach for designing, implementing and piloting the digital tool; c) technical expertise and experience relevant to emergency health services and digital solutions; d) strategy for capacity building and training of the healthcare staff; e) monitoring and evaluation approach; f) detailed work plan, with time schedule of activities (Gantt chart), specific milestones and key activities (completion of needs assessment, development of the digital tool, piloting, development of user manual and training materials, training sessions, final reporting), responsible team members for each phase of the project, g) team composition, roles and responsibilities; and h) risk management plan. The technical proposal should be clear, concise and structured, formatted in Arial font, size 11, and must be legible.
- **Expert profiles** (at least 2 expert CVs) showing previous experience and qualifications and specific expertise related to the assignment, using the provided format, should not exceed 4 pages (each).
- **Financial proposal:** A proposed budget, including a breakdown of costs per deliverable for expert fees, number of working days, daily allowances, accommodation expenses, travel expenses, logistic expenses, venue cost, etc. using the attached Financial Offer Form.

12. AWARD CRITERIA

The selection of the organization will be based on technical expertise, proposed approach, and cost-effectiveness.

The weighted average basis will be applied to evaluate the applicant. The award of the contract will be made to the organization whose offer has been evaluated and determined as:

- Responsive/compliant/acceptable, and
- Having received the highest score out of a pre-determined set of weighted technical and financial criteria specific to the solicitation, as stipulated below:

AC	Award Criteria	Weighting
	Technical Proposal	70%
AC 1	Approach and methodology for the assignment	40%
AC 2	Work Plan, including proposed activities	5%
AC 3	Quality control mechanisms and sustainability of the intervention	5%
AC 4	Qualification of the experts (CVs) <ol style="list-style-type: none"> 1. <u>Project manager:</u> <ul style="list-style-type: none"> • Qualifications: At minimum Master's degree in Public Health, Health Management, Project Management, Information Technology, or a related field. • Experience: At least 5 years of professional experience in managing large-scale health or digital health projects, particularly those involving primary health care or emergency health services. Proven 	20%



track record of leading multidisciplinary teams and coordinating with various stakeholders, including government entities, healthcare professionals, and technical experts. Experience in working on projects funded by international organizations or aligned with EU health standards is highly desirable.

- Skills: Strong project management skills, with certification, for example in PMP, PRINCE2, or equivalent being an advantage. Excellent leadership, communication, and organizational abilities. Ability to manage complex projects with tight deadlines and multiple deliverables. Familiarity with digital health technologies and understanding of health systems in low-resource settings.

2. Digital health specialist / health informatics expert:

- Qualifications: At minimum Master's in Health Informatics, Computer Science, Health Information Management, or a related discipline.
- Experience: At least 5 years of professional experience in developing and implementing digital health solutions, such as e-health, telemedicine, or health information systems. Experience in integrating digital tools with existing health systems and ensuring interoperability. Familiarity with data security and privacy regulations, including GDPR.
- Skills: Strong knowledge of health informatics standards (e.g., HL7® FHIR®). Proficiency in software development and IT project management within healthcare settings. Ability to analyze health data and provide solutions that improve service delivery and patient care.

3. IT specialist / software developer:

- Qualifications: At minimum Master's in Health Informatics, Computer Science, Health Information Management, Human-Computer Interaction, Cybersecurity, Information Technology, or a related discipline.
- Experience: At least 5 years of professional experience in digital health system development, data encryption, and cybersecurity protocol. Familiarity with data security and privacy regulations, including GDPR.
- Skills: Health informatics standards, strong software development skills, GDPR understanding, and ability to design accessible user interface.

4. M&E specialist:

- Qualifications: At minimum Master's degree in Public Health, Health Economics, Statistics, or related field.
- Experience: At least 5 years of professional experience in designing and implementing M&E frameworks for health projects.
- Skills: Strong analytical and data interpretation skills. Proficiency in M&E tools and techniques, as well as experience with data analysis software such as SPSS, STATA or R.

5. Training and capacity building specialist:

- Qualifications: At minimum Master's degree in Education, Public Health, Health Management, or a related field.
- Experience: At least 5 years of professional experience in developing and delivering training programs, especially in the health sector.



	<ul style="list-style-type: none"> • Skills: Excellent training facilitation skills, experience in curriculum development, and the ability to adapt training materials to different audiences. Strong communication skills and experience in using digital training tools. <p>6. <u>Community engagement specialist:</u></p> <ul style="list-style-type: none"> • Qualifications: At minimum Bachelor’s in Public Health, Social Sciences, Community Development, or related fields. • Experience: At least 5 years of professional experience in stakeholder engagement, community health programs, or public health projects. • Skills: Strong interpersonal and communication skills. Ability to work effectively with diverse communities and health care professionals. <p>7. <u>Administrative and financial officer:</u></p> <ul style="list-style-type: none"> • Qualifications: At minimum Bachelor’s degree in Finance, Business Administration, Accounting. • Experience: At least 5 years of professional experience in financial management, procurement, and project administration. • Skills: Proficient in financial software (e.g., QuickBooks, SAP) and experience with budgeting, financial reporting, and procurement procedures. 	
	Financial Proposal	30%
AC 5	Clarity and coherence of the financial proposal, realistic estimation of the costs for the training implementation	10%
AC 6	Financial score = lowest price / price of the tender being considered x 100	20%

13. ROLES AND RESPONSIBILITIES

In order to respond to the objectives of assignment, the selected organization is expected to closely work with the project “SOLIDAR” and other relevant actors.

The SOLIDAR project will provide necessary support, including access to relevant data, collaboration with stakeholders, and logistical assistance for training sessions, whenever possible.

- The **consulting organization (service provider)** will design, develop, and implement the digital solution. It will be responsible to conduct a needs assessment, develop the digital tool, implement a pilot phase, provide training, technical support, and report progress regularly. It will also ensure all deliverables meet quality standards by reviewing outputs, providing feedback, and integrating stakeholder input. In addition, it will monitor progress and evaluate project effectiveness by implementing an M&E framework, assessing the pilot phase, and recommending improvements.
- **SOLIDAR project management team** will oversee and manage the entire project. It will also provide strategic direction, coordinate activities, monitor progress, and review deliverables to ensure adherence to timelines and quality.
- **PHC personnel and health care professionals** will participate in training, piloting, and using the digital solution. They will be responsible for engaging in training, provide feedback during the pilot phase, and utilize the tool effectively.
- **Stakeholders and community representatives** will provide insights and feedback. They will participate in workshops and discussions, offering input to ensure the digital solution meets community needs.

All activities should be conducted in accordance with the requirements and timeline included in these Terms of Reference.



SOLIDAR

BASHKË NË EMERGENCAT SHËNDËTËSORE
