



REQUEST FOR PROPOSAL

Terms of Reference for a Service Provider for Covid -19 Vaccination Programme Social Mobilisation Activities

Right to Care is requesting proposals from Community Based Organizations (CBOs) for the social mobilisation of communities and individuals for a USAID funded COVID-19 vaccination programme. The vaccination programme is being rolled out across all nine (9) provinces of South Africa and intends to reach 70% of South Africans who are eligible for COVID-19 vaccination.

Proposals must offer a full range of activities for community engagement and social mobilisation as outlined in the DOH National Social Mobilization and Community Engagement Package. RTC will give preference to CBOs that are already well established, have district and ward level presence, and have strong local knowledge. areas. To qualify, CBOs must have local offices in the specified districts and letters of support from the District Department of Health (DOH). Current or previous experience of the specified work in the identified district will be an added advantage.

It is anticipated that work will start on the 1 June 2022 and end on the 31st of December 2022.

Funding period: 7 months (1 June to 31 December 2022) with the possibility of extension to 12 months dependant on funding availability

Funding Amount: Not disclosed

- **Aim:** To address vaccine hesitancy, mobilize and link eligible individuals to COVID-19 vaccination provided by community mobile sites and static health facilities
- **Objective:** Use ward-based approach, peer counselling and localized communications in mobilizing targeted, hard to reach and rural populations at targeted public sites using one or more of the following community engagement and social mobilization modalities:
 - a. Effective liaison with stakeholders and community entry strategies
 - b. Participatory community dialogues, events and activations
 - c. Use trained and vaccinated Social Mobilizers/Peer Counsellors for community engagement and mobilization
 - d. Use localized communications to support social mobilization activities to advertise sites and build community trust around vaccines
 - e. Amplify national COVID-19 messages and campaigns with technical assistance from RTC and District DOH

- f. Implement performance-based program management by gender, age and geography using Electronic Vaccination Data System (EVDS) and Geolocation Information System (GIS) generated data
- g. Track and monitor ward eligible population COVID-19 saturation
- h. Reach vulnerable and hard to reach populations such as youth, undocumented persons and PLHIV community engagement strategies

The applicant must have demonstrated the ability to conduct the following activities:

- i. Strong relations with stakeholders at district and ward levels and community leaders including traditional leaders and faith leaders as well as with the community in general
- ii. Ability to recruit, train, manage and supervise Social Mobilizers from targeted wards
- iii. Facilitation of community entry and exit dialogues on COVID-19 behavioural prevention and vaccination at ward level
- iv. Ability to implement health-related social mobilization and linking individuals at community level to health services onsite and offsite
- v. Ability to use localized communications to market sites COVID-19 vaccination and build trust around COVID-19 vaccines at community level
- vi. Capability to provide onsite and offsite individualized referrals and linkage for COVID-19 vaccination
- vii. Mobilize and link hard-to-reach and vulnerable population to COVID-19 vaccination
- viii. Ability to conduct a bottom-up social listening response strategy
- ix. Capability to use real time data for performance management, reporting, monitor saturation and develop targeted remedial plans

Deliverables

- i. Number of targeted individuals mobilised reached by ward, age and gender
- ii. 70% of eligible population for COVID-19 vaccination by ward reached
- iii. Monitor COVID-19 vaccination saturation vaccination by ward, age and gender
- iv. Trained Social Mobilisers on Social Mobilisation, Localised Communications, Data Capturing, M&E, Quality Improvement and Supervision
- v. Stakeholders mapping matrix by ward, sub district and district
- vi. Participation in sub district and district stakeholder liaison meetings
- vii. Community leaders engagement meetings, community and school dialogues, community activations and localised COVID-19 vaccination campaigns
- viii. Community radio activities, site adverts in local newspapers, COVID-19 IEC materials distribution

The proposal should contain a single response with 1) a maximum 3-page Technical narrative and 2) a Financial proposal.

The Technical narrative must have the following sections:

- Organizational profile

- Relevant experience and capabilities.
- Proposed approach
- Work plan

The Financial proposal should provide costs related to the following:

- A detailed proposed budget in excel, including all envisaged costs to implement the proposed approach over the initially envisaged 8-month period including:
 - Personnel cost
 - Travel and Transport
Equipment & Supplies
 - Other Direct costs
 - Overhead Costs (if applicable)
- An associated cost narrative

Proposals must be signed by the applicant and/or a person or persons duly authorized to do so on behalf of the organization.

Applicants will be evaluated based the criteria listed below:

1. Relevant Experience implementing health-related social mobilization services 30%
2. Localization and established relationship with province and/or district health authorities of interest 20%
3. Technical approach 20%
4. Staffing and management 10%
5. Cost efficiencies 20%

All applications are to be submitted to Right to Care procurement at email procurement@righttocare.org no later than 5pm on 26 May 2022.

Questions may be directed to procurement@righttocare.org until 17 May 2022 at 12h00.

Successful applicants will be informed by 31 May 2022.

Implementation period: 1 June to 31 December 2022.