



Strengthening school and community capacity to promote adolescent mental health and well-being in Czechia under the EC funded project 'Addressing Mental Health Challenges in EU Member States, Norway and Iceland'

Request for Proposals (RFP)

Bid Reference

EURO/ACO/CZH/004

Country/Unit Name

Czechia, Country Office

Closing Date:

[14 September 2025]



The World Health Organization (WHO) is seeking offers for Strengthening school and community capacity to promote adolescent mental health and well-being in Czechia under the EC funded project 'Addressing Mental Health Challenges in EU Member States, Norway and Iceland'.

Your ☒ Institution is invited to submit a proposal for the services in response to this Request for Proposals (RFP).

WHO is a public international organization, consisting of 194 Member States, and a Specialized Agency of the United Nations with the mandate to act as the directing and coordinating authority on international health work. As such, WHO is dependent on the budgetary and extra-budgetary contributions it receives for the implementation of its activities. Bidders are, therefore, requested to propose the best and most cost-effective solution to meet WHO requirements, while ensuring a high level of service.

1. Requirements

WHO requires the successful bidder, to carry out capacity building activities in schools to promote adolescent mental health and well-being by strengthening the consistency in quality and the scalability of mental health promotion and prevention activities delivered in schools, increase connection between schools and community based psychosocial supports, and increase the confidence and competence of teachers to protect and promote the mental health of students. The work should directly support the Ministry of Health of the Czech Republic in close collaboration with the Ministry of Youth, Sport and Culture. .

See detailed Terms of Reference in Annex 1 for complete information.

The successful bidder shall be a ☐ for profit / ☒ not for profit institution operating in the field of mental health. with proven expertise in coordinating and implementing mental health promotion and prevention activities towards the youth, particularly in schools and in contexts involving collaboration between schools and community-based services. WHO Collaborating Centres are not eligible to submit applications under this Call for Proposals..

The successful bidder is expected to demonstrate experience and list relevant projects as follows:

Mandatory experience:

- A minimum of three years of relevant experience is required (longer experience is an advantage), with a proven track record of successfully managing collaborative projects on national and regional levels involving multiple stakeholders, including effective collaboration with national and local health/social authorities.
- Proficiency in proposal development, budget management, and conducting assessments of service delivery
- The project team members should have qualifications in psychology, psychiatry, social work, mental health, or related fields
- Strong analytical, cultural competence, and communication skills within the team
- Compliance with national accounting, procedural standards and regulations.
- Compliance with the United Nations' Prevention of Sexual Exploitation, Abuse, and Harassment (PSEAH) requirements
- The organization must agree to undergo an external audit if necessary to ensure adherence to these standards and other operational protocols as well as capacity assessment of the implementing partner by the external party before the start of the project

Desirable experience:

- Previous collaboration with the Ministry of Health of the Czech Republic and the Ministry of Education, Youth and Sports

The bidder is expected to follow the instructions set forth below in the submission of their proposal to WHO.



2. Proposal

The proposal and all correspondence and documents relating thereto shall be prepared and submitted in the English language.

The proposal shall be concisely presented and structured to include the following information:

- Confidentiality Undertaking (*please complete Annex 2*)
- Technical Proposal in English, Word format, based on the provided template (*Annex 5*)
- Financial proposal in English, in Excel format, in Czech Korunas (CZK), based on the provided template (*Annex 5*).
- Supporting Documents (might be in Czech) proving that the organization meets the eligibility criteria (e.g., registration documents, proof of past experience, technical qualifications of the experts, proficiency of the core staff, compliance with the PSEAH and economical national and UN standards in the status of the organization or any other SoPs).

Information which the bidder considers confidential, if any, should be clearly marked as such.

3. Instructions to Bidders

The bidder must follow the instructions set forth in this RFP in the submission of their proposal to WHO.

A prospective bidder requiring clarification on technical, contractual or commercial matters may notify WHO via email at the following address no later than **8 September 2025**:

Email for submissions of all queries: eurowhocz@who.int and klimkovav@who.int
(*use Bid reference in subject line*)

A consolidated document of WHO's responses to all questions (including an explanation of the query but without identifying the source of enquiry) will be sent to all prospective bidders who have received the RFP.

From the date of issue of this RFP to the final selection, contact with WHO officials concerning the RFP process shall not be permitted, other than through the submission of queries and/or through a possible presentation or meeting called for by WHO, in accordance with the terms of this RFP.

The bidder shall submit, in writing, the complete proposal to WHO, no later than **14 September 2025 at 18:00 hours CET time** ("the closing date"), by email at the following email address:

eurowhocz@who.int
(*use Bid reference in subject line*)

To be complete, a proposal shall include:

- A technical proposal, as described under part 2 above;
- A financial proposal, as described under part 2 above;
- Annexes 2 & 3, duly completed and signed by a person or persons duly authorized to represent the bidder, to submit a proposal and to bind the bidder to the terms of this RFP.

Each proposal shall be marked Ref: EURO/ACO/CZH/004 .

WHO may, at its own discretion, extend the closing date for the submission of proposals by notifying all bidders thereof in writing before the above closing date and time.



Any proposal received by WHO after the closing date for submission of proposals may be rejected. Bidders are therefore advised to ensure that they have taken all steps to submit their proposals in advance of the above closing date and time.

The offer outlined in the proposal must be valid for a minimum period of 90 calendar days after the closing date. A proposal valid for a shorter period may be rejected by WHO. In exceptional circumstances, WHO may solicit the bidder's consent to an extension of the period of validity. The request and the responses thereto shall be made in writing. Any bidder granting such an extension will not, however, be permitted to otherwise modify its proposal.

The bidder may withdraw its proposal any time after the proposal's submission and before the above mentioned closing date, provided that written notice of the withdrawal is received by WHO at the email address indicated above, before the closing date for submission of proposals.

No proposal may be modified after its submission, unless WHO has issued an amendment to the RFP allowing such modifications.

No proposal may be withdrawn in the interval between the closing date and the expiration of the period of proposal validity specified by the bidder in the proposal (subject always to the minimum period of validity referred to above).

WHO may, at any time before the closing date, for any reason, whether on its own initiative or in response to a clarification requested by a (prospective) bidder, modify the RFP by written amendment. Amendments could, *inter alia*, include modification of the project scope or requirements, the project timeline expectations and/or extension of the closing date for submission.

All prospective bidders that have received the RFP will be notified in writing of all amendments to the RFP and will, where applicable, be invited to amend their proposal accordingly.

All bidders must adhere to the UN Supplier Code of Conduct, which is available on the WHO procurement website at <http://www.who.int/about/finances-accountability/procurement/en/>.

4. Evaluation

Before conducting the technical and financial evaluation of the proposals received, WHO will perform a preliminary examination of these proposals to determine whether they are complete, whether any computational errors have been made, whether the documents have been properly signed, and whether the proposals are generally in order. Proposals which are not in order as aforesaid may be rejected.

The evaluation panel will evaluate the technical merits of all the proposals which have passed the preliminary examination of proposals based on the following weighting:

Technical Weighting:	70 % of total evaluation
Financial Weighting:	30% of total evaluation

The technical evaluation of the proposals will include:

Alignment with the objectives and focus of the call	30
The practicality of the proposed activities within the given timeframe and budget.	20

Potential for long-term impact and integration into the national health system	20
Evidence-based approaches to mental health promotion and prevention service provision towards the youth, particularly in schools	20
Efficient use of resources to achieve maximum impact.	10
TOTAL	100

The scoring scale per criteria was defined as follows:

Criteria evaluated as:	Based on the following supporting evidence:	Corresponds to the score of:
Excellent	Excellent evidence of ability to exceed requirements	100%
Good	Good evidence of ability to exceed requirements	90%
Satisfactory	Satisfactory evidence of ability to support requirements	70%
Poor	Marginally acceptable or weak evidence of ability to support requirements	40%
Very Poor	Lack of evidence to demonstrate ability to comply with requirements	10%
No submission	Information has not been submitted or is unacceptable	0%

The number of points which can be obtained for each evaluation criterion is specified above and indicates the relative significance or weight of the item in the overall evaluation process.

A minimum of [60] points is required to pass the technical evaluation.

The final evaluation will combine the weighted scores of both technical and financial proposals to come up with a cumulative total score.

Please note that WHO is not bound to select any bidder and may reject all proposals. Furthermore, since a contract would be awarded in respect of the proposal which is considered most responsive to the needs of the project concerned, due consideration being given to WHO's general principles, including the principle of best value for money, WHO does not bind itself in any way to select the bidder offering the lowest price.

WHO may, at its discretion, ask any bidder for clarification of any part of its proposal. The request for clarification and the response shall be in writing. No change in price or substance of the proposal shall be sought, offered or permitted during this exchange.

NOTE: Individual contact between WHO and bidders is expressly prohibited both before and after the closing date for submission of proposals.

5. Award

WHO reserves the right to:

- Award the contract to a bidder of its choice, even if its bid is not the lowest;
- Award separate contracts for parts of the work, components or items, to one or more bidders of its choice, even if their bids are not the lowest;
- Accept or reject any proposal, and to annul the solicitation process and reject all proposals at any time prior to award of contract, without thereby incurring any liability to the affected bidder or bidders and without any obligation to inform the affected bidder or bidders of the grounds for WHO's action;
- Award the contract on the basis of the Organization's particular objectives to a bidder whose proposal is considered to be the most responsive to the needs of the Organization and the activity concerned;



- e) Not award any contract at all.

WHO has the right to eliminate bids for technical or other reasons throughout the evaluation/selection process. WHO shall not in any way be obliged to reveal, or discuss with any bidder, how a proposal was assessed, or to provide any other information relating to the evaluation/selection process or to state the reasons for elimination to any bidder.

NOTE: WHO is acting in good faith by issuing this RFP. However, this document does not oblige WHO to contract for the performance of any work, nor for the supply of any products or services.

At any time during the evaluation/selection process, WHO reserves the right to modify the scope of the work, services and/or goods called for under this RFP. WHO shall notify the change to only those bidders who have not been officially eliminated due to technical reasons at that point in time.

WHO reserves the right at the time of award of contract to extend, reduce or otherwise revise the scope of the work, services and/or goods called for under this RFP without any change in the base price or other terms and conditions offered by the selected bidder.

WHO also reserves the right to enter into negotiations with one or more bidders of its choice, including but not limited to negotiation of the terms of the proposal(s), the price quoted in such proposal(s) and/or the deletion of certain parts of the work, components or items called for under this RFP.

Within 30 days of receipt of the contract between WHO and the successful bidder (the "Contract"), the successful bidder shall sign and date the Contract and return it to WHO according to the instructions provided at that time. If the bidder does not accept the Contract terms without changes, then WHO has the right not to proceed with the selected bidder and instead contract with another bidder of its choice. The Contract will include, without limitation, the provisions set forth in Annex 3.

Any and all of the contractor's (general and/or special) conditions of contract are hereby explicitly excluded from the Contract, i.e., regardless of whether such conditions are included in the Contractor's offer, or printed or referred to on the Contractor's letterhead, invoices and/or other material, documentation or communications.

We look forward to receiving your response to this RFP.

Yours sincerely,
WHO Country Office in the Czech Republic

**Annexes**

1. Detailed Terms of Reference
2. Confidentiality Undertaking
3. Vendor Information Form
4. Contractual provisions
5. Templates of the project proposal and budget breakdown



Annex 1: Detailed Terms of Reference

Strengthening school and community capacity to promote adolescent mental health and well-being in Czechia under the EC funded project 'Addressing mental health challenges in EU Member States, Norway and Iceland'.

Background

The World Health Organization (WHO) was established in 1948 as a specialized agency of the United Nations. The objective of WHO (www.who.int) is the attainment by all peoples of the highest possible level of health. "health," as defined in the WHO constitution, is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity. WHO's main function is to act as the directing and coordinating authority on international health work.

Through its Country Office in the Czech Republic, WHO provides various forms of support to improve the national health system and address public health challenges. This includes technical assistance, capacity building, policy development, health system strengthening, disease prevention and control, emergency response and preparedness, health data, and research.

Context

The European region faces a significant mental health crisis, with approximately 143 million people across the region—about one in six individuals – living with a mental health condition. yet, mental health systems remain significantly underfunded, receiving on average 3.6% of healthcare budgets. This underinvestment contributes to widespread treatment gaps, delayed care and unmet needs. amongst young people, approximately 20% of 15–19-year-olds are living with a mental health condition, with young men and women equally impacted, and suicide is now the leading cause of death for 15–29-year-olds. Data from the most recent health behaviour in School-aged Children (HBSC) survey suggest a trend of worsening mental health, with more than one in four adolescents reporting frequent feelings of sadness, and notable increases in anxiety, depression and self-harm. These conditions emerging during adolescence often persist into adulthood, affecting quality of life, workforce participation and social connectedness.

The economic burden of poor mental health is substantial, with mental health issues costing European economies over 4% of GDP annually. addressing mental health challenges requires not only strengthening clinical services for diagnosis and treatment but also developing effective policy and systems for mental health promotion, early intervention and prevention across all sectors of society.

Responding to this urgent need, the WHO Regional Office for Europe, in collaboration with the European Commission, has launched a four-year European Union-funded initiative, "Addressing mental health challenges in the European Union, Iceland and Norway." The project aims to strengthen mental health systems by providing tailored support and capacity-building in critical areas including leadership, data collection, rights-based service design, integration of mental health into primary care, and system-wide coordination. Project activities include the development of country-specific training programmes, adaptation of WHO tools, and policy engagement to facilitate national priorities. A cornerstone of the initiative is the conducting of structured policy dialogues across all 27 EU member states, Iceland and Norway, aimed at identifying member state needs and priorities, and aligning project activities with local contexts, and opportunities.

Mental health capacity building in Czechia

Under the project, a series of policy dialogues were conducted in 2024-25 with the Ministry of Health of the Czech Republic, which have highlighted key national priorities for mental health. These discussions identified concerns about the deteriorating mental health of young people, with 15% of young people aged 15-19 years old living with a mental health condition, and suicide being the leading cause of death in this age group. Concerns were also raised regarding limitations in the skills and capacities of professionals working with youth to effectively meet their mental health needs. The dialogues explored settings with both interest and potential for stronger mental health support—with a particular focus on building the capacity of schools and teachers to respond to the mental health needs of adolescent students. a recurring consideration raised was the need for a coordinated, cross-sectoral approach that fosters collaboration between the health, education and social welfare sectors to deliver more comprehensive and sustainable support for young people.



Based on these identified needs and priorities of the Ministry of Health of the Czech Republic to build capacity to support adolescent mental health, and the identification of schools as a priority setting for capacity-building in collaboration with health and other key sectors the mental health flagship proposes the following activities which could be supported by who europe and implemented between October 2025 and October 2026.

Objectives

This call for proposals aims to build the capacity of schools to promote adolescent mental health and well-being by strengthening the consistency in quality and the scalability of mental health promotion and prevention activities delivered in schools, increase connection between schools and community based psychosocial supports, and increase the confidence and competence of teachers to protect and promote the mental health of students. The work should directly support the Ministry of Health of the Czech Republic in close collaboration with the Ministry of Education, Youth and Sports.

Project governance

A multi-sectoral Steering Group (SG) will be established by the Ministry of Health to support the project methodically and strategically, particularly to direct the project-related and subsequent follow-up activities to ensure the project's impact and long-term sustainability of the underlying activities. An essential role of the SG will be to determine the specificities of the mental health initiative to be developed and implemented (based on gaps, priorities, and opportunities), and to identify and advocate for policy changes necessary to support the long-term provision of mental health promotion and prevention activities in schools – both on project and systemic levels. The work of the SG should also facilitate the scale-up of the project pilot into a national, sustainable solution.

Other tasks/responsibilities may include:

Guide the strategic direction and implementation of the project, including decisions related to the specific objectives, target population and pilot sites;

Review draft deliverables including workplans, monitoring and evaluation framework and other resources; facilitate intersectoral coordination and alignment among ministries, schools, community organizations, youth and parent representatives;

Monitor overall project progress and address emerging challenges; and

Inform necessary adaptations to the training and promotion packages to improve usability, scalability and sustainability.

A key responsibility of the supplier selected through this Call for Proposals will be to support the organization and coordination of regular meetings of the multi-sectoral SG, in close collaboration with the Ministry of Health (MoH) and the WHO Country Office in Czechia. This will include preparing meeting agendas, compiling and distributing relevant documents (such as analyses and progress reports), and presenting key project findings to inform discussion and guide next steps. The supplier will also be expected to help maintain active engagement of all stakeholders. In doing so, the provider will play a central role in ensuring that the SG functions effectively as a platform for cross-sector collaboration, dialogue, and collective decision-making throughout the duration of the project.

Project deliverables:

Deliverable 1: Regular coordination and advisory meetings of the Steering Group

Ensure regular coordination and advisory meetings of the SG, convened by the Ministry of Health. Coordination meetings should be held at least once in three months, with the option of more frequent sessions as needed during critical phases of the project (a maximum of one meeting per month is recommended).

Output:

Documented minutes and attendance records from each SG meeting;



Summary of decisions taken, action points, and follow-up items (including the distribution of the meeting agenda and relevant supporting documents to SG members ahead of the meeting);

Regular documentation of monitoring and evaluation planning and review discussions, including changes made to tools or processes based on stakeholder feedback.

Deliverable 2: Undertaking of situation analysis/mapping exercise

Output: In collaboration with the SG and the WHO Czechia Office, and under the technical oversight of WHO Europe, conduct an analytical mapping exercise utilizing relevant components of the WHO Multisectoral Child and Adolescent Mental Health mapping tool and aiming to understand the resources and structure of the service system for youth mental health, needs of various stakeholders, gaps and opportunities, and to support refinement of the project objectives and activities.

While the exercise under Deliverable 2 does not need to cover all components of the mapping tool, it should aim to answer the following key questions:

What are the existing programmes and activities related to the provision of mental health promotion and prevention activities delivered in schools?

To what extent have the programmes and activities been implemented, with what consistency across the country, and what are their impacts and limitations—for example, have they been evaluated and how confident are school staff in delivering them?

Outputs:

An analytical report outlining the findings of the mapping exercise including the resources and structure of the service system for youth mental health, needs of various stakeholders, existing programmes and activities and their impact, gaps and opportunities.

Presentation of the mapping report to the SG.

Deliverable 3: Development of an evidence-informed school mental health package.

In collaboration with the SG and the WHO Czechia Office, and under the technical oversight of WHO Europe, adapt the most suitable evidence-informed school mental health promotion package to the Czech school context, or further develop one already in use in Czech schools that was identified as most effective under Deliverable 2.

The package developed in Deliverable 3 should build on the needs and opportunities identified through the mapping exercise and discussions with the SG, and be evidence-informed, drawing on relevant WHO guidelines, resources, and the EU Best Practice Portal.

Tools to consider as relevant include:

Helping Adolescents Thrive (HAT) guideline and toolkit

mhGAP Child and Adolescent Mental Health module

WHO Europe Quality Standards for Child and Youth Mental Health Services - particularly relating to youth engagement and family involvement

Scalable brief psychological interventions such as: Problem Management Plus (PM+), Self-Help Plus (SH+), Early Adolescent Skills for Emotions (EASE)

[EU Best Practice Portal](#)



The tools listed above represent effective, evidence-based resources and guidance in the field. It will be important to identify what is already working well in Czech schools and build on this in alignment with who resources and the evidence base more broadly. The final package must be available in Czech.

Output:

Concept note/proposal for evidence-informed schools mental health promotion package.

Presentation of a draft package to the SG.

Deliverable 4: Develop a training package and associated implementation resources required to implement the developed mental health promotion package

In collaboration with the SG and the WHO Czechia Office, and under the technical oversight of WHO Europe, develop a training package and compendium of resources required to implement the school's mental health package. the training package should draw on relevant who tools/resources, and incorporate evidence-informed training and implementation strategies with opportunities for interactive learning and monitoring and evaluation.

Output:

A training and implementation resource package in Czech

Presentation of the training package to the SG

Deliverable 5: Delivery of pilot implementation

In collaboration with the SG, the WHO Czechia Office, and under the technical oversight of WHO Europe, undertake a pilot implementation of the developed school mental health package in agreed pilot schools or locations. This should include development of a pilot evaluation framework to support ongoing learning, adaptation, and decision-making. It will focus on assessing implementation outcomes including the feasibility, acceptability and scalability of the package and potential implementation barriers and facilitators, and inform adjustments to support future scale-up.

Output:

Proposal for pilot implementation including agreed schools, timelines, training plan

Development of pilot evaluation framework

Delivery of training and implementation support in pilot schools

While the details of the pilot including scope and setting will largely depend on the results of the mapping exercise, outcomes of the previous deliverables and a subsequent agreement reached in the SG, a candidate with a clearer proposition of schools and regions, as well as an overall more detailed approach to the implementation of this project, will be prioritized in this Call for Proposals.

Deliverable 6: Data collection and evaluation of pilot activities

The implementing partner is expected to outline the scope and approach of the evaluation in their proposal, including whether it will be qualitative, quantitative, or mixed-methods, along with potentially relevant indicators, data collection methods, and approaches to analysis and evaluation.

Output:

Evaluation report with recommendations for future scale-up



Presentation slide deck

Proposal duration and budget

Duration: 15 october 2025 – 15 october 2026 (12 months).

Maximum budget: the maximum amount for the proposal should not exceed CZK 1,075 000. The budget should be provided in Czech Korunas (CZK).



Annex 2: Confidentiality Undertaking

1. The World Health Organization (WHO), acting through its Department of WHO Country Office in the Czech Republic, has access to certain information relating to Strengthening school and community capacity to promote adolescent mental health and well-being in Czechia under the EC funded project 'Addressing Mental Health Challenges in EU Member States, Norway and Iceland' which it considers to be proprietary to itself or to entities collaborating with it (hereinafter referred to as "the Information").
2. WHO is willing to provide the Information to the Undersigned for the purpose of allowing the Undersigned to prepare a response to the Request for Proposal (RFP) for "Strengthening school and community capacity to promote adolescent mental health and well-being in Czechia under the EC funded project 'Addressing Mental Health Challenges in EU Member States, Norway and Iceland'" ("the Purpose"), provided that the Undersigned undertakes to treat the Information as confidential and proprietary, to use the Information only for the aforesaid Purpose and to disclose it only to persons who have a need to know for the Purpose and are bound by like obligations of confidentiality and non-use as are contained in this Undertaking.
3. The Undersigned undertakes to regard the Information as confidential and proprietary to WHO or parties collaborating with WHO, and agrees to take all reasonable measures to ensure that the Information is not used, disclosed or copied, in whole or in part, other than as provided in paragraph 2 above, except that the Undersigned shall not be bound by any such obligations if the Undersigned is clearly able to demonstrate that the Information:
 - a) was known to the Undersigned prior to any disclosure by WHO to the Undersigned (as evidenced by written records or other competent proof);
 - b) was in the public domain at the time of disclosure by or for WHO to the Undersigned;
 - c) becomes part of the public domain through no fault of the Undersigned; or
 - d) becomes available to the Undersigned from a third party not in breach of any legal obligations of confidentiality (as evidenced by written records or other competent proof).
4. The Undersigned further undertakes not to use the Information for any benefit, gain or advantage, including but not limited to trading or having others trading in securities on the Undersigned's behalf, giving trading advice or providing Information to third parties for trade in securities.
5. At WHO's request, the Undersigned shall promptly return any and all copies of the Information to WHO.
6. The obligations of the Undersigned shall be of indefinite duration and shall not cease on termination of the above mentioned RFP process.
7. Any dispute arising from or relating to this Undertaking, including its validity, interpretation, or application shall, unless amicably settled, be subject to conciliation. In the event of the dispute is not resolved by conciliation within thirty (30) days, the dispute shall be settled by arbitration. The arbitration shall be conducted in accordance with the modalities to be agreed upon by the Undersigned and WHO or, in the absence of agreement within thirty (30) days of written communication of the intent to commence arbitration, with the rules of arbitration of the International Chamber of Commerce. The Undersigned and WHO shall accept the arbitral award as final.
8. Nothing in this Undertaking, and no disclosure of Information to the Undersigned pursuant to its terms, shall constitute, or be deemed to constitute, a waiver of any of the privileges and immunities enjoyed by WHO under national or international law, or as submitting WHO to any national court jurisdiction.

Acknowledged and Agreed:

Entity Name:
Mailing Address:
Name and Title of duly authorized representative:
Signature:
Date:



**Annex 3: Vendor Information Form**

Company Information to be provided by the Vendor submitting the proposal			
UNGM Vendor ID Number: <i>If available – Refer to WHO website for registration process*</i>			
Legal Company Name: <i>(Not trade name or DBA name)</i>			
Company Contact:			
Address:			
City:		State:	
Country:		Zip:	
Telephone Number:		Fax Number:	
Email Address:		Company Website:	
Corporate information:			
Company mission statement			
Service commitment to customers and measurements used <i>(if available)</i>			
Organization structure (include description of those parts of your organization that would be involved in the performance of the work)			
Relevant experience (how could your expertise contribute to WHO's needs for the purpose of this RFP) – <i>Please attach reference and contact details</i>			
Staffing information			

* <http://www.who.int/about/finances-accountability/procurement/en/>

Annex 4: Contractual Provisions

Within 30 days of receipt of the contract between WHO and the successful bidder (the “Contract”), the successful bidder shall sign and date the Contract and return it to WHO according to the instructions provided at that time. If the bidder does not accept the Contract terms without changes, then WHO has the right not to proceed with the selected bidder and instead contract with another bidder of its choice. The Contract will include, without limitation, the provisions set forth below (with the successful bidder referred to below as the “Contractor”):

1. **Compliance with WHO Codes and Policies.** By entering into the Contract, the Contractor acknowledges that it has read, and hereby accepts and agrees to comply with, the WHO Policies (as defined below). In connection with the foregoing, the Contractor shall take appropriate measures to prevent and respond to any violations of the standards of conduct, as described in the WHO Policies, by its employees and any other natural or legal persons engaged or otherwise utilized to perform any services under the Contract.

Without limiting the foregoing, the Contractor shall promptly report to WHO, in accordance with the terms of the applicable WHO Policies, any actual or suspected violations of any WHO Policies of which the Contractor becomes aware.

For purposes of the Contract, the term “WHO Policies” means collectively: (i) the WHO Code of Ethics and Professional Conduct; (ii) the WHO Policy Directive on Protection from sexual exploitation and sexual abuse (SEA); (iii) the WHO Policy on Preventing and Addressing Abusive Conduct; (iv) the WHO Code of Conduct for responsible Research; (v) the WHO Policy on Whistleblowing and Protection Against Retaliation; (vi) the WHO Policy on Prevention, Detection and Response to Fraud and Corruption, and (vii) the UN Supplier Code of Conduct, in each case, as amended from time to time and which are publicly available on the WHO website at the following links: <http://www.who.int/about/finances-accountability/procurement/en/> for the UN Supplier Code of Conduct and at <http://www.who.int/about/ethics/en/> for the other WHO Policies.

2. **Zero tolerance for sexual exploitation and abuse, sexual harassment and other types of abusive conduct.** WHO has zero tolerance towards sexual exploitation and abuse, sexual harassment and other types of abusive conduct. In this regard, and without limiting any other provisions contained herein:

(i) each legal entity Contractor warrants that it will: (i) take all reasonable and appropriate measures to prevent sexual exploitation or abuse as described in the WHO Policy Directive on Protection from sexual exploitation and sexual abuse (SEA), and/or sexual harassment and other types of abusive conduct as described in the WHO Policy on Preventing and Addressing Abusive Conduct by any of its employees and any other natural or legal persons engaged or otherwise utilized to perform the work under the Contract; and (ii) promptly report to WHO and respond to, in accordance with the terms of the respective Policies, any actual or suspected violations of either Policy of which the Contractor becomes aware; and

(ii) each individual Contractor warrants that he/she will (i) not engage in any conduct that would constitute sexual exploitation or abuse as described in the WHO Policy Directive on Protection from sexual exploitation and sexual abuse (SEA), and/or sexual harassment and other types of abusive conduct as described in the WHO Policy on Preventing and Addressing Abusive Conduct. Without limiting the foregoing, the individual Contractor shall promptly report to WHO, in accordance with the terms of the respective Policies, any actual or suspected violations of either Policy of which the individual Contractor becomes aware.

3. **Tobacco/Arms Related Disclosure Statement.** The Contractor may be required to disclose relationships it may have with the tobacco and/or arms industry through completion of the WHO Tobacco/Arms Disclosure Statement. In the event WHO requires completion of this Statement, the Contractor undertakes not

to permit work on the Contract to commence, until WHO has assessed the disclosed information and confirmed to the Contractor in writing that the work can commence.

4. **Anti-Terrorism and UN Sanctions; Fraud and Corruption.** The Contractor warrants for the entire duration of the Contract that:

- i. it is not and shall not be involved in, or associated with, any person or entity associated with terrorism, as designated by any UN Security Council sanctions regime, that it shall not make any payment or provide any other support to any such person or entity and that it shall not enter into any employment or other contractual relationship with any such person or entity;
- ii. it shall not engage in any fraudulent or corrupt practices, as defined in the WHO Policy on Prevention, Detection and Response to Fraud and Corruption, in connection with the execution of the Contract;
- iii. it shall take all necessary measures to prevent the financing of terrorism and/or any fraudulent or corrupt practices as referred to above in connection with the execution of the Contract; and
- iv. it shall promptly report to WHO, through the WHO Integrity Hotline or directly to the WHO Office of Internal Oversight Services (IOS), any credible allegations of actual or suspected fraudulent or corrupt practices, as defined in the WHO Policy on Prevention, Detection and Response to Fraud and Corruption of which the Contractor becomes aware and respond to such allegations in an appropriate and timely manner in accordance with its respective rules, regulations, policies and procedures. Furthermore, the Contractor agrees to cooperate with WHO and/or parties authorized by WHO in relation to the response. Relevant information on the nature of any credible allegations of such actual or suspected violations, as well as the details of the intended response and the outcome of any such response, should be communicated and coordinated with WHO, with the understanding that, subject to the terms of the WHO Policy on Prevention, Detection and Response to Fraud and Corruption, confidentiality and the due process rights of those involved will be respected.

In the event that any resources, assets and/or funds provided to or acquired by the Contractor under the Contract are found to have been used by the Contractor, its employees or any other natural or legal persons engaged or otherwise utilized to perform any work under the Contract, to finance, support or conduct any terrorist activity or any fraudulent or corrupt practices, the Contractor shall promptly reimburse and indemnify WHO for such resources, assets and/or funds (including any liability arising from such use).

5. **Breach of essential terms.** The Contractor acknowledges and agrees that each of the provisions of paragraphs 1, 2, 3 and 4 above constitutes an essential term of the Contract, and that in case of breach of any of these provisions, WHO may, in its sole discretion, decide to:

- i. terminate the Contract, and/or any other contract concluded by WHO with the Contractor, immediately upon written notice to the Contractor, without any liability for termination charges or any other liability of any kind; and/or
- ii. exclude the Contractor from participating in any ongoing or future tenders and/or entering into any future contractual or collaborative relationships with WHO.

WHO shall be entitled to report any violation of such provisions to WHO's governing bodies, other UN agencies, and/or donors.

6. **Use of WHO Name and Emblem.** Without WHO's prior written approval, the Contractor shall not, in any statement or material of an advertising or promotional nature, refer to the Contract or the Contractor's relationship with WHO, or otherwise use the name (or any abbreviation thereof) and/or emblem of the World Health Organization.

7. **Assurances regarding procurement.** If the option for payment of a maximum amount applies, to the extent the Contractor is required to purchase any goods and/or services in connection with its performance of the Contract, the Contractor shall ensure that such goods and/or services shall be procured in accordance with the principle of best value for money. "Best value for money" means the responsive offer that is the best combination of technical specifications, quality and price.

8. **Audit and Investigations.** WHO may request a financial and operational review or audit of the work performed under the Contract, to be conducted by WHO and/or parties authorized by WHO, and the Contractor undertakes to facilitate such review or audit. This review or audit may be carried out at any time during the implementation of the work performed under the Contract, or within five years of completion of the work. In order to facilitate such financial and operational review or audit, the Contractor shall keep accurate and systematic accounts and records in respect of the work performed under the Contract. Similarly, WHO may initiate an investigation into credible allegations of fraud and corruption and other forms of misconduct based on information received in accordance with its respective policies, procedures and rules.

In this context, the Contractor shall make available, without restriction, to WHO and/or parties authorized by WHO:

- i. the Contractor's books, records and systems (including all relevant financial and operational information) relating to the Contract; and
- ii. reasonable access to the Contractor's premises and personnel.

The Contractor shall provide satisfactory explanations to all queries arising in connection with the aforementioned audit and access rights.

WHO may request the Contractor to provide complementary information about the work performed under the Contract that is reasonably available, including the findings and results of an audit (internal or external) conducted by the Contractor and related to the work performed under the Contract.

9. **Publication of Contract.** Subject to considerations of confidentiality, WHO may acknowledge the existence of the Contract to the public and publish and/or otherwise publicly disclose the Contractor's name and country of incorporation, general information with respect to the work described herein and the Contract value. Such disclosure will be made in accordance with WHO's Information Disclosure Policy and shall be consistent with the terms of the Contract.

**Annex 5****TEMPLATES OF THE PROJECT PROPOSAL AND THE BUDGET BREAKDOWN****Information about the Organization and Project Proposal****Information on the organization-applicant**

TABLE 1	INFORMATION ABOUT THE ORGANIZATION				
Name of the organization					
Abbreviation (if applicable)					
Type of organization (NGO, community-based, community-led, scientific, etc.)	NGO <input type="checkbox"/>	Community-Based <input type="checkbox"/>	Community-lead <input type="checkbox"/>	Scientific <input type="checkbox"/>	Other <input type="checkbox"/>
Status of the organization (local, regional, national level, country-level, international)	Local-level <input type="checkbox"/>	Regional level <input type="checkbox"/>	National level <input type="checkbox"/>	International <input type="checkbox"/>	Other <input type="checkbox"/>
Date of legal registration					
Legal Address					
Actual Address					
Phone number					
E-mail of the organization					
Website of the organization					
Yearly budget in 2024 (amount in CZK)					

TABLE 2	CONTACT DETAILS OF THE HEAD OF THE ORGANIZATION
Name, Surname	



Post	
Address for correspondence	
Mobile phone number	
E-mail address	
Contact Person for the project	
Contact e-mail	
Contact phone	

TABLE 3	INFORMATION ON ACTIVITIES OF THE ORGANIZATION
Statutory goals and objectives of the organization	
Experience of the organization in the field (implementation of projects); experience in working with various audiences, previous projects in schools and/or community-based youth services, previous work with the youth/children, reaching out vulnerable populations, previous collaboration with the Czech Ministry of Health and/or Ministry of Education, Youth and Sports etc.	
Resources of the organization (number of paid employees, number of volunteers, number of members of the organization, staff qualifications, premises, equipment, etc.).	
Other relevant information	



I. Project proposal

Please use the template to present your proposal. Maximum length 4 pages.

Project Title	
Project background information/justification	
Project Overall Objective	
Project-specific objectives	
Project Tasks and Sub-tasks (activities)	
Expected results/deliverables	
Project period Start-End date	
Implementation arrangements (please briefly describe the implementation structure, including the geographical location and partners involved, as well as the referral system (if any))	
How would the impact of the project be measured? Is there evaluation component included?	
Estimated budget (Please indicate the total amount and the period the budget is covering. Provide the detailed budget in a separate Excel file)	
Geographical coverage	
What are the proposed Health-related indicators and targets to them?	
Sustainability of intervention (planned strategic collaborations)	-

II. BUDGET



See Annex 2 – Detailed Budget in CZK.

Summary budget by category:	CZK

III. DELIVERABLES AND DEADLINES

Deliverable	Deadline

IV. Proposed Payment Instalments

V. Project Visibility Plan

VI. Quality Assurance Activities



Project title:			
Implementing partner:			
Country:			
Project period:			
Project Cost and Currency:		CZK	

Project Budget Breakdown						
Item	Unit quantity	Unit Cost	Frequency no.	Frequency unit (Months, Days or Lump sum)	% Charged	Total (CZK)
A. Staff and Other Personnel Costs (please itemize costs of all project staff to be recruited directly by the implementing partner for project implementation - HQ and local)						
B. Procurement of health related supplies and Equipment (e.g. Medical supplies/consumables, medical equipment incl. furniture, vaccines, medicines, ambulances etc). Please itemize costs of consumables to be purchased under the project, including associated transportation, freight, storage and distribution costs.						
C. Procurement of non-health related supplies and equipment (e.g. Supplies/consumables, cars, other transportation equipment, IT and telecommunications equipment, oither equipment incl. furniture, fules for transportation equipment, maintenance of equipment). Please itemize costs of consumables to be purchased under the project. includina associated transpoartation, freight, storage and distribution costs.						
D. Procurement of Services (e.g. non-staff drivers, consultants-local/international, field worker incentives, contractors-local/international). Please list works and services to be contracted under the project.						
E. Travel/Meeting related expenses (e.g. Per diem, air tickets, meeting venues expenses, hotel accomodation, transportation allowance, vehicles rental, hospitality/catering, other travel related expenses). Please itemize travel costs of staff, consultants and other personnel for project implementation.						
F. Infrastructure (e.g. Utilities (electricity/water), Office/Warehouse rental, communication expenses (phone, internet...), security expenses, maintenance of premises etc) please include general operating expenses for project implementation related to the office/operations in project Country.						
G. Other costs (e.g. bank charges, insurance, indirect costs, other). Please detail all other costs for project implementation related to the office/operations in project Country.						
Total Project Cost						

Please note that international travel is currently not an eligible expense.

Summary budget by category:	CZK
A. Staff and Other Personnel	-
Costs	-
B. Procurement of health related	-
C. Procurement of non-health	-
D. Procurement of Services	-
E. Travel/Meeting related	-
F. Infrastructure	-
G. Other cost	-
Total	-