



## Request for Proposal (RFP) for research and analysis on establishing a mechanism for global accountability and target setting for antimicrobial resistance (AMR)

### 1. RFP Background & Objectives

#### Context and background:

- AMR directly causes 1.27 million deaths and is associated with an additional 3.7 million deaths annually. Low- and middle-income countries (LMICs) bear the brunt of this burden, accounting for nearly 90% of the direct death toll and over 99.5% of AMR–related deaths among children under-5. The problem of AMR is growing and, while global health policy efforts have intensified over the last decade, progress to address the AMR burden is slow.
- Two key meetings in 2024 provide the opportunity for renewed political attention and agreement on AMR – the UN High-Level Meeting (UN HLM) on AMR in September and the fourth Ministerial Conference on AMR in November in Saudi Arabia.
- However, successive global political commitments on AMR including the 2015 WHO blueprint, 2016 HLM and 2022 Muscat declaration have delivered only limited impact. There remains an urgent need for more effective, sustained action on AMR by governments alongside other stakeholders to shift the dial on the AMR burden.
- One factor that could raise ambition and drive sustained action is agreed global targets: quantified, outcome-based objectives, and a means to assess progress to enable accountability. Following the 2016 UN HLM, there was a widely-accepted recommendation to create an independent evidence panel to monitor and report on evidence on AMR to Member States,<sup>1</sup> though there is no consensus on the shape of such a body and the global debate around what an accountability approach and framework should look like is underinformed by research.

#### Objectives:

This project will examine and make recommendations around accountability models/mechanisms that could be agreed and institutionalised at the global political level to set targets and monitor progress on AMR, with a view to driving more effective progress on AMR from governments in collaboration with others. Any model must work for all countries and contexts, with a particular focus on addressing the needs and priorities of low- and middle-income countries (LMIC) given the disproportionate impact of AMR,<sup>2</sup> recognising that global policy debates on AMR have not always been inclusive of all countries, their contexts and knowledge.<sup>3</sup>

Please note that this is a project intended to inform fast-moving political processes. We are seeking an organisation with experience and capabilities to deliver research within a short timescale that is politically-sensitive, and provide strategic political advice to senior stakeholders.

Questions to address could include the following (but this is not exhaustive and we welcome advice from the research organisation):

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<sup>1</sup> IACG, No Time to Wait <https://www.who.int/docs/default-source/documents/no-time-to-wait-securing-the-future-from-drug-resistant-infections-en.pdf>

<sup>2</sup> LMICs account for nearly 90% of the direct AMR death toll and over 99.5% of AMR–related deaths among children under-5.

<sup>3</sup> <https://wellcome.org/sites/default/files/wellcome-global-response-amr-report.pdf>, page 80.



**Overall guiding question: What types of model or mechanism to drive sustained global accountability to reduce the AMR burden might be most relevant to the issues and might be most politically salient?**

**This will likely include addressing the following:**

- a) Which models that already exist are exemplars in terms of driving political action and accountability/target setting? Which examples from other sectors could we learn from in terms of positive or negative impact? (Existing examples to look at could include those for climate change, tobacco control, other areas of global health including key infectious diseases.)
- b) Can a global mechanism achieve a balance between broad, global political acceptance i.e. maximum number of countries ratifying an agreement, and advancing goals that are stretching and do not default to a “lowest common denominator” approach?
- c) How can global mechanisms be shaped by national experience, and in turn, best serve national efforts? Are there examples in other sectors where the national-global action is bridged well, given such different contexts and approaches to responses?
- d) How can an accountability and targeting setting mechanism be appropriately designed, prioritising equity and inclusion? Are there examples of global mechanisms that equitably represent countries, and ensure that the mechanism is designed and led by those most impacted?

*Note that we do not expect this project to address specific targets; rather, it should focus on the overall models for accountability. We do expect there to be ongoing discussion of targets amongst stakeholders in the AMR community; this project should be complementary and as Wellcome we expect to engage with you closely to share our contextual understand across the project.*

**In order to answer the question above, the project could also explore the following.**

**1. What global governance structures around AMR exist? What are the benefits as well as gaps in existing approaches? (This section will be brief)**

- a) Within existing global commitments on AMR (e.g. 2015 WHO Global Action Plan (GAP) on AMR, 2016 UNHLM political declaration, 2019 Interagency Coordination Group on AMR (IACG) report, Muscat Declaration, as well as various inter-governmental political declaration such as G7 and G20), what specific and measurable targets exist and are these effective in driving political progress?
- b) To what extent are national action plans (NAPs) driving progress? You will likely provide a short summary of existing research on this question (e.g. from WHO, Wellcome, ICARS, OECD), drawing on a range of geographical and economic settings.
- c) How is progress of AMR responses currently monitored at the global-level? Including any tracking of existing targets and monitoring of data (e.g. GAP Monitoring and Evaluation Framework, TrACCSS, monitoring and evaluation of new data such as GRAM and ADILA).

**2. What global accountability models/mechanisms might work best to bring governments together to make faster progress on the AMR burden?**

- a) Are there examples of where accountability mechanisms galvanised political engagement, sustained action and driven impact on other issues (in global health or elsewhere)? Which of these might be most politically salient for a range of governments around the world/country contexts? Which might be most appropriate for AMR?



- b) In addition to a potential new mechanism to drive progress, how can existing global governance and accountability mechanisms for progress on AMR be strengthened to increase political engagement and drive action? Or are there additional accountability mechanisms or processes that should be initiated through current ones?
- c) What would the most effective form and function be for each of the mechanisms proposed by the IACG in 2019?
- d) What might be the role of self-reporting on progress versus independent verification?
- e) What might accountability look like for non-governmental organisations (i.e. private and non-profit sectors) and areas where government has struggled to regulate due to embedded vested interests?

## **2. RFP Specification**

### **Activities and geographical scope**

Suppliers should propose a detailed methodology for the work. We anticipate it to include the following:

- Review of models for global accountability and target setting in other areas of global health or other sectors, with reference to any existing reviews including the 2019 IACG recommendations. Analysis of political saliency of the models. Based on the landscaping, analyse political saliency of the different models and the balance or acceptance and ambition.
- Review and assessment of existing accountability mechanisms for AMR, including the role of NAPs and how these interact with global accountability mechanisms, and assessment of proposals to improve existing mechanisms or establish new ones as a subset of these. Assess the political saliency of any existing proposals.
- Prepare and propose a “menu of options” for a new/updated global accountability mechanism for AMR to drive progress by global governments and include clear target-setting, including pros and cons for different options (e.g. ability to achieve broad consensus, ability to set stretching targets).

The work will be global in scope, but could draw on specific country case studies if these are relevant (ideally these would link national strategies to global accountability) and should ensure equitable inclusion of diverse stakeholders in the consultations. It is important that any recommendations arising from this work are full sensitive to different country contexts and recognise the need for these to be politically viable for countries with lower-resource contexts.

If translation services are needed to ensure sufficient diversity of opinions are consulted, please state this in your proposal including costs. We expect the Supplier’s team to be diverse in membership, inclusive in practice and have experience of working across a range of global settings, with or alongside minoritised communities. We anticipate it will be an asset if the supplier has a diverse global network.

### **Expected outputs and timeline for delivery**

The specific outputs are to be discussed with the Supplier, but must include the reviews, analysis and “menu of options” style proposal outlined above. This could be presented in a report and presentation to Wellcome staff, with the report including more details on



methodology, findings and case studies. This should be delivered by the end of February 2024.

### 3. RFP Timetable

#	Activity	Responsibility	Date
1	RFP issued on <a href="#">Contract Opportunities</a> webpage, amplified by Wellcome staff.	Wellcome	30/10/2023
2	Submission of Expression of Interest (EOI) and Supplier Q&A to <a href="mailto:z.molyneux@wellcome.org">z.molyneux@wellcome.org</a>	Supplier	7/11/2023
3	Return of Supplier Q&A and invitation to submit full proposal to Suppliers	Wellcome	10/11/2023
4	Submission of RFP Response	Supplier	17/11/2023
5	RFP Evaluation Period	Wellcome	20/11/2023-24/11/2023
6	Supplier Presentations	Supplier	4/12/2023 – 6/12/2023
7	Notification of Contract Award	Wellcome	8/12/2023
8	Contract Negotiation	Wellcome & Supplier	Early-mid December
9	Contract Start Date	Wellcome & Supplier	December 2023 – negotiable, as early as possible is preferable

Note, Wellcome closure from Thursday 21<sup>st</sup> December – 1<sup>st</sup> January (office open on 20<sup>th</sup> Dec and 2<sup>nd</sup> January).

Suppliers, please advise on any accessibility requirements.

### 4. Response Format

The following headers support the timetable by providing further detail of the key steps.

#### Expression of Interest (EOI) and Supplier Q&A

- Suppliers are asked to submit a short expression of interest by e-mail to the lead contact in accordance with the RFP timetable, which should contain the following information;
  - Confirm that if you were appointed by Wellcome this would not create a conflict of interest.
  - Confirm whether you are a company or individual, if company please provide full company name, address, and company registration number.



- A non-binding cost estimate as a single figure in GBP, with a rough break down of costs.
- Any questions you have about the exercise and activity. All questions will be collated, anonymised, answered and returned to all Suppliers who have submitted an expression of interest in the RFP process. Please make sure you ask all questions at this stage. Once Wellcome have responded to all questions, if you have any additional questions after this deadline these will not be answered to ensure that this is a fair and equitable process.
- The EOI should address the following:
  - Outline your proposed approach to meeting the objectives (max. 750 words)
  - How you will deliver on the Specification, including a brief overview of likely methodology and feasibility of the timeline (max. 750 words).
  - Outline your relevant experience in this area including experience delivering fast-paced policy research and with providing advice relevant to political processes. Please include detail about how you will work with others to fill gaps and complement your expertise. This will include your geographical reach and way of working with partners / networks globally (max. 750 words)
  - Outline how equity, diversity and inclusion will be embedded in your approach (max. 500 words)

We will review expressions of interest to ensure that proposals fit within the scope of the RFP. Where we are satisfied of this, we will invite organisations to submit a full proposal to the RFP in accordance with the RFP timetable. **Please note that you should only submit a full proposal to the RFP if you have been invited to do so.**

Submitting an EOI is not a binding commitment to submit a full proposal should your organisational priorities change, you will not then be penalised for future opportunities.

### **RFP Response**

Suppliers submitting a full proposal should cover the following areas in their response:

<b>#</b>	<b>Question</b>	<b>Max [Words]</b>
<b>1</b>	The proposal should demonstrate a clear understanding of the RFP objectives and the intended outcome, and detail your proposed approach to deliver them. Include you approach to working with Wellcome and other partner organisations.	<b>500</b>
<b>2</b>	Outline the anticipated deliverables, including interim deliverables, and associated timeframes.	<b>500</b>
<b>3</b>	Outline the experience of the proposed project team in this area and how you will work with or consult experts/networks/other stakeholders. Include your nominated point of contact for Wellcome.	<b>250</b>



<b>4</b>	Provide your cost proposal based upon the requirements, including: a) Cost breakdown (excluding VAT or any local taxes including all costs (specifying all day rates of individuals involved, the allocation of days between members of the team, and the cost of activities) b) Supporting justification of the financials	<b>250</b>
<b>5</b>	Provide example(s) (up to two) of where you have successfully provided services similar to those described in this RFP.	<b>500</b>
<b>6</b>	Describe anticipated risks and challenges, and ways to mitigate them.	<b>250</b>
<b>7</b>	Outline how you would ensure equity, diversity and inclusion considerations are embedded throughout the planning, development and delivery of the project.	<b>250</b>
<b>8</b>	Outline your approach to data protection. In particular, the recruitment approach must be compliant with UK GDPR, the Data Protection Act 2018 and The Privacy and Electronic Communications (EC Directive) Regulations 2003 (“PECR”) (together, “DP Laws”).	<b>250</b>

#### Evaluation Criteria

<b>Criteria</b>	<b>Detail</b>	<b>%</b>
Methodology	<i>Coverage:</i> How well are the desired focus areas (as outlined in the objectives and specification) addressed? <i>Quality:</i> Is the proposed methodology aligned with our needs? <i>Utility:</i> Will the proposed methodology deliver the desired, credible, and useful results?	30%
Experience	<i>Skills and Experience:</i> Does the supplier have the relevant skills, experience, and contextual understanding to deliver this work?	30%
Delivery & Outputs	<i>Communication:</i> Is there a good plan for communicating with the Wellcome team? <i>Delivery plan:</i> Is the proposed delivery plan appropriate and achievable? <i>Feasibility:</i> How feasible is the delivery plan? Are there significant risks associated with the proposed timelines, and how well are they mitigated?	10%
Budget	<i>Value for Money:</i> Is the proposed work within your budget and good value for money?	10%
EDI	<i>EDI:</i> are EDI considerations sufficiently embedded within the proposal?	20%
<b>Total:</b>		<b>[100]%</b>

#### Contract Feedback



This section allows Suppliers to provide specific feedback to the contractual agreement which will be used should their proposal be successful. This is the suppliers' opportunity to provide negotiation points on Wellcome's terms and conditions, we will not consider negotiations that are only raised after the contract has been awarded so as not to delay the contracting process. Please ensure you engage with a relevant legal contact if applicable. Contract feedback is to be incorporated into your proposal as an annex and in the following format;

Clause #	Issue	Proposed Solution/Comment

Suppliers submitting proposals as a registered company should review Wellcome's Standard terms and Conditions [document](#).

Individuals submitting proposals as a sole trader (not registered) should review this [document](#). Individuals submitting proposals through their own personal services company please highlight this to the Wellcome contact immediately (see point 6 below).

#### Information Governance

Wellcome is committed to upholding data protection principles and protecting your information. The [Wellcome-Privacy-Statement-2023.pdf](#) explains how, and on what legal basis, we collect, store, and use personal information about you. This includes any information you provide in relation to this proposal.

Under [GDPR/Data Protection law](#), Wellcome must keep a record of all personal information it is processing (i.e., collecting, using, and sharing). This record will be made available to the Information Commissioner's Office upon request.

This is Wellcome's record of data processing activities which meets GDPR article 30 requirements.

Suppliers will be asked to complete the [TPSRA2](#) assessment before presentation stage to assess how you handle data.

#### **Supplier Presentations**

Following a submission of the proposal, successful proposals will invited to a virtual meeting which will last up to 50 minutes and include a Supplier presentation followed by questions and answers session.

#### **5. About Wellcome**

Wellcome improves health for everyone by funding research, leading policy and advocacy campaigns, and building global partnerships. Collaborative research that involves a diverse range of people from different fields of interest is key to progress in health science – and to achieving our aim of fostering a healthier, happier, world. We're taking on the biggest health challenges facing humanity – climate and health, infectious disease, and mental health – to find urgent solutions and accelerate preventions. Find out more about Wellcome and our work at: [wellcome.org](#).



## 6. Prospective Suppliers Personnel - IR35 and Off Payroll Working Rules

Before the RFP response deadline, Prospective Suppliers must make the Wellcome Contact aware if they are intending to submit a proposal where the services will be provided by any individuals who are engaged by the Prospective Supplier via an intermediary i.e.

- Where the Prospective Supplier is an individual contracting through their own personal services company; or
- The Prospective Supplier is providing individuals engaged through intermediaries, for the purposes of the IR35 off-payroll working rules.

## 7. Equity Diversity and Inclusion

Embracing [diversity and inclusion](#) is fundamental to delivering our mission to improve health, and we are committed to cultivating a fair and healthy environment for the people who work here and those we work with. We want to cultivate an inclusive and diverse culture, and as we learn more about barriers that disadvantage certain groups from progressing in our workplace, we will remove them.

Wellcome takes diversity and inclusion seriously, and we want to partner with suppliers who share our commitment. We may ask you questions related to EDI as part of our RFP processes.

## 8. Disability Confident

The Wellcome Trust is proud to be a Disability Confident Employer (DC Level 2) and we encourage all our partners and suppliers to do the same. More information about this can be found on the government website [Disability Confident employer scheme and guidance - GOV.UK \(www.gov.uk\)](#). Disability Confident is creating a movement of change, encouraging employers to think differently about disability and take action to improve how they recruit, retain and develop disabled people.

## 9. Accessibility

Wellcome is committed to ensuring that our RFP exercises are accessible to everyone. If you have a disability or a chronic health condition, we can offer adjustments to the response format e.g., submitting your response in an alternate format. For support during the RFP exercise, contact the Wellcome Contact.

If, within the proposed outputs of this RFP exercise, specific adjustments are required by you or your team which incur additional cost then outline them clearly within your commercial response. Wellcome is committed to evaluating all proposals fairly and will ensure any proposed adjustment costs sit outside the commercial evaluation.





## 10. Independent Proposal

By submission of a proposal, prospective Suppliers warrant that the prices in the proposal have been arrived at independently, without consultation, communication, agreement or understanding for the purpose of restricting competition, as to any matter relating to such prices, with any other potential supplier or with any competitor.

## 11. Funding

For the avoidance of doubt, the output of this RFP exercise will be funded as a **Contract** and not as a Grant.

## 12. Costs Incurred by Prospective Suppliers

It should be noted that this document relates to a Request for Proposal only and not a firm commitment from Wellcome to enter into a contractual agreement. In addition, Wellcome will not be held responsible for any costs associated with the production of a response to this Request for Proposal.

## 13. Sustainability

Wellcome is committed to procuring sustainable, ethical and responsibly sourced materials, goods and services. This means Wellcome seeks to purchase goods and services that minimise negative and enhance positive impacts on the environment and society locally, regionally and globally. To ensure Wellcome's business is conducted ethically and sustainably, we expect our suppliers, and their supply chains, to adhere to these principles in a responsible manner.

## 14. Wellcome Contact Details

Submission of EOI:

Name: Zoe Molyneux  
Pronouns: Her  
Role: Policy Lead  
Email: [z.molyneux@wellcome.org](mailto:z.molyneux@wellcome.org)

After 13<sup>th</sup> November, the point of contact within this RFP exercise will be:

Name: Rachael Hore  
Pronouns: Her  
Role: Policy Adviser  
Email: [r.hore@wellcome.org](mailto:r.hore@wellcome.org)