

# Call for tender: Consultant services – Vaccination from the perspective of the patient community

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## 1. EPF General Information

The **European Patients' Forum (EPF)** was founded in 2003 to ensure that the patients' community drives policies and programmes that affect patients' lives to bring changes empowering them to be equal citizens in the EU.

EPF currently represents 74 members, which are national coalitions of patient organisations and disease-specific patient organisations working at European level. EPF reflects the voice of an estimated 150 million patients affected by various chronic diseases throughout Europe.

Our Vision is that all patients with chronic conditions in Europe have access to high-quality, patient-centred health and related care.

## 2. Purpose of the tender

The purpose of this tender is to select a professional consultant **to conduct research, analyse data and write a report on the topic of vaccination from the perspective of the patient community** for the European Patients' Forum, hereafter referred to as the 'EPF'.

This activity arises from the EPF 2018 Work Programme, under a project which has received funding from Vaccines Europe.

## 3. Research objectives, audience, and use of findings

### 3.1. OBJECTIVES

**The objective of this project is to:**

- Contribute to transforming vaccine hesitancy to vaccines confidence **in groups of patients with chronic diseases**, for whom specific vaccination recommendations exist in national immunisation programmes but adherence to these recommendations is low due to hesitancy and/or lack of awareness
- Raise awareness in this difficult-to-reach group of patients about the benefits of vaccination.

More information is available in the annex to this tender.

**The Consultant should focus his/her work on the following elements:**

- (1) Identifying key information gaps and the needs for the patient community with regards to vaccination;
- (2) Mapping controversial issues for the patient community, and challenges met by patient organisations, national and international authorities when addressing these issues.

- (3) Identifying existing tools, good practices and recommendation regarding information on vaccination for the patient community, on which we can build recommendations.

### 3.2. TARGET AUDIENCE

Patient organisations, at both national and European levels, to use as an advocacy and information tool.

### 3.3. EXPLOITATION OF RESEARCH FINDINGS:

The research findings delivered by the Consultant will be translated by the EPF Secretariat into different information support for the patient community, including:

- A “manifesto” on the importance of vaccination;
- An information toolkit for patient organisations to use within their own community (a blend of power-point presentations, infographics and highly-visual information, a patient testimonial video...).
- A pilot national workshop, reaching out to chronic disease patients and disseminating the toolkit through their ecosystem, will be organised in the second semester of 2018.

### 3.4. SUGGESTED METHODOLOGY

- Exploitation of the EPF Needs assessment survey (conducted in March/April 2018);
- Literature review and mapping of existing resources on vaccines hesitancy and controversial issues on vaccination from the perspective of the patient community;
- Desk research and mapping of existing tools, good practices and recommendations on vaccination for the patient community (including but not limited to works from World Health Organisation, European Centre for Disease Control and Prevention, medical and scientific societies of the disease areas targeted);
- Potentially - interviews with key patient representatives (identified further to the Needs assessment survey) or with representatives from national/international public health institutions.

It is important to note the following:

- The report produced as a result of the research shall be based on trustworthy, objective, peer-reviewed, evidence-based, state-of-the art publications in the field;
- Information will be made available in different European languages. EPF will arrange the translations, but translatability needs to be taken into consideration as far as possible in the way the information is presented in the report; The information shall be developed in close consultation with the EPF team.

## 4. Description of services

The successful tenderer shall deliver following deliverables based on the following tasks:

Task	Description	Methodology	Deliverables description	Estimated due date
1	Identifying key information gaps and the needs for the patient community with regards to vaccination;	EPF Needs assessment survey exploitation + literature review	Internal report	30 April
2	Mapping controversial issues for the patient community, and challenges met by patient organisations, national and international authorities when addressing these issues.	Literature review and mapping of existing resources + potentially interviews	Internal report	20 May
3	Identifying existing tools, good practices and recommendation regarding information on vaccination for the patient community, on which we can build recommendations	EPF survey, desk research and mapping of existing tools, good practices and recommendations on vaccination for the patient community	Internal report	15 June
4	Consolidated report consisting of the three sections	Enhanced report	Consolidated report	15 July

## 5. Participation in the tendering procedure

**The maximum contract price is EUR 5000** including fees, administrative overheads and VAT.

The duration of the assignment is around 2 months. The minimum total number of days for the service is 10.

There is no travel and subsistence cost planned for this contract. If such costs arise they are to be covered by the tenderer.

## 6. Participation in the tendering procedure

### 6.1. TENDER SUBMISSION

Tenderers should submit the following documents:

- The completed submission form (see annex 1);
- CV/s of people involved in implementing the Tasks;
- A list of references and examples of work;
- The offer should be submitted to Kaisa Immonen, EPF Director of Policy ([kaisa.immonen@eu-patient.eu](mailto:kaisa.immonen@eu-patient.eu)).

### 6.2. TENDER PROCESS

EPF reserves the right to conduct the tender process and select the successful tender. EPF is not bound contractually or in any way to a bidder to this request for tender until EPF and the successful winner have entered into a written contract.

### 6.3. TENDER EVALUATION

Participation in this tendering procedure is open on equal terms to all natural and legal persons fulfilling the abovementioned eligibility criteria and language requirements. EPF may, in its discretion, extend the closing date and time of the tender.

The selection procedure will be based on the principles of equal treatment, fairness and transparency and on expertise (75%) and price (25%).

All applicants will receive acknowledgement of receipt of their tender and will be informed of the outcomes of the selection process within one week following the deadline date. EPF is not obliged to provide reasons for its decision to shortlist; accept or reject any particular tender.

Offers to the tender will be evaluated based on the following criteria:

Qualitative award criteria	Points
<b>Qualitative criteria 1:</b> A cost proposal - Most economically advantageous tender for a maximum budget of 5000€	25
<b>Qualitative criteria 2:</b> A list of references and examples of work – Demonstrated quality of the technical and professional capacity proposed by the tenderer in terms of drafting reports of EU events. The tenderer is requested to provide at least two examples of publications	25
<b>Qualitative criteria 3:</b> Demonstrated knowledge of the European health scene. Experience of working with patient organisations a plus.	25
<b>Qualitative criteria 4:</b> Congruence of proposal with the timeline - Measures in place to ensure timely delivery of the services concerned.	25

Applicants must have excellent knowledge of the English language and understanding of EU public health policy and/or patient advocacy.

#### 6.4. EXCLUSION CRITERIA

Candidates or tenderers shall be excluded from participation in this procurement procedure if:

- a) they are bankrupt or being wound up, are having their affairs administered by the courts, have entered into an arrangement with creditors, have suspended business activities, are the subject of proceedings concerning those matters, or are in any analogous situation arising from a similar procedure provided for in national legislation or regulations;
- b) they have been convicted of an offence concerning their professional conduct by a judgment which has the force of res judicata;
- c) they have been guilty of grave professional misconduct proven by any means which the EPF can justify;
- d) they have not fulfilled obligations relating to the payment of social security contributions or the payment of taxes in accordance with the legal provisions of the country in which they are established or with those of the country of the EPF or those of the country where the contract is to be performed;
- e) they have been the subject of a judgment which has the force of res judicata for fraud, corruption, involvement in a criminal organisation or any other illegal activity detrimental to the Union’s financial interests;
- f) following another procurement procedure or grant award procedure financed by the Union’s budget, they have been declared to be in serious breach of contract for failure to comply with their contractual obligations.

#### 6.5. SCHEDULE

The tender is open from 7 March 2018 to 30 March 2018.

Tender submission and schedule of the work are as follows:

Launch Tender	EPF	7 March 2018
Close of the Tender	Tenderer	28 March 2018
Selection of the tenderer	EPF	30 March 2018
Signature of the Contract / Briefing session with EPF Director of Policy to agree on the objectives, the methodology, and the process;	EPF - Tenderer	4 April 2018
Start of the assignment	Tenderer	4 April 2018
End of the assignment	Tenderer	15 July 2018

## 7. Terms of payment

Prices must be fixed amounts in Euro and will not be subject to revision. The amount of VAT should be shown separately on the price offer and invoice.

Costs incurred in preparing and submitting tenders are borne by the tenderers and cannot be reimbursed.

## 8. Quality issues

In delivering the service the tenderer shall ensure the highest quality standards of which EPF shall be the sole judge.

## 9. Confidentiality and conflict of interest

The Tenderer undertakes that they will not at any time, either before or after the termination of this service, use or disclose or communicate to any person confidential information relating to the affairs of EPF. This restriction shall continue to apply after the termination of the service without limit in point of time.

To ensure the independence of terms of their contract, the winning tenderer will sign a declaration certifying that they have no conflict of interests in relation to the tasks to be undertaken and undertake to inform Camille Bulot, Membership & Stakeholder Relations' Manager should this status change.

## 10. Terms and conditions

EPF reserve the right to reject any and all proposals, in whole or in part, to advertise for new proposals, to abandon the need for services, and to cancel or amend this call for tender at any time prior to the execution of the written contract. EPF reserves the right to waive any formalities in the call for tender process. EPF may respond to questions or provide information from tenderers, and is under no obligation to provide such responses or information to all other tenderers.

By submitting a proposal, the tenderer agrees that:

- EPF may copy the proposal for purposes of facilitating the evaluation of the proposal and agrees that such copying will not violate the rights of any third party.
- It will not bring any claim or have any cause of action against EPF based in any misunderstanding concerning the information provided or concerning EPF's failure, neglect or otherwise, to provide the bidder with pertinent information as intended by this call for tender.



The accomplishment of a tendering procedure imposes no obligation on the EPF to award the contract. Should the invitation to tender cover several items or lots, EPF reserves the right to award a contract for only some of them. EPF shall not be liable for any compensation with respect to tenderers whose tenders have not been accepted. Nor shall it be so liable if it decides not to award the contract.

## 11. Contact person

For more information, please contact:

Kaisa Immonen  
Director of Policy  
[kaisa.immonen@eu-patient.eu](mailto:kaisa.immonen@eu-patient.eu)

## 12. Contracting authority

European Patients' Forum (EPF)  
Chaussee d'Etterbeek 180  
1040 Brussels  
[www.eu-patient.eu](http://www.eu-patient.eu)

## Annex - Background information

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- European objectives to decrease the burden of chronic diseases (NCDs) comprise addressing the determinants of health, reducing health inequalities, and public awareness-raising / disease-prevention campaigns.  
European Commission President Jean-Claude Juncker identified equal access to vaccines as a specific priority in his State of the European Union address on 13 September 2017, expressing the Commission’s commitment to working with Member States to support national vaccination efforts, in order to avoid needless deaths.
- Vaccine-preventable infectious diseases like influenza, pneumococcal diseases and shingles are more difficult to manage in patients with chronic diseases because of increased risks of drug interactions and potential adverse effects of drugs on underlying diseases like diabetes. For example:
  - Patients with chronic diseases of lungs, heart, liver or kidneys are at increased risk of pneumococcal infections;
  - Patients with diabetes (type 1 or type 2), even when well-managed, are at high risk of serious flu complications, often resulting in hospitalization and sometimes even death;
  - Patients with the comorbidities of diabetes, coronary artery disease and associated micro vascular disorders have an increased risk of HZ occurrence, with painful and debilitating complications;
  - Rates of serious illness due to influenza viruses are high among older people and patients with chronic conditions such as COPD;
  - Patients with autoimmune conditions and organ transplants are more vulnerable to infections in general;
  - In addition, some patients with chronic disease cannot be vaccinated and are thus more vulnerable to common infectious diseases. This is a problem if the rate of vaccination coverage diminishes, reducing community immunity (also referred to as “herd immunity”).<sup>1</sup>

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<sup>1</sup> ECDC fact sheet “What is community immunity and why is it important?”  
<https://ecdc.europa.eu/sites/portal/files/media/en/healthtopics/immunisation/Documents/ecdc-community-immunity-leaflet.pdf>