

Issue Date: October 22, 2013

Closing Date: November 27, 2013

REQUEST FOR PROPOSAL

GLOBAL EVALUATION PARTNER EXPANDING ACCESS TO CARE FOR PEOPLE LIVING WITH CHRONIC DISEASE REACHING THE UNDERSERVED IN BRAZIL, INDIA, SOUTH AFRICA, UNITED STATES

Medtronic Philanthropy has a global commitment to expand access to chronic disease care for underserved populations, focusing on diabetes and cardiovascular disease. To reach this goal, we aim to strengthen health systems by advancing policies, empowering patients and leveraging caregivers and frontline health workers to enable people living with chronic disease to successfully manage their condition in acute events and over the long term. This five-year effort (January 2014-December 2018), totaling approximately \$14.5 million in program implementation costs, will involve local, innovative pilot projects, stakeholder engagement and advocacy efforts in four target countries: Brazil, India, South Africa and the United States.

Opportunity

Medtronic Philanthropy seeks a partner to help evaluate its global efforts. The total budget ceiling¹ for the evaluation partner is \$2.625 million over the five years (renewable annually), including funds to support global tool development, in-country needs assessments, monitoring and evaluation of local projects in each country, technical assistance in data collection and presentation of data, and a final evaluation report intended to advance the field and guide future global programming in chronic disease.

While a core element of our work is focused on financial support and technical assistance to local efforts, Medtronic Philanthropy has a track record of achieving a public impact through our strengths in partnership building and convening key stakeholders around a common goal, unified strategy and outcomes driven results.

The evaluation partner will have complementary experience in conducting needs assessments, monitoring demonstration projects and evaluating large public health initiatives. We are particularly interested in collaborating with a partner that has expertise in evaluating community-based approaches to improving health.

The evaluation partner will be responsible for developing global tools and the overall monitoring and evaluation framework for the commitment, adapting those tools in-country, supporting local needs assessments in Brazil, South Africa and the United States², ongoing monitoring of demonstration projects in all four countries during program implementation and evaluating the commitment upon completion.

Tracking progress and measuring impact is central to Medtronic Philanthropy's commitment. Developing a strong evidence base for successful interventions will be key as the global community strives to scale up best practices to reach the global target of a 25% reduction in premature mortality from non-communicable diseases (NCDs) by 2025.

In conjunction with this request for proposal (RFP), Medtronic Philanthropy has also issued an RFP for a global implementation partner. This partner organization will be responsible for local grant making, local stakeholder engagement, program management, technical assistance, communications and thought leadership. **Organizations are eligible to respond to both RFPs, but can only receive one award.** Both global partners will be expected to work collaboratively throughout the initiative.

¹ Budgets will be determined annually, based on available funds and grantee performance.

² India Needs Assessment was completed and results were shared on October 4, 2013. Tools and data used in the assessments will be shared with Implementation and Evaluation Partners selected to work with Medtronic Philanthropy. Partners can refine analysis to inform next steps.

Overview of Medtronic Philanthropy

Medtronic Philanthropy, established in 1978 as the Medtronic Foundation, is the primary channel for Medtronic's strategic giving, with the majority of grant programs aligned with the company's commitment to improve access to quality health care. The goal of Medtronic Philanthropy is to expand access to chronic disease care for the underserved worldwide.

NCDs, such as diabetes and cardiovascular disease, account for more than 60 percent of all deaths worldwide. Since 2010, Medtronic Philanthropy has awarded more than \$7.5 million in grants related to NCDs. This new initiative to expand access to care and reach the underserved in Brazil, India, South Africa and the United States is a major expansion of our global commitment to improve the lives of people living with chronic disease.

Background

Chronic disease has been the leading cause of death and disability globally for over 30 years. However, the field of non-communicable diseases has received relatively little funding, especially in low- and middle-income countries where infectious diseases have dominated health agendas, budgets and discourse. Thanks to the tremendous successes of economic development, family planning, maternal and child health programs, and HIV/AIDS, malaria and TB prevention and treatment efforts over the past 20 years, millions more people are living longer than ever. But with extended lifespans comes a rise in diseases of lifestyle and aging; non-communicable diseases are the leading cause of death globally. In the face of pandemic rates of morbidity and mortality due to NCDs, Medtronic Philanthropy is committed to expanding access to care for people living with two of the most prevalent NCDs – diabetes and cardiovascular disease – with a particular focus on underserved communities.

Medtronic Philanthropy's strategy is to join the global health community in making a long-term investment to reach the global target of a 25% reduction in premature mortality from NCDs by 2025. A cornerstone of the strategy is to help enhance the global health capabilities needed to address NCDs throughout the world. To that end, we are committed to developing global partnerships, while also leveraging the expertise of local organizations to expand their efforts in chronic disease management. We are particularly interested in building on the excellent work that has been done at the community level across a variety of health issues and want to support interventions that integrate NCDs into other health programs. At the same time, we will also be working with policy makers to clarify the distinct social, economic and health impact that NCDs have on the people living with them, and opportunities to advance policies and resources to better support them and their families.

We recognize that additional resources are needed to help meet global and national NCD goals and, specifically, that greater support is needed to strengthen community level responses given that there has been limited opportunity to develop programming in the NCD area. Medtronic Philanthropy is embarking on a five-year effort to expand access to care as a catalyst to accelerate the promotion and delivery of quality health services for underserved people living with chronic diseases.

The recent advances in improving health outcomes for underserved communities – through disease prevention, education, training of health providers, patient empowerment, and advocacy at the local, national and global levels – are impressive and have been spurred by strong political leadership and funding. Progress has been the direct result of the outstanding efforts of civil society and its ability to collaborate with government and the private sector and mobilize communities.

Medtronic Philanthropy believes that supporting local and national NCD plans is a critical step to ensuring that countries meet their national and local targets. In addition, we believe a vibrant civil society focusing on these issues is needed to work in partnership with government to improve the lives of people living with NCDs, especially the underserved, and elevate community priorities on national health agendas. Notable public health victories in recent history are in large part attributable to the success community-based efforts have had on the ground, working closely with individuals and families particularly affected by disease and disability.

Our Goal

Our goal is to expand access to care for underserved populations living with diabetes and cardiovascular disease.

To achieve our goal, we aim to strengthen health systems by advancing policies, empowering individuals living with chronic disease and leveraging caregivers and frontline health workers to enable people living with chronic disease to successfully manage their condition in acute events and over the long term. We believe that interventions in these areas will result in more policies to expand access to care for diabetes and cardiovascular disease, particularly among the underserved, more individuals seeking care for their conditions, and more health workers better able to manage initial care closer to home. (See Appendix A for a snapshot of our global access strategy.)

Continuum of Care Framework

The Continuum of Care is an essential framework that Medtronic Philanthropy uses to map the patient care pathway within a community. The framework enables a quantitative and qualitative assessment of both the *demand* for health care by individuals within a community and the *supply* of health care delivered by a health system. This systematic assessment provides insights into the barriers, needs and opportunities within a health system to expand access to care. Medtronic Philanthropy uses this information as a guide to engage multi-sector stakeholders, including policy makers, and partner with local community organizations through strategic grant making that supports innovative demonstration projects to empower patients and build the capacity of frontline health workers. (See Appendix A for a graphic representation of the Continuum of Care.)

Building a Strong Partnership

Medtronic Philanthropy plans to select its two global partners (implementation and evaluation) in January 2014. A core foundation of Medtronic Philanthropy's global access strategy is shared learning across countries – a critical lever to scaling up best practices globally – and between Medtronic Philanthropy and our partners. (Please see Appendix A for a description of our access strategy.) Medtronic Philanthropy staff includes technical experts in all aspects of diabetes and cardiovascular disease who also have experience in grant-making. While the team has extensive experience managing relationships from the United States, Medtronic Philanthropy does not have staff located in Brazil, India and South Africa.

The first quarter of 2014 will be dedicated to building a collaborative team, assuring clarity on strategy, shared objectives and the path forward, and intensive planning to help ensure a smooth launch with key programs beginning by the end of February³.

As part of this initial phase of work, there will also be an opportunity to delve deeply into the core elements of grant making, needs assessments, monitoring and evaluation, ingredients of successful demonstration projects and scale-up – as well as issues particular to NCDs. We realize that no single partner will have all the knowledge or experience necessary to make this effort a success, and that our global partners, while responsible for identifying needs on the ground and designing, implementing and evaluating interventions, will also coordinate meetings and workshops to gather in depth information and knowledge about the global NCD landscape and developments in diabetes and cardiovascular disease.

Medtronic Philanthropy will introduce the partners to the Continuum of Care Framework, which will be used as a guide to identify needs and opportunities within the four countries and help prioritize interventions on the ground. In addition, Medtronic Philanthropy will share relevant lessons from its experience in both technical areas of NCDs as well as collaborations around NCDs to further guide program planning and implementation.

³ Local Grant effort in India projected to be launched by late February given completion and release of needs assessment in October 2013 – see recent results from our partner MAMTA: Results from Needs Assessment in Shimla and Udaipur <http://www.medtronic.com/philanthropy/grants/grantee-stories.html>

During these first several weeks, the global evaluation partner and its in-country evaluation partners, together with the selected global implementation partner, will work together with Medtronic Philanthropy and other thought leaders to ensure alignment and access to technical information needed to undertake this five-year effort. Medtronic Philanthropy staff will provide input regarding the metrics for monitoring and evaluation and contracting of local evaluation partners.

The following are core capabilities for organizations interested in becoming Medtronic Philanthropy's global evaluation partner:

- Experience with a wide range of tool development and adaptation to support community-based assessment and evaluation methodologies
- Reputation for partnering well locally, building capacity in M&E and working on practical approaches for M&E at the community level
- Ability to provide perspectives on evidence to advance global and local efforts on NCDs and willingness to participate in joint thought leadership opportunities
- Familiarity with developing global M&E frameworks that are also locally relevant and support evaluating large donor initiatives and/or corporate initiatives
- Ability to create dashboards for relevant metrics at the community and country levels and, at the global level, align these metrics with the global monitoring framework
- In-depth knowledge of NCD trends, intervention approaches and indicators and impact assessment
- Track record in conducting local needs assessments, ideally in the target countries and in the area of NCDs
- Ability to use technology and innovation as needed to enhance reliability and validity of data collected
- Monitoring and assessing local projects, ideally in the target countries and in the area of NCDs
- Availability to work at varying levels of effort over a period of time
- Ability to create strong visuals of metrics and progress made over the five-year period
- Track record in using the results of demonstration projects to influence policy
- Reputation as a strong partner with a collaborative style, focusing on local ownership
- Previous work with private sector partners

Budget

Medtronic Philanthropy will launch this initiative in **Brazil, India, South Africa and the United States** beginning **January 2014 and ending December 2018**. The estimated budget ceiling for the global evaluation partner over the **five year period is \$2.625 million, renewable annually, and based on performance and available funds**.

- **\$750,000 budget ceiling** for year 1
- **\$400,000 budget ceiling** for years 2-4: **\$1.2 million total**
- **\$675,000 budget ceiling** for year 5

Eligibility

Medtronic Philanthropy is seeking an evaluation partner with demonstrated expertise in evaluating large global public health initiatives. As Medtronic Philanthropy's global evaluation partner, the selected organization is expected to have the capacity, competence and experience to accomplish the evaluation goals and objectives outlined in this RFP. Proposals may be submitted by individual organizations and groups of collaborating organizations.

Organizations eligible to apply for funding:

- Registered voluntary, non-governmental, not-for-profit or charitable organizations, ideally locally registered and working in each country of interest

- Network of local partners able to participate in adaptation of tools and execution of M&E activities
- For-profit organizations
- Universities and academic institutions
- International organizations headquartered within and outside of the U.S.

Scope of Services

Collaboration will be an integral component of the successful evaluation of this global initiative. We envision that the evaluation partner will engage in multiple levels of collaboration: with Medtronic Philanthropy on development of an evaluation framework and work plan, including performance indicators, benchmarks and proposed evaluation methodologies (quantitative and qualitative); with the global implementation partner regarding assessment tools, monitoring, objectives and outcomes and clear communication around metrics and overall impact; with local in-country partners to advise and support innovative on-the-ground interventions and opportunities to integrate NCD efforts with other health projects; and with other stakeholders, including local governments, as ongoing advisors and to ensure alignment of on-the-ground efforts with country NCD plans.

A successful global evaluation partner will be committed to assessing local community needs, leveraging its experience in developing evaluation frameworks in collaboration with global funders and in-country stakeholders, monitoring the progress of local projects, and evaluating health impact of global initiatives.

There are three specific areas of responsibility:

I. In-country Needs Assessments | An in-country needs assessment for Brazil, South Africa and the United States and validation of the completed needs findings in India will inform the initiative's trajectory over the five years. These assessments will be based on the Continuum of Care Framework and will lay the groundwork for discussions among Medtronic Philanthropy, the global implementation partner and in-country stakeholders to design and implement local projects. In conjunction with these efforts, the evaluation partner will:

- Develop a framework, core indicators and set of tools to guide in-country needs assessments
- Engage local stakeholders in developing each needs assessment
- Measure current levels of community and individual knowledge, attitudes and practices regarding diabetes and cardiovascular health and health-seeking behaviors
- Map patient care pathways at the community level
- Systematically identify needs, barriers and opportunities
- Prioritize findings in order to inform interventions by implementation partner
- Describe the policy environment, local expenditures and current level of care provided by frontline health workers (as locally defined) at the community level, including private health care providers
- Develop a final needs assessment report for each target country, summarizing findings and recommending next steps to guide program strategy for that country

II. Monitor and Assess Local Projects | The global evaluation partner will work with the global and local implementation partners to facilitate ongoing monitoring of local projects. Monitoring data, which will be agreed upon with input from the implementation partner and Medtronic Philanthropy, will be collected and assessed roughly every six months by the evaluation partner, who will:

- Work with Medtronic Philanthropy to develop the evaluation work plan and framework, including metrics and impact targets
- Develop a set of evaluation tools to streamline monitoring and data collection
- Clarify the best qualitative approaches to support quantitative measurement and apply qualitative tools accordingly
- Collaborate with local stakeholders to ensure culturally appropriate adaptation of evaluation methods
- Provide technical assistance to local implementing partners to guide data collection

- Provide visual representations of progress
- Report on progress of between 12 and 20 local projects (up to an estimated 5 projects per country) twice a year and raise any issues of concern more often, as needed
- Coauthor publications and participate in thought leadership activities related to evaluation work

III. Final Evaluation | In the fifth year of Medtronic Philanthropy’s global initiative, the global evaluation partner is responsible for collecting, analyzing and reporting on outcomes. Reporting should include both aggregate findings (impact of the initiative as a whole) and country-level findings (impact of local projects). The evaluation partner will:

- Work with global and local implementation partners to ensure complete collection of evaluation data
- Conduct process (“how”) and impact (“what”) evaluations using agreed upon metrics and impact targets, and qualitative information to help Medtronic Philanthropy and its partners communicate about the impact of its five-year commitment
- Develop final report, including best practices and lessons learned (quantified where possible), to advance the field and guide future NCD programming for underserved populations

Timeline

The following is an at-a-glance timeline for the initiative. Please see Appendix B for a more detailed timeline for the first two years of the initiative.

Implementation and Evaluation Milestones						
	Conduct Needs Assessment	Country Launch	Establish Advisory Board	Select Local Demonstration Projects	Implement Pilot Projects and Monitor Progress	Complete Evaluation
Brazil	2014	2014	2014	2014	2015	2018
India	2013	2014	2014	2014	2014	2018
South Africa	2014	2014	2014	2014	2014	2018
US	2014	2014	2014	2014	2014	2018

Roles and Responsibilities

The following provides a breakdown of roles and responsibilities across Medtronic Philanthropy, the global implementation partner and the global evaluation partner.

Roles	
Organization	Responsibilities
Medtronic Philanthropy is accountable for the global initiative and responsible for strategic vision, thought leadership and financing.	Provide technical expertise on cardiovascular disease and diabetes
	Leverage relationships with in-country governments
	Advise on metrics for monitoring and evaluation
	Guidance on Continuum of Care Framework, and other technical and collaborative advancements
	Advise on country-level strategies based on needs assessments
	Provide guidance on selection of advisory board, consultative bodies and local partners
	Issue publications on findings

	<p>Convene Medtronic Philanthropy, global implementation and evaluation partners for pre-program activities and annual meetings – including start-up for program in January-February 2014</p>
<p>The global implementation partner is responsible for local grant making, local stakeholder engagement, program management, technical assistance, communications and supporting thought leadership.</p>	<p>Convene local stakeholders to ensure local project ownership</p> <p>Provide expertise in key areas, including local capacity building, patient-centered frameworks and interventions that focus on patient empowerment and frontline health workers and caregivers</p> <p>Establish and convene advisory boards and consultative bodies</p> <p>Issue and manage in-country RFPs for selecting local implementation partners</p> <p>Develop a strategy for awarding opportunity grants with guidance from Medtronic Philanthropy</p> <p>Engage with the ministries of health to build relationships, ensure alignment with government priorities and identify policy/advocacy partners</p> <p>Guide development of local project plans alongside local implementation partner(s)</p> <p>Manage local project launches</p> <p>Manage local projects and report on progress</p> <p>Work with the global evaluation partner to facilitate data collection and presentation of progress (through data visualization, dashboards, etc.)</p> <p>Identify opportunities for Medtronic Philanthropy to engage with local stakeholders and decision makers on cardiovascular disease and diabetes to advance partnerships across a Continuum of Care</p> <p>Provide key data and other information that will allow Medtronic Philanthropy to engage in the local, national and global dialogue on NCDs</p> <p>Represent Medtronic Philanthropy at opportunities when the organization is unable to participate</p> <p>Contribute to Medtronic Philanthropy’s role as a thought leader</p> <p>Develop and execute in-country communications plans ensuring outreach to local stakeholders</p>
<p>The global evaluation partner is responsible for global M&E framework, global set of monitoring and evaluation tools for local adaptation, in-country needs assessments, monitoring and assessing local projects’ performance, final evaluation of the global initiative and supporting thought leadership.</p>	<p>Conduct in-country needs assessments using tools grounded in the Continuum of Care Framework that are developed and adapted by the evaluation partner</p> <p>Work with Medtronic Philanthropy and Implementation Partner to develop a results framework, including metrics and impact expectations</p> <p>Develop global set of quantitative and qualitative tools and adapt for use locally</p> <p>Align monitoring and evaluation priorities with local project plans</p> <p>Analyze local projects’ performance</p> <p>Work with the global implementation partner to</p>

	facilitate data collection and presentation of progress (through data visualization, dashboards, etc.); develop national level dashboards that connect to the global monitoring framework
	Contribute to Medtronic Philanthropy’s thought leadership by coauthoring publications
	Provide guidance on course correction per monitoring data, if needed

Proposal Format

Proposals should include seven sections: 1) executive summary, 2) organizational background and capabilities, 3) illustrative year work plan, 4) proposed annual and 5 year budget, 5) proposed staff, 6) references and 7) appendix.

Please provide all information in the sequence indicated below. If there is supplemental information you would like to provide in addition to the requested information below, that is acceptable. **Please limit the overall response to 20 pages.**

Executive Summary (1 page) | Please provide an executive summary highlighting your organization’s unique strengths and competitive advantages. Summarize your approach to addressing the core objectives of this RFP, demonstrating why your organization is best qualified to serve as Medtronic Philanthropy’s global evaluation partner.

Organizational Background and Capabilities (7-9 pages) | Using Medtronic Philanthropy’s access strategy (see Appendix A), please respond to the following based on your organization’s capabilities and documented results.

Evaluation capabilities (See Appendix C, D and E for illustrative interventions, results and metrics)

- Describe the process and give three examples for how your organization conducts in-country needs assessments, highlighting the following:
 - Working within a donor-developed framework and designing tools for data collection
 - Working with local governments and stakeholders to identify data rich and geographically representative areas within countries of interest
 - Adapting tools to reflect cultural sensitivities while preserving data integrity
 - Conducting data collection
 - Reporting
 - Instances of when you changed your evaluation strategy mid-stream during a project and how your organization managed that transition
- Discuss your organization’s evaluation management approach (using the steps below as a guide) to develop, launch and manage a global public health evaluation:
 - Developing evaluations frameworks and adapting them for local settings
 - Training and technically assisting implementation partners with data collection
 - Harmonizing indicators across and within countries
 - Ongoing monitoring
 - Reporting
- If Medtronic Philanthropy could only track five metrics globally for this initiative, explain what they would be and how you selected them.

- Based on your experience in M&E in global health, outline what an expected level of change could be in the following areas following a three-year intervention – and how you would measure this change:
 - Disease awareness
 - Health seeking behavior
 - Empowerment of individuals living with a disease
 - Improved skills of frontline health workers
 - Policy/advocacy change
 (Feel free to specify the core interventions that could best drive change in these areas within three years, using examples that are evidence based.)
- Some have said that while we know which health interventions work, the challenge is replicating for national and global impact. In your experience, which metrics are the most effective in determining whether and how an intervention can be replicated? Which metrics are the most effective in bringing an intervention to scale? Please provide specific examples.
- Describe your organization’s expertise in conducting process and impact evaluations. What specific methodologies have you previously used to evaluate multi-country global public health programs? Provide three examples.
- Explain how you will monitor the initiative across the four countries. Provide detail on country-specific capabilities and global management capabilities.
- Please suggest the best way to determine the implementation partner’s vs. the evaluation partner’s roles and responsibilities for monitoring. What is the most reliable, objective and efficient way to coordinate monitoring of projects across multiple partners, locations and countries?
- Describe your plan for sharing key lessons, improvements and best practices across different country teams and local partners? Provide three examples of how you have conducted this work before.

Evaluation experience relevant to Brazil, India, South Africa and the United States

- Discuss your organization’s previous or ongoing work in Brazil, India, South Africa and the United States
 - If your organization has worked in all of the countries above, please provide at least one example of an initiative in each country that is relevant to the scope of services outlined in this RFP, with particular attention to determining local needs and measuring and evaluating programs to address those needs. Describe how you transferred lessons and approaches across countries. Based on your experience, what country-specific issues should Medtronic Philanthropy be aware of because they may affect the success of this initiative?
 - If your organization has not worked in one or more of these countries, please provide detailed steps of how you propose to undertake this project in the new country(ies), including the planning process, staffing, local partnerships, etc. to ensure an efficient start-up and continued success.

Evaluation experience, commitment and leadership in global public health

- Provide three examples, ideally representing work in the target countries of interest, with specific results of how your evaluation work advanced the field of global health. What lessons can you share from evaluating community-level interventions that are germane to our effort to measure and achieve impact of interventions focusing on NCDs? (Examples can come from interventions outside of the NCD area.)
- Provide examples of how you have collaborated with another global partner to achieve a shared goal. How do you recommend structuring a successful collaboration?

- Describe your organization’s relationships with key institutions in global public health (e.g., UN organizations, government agencies, global/local NGOs) and the results of key partnerships with these institutions.

Experience in NCDs OR institutional commitment to NCDs

- Explain your organization’s interest in working in the area of NCDs
 - If your organization has experience in NCDs, please describe (e.g., research)
 - If your organization does not have experience in NCDs, please describe how you will build your knowledge in this area

Previous work with private sector and/or corporate philanthropy partners

- Explain your organization’s experience in working with private sector partners
 - If your organization has experience working with the private sector, please describe prior work conducted and suggested ingredients for a successful collaboration with Medtronic Philanthropy
 - If your organization does not have experience working with a corporate donor, please describe how you propose to work with Medtronic Philanthropy and critical questions you have to assure a successful collaboration

Illustrative Year (1 page) | Please provide a quarterly work plan for years 1 through 5 using the template below.

Detailed Budget (1-3 pages) | Please provide a budget and budget summary outlining key activities and staffing by quarter for the timeframe of January 2014 to December 2018. Assume an illustrative budget of \$750,000 for year 1, \$400,000 for years 2 through 4 (\$1.2 million total) and \$675,000 for year 5 using the template provided.

Proposed Management Structure/Organizational Chart and Staff (1 ½ pages) | Please provide a description/graphic representation of the proposed management structure for this initiative, at both the HQ and country level. Please provide a CV for the project director and brief bios for three to five other key personnel proposed for this project, including key staff in countries of interest. Please clarify the skills capabilities of identified key staff as tied to the competencies needed under this RFP.

References (½ page) | Please provide two references from donors for which you have managed a similar size evaluation in the last two years. Include organization name and contact information (name, title, phone number and email address).

Appendix of Details (1 page) | Please provide any additional information about your organization’s capabilities in an appendix.

Questions

Medtronic Philanthropy will host an optional Bidder’s call on **October 30, 2013 from 10:00 a.m. to 11:00 a.m. EST and again on October 31, 2013 from 4:00 p.m. to 5:00 p.m. EST** to address questions about this RFP. Interested parties should sign up for one of these slots, please email medtronicphilanthropy@medtronic.com if would like to receive details of these calls.

Any questions should be submitted in writing no later than **12:00 p.m. EST on October 28, 2013** via email to medtronicphilanthropy@medtronic.com. Only those questions submitted via email will be discussed during this call. Collated questions with responses will be distributed to all applicants as soon as **November 1, 2013**.

Submission Instructions

Medtronic Philanthropy has a four-step process for proposal submission:

- Step 1: Interested parties should indicate interest via medtronicphilanthropy@medtronic.com to receive information and begin the application process.
- Step 2: Applicants should complete their organization's profile information in our online system and provide Medtronic Philanthropy information to determine eligibility for application.
- Step 3: Approved applicants will need to complete and submit their proposal application by **5:00 p.m. EST November 27, 2013**.
- Step 4: Successful applicant organizations will be invited for final presentations the week of December 16, 2013.

Medtronic Philanthropy may contact applicants throughout the process to clarify key points or answer questions as needed. It is the applicant's responsibility to ensure that files are complete and transmitted by the deadline. The applicant bears full responsibility for data errors and omissions.

Timeline and Notification

Applicants selected for awards will be notified in January 2014.

RFP Milestones	Date (on or about)
Issue RFP	October 22, 2013
Submit questions about the RFP	October 28, 2013
Conference call to address questions about the RFP	October 30 and 31, 2013
Submit proposal	November 27, 2013
Invitation to finalists to give in-person presentation	Week of December 9, 2013
Finalist presentations	Week of December 16, 2013
Notification of award decision	By January 15, 2014
Kick Off	By February 15, 2014

Issuance of this request for proposals does not constitute an award commitment on the part of Medtronic Philanthropy, nor does it commit to pay for costs incurred in the preparation and submission of applications. Further, Medtronic Philanthropy reserves the right to reject any or all applications received.

Guidance for Budget Submission

In preparing a notional 5 year budget, please use the budget ceiling of \$2.625 over a five-year period.

A detailed budget should be prepared in Excel with a summary worksheet addressing the following categories totaled by year:

1. Salary and fringe benefits: List personnel individually by title; include annual salary, percent time on the project, and fringe benefits in accordance with the applicant's personnel policies.
2. Travel and transportation: Indicate the number of trips, domestic, regional, and international, and the estimated costs per trip. Specify the origin and destination for proposed trips, mode and duration of travel, and number of individuals traveling. Travel expenses should be based on the applicant's standard travel policies.
3. Equipment: Include a breakdown of equipment by type including unit cost and quantity.

4. Supplies: Include a breakdown of supplies by type including unit cost and quantity.
5. Trainings, workshops, and events: Break down by type of training or event, including number of participants and days.
6. Contractual: Any goods and services being procured through a contract mechanism, including sub-grants and consultants; list each contract separately and provide a breakdown of costs included, such as a daily rate and number of days for consultants.
7. Other direct costs: This includes communications, insurance, printing, report preparation costs, etc.
8. Indirect costs: This should include institutional overhead and other indirect expenses. Please outline what this includes and the proposed rate.

Medtronic Philanthropy encourages applicants to focus resources on in-country work. Applications will be reviewed for cost realism and cost effectiveness in accordance with the evaluation criteria. Opportunities to cost share or leverage other donor funds is highly regarded.

A supporting budget narrative should be prepared that addresses the following:

- Amount and duration of funding requested
- Explanation and justification for all cost items, making sure to include:
 - A breakdown of all items included in the fringe benefit rate (e.g., unemployment insurance, workers compensation, health and life insurance, retirement, FICA, etc.) and the costs of each, expressed in dollars and as a percentage of salaries
 - An explanation and justification of all equipment costs
 - A breakdown of all costs included in the indirect rate
- Other external sources of funding, if any; financial and/or other forms of support (e.g., “in-kind” support) that the recipient organization will commit to the project
- Brief list of major sources of financial support for your organization and explanation of whether there is any link – financial, personal or professional relationship, or otherwise – to a government official. A government official is very broadly interpreted to include:
 - Employees of governments, and other civil servants, performing government functions (for example, product approvals, pricing, reimbursement and purchasing)
 - Those engaged by governments (including private individuals appointed by such entities) to provide advice involving a governmental function (e.g. private health care professionals, experts, consultants, members of advisory panels, etc.)
 - Employees of government-funded institutions (e.g. public hospitals and universities, or government controlled businesses)
 - Officers of political parties, candidates for public office
 - Members of international public organizations (e.g., UN, World Bank, WHO) or any government agency
 - Those directly associated with the Government official, including their staff, business partners, close associates and family

Illustrative Year - Workplan Template

	Key Lead	Collaborator (within Core Team and/or sub-partner)	Measures & Targets (if applicable)	Final Due Date	Status: on track; needs attention; behind schedule	Implementation Schedule 2014											
						Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
Goal 1																	
Sub Task 1																	
Sub Task 2																	
Sub Task 3																	
Sub Task 4																	
Sub Task 5																	
Goal 2																	
Sub Task 1																	
Sub Task 2																	
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Sub Task 5																	

Confidentiality Statement

By responding to this Request for Proposal (RFP), the submitting organization agrees to keep confidential all information, whether written or verbal, concerning the business and affairs of this prospective project, Medtronic Philanthropy and its associated companies. Medtronic Philanthropy, otherwise known as the “MEDTRONIC PHILANTHROPY” is looking for an organization to manage, and help execute its strategy around expanding access to chronic disease care for the underserved in four focus countries (Brazil, India, South Africa and the United States) referred to as “MEDTRONIC PHILANTHROPY PROJECT”. All information furnished by any provider to MEDTRONIC PHILANTHROPY under this RFP, or in contemplation of a contract shall be considered to be the property of Medtronic. This RFP is not an offer to contract and represents a Request for Proposal only.

Medtronic Philanthropy looks forward to the timely submission of a full proposal in response to the above requests.

Global Access: *Snapshot of Our Strategy*



Medtronic Philanthropy's Goal | To expand access to chronic disease care for the underserved. To reach this goal, we aim to strengthen health systems by advancing policies, empowering patients and leveraging caregivers and frontline health workers to enable people living with chronic disease to successfully manage their condition in acute events and over the long term.

Value Proposition, Principles and Approach | If policies are in place to support NCD care, if people affected by diabetes and cardiovascular disease are actively striving for good health, and if care is facilitated by frontline support close to home, then patients are more likely to remain engaged in the healthcare system and effectively manage their condition in acute events and over the long term. As a result, we expect to see improved patient outcomes and population health, moving us closer to the targets set forth in the Global Monitoring Framework for Non-Communicable Diseases.

Guiding Principles

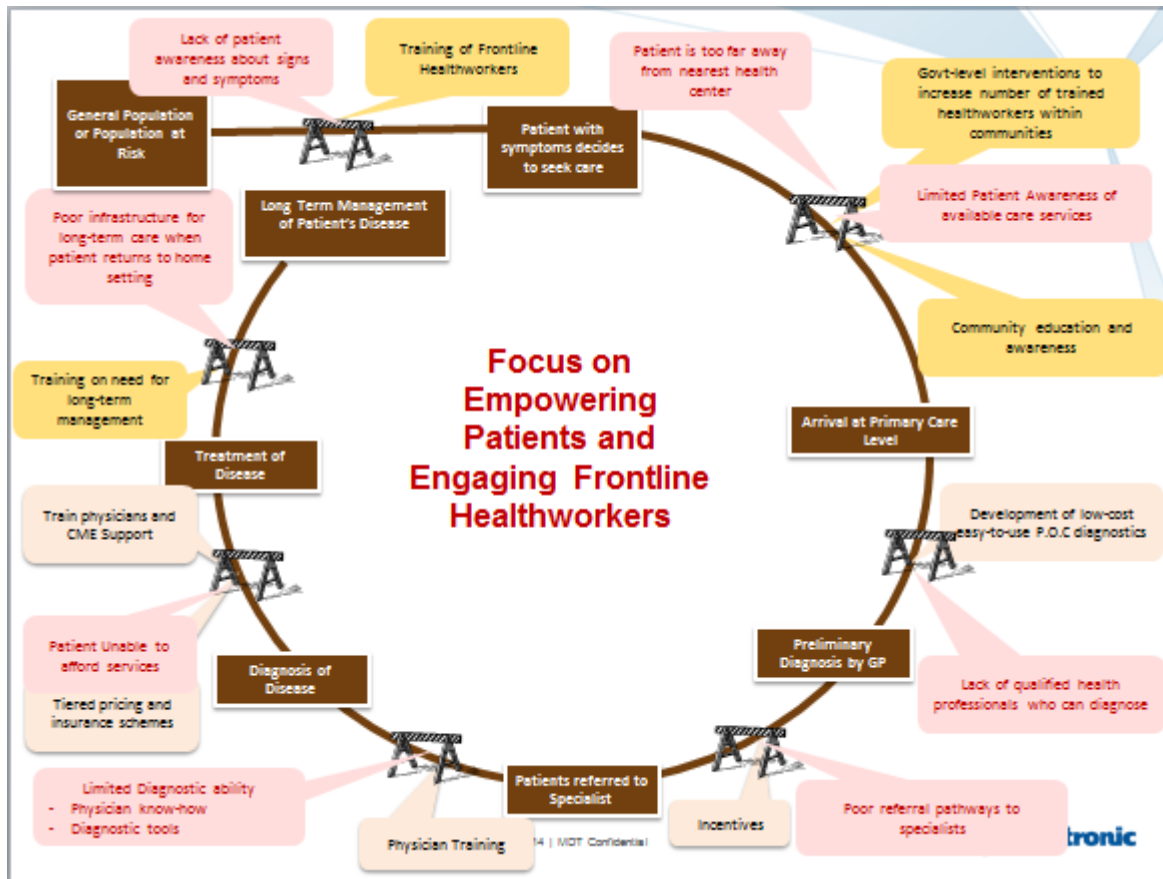
- Address the needs of the underserved
- Use Continuum of Care Framework to identify needs within the system
- Follow Theory of Change
- Focus on Evidence-based Interventions
- Integration in existing platforms for other health issues to enable efficiency and scale
- Prioritize Local Ownership, Execution, Sustainability
- Strengthen and Expand Local Capacity

- Build and Enable Partnerships
- Shape and Share Best Practices, locally and globally

Approach

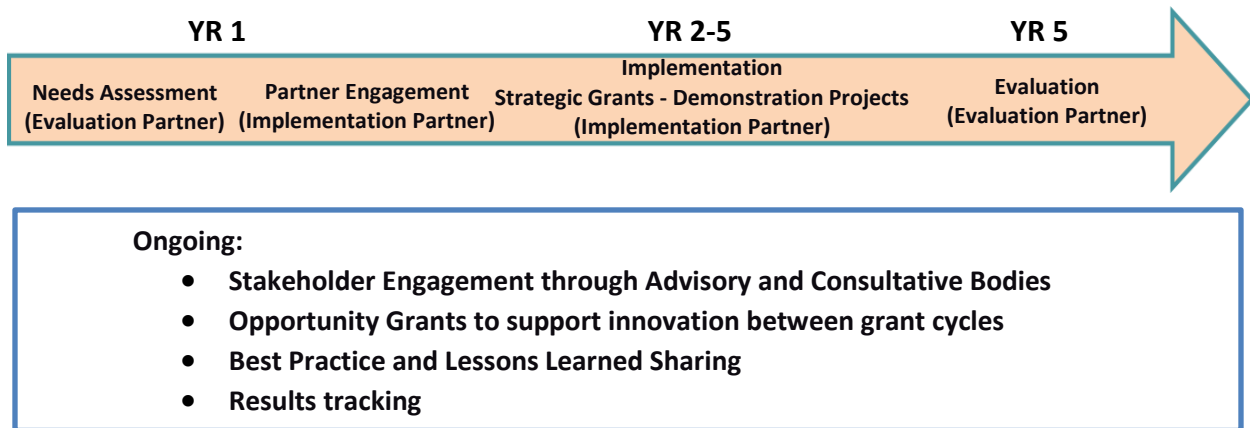
- Identify needs and opportunities in the continuum of care for cardiovascular disease and diabetes in key geographies
- Partner and engage with local stakeholders including community organizations and policy makers to address needs
- Issue strategic grant support to demonstrate impact of innovative interventions that empower patients, build capacity of frontline health workers, and enable policy

Continuum of Care | The Continuum of Care is an essential framework that Medtronic Philanthropy uses to map the patient care pathway within a community. The framework enables a quantitative and qualitative assessment of both the *demand* for health care by individuals within a community and the *supply* of health care delivered by a health system. This systematic assessment provides insights into the barriers, needs and opportunities within a health system to expand access to care. Medtronic Philanthropy uses this information as a guide to engage multi-sector stakeholders, including policy makers, and partner with local community organizations through strategic grant making that supports innovative demonstration projects to empower patients and build the capacity of frontline health workers.



Appendix B: Global Access - Tying it Together In-country Timeline

Global Access: Tying it Together In-country | Medtronic Philanthropy uses a Continuum of Care Framework to identify and then address needs within the health system through demonstration projects – in collaboration with government and local partners. The in-country program lifecycle ideally spans 5 years and is deeply rooted in local ownership and stakeholder engagement. The chosen global implementation and evaluation partners are involved in country across this lifecycle and will deliver key results. In addition to specific activities that occur at various stages of our in-country lifecycle, there are key strategies that are ongoing.



Ensuring local ownership requires that locally managed advisory and consultative bodies are established and facilitated. Medtronic Philanthropy is clear that no one sector alone can address the cardiovascular disease and diabetes needs of the underserved. Supporting local initiatives and advancing local policy is best advised by local thought leaders at national and community levels. Medtronic Philanthropy aims to support stakeholder engagement through these bodies to ensure sharing of information, signaling of key opportunities to innovate, share lessons and engage in collaborative decision-making.

Year 1: Needs Assessment and Partner Engagement

Key activities in this area include:

- Global Evaluation Partner:
 - Conducting an environmental scan and needs assessment using the continuum of care as a framework and key best practice indicators across the continuum of care as identified by the global evaluation partner and adapted locally by local partners.
- Global Implementation Partner:
 - Engagement of key stakeholders involved across the Continuum of Care to discuss gaps and opportunities to address health system barriers, potential advisory board participants to ensure involvement of key local stakeholders will should be identified and invited.

Deliverables and Results: At the end of the first year each country should have a needs assessment report, preliminary identification of sub grantees to address the needs identified, guidelines, metrics, and indicators, and a draft implementation plan for each area of focus.

Status to Date: Needs Assessment and Partner Engagement are underway and will be completed by Medtronic Philanthropy staff in partnership with local organizations in India. For recent results from our partner MAMTA: Please reference: Results from Needs Assessment in Shimla and Udaipur <https://dl.dropboxusercontent.com/u/70935533/Medtronic%20Report%20%28Medtronic%20Philanthropy%29.pdf.zip>

Geographies and partners have been identified in the US, but work has not been started. South Africa and Brazil are still in early pre planning stages.

Year 2 – 4: Implementation: Demonstration Projects – Strategic Grants

Once the needs assessment is completed, results are shared, and partners are engaged, the following activities are anticipated:

- Global Implementation Partner:
 - Confirming potential local partners, finalizing country-level implementation plans, deploying local RFPs for strategic grants to support innovative community interventions that empower patients, enable the frontline, and advance local policy.
 - Final grants are awarded to chosen demonstration projects, while results tracking tools are deployed and stakeholders are engaged as a consortium of partners across the continuum of care impacting demonstration project locations.
 - In addition, a local advisory board should be confirmed prior to deploying local RFPs.
- Global Evaluation Partner:
 - Provide results tracking template for adaptation locally by implementation partner.
 - Capture aggregated results, best practices, and lessons quarterly, biannually, and annually.
 - Prepare master presentation of cross-country and cross project learning for use locally.

Deliverables and Results: A local advisory board, final RFPs, final demonstration grants, and results tracking framework, master presentations

Year 5: Evaluation

Once final phase of each demonstration project is completed, impact results for each project, across projects, and across countries will be conducted. Specific activities include:

- Global Implementation Partner:
 - Final reports for all grants, convening of findings, consortia discussions, in country donor panels
- Global Evaluation Partner:
 - Design and execution of impact evaluation using global approach adapted locally
 - Involvement of key grantees in design and evaluation
 - Preparation of papers and presentations based on final impact results

Deliverables and Results: Evaluation tools, final data, final papers and presentation of Global Access results in country and globally.

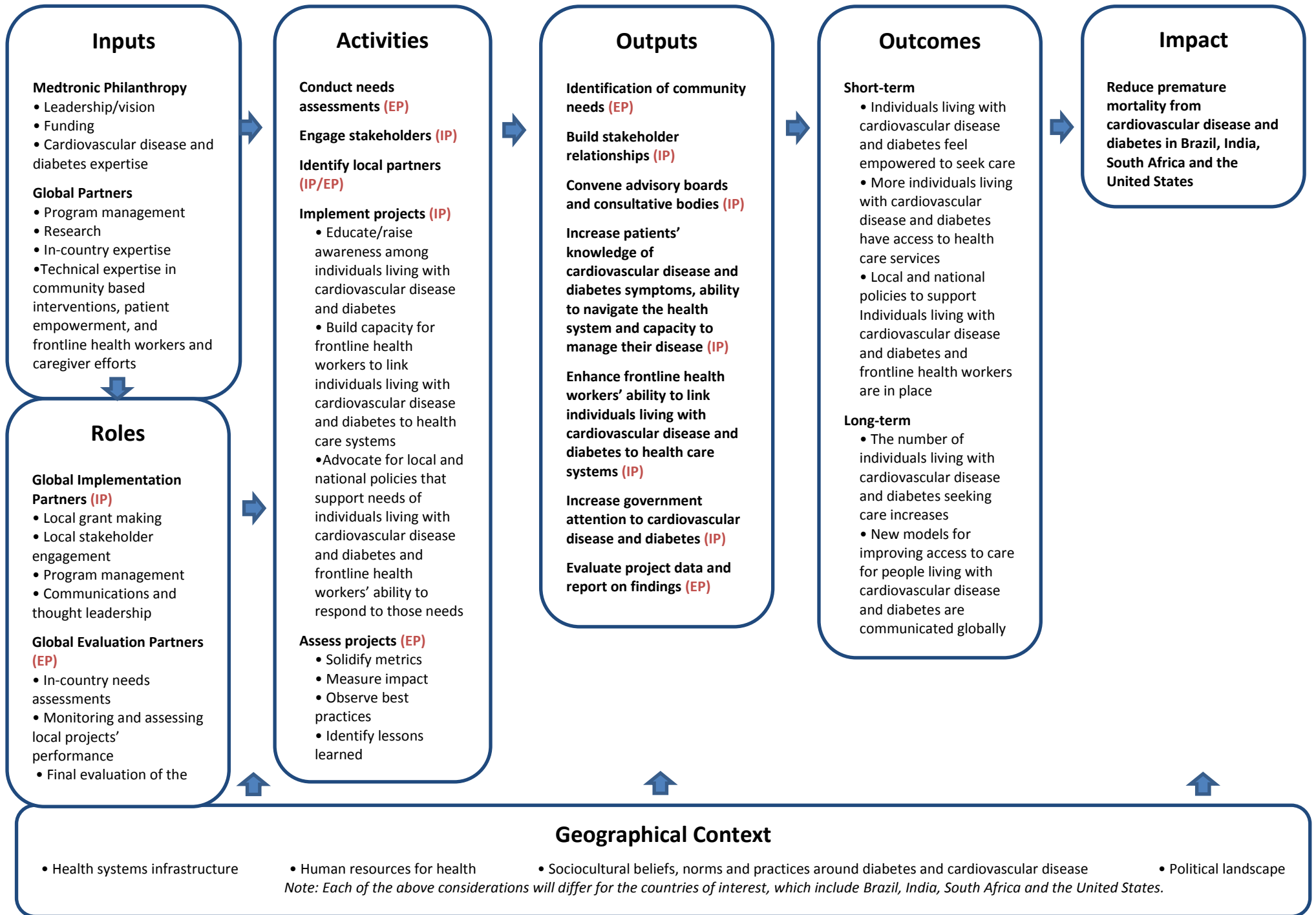
Timeline for Calendar Year 2014 and 2015

Quarterly Activities Timeline	2013		2014				2015			
	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
Pre-program Activities										
Select global implementation partner										
Select global evaluation partner										
Initiate onboarding and planning activities										
India										
COMPLETE: Conduct in-country needs assessment										
Establish advisory board/consultative body										
Issue RFP and select local implementation partner(s)										
Identify local evaluation partner(s)										
Finalize implementation plan w/local partner(s)										
Finalize evaluation plan w/local partner(s)										
Implement local projects										
Monitor and report local projects' progress										
Analyze local projects' performance										
United States										
COMPLETE: Identify local implementation partner(s)										
COMPLETE: Identify local evaluation partner(s)										
UNDERWAY: Conduct in-country needs assessment										
Establish advisory board/consultative body										
Finalize implementation plan w/local partner(s)										
Finalize evaluation plan w/local partner(s)										
Implement local projects										
Monitor and report local projects' progress										
Analyze local projects' performance										
South Africa										
Conduct in-country needs assessment										
Establish advisory board/consultative body										
Issue RFP and select local implementation partner(s)										
Identify local evaluation partner(s)										
Finalize implementation plan w/local partner(s)										
Finalize evaluation plan w/local partner(s)										
Implement local projects										
Monitor and report local projects' progress										
Analyze local projects' performance										
Brazil										

Conduct in-country needs assessment										
Establish advisory board/consultative body										
Issue RFP and select local implementation partner(s)										
Identify local evaluation partner(s)										
Finalize implementation plan w/local partner(s)										
Finalize evaluation plan w/local partner(s)										
Implement local projects										
Monitor and report local projects' progress										
Analyze local projects' performance										

Timeline Key	Medtronic Philanthropy	
	Global implementation partner	
	Global evaluation partner	

Appendix C: Measuring Progress: Illustrative Logic Model - Potential Flow of Inputs to Impact



Appendix D: Illustrative Results and Metrics

Empower Patients | The strategies for empowering patients include improving health care seeking behaviors, patients' ability to navigate the health care system and overall disease management. Below, please find a list of potential tactics that we suggest be used to achieve these goals:

- Train patient advocates
- Educate patient populations living with diabetes and cardiovascular disease
- Educate caregivers
- Create culturally appropriate resources
- Support community based organizations
- Advance patient advocacy with policy makers

Using these tactics, Medtronic Philanthropy expects to see the following improvements in health system navigation, patient and caregiver education, awareness and behavior change and patient outcomes. Please see below for specific short-term (ST) and long-term (LT) outcomes.

- **Health System Navigation**
 - Increase number of patients that navigate the system effectively (ST)
 - Increase number of patient advocates/navigators in the system (LT)
- **Patient and Caregiver Education, Awareness and Behavior Change**
 - Increase awareness of disease symptoms (ST)
 - Increase patients who know their numbers (e.g., BP, A1C levels) (ST)
 - Increase caregiver knowledge of symptoms and disease management options (ST)
 - Increase patient awareness of services available (ST)
 - Strengthen role of caregivers in management of chronic condition (LT)
 - Increase patient satisfaction of care experience (LT)
 - Increase Patient ability and participation in managing disease (LT)
- **Patient Outcomes**
 - Improve cardiovascular disease and diabetes indicators (LT)
 - Improve patient quality of life (LT)
 - Reduce secondary acute events (LT)
 - Reduce in readmission rates (LT)
- **Policy Movement**
 - Include patient perspective on policy development (LT)
 - Change policy to include patient empowerment (LT)

To measure both the short-term and long-term outcomes described above, Medtronic Philanthropy would like the following metrics to be used to evaluate progress towards the overall goal of patient empowerment.

- **Health System Navigation**
 - % increase in patient satisfaction of navigation through health system
 - % Increase in patient advocates/navigators
- **Patient and Caregiver Education, Awareness and Behavior Change**
 - % increase per year of total patients educated on signs and symptoms
 - % increase per year of patients who know numbers
 - % increase in caregiver knowledge
 - % increase in patients who know about available services
 - % increase in patient satisfaction of care experience
 - % increase in meeting patient self management goals
- **Patient Outcomes**
 - % improvement in cardiovascular disease and diabetes indicators (e.g., BP, A1C levels)
 - % increase of patient quality of life
 - % reduction in secondary acute events
 - % reduction in readmission rates

- **Policy Movement**
 - % increase in policy discussions with patient perspective

Enable Frontline Health Workers | The strategies for enabling frontline health workers include linking frontline health workers to the health care system and increasing the effectiveness of frontline health care workers. Below, please find a list of potential tactics that we suggest be used to achieve these goals:

- Leverage frontline health worker models across diseases, geographies, systems
- Advance frontline health worker role with policy makers
- Support development of accredited frontline health worker chronic care models for resource constrained settings
- Enable medical teams to fully utilize frontline health workers
- Train frontline health workers

Using these tactics, Medtronic Philanthropy expects to see the following improvements in health system strengthening, frontline health worker effectiveness and policy movement. Please see below for specific short-term (ST) and long-term (LT) outcomes.

- **Health System Strengthening**
 - Identify effective, regionally recognized integrated disease/frontline health worker models (ST)
 - Identify and engage policy makers in the project (ST)
 - Increase care management teams which include frontline health workers (ST)
 - Increase number of systems adopting integrated disease/frontline health worker models (LT)
 - Increase recruitment, retention and effective placement of frontline health workers in communities (LT)
- **Frontline Health Worker Effectiveness**
 - Increase number of knowledgeable frontline health workers providing care (ST)
 - Increase effectiveness of frontline health workers (ST)
- **Policy Movement**
 - Policy changed to include frontline health worker national standards, reimbursement. (LT)
 - Increased recognition of frontline health workers nationally (LT)

To measure both the short-term and long-term outcomes described above, Medtronic Philanthropy would like the following metrics to be used to evaluate progress towards the overall goal of enabling frontline health workers.

- **Health System Strengthening**
 - Identify frontline health worker models of care that are replicable across a region
 - Identify key opinion leaders on policy to help inform project and country level policy
 - % increase in number of care management teams using frontline health workers
 - % increase in number of systems adopting integrated disease/ frontline health worker models
 - % improvement in recruitment/retention of frontline health workers in communities
- **Frontline Health Worker Effectiveness**
 - % increase in number of knowledgeable frontline health workers
 - % increase in frontline health worker performance measures
- **Policy Movement**
 - Policy changes at the regional or country level to include frontline health worker standards/reimbursement
 - % Increase in policies on frontline health workers

Engage in Global NCD Advocacy | The strategies for engaging in global NCD advocacy supporting national and state NCD plans, patient empowerment and frontline health worker integration policies. Below, please find a list of potential tactics that we suggest be used to achieve these goals:

- Develop an NCD advocacy plan for Medtronic Philanthropy
- Convene partners on key advocacy goals for NCDs, patient empowerment and frontline health workers
- Support local, national and global NCD advocacy work with select NGO leaders
- Partner with global health and private sectors

Using these tactics, Medtronic Philanthropy expects to see the following improvements in global and country NCD policies. Please see below for specific short-term (ST) and long-term (LT) outcomes.

- **Global NCD Policy**
 - Develop advocacy plan for Medtronic Philanthropy (ST)
 - Improve NCD visibility at global health meetings (LT)
 - Support convenings and country-country exchanges on south-south collaboration on NCD plans and policies (LT)
 - Support convenings and country-country exchanges on global patient empowerment and frontline health worker plans and policies (LT)
- **Country NCD Policy**
 - Develop an advocacy plan with partners in each focus country with NCD Alliance (LT)

To measure both the short-term and long-term outcomes described above, Medtronic Philanthropy would like the following metrics to be used to evaluate progress towards the overall goal of engaging in global NCD advocacy.

- **Global NCD Policy**
 - Develop global NCD policy advocacy plan for Medtronic Philanthropy
 - % increase in number of Global health meetings with NCDs on agendas
 - % increase in number of convenings and country-country exchanges on NCD policy collaboration
 - % increase in number of convenings and country-country exchanges on patient empowerment and FLHW policies
- **Focus Country NCD Policy**
 - Develop advocacy plans with partners in focus countries with NCD Alliance

Appendix E: Illustrative Interventions and Results

Illustrative Interventions to Consider

- Community level interventions
 - Simplified frontline health worker and caretaker tools, training and approaches for cardiovascular disease and diabetes
 - Integration of CVD and diabetes into existing community health education efforts – HIV/AIDS; maternal and women health; child health;
 - Social marketing of CVD and diabetes care
 - Community preparedness for acute events
- Technology solutions
 - mHealth
 - Tablets
 - Online training modules
- Advocacy and Empowerment
 - Simplified advocacy tools for CVD and diabetes
 - Leadership training for people impacted
 - Representation of people affected in design, evaluation of interventions, on advisory boards and in policy dialogue
- Policy Dialogue
 - Global and national level cross-exchange and improvement initiatives – south to south
 - Facilitation of advisory and consortium bodies

Appendix F: Frequently Asked Questions

Can interested parties apply for both global implementation partner and global evaluation partner?

Yes, a single organization may apply for both, but both roles cannot be awarded to the same organization. Medtronic Philanthropy aims to ensure that evaluation be independent from implementation. Therefore two unique organizations will be selected as partners. *Note: Universities are eligible to apply.*

May consortia apply?

Yes, a consortium of partners is eligible to apply. If proposals include more than one organization, please outline the relationship of “prime” and “sub” contractors. Note: Budgets must include all costs, including subcontracting costs.

Is the budget ceiling inclusive of global and local support?

Yes, the budget ceiling is all inclusive. Please keep overhead, staff, travel and out of pocket costs within the budget ceiling.

Is experience in NCDs, particularly cardiovascular disease and diabetes, a requirement for interested partners?

No. While experience in NCDs will be prioritized, strong candidates with applicable global health expertise will be considered.

Are organizations outside the US eligible to apply?

Yes, as long as an organization has prior experience working in the US.