Tender Specifications

for

Systematic literature review on interventions for communicable diseases prevention and control in prisons and other custodial settings

Framework service contract

Publication Reference: ***OJ/09/06/2015-PROC/2015/017***

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Introduction to ECDC

The European Centre for Disease prevention and Control (ECDC) is an agency of the European Union, established by the European Parliament and Council Regulation 851/2004 of 21 April 2004. Its purpose is to identify, assess and communicate current and emerging threats to human health from communicable disease. Within this broad mission statement, the main technical tasks of the Centre fall into the following four categories:

- The publication of independent scientific opinions, bringing together technical expertise in specific fields through its various EU-wide networks and via ad hoc scientific panels;
- The provision of technical assistance to EU member states, communication of the Centre's activities and results and dissemination of information tailored to different audiences;
- The development of epidemiological surveillance at the European level and the maintenance of networks of reference laboratories; and
- Early Warning and Response based on 'round the clock' availability of specialists in communicable diseases.

Further information about the Centre can be found on the ECDC website www.ecdc.europa.eu.

The tender process

The purpose of competitive tendering for awarding contracts is two-fold:

- to ensure the transparency of operations;
- to obtain the desired quality of services, supplies and works at the best possible price.

The applicable regulations, namely directives **92/50/EEC, 93/36/EEC and 93/37/EEC**, oblige the ECDC to guarantee the widest possible participation, on equal terms in tender procedures and contracts.

1 Overview of this tender

1.1 Description of the contract

The services required by ECDC are described in the terms of reference in **section 2** of the present tender specifications.

In drawing up a tender, tenderers should bear in mind the provisions of the draft contract in **Annex I**. In particular, the draft contract indicates the method and the conditions for payments to the contractor.

Tenderers are expected to examine carefully and respect all instructions and standard formats contained in these specifications and the invitation to tender. An offer which does not contain all the required information and documentation may be rejected.

1.2 Timetable

Activity	Date	Comments
Launching of tender	12/06/2015	Dispatch of contract notice to the OJ
Site visit or clarification meeting (if any)	-	Not applicable to this tender
Deadline for request of clarifications	24/07/2015	
Deadline for submission of offers	**03/08/2015**	At 16:30 local time if hand delivered
Interviews (if any)	-	Not applicable to this tender
Opening session	10/08/2015	At 10:00 local time
Date for evaluation of offers	Opening date plus 1 week	Estimated
Notification of award to the selected Tenderer	Evaluation date plus 3 weeks	Estimated
Contract signature	Notification date plus 2 weeks	Estimated

1.3 Participation in the tender procedure

This procurement procedure is open to the natural or legal person wishing to bid for the assignment and established in the European Union, European Economic Area and Stabilisation and Association Agreements countries.

Tenderers must not be in any situation of exclusion under the exclusion criteria indicated in section 3.1 of these tender specifications and must have the legal capacity to allow them to participate in this tender procedure (see section 3.2.1).

Please note that any attempt by a tenderer to obtain confidential information, enter into unlawful agreements with competitors or influence the evaluation committee or ECDC during the process of examining, clarifying, evaluating and comparing tenders will lead to the rejection of his tender and may result in administrative penalties.

1.4 Participation of consortia

A consortium may submit a tender on condition that it complies with the rules of competition.

A consortium may be a permanent, legally-established grouping or a grouping which has been constituted informally for a specific tender procedure. Such grouping (or consortium) must specify the company or person heading the project (the leader) and must also submit a copy of the document authorising this company or person to submit a tender. All members of a consortium (i.e., the leader and all other members) are jointly and severally liable to ECDC.

In addition, each member of the consortium must provide the required evidence for the exclusion and selection criteria (see section 3 of these tender specifications). Concerning the selection criteria 'technical and professional capacity', the evidence provided by each member of the consortium will be checked to ensure that the consortium **as a whole** fulfils the criteria.

The participation of an ineligible person will result in the automatic exclusion of that person. In particular, if that ineligible person belongs to a consortium, the whole consortium will be excluded.

1.5 Subcontracting

If subcontracting is envisaged, the tenderer must clearly indicate in the tender which parts of the work will be subcontracted. The total value of the subcontracted part of the services cannot represent the total value of the contract value.

Subcontractors must satisfy the eligibility criteria applicable to the award of the contract.

If the identity of the subcontractor is not known at the time of submitting the tender, the tenderer who is awarded the contract will have to seek ECDC's prior written authorisation before entering into a subcontract.

Where no subcontractor is given, the work will be assumed to be carried out directly by the tenderer.

1.6 Presentation of the tender

Tenders must comply with the following conditions:

1.6.1 Double envelope system

Offers must be submitted in two sealed envelopes. The inner envelope contains 3 separate inner envelopes clearly marked Envelopes A, B and C (see Invitation to tender).:

The content of each of these envelopes shall be as follows:

1. Envelope A – Administrative documents
   One original and one copy of:
   - The signed, dated and duly completed **Tender Submission Checklist** using the template in **Annex IX**;
   - The duly filled in, signed and dated **Exclusion Criteria and Non-Conflict of Interest Declaration**(s) as requested in section 3.1 and using the standard template in **Annex II**;
   - The duly filled in, signed and dated **Legal Entity Form**(s) as requested in section 3.2.1 and using the standard template in **Annex III** as well as the requested accompanying documents;

- The duly filled in, signed and dated **Financial Identification Form**[1] using the template in **Annex IV**;
- Financial and economic capacity documents as requested in section 3.2.2;
- The technical and professional capacity documents as requested in section 3.2.3;
- A statement containing the name and position of the tenderer's **authorised signatory**; and
- In case of consortia, a **consortium agreement** duly signed and dated by each of the consortium members specifying the company or person heading the project and authorised to submit a tender on behalf of the consortium (please see section 1.4 of these tender specifications)**.**

2. Envelope B – Technical proposal
    - One original (unbound, signed and clearly marked as "Original") and four copies (bound and each marked as "Copy") of the Technical Proposal, providing all information requested in section 4.1.

3. Envelope C – Financial proposal
    - One signed original and four copies of the Financial Proposal, based on the format in found in **Annex VII**.

Tenderers are welcome to submit in an environmentally friendly way, e.g., by choosing a simple and clear structure (list of contents and consecutive page numbering), double-sided printing, limiting attachments to what is required in the technical specifications (no additional material) and avoiding plastic folders or binders. This will not affect the evaluation of the tender.

1.6.2 Language

Offers must be submitted in one of the official languages of the European Union. ECDC prefers, however, to receive documentation in English. Nonetheless, the choice of language will be not play any role in the consideration of the tender.

1.7 Confirmation of offer submission

In order to keep track of offers due to arrive, tenderers who do not hand deliver their offers are requested to complete and return the form found **Annex VIII**.

1.8 Contacts between ECDC and the tenderers

Contacts between ECDC and tenderers are prohibited throughout the procedure, except in the following circumstances:

1.8.1 Written clarification before the deadline for submission of offers

Requests for clarification regarding this procurement procedure or the nature of the contract should be done **in writing only** and should be sent by mail, fax or email to:

[1] In the case of a consortium, only **one** Financial Identification Form for the whole consortium shall be submitted, nominating the bank account into which payments are to be made under the contract in the event that the respective tender is successful.

ECDC
Attn: Procurement Back Office

Granits väg 8
171 65 Solna
Sweden
Fax: +46 8 58 60 10 01
email: procurement@ecdc.europa.eu

Each request for clarification sent to ECDC should indicate the publication reference and the title of the tender.

The deadline for clarification requests is indicated in the timetable under section 1.2. Requests for clarification received after the deadline will not be processed.

At the request of the tenderer, ECDC may provide any additional information or clarification resulting from the request for a clarification on the ECDC Procurement webpage:
http://www.ecdc.europa.eu/en/aboutus/calls/Pages/ProcurementsandGrants.aspx.

ECDC may, on its own initiative, inform interested parties of any error, inaccuracy, omission or other clerical error in the text of the contract notice or in the tender specifications by publishing a corrigendum on its website.

Tenderers should regularly check the ECDC website for updates.

1.8.2 After the closing date for submission of tenders

If, after the tenders have been opened, some clarification is required in connection with a tender, or if obvious clerical errors in the submitted tender must be corrected, the ECDC may contact the tenderer, although such contact may not lead to any alteration of the terms of the submitted tender.

1.8.3 Visits to ECDC premises

No site visits at ECDC's premises are deemed necessary for this procedure.

1.8.4 Interviews

The Evaluation Committee will not conduct interviews for this procedure.

1.9 Division into Lots

This tender is not divided into lots. The tenderer must be in a position to provide all the services requested.

1.10 Variants

Not applicable.

1.11 Confidentiality and public access to documents

All documents presented by the tenderer become the property of the ECDC and are deemed confidential.

In the general implementation of its activities and for the processing of tendering procedures in particular, ECDC observes the following EU regulations:

- Council Regulation (EC) No. 1049/2001 of 30 May 2001 regarding public access to European Parliament, Council and Commission documents; and
- Council Regulation (EC) No. 45/2001 of 18 December 2000 on the protection of individuals with regard to the processing of personal data by the Community institutions and bodies and on the free movement of such data.

The tender process will involve the recording and processing of personal data (such as a tenderer's name, address and CV). Such data will be processed pursuant to Regulation (EC) No. 45/2001.

Unless indicated otherwise, a tenderer's replies to questions and any personal data requested by ECDC are required to evaluate the tender in accordance with the tender specifications and will be processed solely for that purpose by ECDC. A tenderer is entitled to obtain access to their personal data on request and to rectify any such data that is inaccurate or incomplete.

If you have any queries concerning the processing of your personal data, you may address them to the ECDC Data Protection Officer dpo@ecdc.europa.eu. You also have the right of recourse at any time to the European Data Protection Supervisor for matters relating to the processing of your personal data

1.12 Contractual details

A draft contract is attached to these technical specifications as **Annex I**.

ECDC wishes to conclude a framework contract to provide consultancy services for performing a systematic literature review on interventions for communicable diseases prevention and control in prisons and other custodial settings, for a period of up to twenty-four months, with possible renewals up to two times 12-month. A framework contract will establish the terms governing specific contracts to be awarded during a given period; in particular, with regard to price.

Signature of the framework contract imposes no obligation on the Centre to order services. Only the implementation of the framework contract through specific contracts/order forms is binding for ECDC.

Each specific contract/order form will contain details of deliverables and timelines for particular services to be provided.

1.13 Electronic exchange of documents

Please refer to the draft contract attached to these technical specifications as Annex I. The related documentation can be found at: *http://ec.europa.eu/dgs/informatics/supplier_portal/index_en.htm*. Other applications currently under development may be implemented on a voluntary basis during the contract execution.

1.14 Additional information

By virtue of article 134(1)(f) and article 134(3) of the Rules of Application of the Financial Regulation, ECDC reserves the option to launch further negotiated procedure, with the contractor chosen as a result of the present call for tender, for new services consisting in the repetition of similar services during the three years following the signature of the original contract.

2 Terms of reference

The terms of reference will become an integral part of the contract that may be awarded as a result of this tender procedure.

2

2.1 Introduction: Background to the invitation to tender

According to the International Centre for Prison Studies (ICPS) nowadays there are more than eight million inmates worldwide[2]. The World Health Organization estimates that at any given time, over two million people are imprisoned in penal institutions in Europe[3].

Compared with the general public, prisoners have an increased prevalence of HIV, hepatitis B, hepatitis C, syphilis, gonorrhoea, chlamydia, and tuberculosis, and according to scientific literature, inmates who are healthy on entry have a considerable risk of leaving prison with HIV, tuberculosis, a drug problem or poor mental health.

The increased risk of disease transmission in correctional settings is recognised as a major issue for the health of both inmates and the general population, as vast majority of people in prisons eventually return to their communities. The main risk factors linked with increased transmission rate in correctional facilities seem to be proximity, high-risk sexual behaviour and injecting drug use, tattooing and piercing. Some authors also suggest that the public health implications of substandard health care in prisons continue to grow as correctional institutions, educators, and community leaders fail to properly address health care issues involving prisoners.

In an article published in 2015[4], Yehia et al. underline the high burden of HIV new diagnosis in correctional facilities (6% of total new HIV diagnosis in Philadelphia in 2010 – 2011) showing a 75% decrease in the probability of newly diagnosed inmates to be successfully linked to care as compared with patients diagnosed in medical clinics. Even if similar data about other diseases are still missing, this shows the great opportunity for primary, secondary and tertiary prevention offered by correctional facility settings if coupled with adequate linkage to care.

The Madrid Declaration in 2010 set forth the guiding principle that health protection in prisons is an essential part of public health and based on equivalence of health in prisons. Building on these principles, UNODC published in 2013 a policy brief on *HIV prevention, treatment and care in prisons and other closed settings: a comprehensive package of interventions*[5]. In 2014 WHO published the document "Prisons and Health" which lists four essential points for a good health service in prison: medical care, health protection, health promotion, health resilience[3].

ECDC has recently launched the project *Guidance on prevention of infectious diseases in penal institutions*. The project aims at developing an evidence-based guidance document for communicable diseases in prison. As far as we are aware, this project represents the first effort to develop a common EU evidence based guidance for the control of communicable diseases in penal institutions.

ECDC has so far performed a scoping phase of the project. This phase aimed to scope the available evidence on the burden of communicable diseases, preventive measures and costs in prison settings and to identify

[2] International Centre for Prison Studies. Highest to Lowest - Prison Population Total 2014. Available from: http://www.prisonstudies.org/highest-to-lowest/prison-population-total?field_region_taxonomy_tid=All

[3] WHO - Europe. Prison and Health 2014. Available from: http://www.euro.who.int/__data/assets/pdf_file/0005/249188/Prisons-and-Health.pdf?ua=1 and Council of Europe Annual Penal Statistics. SPACE II 2011 (main indicators). Available from: http://www3.unil.ch/wpmu/space/space-ii/space-ii-2011-main-indicators/

[4] Yehia BR, Ketner E, Momplaisir F, Stephens-Shields AJ, Dowshen N, Eberhart MG, et al. Location of HIV Diagnosis Impacts Linkage to Medical Care. Journal of acquired immune deficiency syndromes (1999). 2015 Mar 1;68(3):304-9.

[5] Available at: http://www.unodc.org/documents/hiv-aids/HIV_comprehensive_package_prison_2013_eBook.pdf

existing knowledge gaps on prison and health in the European Union (EU). To this scope an evidence mapping tool based on a modular literature search was developed (see figure 1 below).

Figure 1. Matrix of evidence: number of articles retrieved by disease and geographical area

Disease/disease group	Literature review			
	World		Europe	
	PubMed	Embase	PubMed	Embase
STIs & BBDs				
HIV	2,233	2,491	630	864
HBV	293	459	147	255
HCV	587	905	301	500
Chlamydia	119	171	24	62
Gonorrhea	91	156	12	50
Syphilis	126	191	47	82
Other STIs:	127	197	55	103
Sub-total:	**2,766**	**3,315**	**855**	**1,296**
Respiratory diseases				
TB	596	755	356	462
Flu	32	42	14	19
Other Respiratory diseases:	58	126	23	55
Sub-total:	**665**	**885**	**386**	**519**
FBDs				
Salmonellosis	16	26	11	15
Norovirus	5	7	3	1
Hepatitis A	45	71	21	32
Other FWDs	49	88	25	49
Sub-total:	**111**	**184**	**55**	**93**
VPDs				
Meningococcal disease	4	6	3	4
Measles	16	22	12	14
Mumps	5	9	3	4
Rubella	6	11	4	8
Diphteria	7	7	5	6
Other VPDs	25	38	13	26
Sub-total:	**40**	**57**	**23**	**36**
Parasite				
Scabies	16	24	7	15
Lice	16	21	8	13
Intestinal parasitic	2	6	1	5
Skin parasitic diseases	4	3	4	2
Other human parasites	77	42	46	31
Sub-total:	**112**	**92**	**65**	**60**
Other Communicable Diseases				
MRSA	73	106	8	34
Other	528	511	219	238
TOT	**3,799**	**4,337**	**1,377**	**1,862**

Findings from the matrix of evidence were complemented with the results from a survey of key informants from countries of the European Union (EU), the European Economic Area (EEA), and were used to identify specific topics to be addressed by the guidance document.

2.2 Description of the services and scope of the contract

2.2.1 Contract objectives and scope

The objective of this contract is to perform a systematic literature review on interventions, cost-effectiveness and service models for communicable diseases prevention and control in prisons and other custodial settings, following international standards such as Cochrane and PRISMA, with the aim of developing a guidance document.

The contractors should perform a series of systematic reviews of peer-reviewed and grey literature in order to collect, collate, critically appraise, analyse, grade and report relevant research on interventions and service models for custodial settings, with a special focus on EU/EEA.

The scope of areas of interventions, cost-effectiveness and service models shall cover the macro-areas listed below and may cover additional ones. Macro-areas that will be of relevance to systematically collect evidence on include, but are not limited to:

- Screening for selected communicable diseases at entrance;
- Vaccination strategy, including vaccination at entrance and vaccination in outbreak situation;
- Prevention and control of food- and waterborne diseases outbreaks;
- Prevention, care and treatment for HIV including prevention of mother-to-child transmission and post-exposure prophylaxis;
- Prevention, care and treatment of viral hepatitis, with a focus on treatment for hepatitis C;
- Prevention, care and treatment of sexually transmitted diseases;
- Prevention and control of injecting-related infections among current or former drug users, including screening for drug dependence and drug-related health needs at entrance, health promotion, drug dependence treatment including opioid substitution therapy, provision of injecting equipment, and treatment of infectious diseases;
- Prevention of communicable diseases transmission through medical procedures conducted in custodial setting.
- Prevention of communicable disease transmission among prisoners through tattooing, piercing or the sharing of everyday items.

TB prevention and care will be addressed in the frame of a parallel ECDC project and therefore will be not included among the objectives of the present tender.

The identified macro-areas may be addressed in a step-wise approach, on account of feasibility and will be the object of specific requests for service. In this case, macro-areas should be grouped on the bases of priority and as agreed with ECDC and the Expert Panel, e.g. screening at entrance & vaccination strategies & outbreaks management.

The contractor should support ECDC in the management of a multi-disciplinary expert panel. The expert panel will support ECDC and the contractor in the conduct of the project by reviewing and providing input on all its phases.

In addition, the contractor should support ECDC in the development of the guidance document. The contractor, in coordination with ECDC, should prepare a draft guidance document by collating and compiling the evidence gathered from the systematic review and the inputs from the expert panel.

2.2.2 Description of the work/tasks

The following tasks are requested:

2.2.2.1 Work package 1: Project coordination and kick-off meeting

Within two weeks of signing the contract, the contractors shall attend a kick-off meeting face-to-face to fine-tune and agree upon the detailed overall project management plan, the methodological approaches of the different tasks, including the protocol for the systematic review/s, the timetables for deliverables and the follow-up of the project coordination with ECDC. The meeting shall take place in ECDC.

The contractor should provide ECDC with a meeting report after the meeting.

Throughout the contract period the contractor is expected to update and coordinate with ECDC project team on a regular basis. In particular, the contractor is expected to organize regular teleconferences to update ECDC on the project implementation status and prepare short report/notes after the teleconference, summarizing the main conclusions.

2.2.2.2 Work package 2: Management of a multi-sectorial expert panel

The contractor should support ECDC in organizing the Expert Panel consultations, either remotely or face-to-face. The contractor should support ECDC in planning and preparing for such consultation, by devising meeting agenda and preparing the necessary documents, namely: proposed set of PICO questions addressing the macro-areas (see section 2.2.1 of Chapter 2), study protocol, interim reports of the systematic review/s, evidence synthesis tables, final reports of the systematic review/s, guidance draft.

The contractor should attend the face-to-face meeting/s with the Expert Panel and actively participate by:

- Present the findings of the systematic review to the Expert Panel for feedback and evaluation
- Take minutes during the meeting and send ECDC the meeting report after the meeting
- In agreement with ECDC, incorporate any significant feedback from the expert meeting into the final report/s of the systematic review/s

ECDC plans to organize at least 2 Expert Panel meetings during the course of the project to be held in ECDC. ECDC will cover the cost of the organization of such meetings and of the logistics for the Expert panel members. The contractor is expected to attend the meeting/s at its own cost.

2.2.2.3 Work package 3: Evidence synthesis

The contractor should systematically collect, collate, analyse and synthetize the evidence on interventions for communicable diseases prevention and control in custodial setting and their effect in line with the scope of the project. The contractor should use a modular approach and address each macro-area listed under section 2.2.1 of Chapter 2 separately. Per each macro-area the contractor is expected to perform the tasks described in details below.

ECDC may decide whether to request the contractor to perform the tasks listed under *work package 3: evidence synthesis* for one or more macro-area/s at a time (parallel or stepwise approach).

The systematic review/s, evidence analysis and synthesis shall be performed with a standard methodology that will be discussed during the kick-off meeting of the project, fine-tuned and agreed with ECDC and the Expert Panel.

Together with ECDC the contractor will agree on whether to perform one single systematic review to cover all stipulated macro-areas, or to perform separate systematic reviews addressing each macro-area. Tenderers are free to propose a strategy that fits the scope of the contract.

Systematic literature review

Systematically collect scientific evidence on interventions for communicable diseases prevention and control in custodial setting and their effect by systematic literature review from both published and un-published (grey) literature.

The systematic review under this contract should build on the methodology used by ECDC during the scoping phase of the project as described under section 2.1 of Chapter 2. The systematic review should not have any language or geographical restriction, and should cover the period 1980-2015.

The systematic review under this contract should not only give quantitative measurements of effectiveness and cost-effectiveness, but also a qualitative description of the interventions or service models that would be of relevance for targeting prisoner in the EU/EEA Member States.

A detailed PICO question shall be defined for each macro-area, based on a proposal from the contractor to be reviewed by ECDC and the Expert Panel.

The methodology of the systematic review under this contract should cover the following aspects:

- Populations: people in custodial setting.
- Interventions: Any interventions or service models with the aim to prevent and control communicable diseases in custodial setting, according to the macro-areas described under Section 2.2.1 of Chapter 2; and any additional macro-area that may be identified in collaboration with the Expert Panel.
- Comparison: We are looking for both comparative and non-comparative studies, controlled and uncontrolled studies. So a comparison may not applicable for all interventions, for some interventions no intervention or alternative interventions might be the comparison.
- Outcome: For the part of the systematic review that aims to provide a description of the interventions no specific outcome is necessary however, any available information on suitability, feasibility and acceptability of the intervention should be collected. For the quantitative part of the review, any appropriate measurements that detect outcomes such as, but not limited to: uptake and yield of diagnostic tests, number of patients vaccinated, number of patient initiated on treatment and/or adherent to treatment and/or completing treatment course, treatment outcome, change in communicable disease incidence or prevalence, cost-effectiveness of the interventions, etc. Tenderers are free to propose outcomes that fit the scope of the contract.
- Type of articles: Reviews, original research articles and grey literature.
- Language limits: No limits for inclusion in the search (all EU/EEA languages shall be included). ECDC may provide additional support for those languages for which the contractor has no capacity.
- Time limits: Literature from 1980 onwards. The timeframe may be adapted to the topics if appropriate.

Data analysis

The contractor shall analyse and grade the retrieved evidence by macro-area and provide a qualitative description of all interventions and service models addressing that specific macro-area in prison setting and where available, quantitative data on the effectiveness and cost-effectiveness of mentioned interventions and service models with a special focus on EU/EEA context.

Where possible, the data of interventions and service models shall be compared across countries and assessed by means of differences in national/regional/city epidemiology, population structure, or other relevant differences, to draw conclusions when specific interventions and service models are of maximum benefit in custodial settings. For studies performed outside of the EU/EEA an assessment of the applicability of described interventions and service models to the EU/EEA context shall be done.

The quality of the evidence should be carefully assessed with standardised quality appraisal forms. This includes quality assessments of included systematic reviews as well as original research. The systematic review should be performed according to international standards by following the Cochrane guidelines for performing systematic review.

Final report and draft manuscript

Transparent and complete reporting of the systematic review should follow the PRISMA guidelines for reporting on systematic review.

An interim report shall be prepared covering each macro-area. Each interim report should cover the methods and results of the systematic review and should include evidence synthesis table/s (e.g. GRADE evidence tables).

Each interim report shall be reviewed and commented by ECDC and the Expert Panel either by remote consultation or during one of the Expert Panel meeting. The contractor should revise each interim report and incorporate the inputs and comments received.

The contractor is expected to prepare a collection of final reports addressing each specific macro-area for publication on the ECDC website (see ECDC systematic review report template in attach). Each report shall include a short introduction, background, comprehensive details on the methodology, results, evidence table/s and a discussion and conclusions.

The results of work package 3 should provide the following oputputs: systematic review final report; evidence synthesis tables, e.g. GRADE evidence synthesis table/s; data collection database; quality assessment checklists, and; references in the form of endnote library.

In addition to the final reports, a draft for one or more manuscripts to be published in a peer-reviewed journal should be prepared, with shared authorship between ECDC co-authors and the contractor taking into account the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (http://www.icmje.org/ethical_1author.html). The contractor is responsible for submission of the manuscript/s to an agreed journal and for the open access publication fee.

Data obtained and all the results of this project are ECDC's property. The contractor shall not initiate independent drafting or publishing of scientific articles or else present it at for example conferences (see also Article I.8 and Article II.10 of the enclosed draft contract).

2.2.2.4 Work package 4: Guidance document drafting

The contractor should support ECDC in developing a modular guidance document, i.e. each macro-area corresponds to a guidance module. Per each macro-area the contractor is expected to perform the tasks described below.

In close collaboration with ECDC the contractor should draft a guidance module (see ECDC public health guidance template in attach) on the basis of the evidence gathered and graded from the systematic review (evidence synthesis tables) and on the inputs and recommendations formulated by the Expert Panel.

The contractor should be responsible for coordinating at least one round of Expert Panel review of each draft guidance module. At the end of the review round the contractor should collate and revise with ECDC the inputs and comments received. The contractor should undertake a final revision of the guidance draft module.

2.2.3 Deliverables, reporting and project schedule

Work package 1:

DL 1.1 Kick-off meeting: summary report

A face-to-face meeting has been held and a summary report of the meeting has been prepared by the contractor and provided to ECDC within 2 weeks after the completion of the meeting.

The summary report should outline the detailed project work plan (timeline of milestones, methodological approach and communication methods for the follow-up of project coordination with ECDC).

DL 1.2 Coordination: minutes of the teleconference between contractor and ECDC

The contractor prepared brief notes of the issues discussed and decisions taken during regular teleconferences with ECDC.

Work package 2:

DL 2.1 Background document/s for Expert Panel meeting/consultation

The contractor prepared the background documents needed in preparation for the Expert Panel meeting/s. To be provided by the contractor 2 weeks before the Expert panel meeting/consultation is scheduled to take place.

DL 2.2 Expert Panel meeting/s: meeting report

The contractor supported ECDC in planning the Expert Panel meeting and in preparing the materials for consultation. The contractor attended the meeting. The Expert Panel meeting report has been prepared by the contractor and provided to ECDC within 2 weeks after the completion of the meeting.

Work package 3:

Deliverables of work package 3 are intended to be by macro-area, unless specified otherwise. One or more macro-area may be included in each specific contract.

DL 3.1 Study protocol

The contractor finalized the study protocol, including the PICO question, the search methodology, screening inclusion/exclusion criteria. The final study protocol shall incorporate any suggestion from ECDC and the Expert Panel. The study protocol is due 4 weeks after the kick-off meeting.

DL 3.2 Interim report of the systematic review

The contractor has provided ECDC the interim report of the systematic literature review, including the methods and results. The report is aligned with the ECDC systematic review format and includes an introduction outlining the problem, a detailed methodological, results and discussion section. The interim report is due approximately 7 months after the kick-off meeting.

DL 3.3 Final report of the systematic review

The contractor has provided ECDC with the final report of the systematic literature review, which incorporates the comments from ECDC and the Expert Panel. This deliverable shall include, over and above the final report: evidence synthesis tables; data collection database; quality assessment checklists, and; references in the form of endnote library. The final reports are due approximately 9 months after the kick-off meeting.

DL 3.4 Draft manuscript for scientific paper

The contractor has provided ECDC with a draft manuscript of the systematic literature review covering one or more macro-area, as decided by ECDC and the contractor. To be delivered at the end of the specific contract period.

Work package 4:

Deliverables of work package 4 are intended to be by macro-area, unless specified otherwise. One or more macro-area may be included in each specific contract.

DL 4.1 Guidance module: draft guidance

The contractor has provided ECDC the guidance module, as revised after the first round of review from the Expert panel. To be delivered at the end of the specific contract period.

2.2.4 Duration of the contract

The estimated duration of this contract is for a period of up to twenty-four months, with possible renewals up to two times 12-months.

2.2.5 Place of performance of the contract

All tasks will be expected to be performed at the tenderer's premises, with the exception of the Kick-off and the Expert Panel meetings to be held in ECDC premises.

2.2.6 Reference documents

- WHO - Europe. Prison and Health. 2014. Available from: http://www.euro.who.int/__data/assets/pdf_file/0005/249188/Prisons-and-Health.pdf?ua=1
- ECDC. Thematic report: Prisoners 2012. 2013. Available from: http://www.ecdc.europa.eu/en/publications/Publications/dublin-declaration-monitoring-report-prisoners-october-2013.pdf
- UNODC. HIV prevention, treatment and care in prisons and other closed settings: a comprehensive package of interventions. 2013. Available at: http://www.unodc.org/documents/hiv-ids/HIV_comprehensive_package_prison_2013_eBook.pdf
- ECDC. Prevention of norovirus infection in schools and childcare facilities. 2013. Available at: http://ecdc.europa.eu/en/publications/Publications/norovirus-prevention-infection-schools-childcare-facilities.pdf

2.3 Prices

2.3.1 Currency of tender

Prices must be quoted in Euro.

Conversions should use the rates published in the C series of the Official Journal of the European Union on the day when the invitation to tender was issued. This information is also available on the Website of the European Central Bank at the following URL: http://www.ecb.int/stats/eurofxref

The Financial Proposal Form in **Annex VII** must be used to submit a tender.

2.3.2 All-inclusive prices

Prices submitted in response to this tender must be inclusive of all costs involved in the performance of the contract (e.g. to include delivery, supply and installation, maintenance, travel, subsistence, etc). No expenses incurred in the performance of the services will be reimbursed separately by ECDC.

The maximum amount for the whole duration of the contract may not exceed 250 000 euro.

2.3.3 Price revision

Prices shall be fixed and not subject to revision for the duration of the contract.'

See the article about "Prices" of the contract for calculation.

2.3.4 Costs involved in preparing and submitting a tender

ECDC will not reimburse any costs incurred in the preparation and submission of a tender. Any such costs must be paid by the tenderer.

2.3.5 Protocol on the Privileges and Immunities of the European Union

The Centre is, as a rule, exempt from all taxes and duties, and in certain circumstances is entitled to a refund for indirect tax incurred, such as value added tax (VAT), pursuant to the

provisions of articles 3 and 4 of the Protocol on Privileges and Immunities of the European Union. Tenderers must therefore quote prices which are exclusive of any taxes and duties.

2.3.6 Payments

Payment schedules and final specific payments requirements will be specified in the specific requests for services, on the basis of the tender offered price for each task. Invoices for payment are deemed acceptable upon approval of the deliverables by ECDC, as provided under the articles on payment in the framework service contract model.

2.3.7 Financial guarantees

ECDC may require a pre-financing guarantee or a performance guarantee from the Contractor chosen as a result of this tendering procedure. When such guarantee is requested, the specific conditions related to the provision of a guarantee are included in the draft contract (**Annex I**). The costs for the guarantee shall be borne by the Contractor.

3 Exclusion and selection criteria

3.1 Exclusion criteria

All tenderers shall provide a declaration on their honour (see Annex II), duly signed and dated by an authorised representative of the tenderer, stating that they are not in one of the situations of exclusion listed in the Annex II.

The successful tenderer shall provide the documents mentioned as supporting evidence in Annex II before signature of the contract and within a deadline given by the contracting authority. This requirement applies to all members of the consortium in case of joint tender.

The contracting authority may waive the obligation for a tenderer to submit documentary evidence if such evidence has already been submitted for another procurement procedure and provided the documents were issued not more than one year earlier and are still valid. In such cases, the candidate or tenderer must declare on his honour that the documentary evidence has already been provided in a previous procurement procedure, provide reference to that procedure, and confirm that there has been no change in the situation.

3.2 Selection criteria

Tenderers must submit evidence of their legal, economic, financial, technical and professional capacity to perform the contract.

3.2.1 Legal capacity

Requirement
A tenderer is asked to prove that they are authorised to perform the contract under the national law as evidenced by inclusion in a trade or professional register, or a sworn declaration or certificate, membership of a specific organisation, express authorisation or entry in the VAT register.

Evidence required
The tenderer shall provide a duly filled in and signed Legal Entity Form (see **Annex III**) accompanied by the documents requested therein.
(Where the tenderer has already signed another contract with ECDC, they may provide instead of the legal entity file and its supporting documents a copy of the legal entity file provided on that occasion, unless a change in his legal status occurred in the meantime).

3.2.2 Economic and financial capacity

Requirement
The tenderer must be in a stable financial position and have the economic and financial capacity to perform the contract.

Evidence required
Proof of economic and financial capacity shall be furnished by the following documents:

- balance sheets or extracts from balance sheets for at least the last two years for which accounts have been closed (where publication of the balance sheet is required under the company law of the country in which the economic operator is established);

- a statement of overall turnover and turnover concerning services/supplies covered by the contract during the last three financial years. The minimum annual turnover should be at least 100 000 euro.

If, for some exceptional reason which ECDC considers justified, the tenderer is unable to provide the references requested by the contracting authority, he may prove his economic and financial capacity by any other means which ECDC considers appropriate.

The Centre reserves the right to request any additional documentary evidence it deems necessary or useful in order to verify a tenderer's economic and financial standing.

3.2.3 Technical and professional capacity

Requirement(s)

A) Suitability of the organisation and staffing structure available for the activities covered by the contract;

B) Relevant qualifications in the fields of public health, infectious disease, systematic literature reviews, and expertise of key personnel allocated to the project: technical experience, knowledge and capability in the area of the study fields as well as the ability to prepare and present clear and concise reports in the English language to international audience;

C) A minimum of one of members of the project team (tenderers) must have at least 5-year experience in performing and publishing systematic literature reviews of infectious diseases. Previous experience in the area prison health and/or other closed settings will be considered an asset.

D) Involvement in relevant research activities, particularly for the health sector.

Evidence required

The following documents or information shall be presented as evidence of compliance with the technical and professional capacity criteria:

A) Details of the structure of the organisation (including the number of staff) and relevant subcontractors. If the proposal is submitted by a consortium: a presentation of the organisation of consortium and its internal organisation. Proposals must specify the role, qualifications and experience of each of the members of the consortium.

B) Professional accreditations or references held by the tenderer and relevant subcontractors;

C) Detailed CVs of the key experts to carry out the work, covering work experience, education and training, organisational and technical skills attesting the drafting and presentation skills, preferably using the template in Annex VI).

D) Language abilities: statement of the candidate's language abilities. Most of the work will be performed in English. The core staff/key experts must demonstrate a strong ability to draft and operate in this language and provide references to previous work.

E) Examples of work done in the areas covered by this call for tender in the past three years; clearly indicating the role of the contributors.

4 Award of the contract

Offers are opened and evaluated by a committee, possessing the technical and administrative capacities necessary to give an informed opinion on the offers. The committee members are nominated on a personal basis by ECDC under guarantee of impartiality and confidentiality. Each of them has equal voting rights.

Only the tenders meeting the requirements of the exclusion and selection criteria will be evaluated in terms of quality and price.

4.1 Technical proposal

The assessment of technical quality will be based on the ability of the tenderer to meet the purpose of the contract as described in the terms of reference. To this end, the technical proposal shall contain the following information to allow evaluation of the tender according to the technical criteria mentioned in section 3.2:

- A description of the approach proposed and the proposed methods to be applied in details; means to be used to meet the objectives of the terms of reference and assessment of the main issues, limitations, risks of the analyses to be carried out as well as the proposed mitigation measures;
- Work organisation and planning (including major milestones and dates for meetings with ECDC to report on progress, as requested in section 2.2.3 of these tender specifications);
- Description of the involvement of the proposed key experts (roles and responsibilities) to execute the planned activities, as requested in section 2.2.3 of these tender specifications; a description of the intended coordination approach with ECDC.

The information in the technical proposal must be consistent with the terms of reference and must be signed by the tenderer.

4.2 Technical evaluation

The quality of technical offers will be evaluated in accordance with the award criteria and the associated weighting as detailed in the evaluation grid below.

No	Criteria	Max points	Awarded score
1	**Rationale and strategy:** The degree to which the tenderer shows clear understanding of the rationale and strategy. Level of coherence and soundness of the proposal Evaluation of the difficulties, limitations and risks as well the proposed mitigations by the tenderer.	***35***	
2	**Methodology:** Level of soundness of the proposed detailed methodology; The degree to which appropriate tools for carrying out the planned tasks are suggested.	***35***	
3	**Project team, project management, sequence and timing:** Allocation and management of resources, expertise and responsibilities with mobilization of sufficient resources required for timely completion of requested tasks; Sequence and timing of major milestones in execution of the contract, including in the case of consortium/subcontracting description of the key contributions from each of the consortium members, subcontracting arrangements foreseen; Realistic time deadlines for completion of tasks and work plan.	***30***	
	TOTAL	***100***	

Only tenders scoring **60 points** or more (of a maximum of 100) points against the technical award criteria will have their financial proposal evaluated.

Offers scoring less than **60%** for any award criterion will be deemed to be of insufficient quality and eliminated from further consideration.

4.3 Financial proposal

The financial proposal should be presented in the format found in **Annex VII**.

4.4 Choice of the selected tender

The contract will be awarded to the tenderer offering the best value for money, taking into account the awarding criteria listed above. No award criteria and sub-criteria other than those detailed above will be used to evaluate the offer.

The weighting of quality and price will be applied as follows:

$$\text{Score for tender X} = \frac{\text{cheapest price}}{\text{price of tender X}} \times 30 + \frac{\text{Total quality score of tender X}}{100} \times 70$$

"Price of tender X" is total price of the tender in annex VII.

4.5 No obligation to award

Completing the procedure of the call for tenders in no way imposes on the ECDC an obligation to award the contract. ECDC shall not be liable for any compensation with respect to tenderers whose offers have not been accepted, nor shall ECDC be liable when deciding not to award the contract.

4.6 Notification of outcome

Each tenderer will be informed in writing about the outcome of the call for tender.

If tenderers are notified that a tender has not been successful, tenderers may request additional information by fax or mail. At the discretion of ECDC, this information can be given in a follow-up letter providing further details in writing, such as the name of the tenderer to whom the contract is awarded and a summary of the characteristics and relative advantages of the successful tender. However, ECDC would like to stress that it is not free to disclose any information affecting the commercial interests of other tenderers.

List of Annexes

Annex I — Draft contract

Annex II — Exclusion criteria and non-conflict of interest declaration

Annex III — Legal entity form

Annex IV — Financial identification form

Annex V — Authorised signatory form

Annex VI — Curriculum Vitae template

Annex VII — Financial proposal form

Annex VIII — Confirmation of offer submission

Annex IX — Tender submission checklist

Annex X — ECDC Systematic review report template

Annex XI — ECDC Public health guidance template