



# Foreign, Commonwealth & Development Office



## CALLDOWN CONTRACT

**Framework Agreement with:** DAI Global UK LTD

**Framework Agreement for:** Global Evaluation and Monitoring Framework Agreement (GEMFA) Lot 4

**Framework Agreement ECM Number:** ECM\_4755

**Call-down Contract For:** Evaluation of WHO Core Voluntary Contribution (CVC) Programme

**Contract ECM Number:** ECM\_5953

I refer to the following:

1. The above-mentioned Framework Agreement dated 1<sup>st</sup> Feb 2023;
2. Your proposal of 17/11/23

and I confirm that FCDO requires you to provide the Services (Annex A), under the Terms and Conditions of the Framework Agreement which shall apply to this Call-down Contract as if expressly incorporated herein.

This Contract shall be comprised of the following documents:

- Covering Letter
- Terms of Reference
- DAI Global Concept Note Proposal /REDACTED/
- Schedule of Prices /REDACTED/

### **1. Commencement and Duration of the Services**

- 1.1 The Supplier shall start the Services no later than 7<sup>th</sup> December 2023 ("the Start Date") and the Services shall be completed by 30<sup>th</sup> April 2024 ("the End Date") unless the Call-down Contract is terminated earlier in accordance with the Terms and Conditions of the Framework Agreement.

### **2. Recipient**

- 2.1 FCDO requires the Supplier to provide the Services to the FCDO (the "Recipient").

### **3. Financial Limit**

- 3.1 Payments under this Contract shall not, exceed £300,000 ("the Financial Limit") and is inclusive of any government tax, if applicable as detailed in Annex B.

## **22. PAYMENTS & INVOICING INSTRUCTIONS**



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The following Clause 22.4 shall be substituted for Clause 22.4 of the Section 2, Framework Agreement Terms and Conditions.

- 22.4 Where the applicable payment mechanism is "Milestone Payment" invoice(s) shall be submitted for the amount(s) indicated in Annex B and payments will be made on satisfactory performance of the services, at the payment points defined as per schedule of payments. At each payment point set criteria will be defined as part of the payments. Payment will be made if the criteria are met to the satisfaction of FCDO.

When the relevant deliverable is achieved in its final form by the Supplier or following completion of the Services, as the case may be, indicating both the amount or amounts due at the time and cumulatively. Payments pursuant to clause 22.4 are subject to the satisfaction of the Project Officer in relation to the performance by the Supplier of its obligations under the Direct Award Contract and to verification by the Project Officer that all prior payments made to the Supplier under this Direct Award Contract were properly due.

## **4. Officials FCDO**

- 4.1 The Project Officer is:  
Name: /REDACTED/  
Email: /REDACTED/  
Telephone: /REDACTED/
- 4.2 The Contract Officer is:  
Name: /REDACTED/  
Email: /REDACTED/  
Telephone: /REDACTED/

## **Supplier**

- 4.3 The Contract Officer is:  
  
Name: /REDACTED/  
Email: /REDACTED/  
Telephone: /REDACTED/
- 4.4 The Project Officer is:  
  
Name: /REDACTED/  
Email: /REDACTED/  
Telephone: /REDACTED/

## **5. Key Personnel**



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The following of the Supplier's Personnel cannot be substituted by the Supplier without FCDO's prior written consent:

/REDACTED/

## 6. Reports

- 6.1 The Supplier shall submit project reports in accordance with the Terms of Reference/Scope of Work at Annex A.

## 7. Duty of Care

All Supplier Personnel (as defined in Section 2 of the Agreement) engaged under this Contract will come under the duty of care of the Supplier:

- I. The Supplier will be responsible for all security arrangements and Her Majesty's Government accepts no responsibility for the health, safety and security of individuals or property whilst travelling.
- II. The Supplier will be responsible for taking out insurance in respect of death or personal injury, damage to or loss of property, and will indemnify and keep indemnified FCDO in respect of:
  - II.1. Any loss, damage or claim, howsoever arising out of, or relating to negligence by the Supplier, the Supplier's Personnel, or by any person employed or otherwise engaged by the Supplier, in connection with the performance of the Contract;
  - II.2. Any claim, howsoever arising, by the Supplier's Personnel or any person employed or otherwise engaged by the Supplier, in connection with their performance under this Contract.
- III. The Supplier will ensure that such insurance arrangements as are made in respect of the Supplier's Personnel, or any person employed or otherwise engaged by the Supplier are reasonable and prudent in all circumstances, including in respect of death, injury or disablement, and emergency medical expenses.
- IV. The costs of any insurance specifically taken out by the Supplier to support the performance of this Contract in relation to Duty of Care may be included as part of the management costs of the project, and must be separately identified in all financial reporting relating to the project.
- V. Where FCDO is providing any specific security arrangements for Suppliers in relation to the Contract, these will be detailed in the Terms of Reference.

**Section 3**  
**Annex A Terms of Reference**

**Evaluation of WHO Core Voluntary Contribution (CVC) programme.**

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**Abbreviations/Acronyms**

AR	Annual Review
BC	Business Case
CVC	Core Voluntary Contribution (Fully flexible funding)
CY	Calendar Year
DFID	Department for International Development
ELVAR	Evaluation, Learning and Verification for Agency Reform
<i>EQuALS</i>	Evaluation Quality Assurance and Learning Services
FCDO	Foreign, Commonwealth and Development Office
FY	Financial Year
GPW	General Programme of Work
HMG	His Majesty’s Government
KPI	Key Performance Indicator
MEL	Monitoring, Evaluation & Learning
MOPAN	Multilateral Organisation Performance Assessment Network
MOU	Memorandum of Understanding
PBR	Payment by Results
PCR	Programme Completion Report
PF	Performance Framework
SRO	Senior Responsible Owner
ToC	Theory of Change
ToR	Terms of Reference
UN	United Nations
VfM	Value for Money
WHO	World Health Organization

**1. Introduction**

1.1 The Foreign Commonwealth and Development Office (FCDO) is appointing DAI Global to deliver an evaluation of FCDO’s core voluntary funding programme to World Health Organisation (WHO) from 2020 to 2024.

1.2 This Terms of Reference outlines the objectives, requirements and, expectations of the supplier. The evaluation is expected to run for up to 5 months between 7th December 2023 and the end of April 2024.

1.3. The budget for this contract is limited to £250,000 plus UK VAT (£50,000).

**2. Context**

**Programme Context and Budget**

2.1 WHO plays an important role in the achievement of the UK’s global health policy objectives. WHO has, as the lead UN agency dedicated to promote health, a unique mandate to coordinate Members States and advance health and well-being for all, and to set global guidelines and standards. A strengthened WHO is an objective in the HMG Global Health Framework (2023) (Annex C.3).

2.2 The 2017-18 MOPAN Assessment of WHO noted increasing flexible funding as a key strategic issue for WHO given that a high proportion of the organisation’s funds were subject to tight earmarking and therefore driven by donors’ requirements and by disease area<sup>1</sup>. It noted that the heavy reliance on earmarked funding has limited the organisation’s ability to flexibly respond to country-level needs and changes in context. There is mounting evidence of the reduction to efficiency caused by earmarking<sup>2 3</sup>.

2.3 To support and strengthen WHO in addressing these longstanding challenges, in 2020, the UK Government announced a £340 million core voluntary contribution (CVC) to WHO for 2020-24. This new programme, hereby referred to as ‘WHO CVC programme’, consolidated several previously earmarked funding streams, into a new, and overall increased, single flexible (unearmarked) contribution. 30% of this annual funding is defined as Payment by Results (PBR) and conditional on the achievement of annually agreed indicators (“top deliverables”, set out in the programme Performance Framework) with the remainder as fully flexible funding<sup>4</sup>. More information can be found in the WHO CVC Business case (Annex A.3).

**3. Recipient & Beneficiaries**

3.1. The primary recipient of this evaluation is FCDO (Global Health Directorate and the UK Mission in Geneva).

3.2 Beneficiaries who will benefit from this evaluation include other donors of WHO, particularly those who provide CVC funding who may benefit from the lessons, and the Department for Health and Social Care (DHSC) who lead the UK Government relationship with WHO. Reports may also be shared with WHO as the partner funded under the UK’s WHO CVC programme.

**4. Background to the WHO Core Voluntary Contribution (CVC) programme.**

4.1 The WHO CVC programme 2020-24 builds upon, and applies the lessons learnt, from the FCDO’s predecessor CVC programme that ran between 2016 and 2020<sup>5</sup>. Since 2020, the UK has

<sup>1</sup> WHO MOPAN Assessment 2017-18, 2019

<sup>2</sup> Heinzl, M., Cormier, B., & Reinsberg, B. (2023). [Earmarked funding and the control–performance trade-off in international development organizations](#). *International Organization* (forthcoming). [Online appendix](#).

<sup>3</sup> Iwunna O, Kennedy J, Harmer A. Flexibly funding WHO? An analysis of its donors’ voluntary contributions, *BMJ Global Health* 2023. Available at: <https://gh.bmj.com/content/8/4/e011232>

<sup>4</sup> The UK’s High-Level Performance Framework for the World Health Organisation Core Voluntary Contribution 2020/21 to 2023/24

<sup>5</sup> Project Completion Review (PCR)

been the largest contributor of fully flexible core voluntary contributions<sup>6</sup>. At the heart of the design of the WHO CVC programme is:

- increased flexible funding; one pre-requisite for WHO to be the agile, strategic organisation the world needs (especially in response to emerging health threats).
- a clear, prioritised set of UK asks and the use of a performance-conditional funding tranche (30% of the total) to incentivise WHO's achievement of specific UK priorities.

4.2 The objectives of the WHO CVC programme as outlined in the FCDO Business Case<sup>7</sup> are to support further reform of WHO, especially implementing lessons from the COVID-19 pandemic, to enable WHO to emerge stronger, as an organisation that can:

- Coordinate a more effective and integrated global approach to health security: ensuring both better pandemic preparedness and emergency response.
- Play a stronger coordination and converging role in building back resilient health systems world-wide with better health for all; and
- Provide the highest-quality technical advice to its Member States, tailored to their different contexts.

4.3 In addition, the UK objectives are closely mirrored in WHO's own 13<sup>th</sup> General Programme of Work (GPW) (which has been approved by all 194 Member States, including the UK) and which aims, by end 2023, (now extended to 2025) to:

- Protect 1 billion more people from health emergencies.
- Provide 1 billion more people with access to universal health coverage; and
- Enable 1 billion more people to live healthier lives.

To date, against the £340 million programme budget, a total of £306m has been disbursed.

**5. The Purpose of Evaluation**

5.1 An evaluability assessment (see Annex A.6) was conducted in 2022 to provide an assessment of the feasibility and proportionality of likely methods needed to evaluate the WHO CVC programme effectively<sup>8</sup>. The assessment found that **the WHO CVC programme is evaluable**; there is sufficient existing data, and further qualitative and quantitative data that can be gathered to make a robust evaluation of the WHO CVC programme as it ends in March 2024. The initial assessment was supplemented by a light touch mapping of evaluations and reviews (Annex A.7) to assess the extent to which these evaluations and reviews can be used as key inputs into the evaluation of the WHO CVC programme<sup>9</sup>. The consolidation of the two reports has informed FCDO's decision on whether and how to evaluate the WHO CVC programme.

5.2 The primary emphasis of the independent evaluation of the WHO CVC programme is **learning**. An evaluation focused on learning for FCDO will be beneficial, enabling consideration of how the UK have, and how the UK can in future, effectively support and influence WHO.

**6. Evaluation objectives**

6.1 There are four learning evaluation objectives, each with the following outputs:

- a) **Learning review of the synergies between CVC funding and other UK inputs:** To explore the relative importance of WHO CVC programme funding and other UK inputs, and the way

<sup>6</sup> <https://www.who.int/about/funding>

<sup>7</sup> WHO CVC 2020-24 Business Case

<sup>8</sup> Evaluability assessment of the Core Voluntary Contribution (CVC) funding to the World Health Organization (WHO)

<sup>9</sup> Evaluability assessment of the UK Core Voluntary Contribution to the WHO: Light touch mapping of evaluation and reviews.



these synergies have affected or limited change. The WHO CVC programme Business Case (Annex A.3 recognises that CVC is one of several tools for the UK to support and influence WHO. It states that “on its own, the CVC will clearly be insufficient in achieving the UK’s reform objectives. To achieve our objectives, we need to help to build Member State consensus on meaningful reforms to WHO and the wider health architecture”. Other UK inputs include advocacy, engagement and influencing by HMG staff, for example at WHO’s governing bodies and bilaterally. The programme planned but did not use a secondment.

- b) **Learning about CVC as a funding mechanism:** To primarily focus on to what extent the flexibility of CVC funding has contributed to the delivery of the reform agenda and GPW13 and how the WHO CVC programme and PBR mechanism has affected the political economy of decision making at the WHO: i) whether the UK has influenced other funders of WHO, e.g. to increase the flexibility and level of their funding; ii) whether this model of funding has influenced or enabled WHO staff and decision making units to allocate funding differently internally, compared to the UK’s previous earmarking models; and iii) the relative importance of PBR and the UK’s annual ‘top deliverables ’ on influencing WHO’s prioritisation of work and resource allocation within GPW13. This component will inevitably be constrained given the following factors: the scale of WHO’s operations; delays in seeing changes occur at outcome level, which will go beyond the lifetime of this programme and the evaluation; and the relevance of wider contextual factors that contribute to changes, meaning measuring the UK’s attribution is challenging. As such, it is not possible to fully evaluate the contribution of PBR to incentivising change or outcomes achieved by WHO. However, referring to the Evaluation, Learning and Verification for Agency Reform (ELVAR) study, the aim is to maximise the potential learning around the role of PBR in bringing attention to issues and its ability to support change champions.
- c) **Discrete learning analysis:** To support the development of specific pieces of analysis to enhance our understanding of priority areas and how the UK might address these better in future. E.g. Since 2020, what has been the key trends in WHO’s staffing including contractors to staff ratio, technical gaps, gender balance and country representative gaps.
- d) **Learning about evaluation:** To conduct a short analysis of how the FCDO has approached the evaluation of the current WHO CVC programme and recommendations on how best to incorporate evaluation effectively into the next programme. (This analysis should also deliver a Theory of Change (TOC) to ensure facilitation of a future evaluation).

7. The Scope

- 7.1. The evaluation is during the final year of the WHO CVC programme.
- 7.2. The evaluation will only cover the core funding component of the programme. It will not include the secondment to WHO which was originally included in the WHO CVC programme Business Case but was closed.
- 7.3. Whilst the WHO CVC programme is Global, the Evaluation will be desk based, except where a face-to-face meeting with WHO stakeholder in Geneva is agreed with the SRO, within the contract financial limit.
- 7.4. The evaluation of the WHO CVC programme will be guided by the Organisation for Economic Co-operation and Development Assistance Committee (OECD DAC) criteria in particular – relevance, coherence, effectiveness, and sustainability. The evaluability assessment provides an articulation of the evaluation questions relevant to learning, the primary purpose of the evaluation of the WHO CVC programme.

Evaluation questions

RELEVANCE	
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	How well did the design of the FCDO's WHO CVC programme (including the PBR element) respond to WHO funding issues.
	How well did the design of the FCDO's WHO CVC programme (including the PBR element) respond to WHO's reform agenda.
<b>COHERENCE</b>	
	How coherently have the different elements of the programme worked together?
	What are the synergies between the different UK inputs (flexible funding, PBR, evaluation, engagement and influencing)?
	To what extent has FCDO optimised the synergies between UK inputs?
	To what extent has CVC funding to the WHO changed the UK's influence vis-à-vis WHO and how?
	How well has the UK approach to funding the WHO aligned with other donors funding practices and has it led to an improved funding environment for WHO?
<b>EFFECTIVENESS</b>	
	To what extent has WHO CVC programme funding facilitated the more effective delivery of the WHO Reform agenda?
	<p>To what extent has WHO CVC programme funding facilitated the more effective delivery of the GPW 13 by WHO?</p> <ul style="list-style-type: none"><li>-At global level</li><li>-At Regional level</li><li>-At country level</li></ul>
	What would have been different if the UK's CVC funding had been 100% flexible?
	What role has the PBR component had in incentivising WHO organisational change?
	What are the lessons learnt for FCDO to shape the next FCDO WHO CVC funding programme?
<b>EFFICIENCY</b>	
	To what extent has FCDO used the information gathered through the WHO Results Framework?
<b>SUSTAINABILITY</b>	
	To what extent have the organisational changes supported through CVC funding contributed to the sustained delivery of WHO's General Programme of Work (GPW) Triple Billion programme, in particular the

	improved access to quality health services and the rapid detection of and response to health emergencies
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**7.5 Discrete analysis:** in addition to the questions above, the Supplier will develop specific pieces of analysis which will enhance understanding of priority areas and how the UK might address these better in future. E.g. Since 2020, what have been the key trends in WHO’s staffing, including contractor to staff ratio, technical gaps, gender balance, and country representative gaps?

**8. Methodology**

8.1. The Supplier submitted a draft evaluation design and methodology as a part of their Concept Note proposal, which shall be finalised as part of the inception phase. The Supplier will use a mixed methods design combining analysis of primary and secondary quantitative and qualitative data to respond to the evaluation questions.

8.2. The following data collection methods can be used but shall be agreed during the inception period:

8.3. A desk review of key FCDO programme documents, such as:

- a) FCDO, Annual Review, Core Voluntary Contribution (CVC) funding to the World Health Organization (WHO), 20/21 to 23/24
- b) FCDO: Memorandum of Understanding with WHO, Core voluntary contribution (CVC) funding to the World Health Organization (WHO) 2020/21 to 2023/24,
- c) FCDO: WHO CVC 2020-24 Business Case,
- d) FCDO: WHO CVC 2016-20 Project Completion Report,
- e) FCDO: The UK’s High-Level Performance Framework for the World Health Organisation Core Voluntary Contribution 2020/21 to 2023/24,

8.4 Desk review of WHO reporting, such as:

- WHO MOPAN Assessment 2017-18, 2019
- WHO: Thirteenth General Programme of Work 2019-2023
- WHO Budget Portal
- WHO governing body reports.

8.5 Desk review of relevant academic literature, including analysis and commentary on WHO’s funding model.

8.6 Virtual and face-to-face interviews and/or surveys with key internal stakeholders within FCDO and wider external stakeholders e.g. select WHO staff, donors and civil society/academic experts.

**9. Contract Duration**

The contract shall run between the 7th December 2023 and the end of April 2024 and will be split in two phases Inception and Implementation:

**Inception phase - from 7th December 2023- early January 2024 up to 6 weeks]**

During the Inception phase, the Supplier will conduct mapping and review of key relevant programme and policy documentation available to support the evaluation.

The submission of an inception report is expected by the end of week 4, with 2 weeks for iteration and finalisation. During the inception phase the Supplier will have an opportunity to further understand the programme and theory of change.

9.1 The Supplier will deliver the following outputs during the Inception Phase of the Contract:

Outputs/Deliverables	Activities	Completed by end
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Draft inception report  (no more than 10 single sided pages)	a) Initial mapping and review of key relevant programme and policy documentation available to support the evaluation	Week 4
Final evaluation plan and methodology including finalised evaluation questions	b) Detail and finalise the evaluation design and methodology to include:  i. Finalised evaluation questions, updated evaluation workplan to deliver the overall scope of work; methodologies to answer questions; approach to analysis and quality assurance;  ii. Assessment of the overall theory of change underpinning the programme	Week 4
Discrete learning analysis	<ul style="list-style-type: none"><li>• Development and agreement of approach to discrete learning pieces of analysis as outlined above (see 6b and 6c) and prioritisation on how far resources will be divided between focus areas, recognising that it will not be possible to examine all in equal depth.</li></ul>	Week 4
Risk register	c) Update evaluation risk register	Week 4
Final Inception report taking account of FCDO comments on draft.		Week 6

9.2 Formal Review Point

The contract will have a formal review point at the end of the inception phase to determine whether the contract should proceed to its implementation. Continuation of the Contract beyond the review point will be subject to Supplier’s performance and acceptance of Inception phase deliverables by FCDO.

Implementation Phase [January – April 2024]

9.2 During the implementation phase, the supplier is required to deliver on the commitments in the evaluation workplan setting out the overall scope of approach and approach to discrete learning pieces of analysis as agreed in the inception phase. The submission of the final evaluation report is required by the end of March 2024 with a month for the final feedback and iteration before finalisation in April 2024. The Supplier will then share and disseminate the final report before the end of April 2024.

- 9.3 The following final evaluation report products are required:
- a. Final summative evaluation report– no more than 50 pages
  - b. Final evaluation summary (‘evaluation digest’) with key findings and recommendations of the finalised evaluation report – 2 pages using the FCDO’s template for publication available on FCDO’s website.
  - c. Slide pack/presentation summarising the evaluation findings.
- 9.4 In terms of dissemination, the Supplier will deliver at least 2 presentations with internal FCDO stakeholders and WHO. FCDO will lead on dissemination beyond FCDO stakeholders and WHO e.g. the target audience includes other donors/WHO member states who provide Core voluntary funding or who may consider core funding to WHO.
- 9.5 For the final evaluation summary with key findings and recommendations the FCDO’s template for publication available on FCDO’s website can be used. FCDO/OGD will have unlimited access to the material produced by the supplier.

**10. Skills and Competency Requirements**

- 10.1 The Supplier will deploy the proposed team and team structure to deliver the outputs and objectives of the contract.
- 10.2 The evaluation team will have a broad range of technical subject matter expertise (including experts in organisational change) and mixed methods evaluation methodology expertise. The evaluation contract will require strong Team Leadership with excellent technical capabilities and client relationship management skills; and a tightly coordinated approach to programme and data management.
- 10.3 The team will comprise a wide range of technical skills and expertise across multiple areas including.
- a. Qualitative and quantitative evaluations.
  - b. Competency and expertise in value for money approaches and methodologies for evaluating development programmes.
  - c. Expertise in organisational change
  - d. Strong analytical skills and the ability to think strategically and concisely analyse and integrate information from a diverse range of sources into practical and realistic recommendations.
  - e. Effective communications skills, written and spoken English.
- 10.4 The Supplier will ensure inclusion and gender-awareness into the evaluation team for the duration of contract. This is an important cross-cutting them to have awareness of.
- 10.5 The Supplier and sub-contractor implementing the WHO CVC programme will be automatically precluded from delivering any aspect of the Evaluation contract.

**11. Payment Mechanism**

11. 1. The budget for this contract is limited to £250,000 plus UK VAT (£50,000).The supplier will commence services under this contract within 2 weeks from the contract award date.
- 11.2 A payment by results approach will be used to enable effective delivery of the Evaluation contract.
- 11.3 The inception phase payments will be output-based and linked to the successful delivery and acceptance of the inception phase deliverables as per Commercial ProFormas Tab 4.0-Payment. The expenses shall be reimbursed on a monthly basis and shall be based on actuals. The value of payment for each deliverable should be based on the realistic requirement of staff input and associated expenses in line with the payment Tab 4. of cost ProFormas. The deliverables will become eligible for inclusion in invoice upon FCDO’s acceptance and approval.
- 11.4 The inception phase deliverables are the deliverables to be completed by the end of the inception phase (see Inception Phase Deliverable Table). Note, the deliverables listed within the Inception Phase

Deliverable Table do not cover all the requirements of the Inception Phase but are the expected payment KPIs for the Inception Phase.

11.5 The implementation phase payments will be output based and linked to the successful delivery and acceptance of the implementation phase deliverables as per Commercial ProFormas Tab 4.0-Payment. The expenses shall be reimbursed on a monthly basis and shall be based on actuals. The value of payment for each deliverable should be based on the realistic requirement of staff input and associated expenses in line with the payment Tab 4. of cost ProFormas. The deliverables will become eligible for inclusion in invoice upon FCDO's acceptance and approval.

**12. Reporting Requirements**

12.1 The evaluation Supplier will report to the FCDO Senior Responsible Officer and Programme Manager of the FCDO WHO CVC programme.

12.2 The evaluation Supplier will be required to provide the following regular updates to the FCDO Programme Manager (in addition to the key deliverables/outputs described earlier):

- a) Monthly update email providing an overview of key activities, any initial evaluation reflections and findings, any early recommendations to feed into the WHO CVC annual review/ project completion review process in 2024 and the development of a successor WHO CVC programme which will commence in January 2024, and risks and issues. The first of these updates shall be provided in December 2023.

12.3 the Supplier shall submit the following under the following deliverables:

- a. Final summative evaluation report should be no more than 50 pages
- b. Final evaluation summary ('evaluation digest') with key findings and recommendations of the finalised evaluation report should be 2 pages using the FCDO's template for publication available on FCDO's website.
- c. Slide pack/presentation summarising the evaluation findings should be no more than 10 slides covering key takeaways and areas for the UK to strengthen engagement.

**13. Risk and constraints**

13.1 The evaluation Supplier will further develop at inception phase and maintain throughout the contract the draft risk register submitted under the Concept Note proposal.

13.2 Key risks and/or constraints that the evaluation Supplier should consider include:

- a. **Building an understanding and approach for a complex organisation and programme,**
- b. **Ensuring robust data collection, knowledge management, and approach to analysis** the evaluation is likely to draw on programme documentation and monitoring information.
- c. **Lack of financial transparency of CVC funds** specifically how budget decisions are made and why, and how CVC funds are prioritised for activities.
- d. **Consider risks around safeguarding and any ethically considerations** around issues such as confidential data collection, safe storage of data, informed consent of key informants etc.

**14. Aid transparency**

14.1 In line with the International Aid Transparency Initiative (IATI) FCDO requires partners receiving and managing funds to release open data on how this money is spent, in a common, standard, re-usable format and to require this level of information from immediate sub-contractors, sub-agencies and partners. The evaluation Supplier will need to submit copies of their supply chain (sub-contractor) invoices and evidence of payment when invoicing FCDO for its actual costs of procurement of local service (where applicable).

14.2 It is a contractual requirement for all suppliers to comply with this, and to ensure they have the appropriate tools to enable routine financial reporting, publishing of accurate data and providing evidence of this to FCDO. Further IATI information is available from: [www.aidtransparency.net](http://www.aidtransparency.net)

14.3 The evaluation Supplier will also be required to submit to FCDO at the start of the project a delivery chain map, which details all major sub-contractors and partners. This will need to be kept up to date over the life of the evaluation, which any major revisions notified to FCDO.

**15. UK AID branding**

15.1 The Supplier that receives funding from FCDO must use the UK aid logo on their development and humanitarian programmes to be transparent and acknowledge that they are funded by UK taxpayers. Managing Agent should also acknowledge funding from the UK government in broader communications, but no publicity is to be given to this Contract without the prior written consent of FCDO. The Supplier must adhere to UK aid branding guidance. For more information see: [www.gov.uk/government/publications/uk-aid-standards-for-using-the-logo](http://www.gov.uk/government/publications/uk-aid-standards-for-using-the-logo).

**16. Duty of Care**

16.1 The evaluation Supplier is responsible for the safety and well-being of their Personnel and Third Parties affected by their activities under this contract, including appropriate security arrangements. They will also be responsible for the provision of suitable security arrangements for their domestic and business property.

16.3 The evaluation Supplier will be responsible for all of their travel and logistics in-country. The FCDO WHO programme team will support where possible in identifying relevant in-country key informants.

16.4 Supplier shall deliver the contract on the basis of being fully responsible for Duty of Care in line with the details provided above.

**17. List of Annexes /REDACTED/**

**Appendix 1 of Call-down Contract**  
**Schedule of Processing, Personal Data and Data Subjects**

This schedule must be completed by the Parties in collaboration with each-other before the processing of Personal Data under the Contract.

The completed schedule must be agreed formally as part of the contract with FCDO and any changes to the content of this schedule must be agreed formally with FCDO under a Contract Variation.

Description	Details
Identity of the Controller and Processor for each Category of Data Subject	<p>The Parties acknowledge that for the purposes of the Data Protection Legislation, the following status will apply to personal data under this Call-down Contract.</p> <p>1) The Parties acknowledge that Clause 33.2 and 33.4 (Section 2 of the contract) shall not apply for the purposes of the Data Protection Legislation as the <b>Parties are independent Controllers</b> in accordance with Clause 33.3 in respect of the following Personal Data:</p> <p>- For the avoidance of doubt the supplier shall provide anonymised data sets for the purposes of reporting on this project and so FCDO shall not be a Processor in respect of Personal Data necessary for the administration and / or fulfilment of this contract.</p>