



REQUEST FOR PROPOSAL (RFP)

RFP No. ASLM/ACDC/DEP/CAP/LIP/08/31/26

FOR CONSULTANCY FOR THE INTEGRATION, DEPLOYMENT, AND CAPACITY BUILDING OF AN INTEGRATED LABORATORY INTELLIGENCE PLATFORM AND DASHBOARDS

CLOSING DATE: 21 SEPTEMBER 2026

When submitting a response to this RFP, please include the RFP Number and your Organization Name in the email subject line.

1.0 INTRODUCTION

The African Society for Laboratory Medicine (ASLM) is a Pan-African professional body, working to advocate for the critical role and needs of laboratory medicine and networks throughout Africa. For more information, please visit our website at <https://aslm.org>.

2.0 OBJECTIVE OF THE ASSIGNMENT | SCOPE OF WORK | EXPECTED DELIVERABLES

Africa is rapidly growing but continues to face major public health challenges, including HIV, tuberculosis, and malaria, as well as recurring outbreaks of Ebola and other Viral Haemorrhagic Fevers (VHFs) and emerging health security threats. Strengthened laboratory systems, surveillance, and health intelligence capacities are critical to improving preparedness, early detection, response, and recovery efforts while supporting resilient health systems across the continent. ASLM addresses these challenges by working collaboratively with governments, local and international organizations, implementing partners, and the private sector.

ASLM, in collaboration with the Africa Centres for Disease Control and Prevention (Africa CDC), intends to procure consultancy services for the integration, deployment, and capacity building of an Integrated Laboratory Intelligence Platform. The platform will build upon the Africa CDC-ASLM LabMap ecosystem and utilize the Africa CDC Central Data Repository as a primary source of laboratory intelligence data. The assignment will be implemented in

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selected Africa CDC Member States to strengthen laboratory intelligence, diagnostic service monitoring, preparedness, and operational decision-making in response to Ebola and other VHF outbreaks. Development of the platform shall follow an "integrate before build" approach, leveraging and strengthening existing digital health, laboratory, surveillance, preparedness, sample referral, data visualization, data transmission, and other relevant decision-support platforms and systems, while promoting interoperability, reducing fragmentation, and enabling evidence-based decision-making across participating countries.

Purpose of the Assignment

The dashboard is intended to support laboratory intelligence, preparedness, diagnostic service monitoring, and operational decision-making for Ebola, Viral Haemorrhagic Fevers (VHFs), and other Africa CDC priority diseases. The assignment will be implemented through a One Health approach, engaging stakeholders from the human health, animal health, environmental health, laboratory, surveillance, and emergency preparedness sectors to ensure alignment with country priorities, existing systems, and national decision-making processes. Following successful implementation and validation, the dashboard architecture should be scalable and adaptable for deployment in other Africa CDC Member States.

The platform shall provide interactive dashboards that support visibility of laboratory capacity, molecular equipment capacity and utilization, test menu availability, biosafety and biosecurity readiness, population access to diagnostic services, interoperability, and executive-level reporting. The dashboard shall support drill-down analysis, filtering, geospatial visualization, and role-based reporting to facilitate evidence-based planning, preparedness, and operational decision-making. The platform shall be developed using a modular and interoperable architecture that supports future integration with Diagnostic Network Optimization (DNO), Sample Referral Optimization, Hub-and-Spoke Optimization, and other laboratory network planning and decision-support tools.

The Consultant shall implement appropriate data governance, security, and role-based access controls. Access to data, analytics, and dashboard functionality shall be governed by the Ministry of Health and designated national authorities in accordance with approved data-sharing agreements and country-defined access permissions. The platform shall support secure data access, user authentication, audit trails, and appropriate data protection measures.

Objective of the Assignment

To integrate, deploy, and build sustainable national capacity for an Integrated Laboratory Intelligence Dashboard that strengthens laboratory intelligence, preparedness, and operational decision-making for Ebola, VHFs, and other Africa CDC priority diseases, using selected AU member states as pilot and reference implementation for subsequent scale-up across the continent. Specifically, the assignment shall:

- Conduct a landscape analysis and interoperability assessment of existing digital health, laboratory data visualization, data transmission, surveillance, preparedness, and related decision-support platforms and systems.

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- Design and develop, following an “integrate before build” and modular, interoperable architecture, an Integrated Laboratory Intelligence Dashboard built upon the Africa CDC-ASLM LabMap ecosystem and the Africa CDC Central Data Repository.
- Pilot, validate, and deploy the dashboard through an inclusive, multi-stakeholder One Health process.
- Build the capacity of selected National One Health stakeholders and establish a national dashboard core team capable of independently operating, maintaining, and enhancing the platform.
- Develop a replication framework and toolkit to enable scale-up and adaptation of the dashboard in additional Africa CDC Member States.

Scope of Work

The Consultant shall undertake, in collaboration with selected National One Health stakeholders, ASLM, and Africa CDC, the following activities:

Inception and Requirements Gathering

- Submit an Inception Report within five (5) working days of contract signature, outlining the proposed methodology, workplan, and stakeholder engagement approach.
- Engage the selected National One Health stakeholders to validate requirements, priorities, governance arrangements, and implementation approach.

Digital Health and Laboratory Data Platform Landscape Analysis and Interoperability Assessment

- Review existing Ebola response, laboratory, surveillance, sample referral, preparedness, and related digital health, data visualization, data transmission, and decision-support platforms and systems.
- Assess national, regional, continental, and partner-supported platforms.
- Identify opportunities for integration, interoperability, enhancement, and reuse.

Dashboard Design and Development

- Facilitate stakeholder review and approval of dashboard specifications, indicators, and reporting requirements.
- Design and develop the dashboard architecture, modules, and visualizations using ONA, GIS, and other required platforms, in line with the approved specifications.
- Develop automated data flows, APIs, and interoperability mechanisms.

Validation and Deployment

- Develop, validate, and deploy the platform in selected Africa CDC Member States.
- Conduct stakeholder reviews and User Acceptance Testing (UAT).
- Refine and deploy the approved solution.

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Capacity Building and Sustainability

- Train national One Health stakeholders and establish national platform core teams in participating Member States.
- Develop user manuals, SOPs, and technical documentation.
- Transfer knowledge and system administration responsibilities.
- Develop a replication framework for deployment in additional countries.

Expected Deliverables

The Consultant shall produce the following deliverables:

1. Inception Report (including methodology, workplan, stakeholder engagement, and implementation approach).
2. Digital Health and Laboratory Data Platform Landscape Analysis and Interoperability Assessment Report (including review of existing platforms, systems, data flows, interoperability mechanisms, and integration opportunities).
3. Dashboard Specification and Indicator Catalogue (including approved indicators, metadata, reporting requirements, and user requirements).
4. Integrated Laboratory Intelligence Dashboard (including approved dashboard modules, ONA integration, GIS functionality, and interoperability components).
5. Validation and User Acceptance Testing (UAT) Report (including stakeholder validation, testing results, and approved refinements).
6. Capacity Building and Knowledge Transfer Package (including training materials, user and administrator guides, and evidence of training of countries One Health Dashboard Core Team).

Indicative Implementation Timeline

The assignment shall be implemented over twelve (12) weeks in accordance with the following indicative timeline:

Activity	Timeline
Inception Report	Within 5 working days of contract signature
Landscape Assessment, Stakeholder Consultations & Requirements Validation	Weeks 1–4
Dashboard Architecture, ONA Integration & Development	Weeks 3–8
Dashboard Validation, UAT & Refinement	Weeks 8–10
Capacity Building, Handover & Replication Toolkit	Weeks 10–12

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PERIOD OF PERFORMANCE AND OPTIONAL PERIODS:

The initial term (or period of performance) of the consultancy shall be 3 months from the date of contract issuance.

ASLM may exercise its right to extend the contract subject to need, performance of the consultant and availability of funding.

3.0 MANDATORY REQUIREMENTS

- Company profile with Certificate of Incorporation, Tax Clearance and all other applicable licenses, permit, authorizations, affiliations and certifications required per applicable laws and regulations. The company profile should provide additional information such as Registration name and trading name if applicable, physical address, telephone, contact person, period in business, key personnel/management and line of business.
- Individual consultants can also participate, and the above requirements may not be applicable but should conform to in-country tax requirements.

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4.0 EVALUATION CRITERIA AND SUBMISSION REQUIREMENTS

ASLM will accept proposals from bidders that provide Best Value and satisfy the requirements stipulated in the solicitation. All submissions/proposals will be evaluated against the set Evaluation Criteria provided below. Each proposal should contain the items listed in the Submission Requirements column in the following table.

Evaluation Criteria	Submission Requirements	Weight
Past Performance, Qualifications & Language Requirements	• An advanced degree (Master's or higher) for the team lead in Public Health Informatics, Health Information Systems, Computer Science, Data Science, Epidemiology, or a related field; a multidisciplinary team is required. • A minimum of seven (7) years of relevant professional experience designing, developing, and deploying laboratory or health information systems, dashboards, or DHIS2/ONA-based platforms, including at least three (3) similar assignments in Africa. Provide contactable references. • Demonstrated technical expertise in ONA, DHIS2, GIS and geospatial mapping tools (e.g., ArcGIS, QGIS), and interoperability standards and protocols (e.g., HL7 FHIR, OpenHIE). • Experience in laboratory network strengthening, laboratory information systems, or diagnostic network optimization. • Demonstrated experience conducting multi-sectoral stakeholder engagement and capacity building within a One Health framework. • Fluency in French is essential; working proficiency in English is required.	40%
2. Technical Approach & Methodology & Timelines	• Provide technical approach and methodology on how this consultancy will be performed including clear, realistic timelines.	30%

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3.Price	Provide the consultancy fees for the work. A clear cost breakdown will be necessary.	30%
Total		100%

5.0 CONTRACT TYPE

For this procurement, ASLM will issue out a Firm Fixed Price Contract on its terms and conditions indicating the consultant's quoted firm fixed price, scope of work, deliverables, timelines duration of contract and other instructions.

6.0 SUBMISSION REQUIREMENTS

Completed proposals must be addressed to the Procurement Committee and send electronically on or before the closing date and time to rfpsubmission@aslm.org **ONLY**.

7.0 PROPOSED TIMELINES

Date	Activity
31 August 2026	Release of RFP and publicly posted on ASLM website:
11 September 2026	Deadline for submission of inquiries related to this RFP directed to Email to: JShonhe@aslm.org, SMate@aslm.org, BCaroline@aslm.org and all questions must clearly identified with the solicitation # Indicate the RFP number indicated at the top of this RFP (i.e. RFQ #) in your proposals.
14 September 2026	Response to all inquiries released and posted publicly on ASLM website
21 September 2026	Deadline for Proposal submission.
28 September 2026	Final decision announced and Bidders receive feedback
28 September 2026	Contract confirmed & issued out.

While ASLM is desirous of maintaining the proposed timelines, delays necessitated by unforeseen circumstances.

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8.0 ASLM TERMS AND CONDITIONS

The following are the terms and conditions of ASLM and any exceptions to these should be noted in writing at submission:

8.1. This RFP is not an offer to enter into agreement with any party, but rather a request to receive proposals from companies interested in providing the goods or services outlined in this RFP.

8.2. The specifications prescribed are not in any way limited to any specific tenderer as they are based on generally achievable requirements and thus, participation in this solicitation is open to all legal vendors that are registered and comply with the laws of doing business in the applicable country(ies) where services will be rendered. The necessary legal, commercial, technical and financial requirements should be satisfied.

8.3. ASLM does not bind itself to accept the lowest tender price and reserves the right to reject all submissions, in whole or in part, enter into negotiations with any party, and/or award multiple contracts.

8.4. ASLM reserves the right (but is not under obligation to do so) to enter into discussions with one or more respondents in order to obtain clarifications or additional details, to suggest service delivery refinements in the proposal or other aspects of the proposal, or to negotiate the cost quotation.

8.5. All quotations **MUST** be typed, on company official letterhead with full contact details including physical address, contact phone, email. Submissions **MUST** be received on or before the **closing date and time** and all bids received after the closing date and time may not be considered.

8.6. ASLM shall NOT be responsible for any costs involved in the preparation and submission of bids or proposals. All costs to be borne by the bidder and this is irrespective of the outcome.

8.7. Bid validity of quotation/proposals shall be 90 days.

8.8. Unless otherwise specified in the final contract, full payment will be made by ASLM to the Vendor within 30 days of receipt of invoice from the Vendor and either delivery of goods or completion of required deliverable.

8.9 ASLM provides an equal opportunity for any vendor/supplier to participate irrespective of race, colour, religion, sex, or national origin and will receive equal treatment.

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8.10. By participating, preparation and submitting this quotation or proposal, you represent that none from your organization has any conflict of interests.

8.11. To the maximum extent practical and possible, ASLM will strive to ensure that the finances provided in this procurement do not support organisations, companies and individuals associated with acts of terrorism, prostitution and drug trafficking.

8.12. ASLM reserves the right to delay, amend, reissue, or cancel all or part of this RFP at any time but feedback will be provided to the vendors who participated. Additionally, ASLM will be under no obligation to reveal, or discuss with any bidder how a quotation/proposal was assessed, or to provide any other information relative to the selection process. Respondents whose quotations are not selected will be notified in writing and shall have no claim whatsoever for any kind of compensation.

8.13. ASLM reserves the right to waive or permit cure of non-material variances in the bid proposal if, in the judgment of ASLM, it is in ASLM's best interest to do so. Non-material variances include minor informalities that do not affect responsiveness; that are merely a matter of form or format; that do not change the relative standing or otherwise prejudice other vendors; that do not change the meaning or scope of the RFP; or that do not reflect a material change in the services. In the event ASLM waives or permits cure of nonmaterial variances, such waiver or cure will not modify the RFP requirements or excuse the vendor from full compliance with RFP specifications or other contract requirements if the vendor is awarded the contract. The determination of materiality is in the sole discretion of ASLM.

8.14. Failure to provide any of the above specifications and requirements may be considered non-responsive and disqualify the bidder from final selection.

8.15. As part of its commitment to engrain a culture of honesty and integrity in all its business processes, unethical conduct such as undisclosed conflict of interests, bribes and kickbacks and other corrupt activities are strictly prohibited and denounced. No employees at ASLM are allowed to use their position to pursue personal and unethical gain. In the same vein, bidders or potential suppliers and contractors are proscribed from offering bribes aimed at influencing the process and the outcome(s). ASLM implore vendors to embrace this culture in their interactions with us. Violation of this ethical principle and requirement will result in the supplier or service provider disqualified and ASLM will not solicit or accept bids in the future from the same. Should you experience or suspect unethical behaviour by an ASLM employee, please reach out to via email: ASLM@tips-offs.com or through the website: <http://www.tip-offs.com/>.

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