

# Request for Expression of Interest

**Country:** Republic of Kosovo

**Project:** Kosovo Comprehensive Approach to Health System Strengthening (KOMPAS)

**Project ID:** P179831

**Reference No.:** XK-MoH-1.3.3f-CS-CQS

**Issued on:** 22 May 2026

## Consulting Firm for HCWM Infrastructure Assessment, Design, Investment Planning, and Supervision

### Background

The Government of Kosovo has received financing from the International Development Association (IDA) toward the cost of the Kosovo Comprehensive Approach to Health System Strengthening Project (KOMPAS) (P179831), implemented by the Ministry of Health (MoH) of the Republic of Kosovo.

The Project Development Objective (PDO) is to strengthen institutional capacity and governance for quality of care in the Kosovo health system.

The Project consists of the following components:

- Component 1: Strengthening key health system building blocks for Quality of Care (QoC);
- Component 2: Developing an Integrated Health Information System (IHIS);
- Component 3: Project Management, Monitoring, and Evaluation.

Under Subcomponent 1.3 – Strengthening Public Health and Pandemic Prevention, Preparedness and Response (PPR), the Project supports activities related to Infection Prevention and Control (IPC) and Healthcare Waste Management (HCWM), including infrastructure investments aimed at improving environmentally sound and sustainable HCWM systems across public health institutions in Kosovo.

The Ministry of Health intends to engage a qualified Consulting Firm to support the assessment, planning, design, and supervision of HCWM-related infrastructure investments

### Objective of the Assignment

The objective of this assignment is to support the Ministry of Health in identifying, prioritizing, and technically defining infrastructure investments required to ensure safe, compliant, and sustainable Healthcare Waste Management (HCWM) systems across public health institutions in Kosovo.

The Consulting Firm will:

1. Conduct comprehensive HCWM infrastructure assessments across public health institutions;
2. Identify gaps against national legislation, WHO guidelines, and World Bank Environmental, Health and Safety (EHS) standards;
3. Develop functional and technical design concepts for HCWM infrastructure;
4. Prepare technical specifications and costed Bills of Quantities (BoQs);
5. Prepare a prioritized investment plan for phased infrastructure improvements; and

6. Provide supervision services during implementation of HCWM infrastructure works. The assignment will cover tertiary, secondary, and primary healthcare institutions throughout Kosovo, including the University Clinical Center of Kosovo (UCCCK), regional hospitals, and Main Family Medicine Centers (MFMCs).

Further details regarding the scope of services, deliverables, timelines, and institutional arrangements are provided in the Terms of Reference (ToR), which forms an integral part of this Request for Expressions of Interest

## **Qualification Requirements**

The Consulting Firm shall demonstrate:

### **1. Specific Experience of the Consulting Firm**

- Minimum five (5) years of operational experience in environmental consulting, civil engineering, healthcare infrastructure, public health infrastructure, or related fields;
- At least two (2) similar assignments completed during the last five (5) years related to:
  - HCWM infrastructure assessments;
  - Technical audits;
  - Healthcare infrastructure planning/design;
  - Feasibility studies; and/or
  - Construction supervision services;
- Experience in preparation of technical designs, technical specifications, and Bills of Quantities (BoQs);
- Experience in supervision of civil works or infrastructure implementation projects;
- Previous experience with World Bank-financed or other donor-funded projects is considered an advantage.

The Consulting Firm must provide descriptions of similar assignments and client references, including contact details.

### **2. Key Professional Staff**

The Consulting Firm should demonstrate availability of qualified experts, including at minimum:

- a) Team Leader / HCWM Specialist
- b) Infrastructure / Civil Engineer
- c) Given the nationwide scope of the assignment, the Consulting Firm must propose an adequate number of additional field assessors or associate engineers to ensure timely assessment of all health facilities.

## **Selection Process**

Shortlisted firms will be evaluated based on the following criteria:

1. Experience in preparation of technical designs and supervision services (60%);
2. Experience in successfully implemented similar assignments (20%);
3. Availability and qualifications of key professional staff for the assignment (20%).

The Consulting Firm will be selected in accordance with the World Bank's Procurement Regulations for IPF Borrowers, July 2016, revised in November 2017, August 2018, and November 2020, using the Consultant Qualification Selection (CQS) method.

### **Duration of the Assignment**

The expected duration of the assignment is three (3) months for the assessment and design phase. Construction supervision services will continue throughout the implementation phase of HCWM infrastructure works.

### **Submission of Expressions of Interest**

Interested consulting firms may submit Expressions of Interest no later than 12 June 2026 at 14:00 PM. Late submissions will not be considered. Late submissions will not be considered.

Expressions of Interest must be delivered electronically to the addresses below:

#### **Ministry of Health – KOMPAS Project**

Attn.: Procurement Specialist, KOMPAS Project

Address: Olti Trasin Sh.P.K. Objekti Donika Hyrja C #3,  
10 000, Pristine Republic of Kosova

Email(s):

To: [blerim.cerkini@rks-gov.net](mailto:blerim.cerkini@rks-gov.net)

Cc: [fanol.duli@rks-gov.net](mailto:fanol.duli@rks-gov.net)

## TERMS OF REFERENCE (ToR)

**Assignment Title:** Consulting Firm for HCWM Infrastructure Assessment, Design, Investment Planning, and Supervision

**Project:** Kosovo Comprehensive Approach to Health System Strengthening (KOMPAS)

**Project ID:** P179831

**Implementing Agency:** Ministry of Health (MoH), Republic of Kosovo

**Location:** Prishtina, Kosovo (with nationwide travel required)

**Duration:** 3 Months

### 1. Background and Context

Referring to the Financing Agreement between the Republic of Kosovo and the International Development Association for the Kosovo Comprehensive Approach to Health System Strengthening Project (KOMPAS), the KOMPAS Project (P179831) was approved on May 07, 2024. The Project Development Objective (PDO) is to strengthen institutional capacity and governance for quality of care in the Kosovo health system.

The following are the components of the project:

#### **Component 1: Strengthening key health system building blocks for Quality of Care (QoC)**

The objective of this component is to support aspects of public health/Pandemic Preparedness and Response (PPR), service delivery, and health financing (strategic purchasing), that will help unblock the bottlenecks in the structural and process of care. This component will include three sub-components, outlined below:

**Subcomponent 1.1 Improving service delivery.** This subcomponent is aligned with the strategic objectives of the forthcoming Health Sector Strategy for 2023-2030 and builds on the recommendations of the recent World Bank's report highlighting the quality aspect of non-communicable diseases (NCD) management in Kosovo.

**Subcomponent 1.2 Developing and implementing strategic purchasing for quality.** This subcomponent will support the development and implementation of key strategic purchasing elements which are not in place in Kosovo but are critical for both structural and process aspects of quality care.

**Subcomponent 1.3 Strengthening public health and PPR.** This subcomponent will build on activities carried out under the Kosovo Emergency COVID-19 Response Project (P173819) in the areas of PPR. It will support key areas of the Action Plan of the National Program on Communicable Diseases (2022) and the Action Plan for HCWM (2023).

**Component 2: Developing an Integrated Health Information System (IHIS):** The objective of this component is to support the design, development, and implementation of an integrated digital health ecosystem that is critical for the functioning of the entire health system. The foundational and key strategic IHIS building blocks will set the digitized health data environment to support health service delivery and decision-making.

This activity is informed by the “Kosovo eHealth Feasibility Study,” which was completed under the Kosovo Emergency COVID-19 Project (P173819). The planned system will include Primary Health Care (PHC) facilities and hospitals, as well as laboratories and the National Institute of Public Health (NIPH), and will allow for the seamless transmission and sharing of health information among all authorized individuals. Based on globally recognized best practices and experience with previous health information systems development in Kosovo, the approach will be to not build one monolithic system but rather an ecosystem of cooperating information systems built on common governance, standardization, and technical foundational building blocks. Such a system will also require robust patient confidentiality and data privacy protocols to ensure that only authorized users can access patient data.

This component will include three sub-components, outlined below:

**Subcomponent 2.1: Establishing foundational building blocks of IHIS.** This subcomponent will support the establishment of critical elements of foundational environment (Enterprise Architecture) for digital health systems implementation, including: (i) the legal and regulatory framework for transformed health services delivery through digital systems utilization; (ii) the assessment and design of Master Data Management standards and systems, such as foundational registries and common coding and classification systems; (iii) design and implementation of the Health Information Exchange services; and (iv) upgrade of hardware platforms on central locations and in health facilities.

**Subcomponent 2.2: Digital health support for improvement in QoC.** Implementation of Component 1 will require finalization of the implementation and upgrade of the basic health information system (BHIS). Currently, the BHIS is not fully implemented in all Primary Health Care (PHC) facilities and with full functionality. This subcomponent will support: (i) rolling out the BHIS to all PHC facilities (including finalization of patient empanelment and zoning); (ii) upgrading the BHIS functions (automatic update of codes from key registries and allowing dashboard and smart reporting on facility level); and (iii) upgrading the integration with eReferrals system and introduction of eAppointments.

**Subcomponent 2.3: Implementation of IHIS strategic systems.** The eHealth Feasibility Study envisages full digitalization of the health sector in Kosovo to improve the effectiveness and efficiency of service delivery, clinical decision support, health financing, pandemic preparedness and public health functions, supply chain for pharmaceuticals and nutraceuticals, health workforce management, and health system management and policy making.

**Component 3: Project Management, Monitoring, and Evaluation:** The objective of this component is to support overall project administration, including project management, fiduciary functions (procurement, financial management (FM)), monitoring and evaluation, environmental and social compliance, and regular monitoring of and reporting on project implementation. The component will finance consulting services, including consultants to staff the Project Coordination Unit (PCU), as well as office equipment, training, audits, filing systems, and operating costs.

In parallel to the KOMPAS Project, the Ministry of Health is implementing activities financed by the Pandemic Fund (PF), which support strengthening pandemic prevention, preparedness, and response (PPR) capacities through a One Health approach. These activities are implemented in coordination with relevant national institutions and contribute to improving surveillance, laboratory systems, infection prevention and control (IPC), healthcare waste management (HCWM), and emergency response capacities. The proposed assignment contributes to these efforts through assessment, planning, and supervision of investments aimed at strengthening environmentally sound and sustainable healthcare waste management systems across the health sector.

## 2. Objective of the Assignment

The objective of this assignment is to support the Ministry of Health (MoH) in identifying, prioritizing, and technically defining infrastructure investments required to ensure safe, compliant, and sustainable Healthcare Waste Management (HCWM) across public health institutions in Kosovo.

This assignment is undertaken within the framework of the KOMPAS Project, which aims to strengthen institutional capacity and improve quality of care, including Infection Prevention and Control (IPC) and environmental health. Recent assessments have identified significant systemic gaps in HCWM, including deficiencies in infrastructure, equipment, operational practices, and compliance with national and international standards.

In particular, key challenges include:

- Inadequate or non-compliant temporary waste storage areas;
- Insufficient infrastructure for safe internal transport and segregation of medical waste;
- Limited availability of essential equipment (e.g., sharps containers, trolleys, industrial scales);
- Lack of appropriate solutions for handling hazardous and liquid waste streams;
- Weak implementation of standardized procedures for waste handling and documentation.

In this context, the Consulting Firm (the “Vendor”) will:

1. Conduct a comprehensive **infrastructure needs assessment** for HCWM across defined public health facilities;
2. Identify gaps between existing conditions and **national legislation, WHO guidelines, and World Bank Group EHS standards**;
3. Develop **functional and technical layout concepts** for healthcare waste storage and handling systems, ensuring alignment with IPC and safety requirements;
4. Prepare **technical specifications and costed Bills of Quantities (BoQs)** to support future procurement of civil works and equipment;

5. Provide a **prioritized investment plan** to guide phased infrastructure improvements under the Project.

The outputs of this assignment will serve as the technical foundation for subsequent procurement and implementation of infrastructure interventions aimed at improving HCWM practices across all levels of the healthcare system.

The assignment also directly supports the preparation of technical inputs (design, BoQs, and specifications) for two planned procurement packages under the Project:

- (i) construction/adaptation of safe storage spaces for infectious and sharp medical waste, and
- (ii) construction and renovation of follow-up infrastructure for medical waste treatment systems.

### 3. Scope of Work

The Vendor shall perform the following tasks:

#### Task 1: Desk Review and Methodology Design

- Review the Law on Waste No. 04/L-060, the Strategic & Action Plan for HCWM (2024–2026), relevant Administrative Instructions, and the findings of the recent MWM Questionnaire Report including review of HCWM infrastructure requirements, waste flow systems, and applicable WHO/WB standards for healthcare waste facilities.
- Review World Bank ESS3 and the WBG Environmental, Health, and Safety (EHS) Guidelines for Health Care Facilities.
- Develop a Standardized Assessment Tool (checklist and scoring matrix) to evaluate facility infrastructure. This tool must cover:
  - Physical layout and workflow.
  - Ventilation, flooring, and drainage in storage areas.
  - Security and access control.
  - IPC compliance regarding waste movement.

**Deliverable:** Inception Report including the Assessment Tool and the proposed assessment schedule.

#### Task 2: Facility-Level Infrastructure Assessment

Conduct comprehensive on-site technical assessments across all public health institutions in the network. The assessment must include:

- **Tertiary Level:** University Clinical Center of Kosovo (UCCK) – 37 clinics.
- **Secondary Level:** 7 Regional Hospitals.

- **Primary Level:** All Primary Health Care Facilities, including Main Family Medicine Centers (MFMCs), Family Medicine Centers (FMCs), and Family Medicine Ambulances (AMFs)- 462

The assessment must verify:

- **Segregation & Equipment:** Availability of standardized MWM equipment, including color-coded bins, puncture-resistant sharps containers, and biohazard labeling kits at the point of generation.
- **Internal Transport:** Routes used for waste movement and the availability/condition of dedicated, enclosed trolleys specifically designed for the safe internal transport of medical waste.
- **Temporary Storage Areas:** Condition of within facility waste storage areas and central waste storage rooms. The Vendor must verify if these zones are external to main patient care areas, properly ventilated, well-drained, and secured against unauthorized access and weather. Ensure each facility's temporary storage zone is equipped with an industrial scale.
- **Liquid Waste Infrastructure:** Assess the viability and infrastructural needs for the installation of basic neutralization or pre-treatment systems for liquid waste in regional hospitals and larger primary care centers before it is discharged into the public sewage system.

The assessment shall specifically map:

- Waste generation points
- Internal transport routes for medical waste
- Temporary storage infrastructure conditions
- Compliance gaps against HCWM standards, including assessment of the infrastructure conditions of medical waste treatment and storage facilities in regional hospitals and the UCKK central depot

### **Task 3: Gap Analysis and Compliance Review**

- Compare findings against the National HCWM Requirements and WHO Standards. The analysis shall explicitly include WHO HCWM guidelines, World Bank Environmental, Health and Safety (EHS) Guidelines, and the National HCWM legislation and MoH strategy. Identify "High-Risk" facilities where immediate infrastructure failure poses a threat of infection spread.
- Analyze the gap between current equipment (bins, trolleys, heavy-duty PPE, industrial scales) and standardized requirements to support centralized bulk procurement initiatives.

### **TASK 4 – Functional & Technical Design Development**

The Consulting Firm shall:

- Develop **functional layouts and technical design concepts** for:
  - Temporary waste storage areas
  - Waste segregation zones (infectious, sharps, general waste)
  - Internal waste movement pathways
- Ensure design includes:
  - Proper separation from patient care areas
  - Controlled access systems
  - Ventilation and drainage principles
  - Hygienic and easy-to-clean surfaces
- Provide **typical design models** for:
  - Primary healthcare facilities (QKMF/QMF/AMF)
  - Secondary hospitals
  - Tertiary hospitals (QKUK)

#### **TASK 5 – Technical Specifications and BoQs**

The Consulting Firm shall prepare:

- Detailed technical specifications for:
  - HCWM storage infrastructure
  - Ventilation and drainage solutions
  - Access control and safety features
  - Material requirements (non-porous, disinfectant resistant surfaces)
- Costed BoQs for:
  - Civil works (renovation/adaptation of HCWM infrastructure)
  - Equipment supply (bins, trolleys, industrial scales, etc.)
  - Supporting installations where applicable
- Ensure BoQs are:
  - Procurement-ready
  - Aligned with MoH and WB standards

The design and BoQ outputs shall be structured to directly inform future procurement packages for (i) waste storage infrastructure and (ii) medical waste treatment-related infrastructure works.

## Task 6: Construction Supervision of HCWM Infrastructure Works

The Consulting Firm shall provide full-time construction supervision services for all HCWM infrastructure works financed under the Project. The supervision shall ensure that all works are executed in full compliance with approved designs, technical specifications, Bills of Quantities, national legislation, WHO standards, and World Bank Environmental, Health and Safety (EHS) Guidelines.

The Consulting Firm shall be responsible for:

- Daily/regular site supervision and quality control
- Verification of materials and workmanship
- Measurement and certification of completed works
- Review and approval of contractor submissions
- Health, Safety and Environment (HSE) compliance monitoring
- Issuance of interim payment certificates
- Preparation of weekly, monthly, and final completion reports
- Defects liability monitoring and final handover certification

### 4. Deliverables and Payment Schedule

All deliverables must be submitted in English (with the Executive Summary of the Final Report also provided in Albanian).

#	Deliverable	Timeline (Weeks from Signing)	Payment %
1	<b>Inception Note:</b> Methodology, assessment tool/checklist, and schedule for nationwide facility visits-	Week 2	6%
2	<b>Draft Assessment Report:</b> Summary of site visits, database of findings, and initial gap analysis. Identification of investment needs and priority investments	Week 8	24%
3	<b>Technical Design Package (including Indicative BoQs)</b>	Week 10-11	15%
4	Prioritized Investment Plan and Costed Bills of Quantities + Final Report The Costed Bills of Quantities shall be prepared based on prevailing market prices in Kosovo and/or verifiable recent	Week 12	15%

#	Deliverable	Timeline (Weeks from Signing)	Payment %
	procurement data, ensuring realistic budget estimation for implementation.”		

The design phase shall constitute 60% of the total contract value and shall be fully completed and paid within the initial 3-month period based on approved deliverables.

The remaining 40% of the total contract value shall be allocated to construction supervision services. This phase shall commence only after completion of the design phase and initiation of HCWM infrastructure works, and shall be paid separately based on actual implementation progress and approved supervision reports.

#### 5. Duration and Level of Effort

- **Contract Type:** Firm Fixed-Price (Lump-Sum) Contract.
- **Duration:** Up to 3 months from contract signature.

The construction supervision phase will cover the entire duration of HCWM infrastructure works, beyond the initial design phase

- **Level of Effort:** The Vendor is expected to propose a team capable of delivering the scope of work within the 3-month timeframe (estimated total Level of Effort is equivalent to 45–60 expert working days).

#### 6. Reporting and Institutional Arrangements

- **Reporting:** The Vendor will report administratively to the KOMPAS Project Coordinator (PCU). Technically, the Vendor will report to both the Head of the Division for Quality of Care at the MoH and the **MWM Component Specialist**.
- **Coordination:** The Vendor's team must coordinate closely with the Environmental and Social Specialists of the KOMPAS Project to ensure alignment with WB safeguards.
- **Facilities Provided:** The Vendor is expected to work from their own premises but will be provided access to MoH facilities for meetings. The MoH will provide authorization letters for site visits to hospitals and clinics across all municipalities.

#### 7. Required Qualifications

##### A. Firm Qualifications

- Registered consulting firm with a minimum of 5 years of operational experience in environmental consulting, civil engineering, public health infrastructure, or a related field.

- Demonstrated portfolio of at least two (2) similar infrastructure assessments, technical audits, or feasibility studies conducted in the past 5 years (preferably in the healthcare sector).
- Prior experience executing contracts for the World Bank or other international donor-funded projects is highly desirable.

## **B. Key Personnel Requirements**

The Vendor must propose a qualified team to execute the assignment. At a minimum, the team must include:

### **Key Expert 1: Team Leader / HCWM Specialist**

- *Education:* Master's degree in Environmental Health, Public Health, Environmental Engineering, or a closely related field.
- *Experience:* Minimum of 7 years of professional experience in healthcare waste management systems, infection control protocols, and WHO environmental standards.
- *Skills:* Strong analytical capabilities, project management experience, and fluency in English (mandatory).

### **Key Expert 2: Infrastructure / Civil Engineer**

- *Education:* University degree in Civil Engineering, Architecture, or a relevant discipline.
- *Experience:* Minimum of 5 years of experience in conducting facility infrastructure assessments, technical audits, or civil works planning.
- *Skills:* Proven experience preparing technical specifications and cost estimates (Bills of Quantities - BoQs) for small-to-medium scale infrastructure works.
- *Language:* Fluency in Albanian is required for site assessments and local coordination; proficiency in English is required.

### **Field Assessment Team:**

Given the nationwide scope of Task 2, the Vendor is expected to propose additional field assessors or associate engineers as necessary to cover all institutions within the required timeline.

## **8. Selection Method**

Experienced and qualified firms will be selected according to the World Bank's Procurement Regulations for IPF Borrowers' (the Regulations), issued in July 2016, and revised in November 2017 and August 2018, based on the selection method for Consultant's Qualification based Selection (CQS). The shortlisted firms will be evaluated based on the following criteria:

- Previous experience in in the preparation of technical designs and supervision (60%)
- Similar contract implemented successfully (20%)
- Availability of the qualified key staff for the assignment (20%)