CALL FOR PROPOSALS FOR THE UCC/UCUSAF GRANT FOR ICT SKILLS ENHANCEMENT FOR HEALTH WORKERS IN HEALTH FACILITIES SUPPORTED WITH COMPUTERS UNDER THE FOUR FAITH-BASED MEDICAL BUREAUS

STATEMENT OF REQUIREMENTS

1.0   INTRODUCTION

The Uganda Communications Commission (UCC), through the Uganda Communications Universal Service and Access Fund (UCUSAF), has issued a Call for Proposals to enhance ICT skills among health workers in health facilities supported with computers under the four Faith-Based Medical Bureaus, namely: Uganda Catholic Medical Bureau (UCMB); Uganda Protestant Medical Bureau (UPMB); Uganda Muslim Medical Bureau (UMMB); and Uganda Orthodox Medical Bureau (UOMB).

UCC, through UCUSAF, entered into a Memorandum of Understanding (MoU) with the above Faith-Based Medical Bureaus to strengthen digital infrastructure in affiliated health facilities through the provision of computers. The partnership aims to support the digitisation of patient records, improve data management systems and facilitate telemedicine and online consultations. In addition to infrastructure support, the MoU places strong emphasis on capacity building for healthcare workers to ensure effective utilisation of the deployed ICT resources.

Accordingly, a structured training programme is planned to be implemented to improve digital literacy and ICT competencies among health workers in the supported 58 health facilities, enabling them to effectively adopt and utilise digital health tools. This intervention is expected to optimise healthcare delivery and maximise the benefits of digitisation, including:
   1. Streamlining administrative processes,
   2. Improving appointment scheduling and inventory management,
   3. Enhancing data security and integrity, and
   4. Promoting sustainable integration of ICT in health service delivery.

UCC, through UCUSAF, has earmarked resources under a collaborative grant framework to engage a suitable implementing partner(s) to deliver this nationwide initiative in FY 2025/2026. The selected partner will work closely with UCC/UCUSAF to implement the project in line with the UCUSAF Five-Year Strategic Plan (2023/24 – 2027/28) and national digital inclusion priorities, with a focus on expanding equitable access to digital services and strengthening the digital capacity of health workers in underserved and unserved communities.

2.0 BACKGROUND

Uganda's healthcare system continues to experience growing demand for efficient service delivery, accurate health information management and timely access to clinical and administrative data. While Government and development partners have invested in expanding health infrastructure and staffing, many health facilities, particularly in rural and hard-to-reach areas, still face limitations in digital capacity, including inadequate ICT skills among health workers, inconsistent use of electronic systems and limited integration of digital tools into routine service delivery.

Faith-Based Medical Bureaus play a critical role in Uganda's healthcare ecosystem, operating a significant proportion of health facilities that provide essential services to underserved and remote communities. These facilities are often the first point of care for rural populations and are instrumental in delivering maternal health, primary healthcare, HIV/AIDS services and community outreach programmes.

Through partnerships established under the Memorandum of Understanding between UCC/UCUSAF and the four Faith-Based Medical Bureaus, computers have been deployed to 58 affiliated health facilities to strengthen digital infrastructure and enable the adoption of electronic health systems, telemedicine, and digital reporting platforms. However, the effectiveness and long-term sustainability of these investments are highly dependent on the digital competencies of health workers who operate and manage these systems daily.

Limited digital literacy, uneven exposure to ICT tools and gaps in practical system usage continue to constrain the full utilisation of the deployed infrastructure. Strengthening the ICT skills of health workers is therefore essential to ensure improved data quality, operational efficiency, service continuity, and long-term sustainability of digital health interventions. This initiative responds directly to this gap by building the capacity of health workers to effectively integrate ICT into healthcare delivery and management.

3.0 PROBLEM STATEMENT

Despite the existence of supportive national policies and recent investments in digital infrastructure, several operational and capacity challenges continue to constrain the effective utilisation of ICT in Faith-Based health facilities.

Firstly, digital literacy gaps remain prevalent among healthcare workers, limiting their ability to effectively operate computers, health information systems and emerging digital health applications, including telemedicine platforms. This skills deficit reduces the potential impact of deployed ICT infrastructure.

Secondly, there is significant underutilisation of installed ICT infrastructure. Computers, connectivity and basic network systems are not being optimally used due to inadequate training, limited hands-on exposure and insufficient ongoing technical support.

Thirdly, fragmented service delivery practices persist, with paper-based records running parallel to digital systems. This dual approach results in inefficiencies, data inconsistencies, increased administrative burden and delayed access to information for clinical and managerial decision-making.

In addition, data security and regulatory compliance risks remain high. Limited awareness of cybersecurity principles, data protection obligations and safe digital practices exposes patient information to potential breaches, contrary to applicable privacy and data protection regulations.

Finally, there are sustainability constraints, including limited institutional capacity for system maintenance, user support, continuous skills upgrading, and long-term integration of digital tools into routine health operations.

This initiative seeks to address these challenges through a structured capacity-building programme for healthcare workers. The intervention will strengthen practical competencies in the use of digital tools such as electronic medical records, appointment and inventory management systems and secure telemedicine platforms. By enhancing user capability and institutional readiness, the programme will maximise the return on ICT investments and accelerate the adoption of digital healthcare practices in underserved and unserved communities.

4.0   PROJECT OBJECTIVES
4.1.   General Objective
To enhance the digital literacy and ICT competencies of health workers in selected Faith-Based health facilities, enabling effective utilisation of digital tools to improve healthcare service delivery, data management, and operational efficiency.

4.2.   Specific Objectives
The project aims to achieve the following specific objectives:

1. To assess baseline digital capacity by conducting a comprehensive baseline assessment to establish existing digital literacy levels, ICT competencies and capacity gaps among healthcare workers in the supported 58 faith based health facilities.
2. To strengthen digital skills among health workers by equipping at least 1,000 healthcare workers with basic to intermediate ICT competencies, including digital literacy, use of productivity tools, health information systems, cybersecurity awareness and practical application of digital tools in healthcare settings.
3. To improve operational efficiency and data quality by enhancing the use of digital tools for clinical workflows, administrative processes, data management, record keeping, reporting accuracy and information security at facility level.
4. To promote integration of digital health solutions by supporting the adoption of electronic systems, telemedicine platforms, online collaboration tools and digital workflows for service delivery, appointment scheduling, inventory management and internal communication.
5. To strengthen institutional capacity and sustainability by establishing structured mentorship, peer-to-peer learning mechanisms and technical support frameworks that enable continuous skills development and effective maintenance of digital health infrastructure.
6. To ensure long-term impact and institutionalization by monitoring and evaluating project outcomes and implementing a sustainability plan that embeds ICT utilisation into routine healthcare operations and organisational practices.

5.0   PROJECT SCOPE
The project shall be implemented on a nationwide basis, covering the 58 health facilities (as annexed) supported under the four Faith-Based Medical Bureaus, namely: the Uganda Catholic Medical Bureau (UCMB), Uganda Protestant Medical Bureau (UPMB), Uganda Muslim Medical Bureau (UMMB) and Uganda Orthodox Medical Bureau (UOMB).

The target beneficiaries shall include health workers operating within the supported facilities, including clinicians, nurses, midwives, records officers, laboratory and pharmacy staff, administrators and designated facility ICT focal persons.

The implementation period for the project shall be FY 2025/2026.

6.0   PROJECT KEY ACTIONS
The project shall be implemented through the following key actions:
1. Conduct a training needs assessment and baseline digital skills profiling for targeted health workers.
2. Develop standardised training curricula and learning materials aligned to healthcare workflows and operational requirements.
3. Conduct training using a participatory and practical approach, incorporating interactive presentations, hands-on practical sessions,

group discussions, demonstrations, and pre- and post-training assessments.
4. Deliver structured, hands-on training sessions covering the following thematic areas:
   a) Basic computer skills and digital literacy;
   b) Use of productivity tools, including word processing, spreadsheets, and email;
   c) Cybersecurity awareness and data protection practices;
   d) Digital health systems and electronic medical records management; and
   e) Digital collaboration platforms and telemedicine readiness.
5. Provide on-site coaching, mentorship and practical application support to reinforce skills transfer and adoption.
6. Conduct post-training assessments and prepare implementation and performance reports.
7. Deliver training materials in both print and digital formats; administer pre- and post-training evaluations (including skills assessments and feedback instruments); and submit a comprehensive final report comprising attendance registers, key recommendations and a list of trained facility ICT champions (two per facility) to provide ongoing support.

7.0   ELIGIBILITY OF APPLICANTS
The grant may be awarded to a single applicant entity or a consortium of partners under a partnership.

7.1.   General Criteria
1. The applicant organization must be a not-for-profit entity. Where the proposed solution is to be delivered through a consortium, the Lead Applicant must be a not-for-profit organization.
2. The Applicant (Both Lead and co-applicant in case of a consortium) is a legally established entity in Uganda. To address the diverse needs of the project, it is likely that a solution will be delivered through consortia of providers. The applicant organization (in case of consortia both lead and co-applicant organization) will assume overall responsibility and sign a Grant Agreement with UCC to enforce joint accountability of action.
3. The Applicant (Both Lead and co-applicant in case of a consortium) must be in satisfactory financial health and have adequate structures and systems to manage the project and report to the UCUSAF as shall be required.
4. The Applicant (Both Lead and co-applicant in case of a consortium) must be willing to implement activities in unserved and underserved communities across Uganda.

5. The Applicant (Both Lead and co-applicant in case of a consortium) must provide documented evidence of at least three (3) years' experience in ICT skilling health workers, support and training for health workers, etc.
6. The Applicant (Lead or co-applicant in case of a consortium) must demonstrate documented experience in mobilizing, coordinating and delivering similar initiatives at a national scale, especially working in rural areas.
7. The Applicant (Both Lead and co-applicant in case of a consortium) must show a clear plan and capacity to mobilize additional resources or partnerships to support project sustainability beyond initial funding.
8. The Lead Applicant and co-applicant must have an existing working relationship spanning at least two years, supported by an agreement.
9. Co-applicants must demonstrate complementary competencies to the applicant.

7.2. Preference

In evaluating proposals, the Commission will accord priority to applicants whose submissions clearly demonstrate ICT training and digital health capacity-building with demonstrated experience in delivering large-scale, decentralised training programmes within healthcare in Uganda. The organisation should possess the following characteristics:

1. Proven Experience in Health Sector Digital Capacity Building;
   a) Demonstrated experience delivering ICT training or digital transformation programmes for health workers and health facilities.
   b) Familiarity with electronic medical records (EMR), health information systems, telemedicine platforms and data protection requirements in healthcare settings.

2. Strong ICT Training and Curriculum Development Capability
   a) Proven capacity to design and deliver competency-based training programmes, including development of standardised curricula, training manuals and practical learning materials for health facilities.
   b) Demonstrated use of adult-learning methodologies, hands-on training approaches and structured assessment frameworks.

3. Institutional Governance and Grant Management Capacity
   a) Strong governance structures, financial management systems and grant compliance experience.
   b) Demonstrated ability to manage public-sector funding responsibly and produce timely technical and financial reports.

4. Digital Health and Cybersecurity Awareness
   a) Knowledge of data privacy, cybersecurity and regulatory compliance relevant to healthcare information systems.
   b) Ability to embed safe digital practices into training delivery.

5. Sustainability and Knowledge Transfer Capability
   a) Ability to design sustainability mechanisms such as training-of-trainers, mentorship models, refresher training plans and institutional handover strategies.
   b) Capacity to support post-training adoption and continuous improvement.

8.0 ASSESSMENT CRITERIA

Grant applications will be evaluated through a structured three-stage assessment process comprising: Administrative, Technical and Financial evaluations.

8.1. Administrative Evaluation

This stage focuses on verifying the eligibility of the applicant. Key areas assessed include:
   i) Legal registration and status of the organization in Uganda.
   ii) Submission of all required administrative and legal documentation.
   iii) Compliance with minimum eligibility requirements as outlined in the call.

8.2. Technical Evaluation

The technical assessment will evaluate the overall quality, relevance and feasibility of the proposed project. This includes:
   i) Clarity and rationale of the project motivation.
   ii) Alignment of project objectives with SMART (Specific, Measurable, Achievable, Relevant, and Time-bound) principles.
   iii) Applicant's relevant experience and track record in similar ICT and multimedia training programs.
   iv) Appropriateness and innovation of the proposed methodology and project management approach.
   v) Feasibility and practicality of the work plan and timelines.
   vi) Anticipated project outcomes, impact and alignment with UCC/UCUSAF priorities.
   vii) Integration of cross-cutting issues such as gender inclusion, disability mainstreaming, and environmental considerations.
   viii) Demonstrated strategy for sustainability beyond the project period.

8.3. Financial Evaluation

This stage will assess the proposal's financial soundness and cost-effectiveness, including:

i) Clear and realistic budgeting with a strong value-for-money proposition.
ii) Sustainability of project funding post-grant.
iii) Ability to leverage additional resources (financial or in-kind) to scale and sustain the initiative.

9.0   LEGAL DOCUMENTS REQUIRED

All applicants are required to submit the following legal and administrative documents to support their eligibility and capacity. In the case of partnerships or consortia, these requirements apply to both the lead applicant and co-applicants.

1) Certificate of Incorporation or Registration: A valid certificate showing the legal name and registration status of the organization in Uganda.

2) Beneficial owner form in case of a company.

3) Memorandum and Articles of Association: Foundational documents outlining the organization's governance, objectives and operational mandate.

4) Official Address Details: Current physical address, postal address, email and website (where applicable).

5) Authorized Contact Person Information with Powers of Attorney: Full name, title/position, phone number, and email of the designated representative authorized to act on behalf of the organization.

6) Letters of Support (if applicable): Endorsement letters from affiliated entities, proposed implementing partners, or supporting institutions if any (co-applicants).

7) Audited Financial Statements: Certified financial statements for the last two (2) financial years, demonstrating sound financial health and reporting systems.

8) Signed Code of Ethical Conduct: A duly signed copy of the "Code of Ethical Conduct for Grant Applicants and Providers" (refer to Annex 1 of the Call for Proposals).

9) Proof of Relevant Experience: Provide evidence of the organisation's experience skilling health workers, such as project completion reports, client testimonials and/or records of previous grant awards.

10.0   PROPOSAL REQUIREMENTS

1. Project motivation, objectives and outcomes
2. Project linkage to UCC/UCUSAF strategy and the National Development Agenda
3. Experience managing similar projects

4. Project implementation methodology
5. Project management framework
6. Project work plans and associated milestones, with clear description of responsibilities for each partner
7. Project implementation budget with clear allocation of resources to implementing partners
8. Sustainability approach
9. Monitoring and evaluation approach
10. Risk management framework
11. Integration of cross-cutting issues of gender, youth, and digital divide, among others.

NOTE:
The Commission reserves the right to conduct due diligence at any stage of the evaluation process to verify the authenticity and accuracy of the information and documentation submitted by applicants.

11.0   RISK ASSESSMENT
The Commission's assessment team will conduct a comprehensive risk evaluation, including both stated and unstated risks. This assessment will holistically review the applicant's submission to determine the overall level of risk classified as low, medium, high, or extreme that the proposed engagement may pose to UCC/UCUSAF operations, resources, and objectives.

12.0   APPLICATION TIMELINE
The grant application is open effective **26th January 2026 to 6th February 2026.**

A pre-grant application meeting will be held online on **30th January 2026 at 10.00 am.** Participants should register in advance for this meeting:

https://teams.microsoft.com/l/meetup-join/19%3ameeting_ZjM2YWI2MmYtZmI5OC00ZjA3LWE1ZDctM2MzYWUwMD NiZWZi%40thread.v2/0?context=%7b%22Tid%22%3a%22f7ffcd5e-44c0-4686-8452-78ea57432de7%22%2c%22Oid%22%3a%225d9c1dbd-d7cd-408f-aa0b-9f99572c8f3c%22%7d

For further clarification or guidance on the grant application process, please contact +256 412 339000 or +256 312 339000 or email ucusaf@ucc.co.ug

Applications should be submitted in triplicate hard copies (3 copies) by **4.00 pm on 6th February 2026** to:

The Executive Director,
Uganda Communications Commission,
Plot 42 - 44, Spring Road Bugolobi
P O Box 7376,
KAMPALA

A soft copy of the proposal should also be sent to the following email addresses by the deadline: registry@ucc.co.ug; ucusaf@ucc.co.ug

DISCLAIMER
1. Personal information supplied in an application will be used by UCC in accordance with the Laws of Uganda.
2. The Commission reserves the right to carry out any form of due diligence at any time of the application process once an application is received.

ANNEX 1

CODE OF ETHICAL CONDUCT IN BUSINESS FOR GRANT APPLICANTS

1. Ethical Principles
Applicants shall always-
    (a)   maintain integrity and independence in their professional judgment and conduct.
    (b)   comply with both the letter and the spirit of-
        1) the laws of Uganda; and
        2) any contract awarded.
    (c)   avoid associations with businesses and organisations that conflict with this code.

2. Standards
Applicants shall-
    (a)   strive to provide works, services, and supplies of high quality and accept full responsibility for all works, services, or supplies provided.

    (b)   comply with the professional standards of their industry or of any professional body of which they are members.

3. Conflict of Interest
    (a)   Applicants shall not accept contracts that would constitute a conflict of interest with any prior or current contract with the Uganda Communications Commission.

    (b)   Applicants shall disclose to all concerned parties those conflicts of interest that cannot reasonably be avoided or escaped.

4. Confidentiality and Accuracy of Information
    (a)   Information given by Applicants during the grant processes, or the performance of contracts shall be true, fair, and not designed to mislead.

    (b)   Providers shall respect the confidentiality of information received during the performance of a contract and shall not use such information for personal gain.

5. Gifts and Hospitality
Applicants shall not offer gifts or hospitality directly or indirectly, to staff of the Uganda Communications Commission that might be viewed by others as influencing a grant decision.

6. Inducements
    (a) Applicants shall not offer or give anything of value to influence the action of a public official in the grant process or in contract execution.

(b) Applicants shall not ask a public official to do anything inconsistent with the Code of Ethical Conduct in Business.

7. Fraudulent Practices

Applicants shall not:

(a) collude with other businesses and organisations to deprive the Uganda Communications Commission of the benefits of free and open competition.

(b) enter business arrangements that might prevent the effective operation of fair competition.

(c) engage in deceptive financial practices, such as bribery, double billing, or other improper financial practices.

(d) misrepresent facts to influence a grant process or the execution of a contract to the detriment of the Uganda Communications Commission, or utter false documents.

(e) unlawfully obtain information relating to a grant process to influence the process or execution of a contract to the detriment of the Uganda Communications Commission.

(f) withhold information from the Uganda Communications Commission during contract execution to the detriment of the Uganda Communications Commission.

I -------------------------------------- agree to comply with the above code of ethical conduct in business.

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AUTHORISED SIGNATORY   **NAME OF APPLICANT**