

### TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS AND CONTRACTORS

Title	Funding Code/WBS:	Type of engagement	Duty Station:
National WASH in Health Care Facilities Consultant	Grant WBS:	<input checked="" type="checkbox"/> Consultant	Lusaka
<p><b>Background</b></p> <p>The UNICEF Zambia Country Office is leading the "Maintaining and Strengthening Essential Health Services through ACT-A Investments," a Health-WASH program funded by the Republic of Korea (ROK), focusing on enhancing primary healthcare and WASH infrastructure in healthcare facilities. Running from December 15, 2024, to December 15, 2025, the initiative aims to improve WASH and Infection Prevention and Control (IPC) services across six provinces, addressing urgent needs intensified by the COVID-19 pandemic.</p> <p>UNICEF has received an additional \$30 million grant from the Government of the Republic of Korea to support UNICEF's Access to COVID-19 Tools Accelerator (ACT-A) work. This is the largest-ever annual contribution we have received from Korea. It will focus on three priorities that align with the ACT-A Framework and UNICEF's Strategic Plan and related indicators: (1) Support COVID-19-related recovery and restore essential health services, including immunization, to prevent backsliding of SDG 3 on ending preventable deaths; (2) Strengthening primary healthcare, with focus on community health systems; (3) Strengthening primary health care infrastructures (WASH, oxygen systems).</p> <p>Thirty-four UNICEF country offices have been selected to implement programmes over a 12-month period from 15 December 2024 to 14 December 2025.</p> <p>This program plays a crucial role in enhancing WASH and IPC services and forms an integral component of the European Union's NEWZA (Nexus for Water and Energy in Zambia) Action, also implemented through UNICEF. The need for improved WASH conditions is critical, as globally, 22% of healthcare facilities lack water services, 50% lack basic hygiene facilities, and 10% are without sanitation facilities, placing over 1.7 billion people at risk of infection. The pandemic has exacerbated challenges in health service delivery, with significant risks to under-five mortality targets.</p> <p>Through the ACT-A initiative, UNICEF is facilitating access to essential health tools to strengthen health systems, supported by the ROK. This investment aims to enhance health services and improve WASH conditions in Zambia's healthcare facilities, ensuring resilience against current and future health challenges.</p> <p><b>Purpose of the Assignment:</b></p> <p>The primary purpose of this consultancy is to provide technical support to strengthen WASH services in healthcare facilities in Zambia. The consultant will support the Ministry of Health to advance the <a href="#">eight Practical Steps for National Action on WASH in Health Care Facilities</a> by developing a comprehensive WASH in Health Care Facilities situation analysis, facilitating stakeholder engagement, and developing a costed national action plan among other interventions.</p> <p>Specifically, the objectives of this assignment include:</p> <ul style="list-style-type: none"> <li>• Strengthen coordination and implementation of WASH services in healthcare facilities to enhance infection prevention and control.</li> <li>• Build capacity among key stakeholders, including the Ministry of Health and healthcare facility staff, to address WASH challenges.</li> <li>• Ensure that interventions align with national health priorities and the ongoing ACT-A Investments initiative.</li> <li>• Identify gaps, best practices, and opportunities for improvement within current WASH programs in healthcare settings.</li> <li>• Strengthen targets, roadmap and coordination mechanisms in the <a href="#">8 practical steps</a></li> </ul>			

- Development of an actionable and costed National roadmap to enhance WASH and Infection Prevention and Control (IPC) measures in Health Care Facilities
- Contribute to training and capacity-building efforts for facility staff in implementing WASH and IPC standards.

**Scope of Work:**

The consultant is expected to undertake the following tasks:

**Task 1: Comprehensive WASH in Health Care Facilities National Situation Analysis,**

- Conduct a National situational analysis of the enabling environment for WASH in HCF in Zambia (specifically health and WASH policies and strategies, governance structures, institutional arrangements, financing mechanisms, stakeholder analysis, and integration of WASH in health in broader health system strengthening efforts.
- Assess WASH coverage and compliance, identifying gaps and potential improvements.
- Identify some emergency and preparedness gaps in the health Institutions and recommendations
- Assess climate risks and considerations for WASH in health
- Ensure that the situation analysis is published, disseminated by the government, or with government endorsement

**Task 2: Stakeholder Engagement**

- Develop a stakeholder engagement plan that includes relevant institutions such as the Ministry of Health and stakeholders at national and subnational levels.
- Facilitate meetings and discussions to present findings, foster collaboration, clarify roles, validate recommendations, define next steps, and ensure a unified approach to addressing WASH and IPC needs.
- Facilitate review and approval of the WASH in Health Care Facilities Technical working group and task teams developed in 2019 to ensure alignment with the current health strategic plan and emerging contextual issues, ensuring clear roles and responsibilities of different stakeholders at each level for WASH in HCFs
- Strengthening the ongoing coordination mechanisms and ensuring effective information flow between national and sub-national levels

**Task 3: Training and Capacity Building in 20 Districts**

- Organize and deliver training sessions for healthcare facility staff on WASH practices and IPC measures.
- Develop and disseminate training materials that align with national guidelines and best practices.
- Provide technical support to districts conducting WASH FIT assessments in targeted health care facilities to evaluate existing WASH conditions, infrastructure, and service gaps.
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**Task 4: Development of an actionable and costed National roadmap for WASH in HCFs**

- Analyse the WASH in HCFs Data Collected by the Ministry of Health and establish a baseline for WASH in HCFs
- Set detailed targets (with a national costed roadmap) to address gaps and estimate costs (capital investments, rehabilitation, and recurrent costs). Working closely with the technical working group is an effective mechanism to help set these targets and develop a roadmap.
- Support the development of a standardized WASH FIT costing tool to estimate financial requirements for WASH improvements, supporting financial planning by provincial and district health offices.
- Incorporate emergency preparedness and response for healthcare facilities in the roadmap.
- Integrate climate change considerations into the assessment and roadmap, ensuring WASH infrastructure is resilient to climate-related shocks (e.g., droughts, floods).
- Identify and recommend different funding mechanisms available for WASH in the HCFs roadmap
- Develop a tool/score card process to track progress for WASH in Healthcare facilities

**Task 5: Monitoring and Evaluation**

- Establish mechanisms for monitoring the implementation of prioritized WASH improvements in healthcare facilities.

- Based on the assessment findings, support districts to identify and implement low-cost or no-cost interventions that can be immediately undertaken by assessed facilities, such as basic repairs, hygiene behaviour change interventions, and minor infrastructural improvements.
- Provide recommendations for interventions that require submitting proposals for funding opportunities to enhance WASH services.
- Facilitate integration of WASH data and activities with existing health information management systems (HMIS) and other relevant health programs

**Task 6: Knowledge Documentation and Share Results**

- Document lessons learned, challenges faced, and success stories from the WASH interventions, compiling a report to share with stakeholders and inform future initiatives.

**Child Safeguarding**

Is this project/assignment considered as "[Elevated Risk Role](#)" from a child safeguarding perspective?

YES  NO If YES, check all that apply:

**Direct contact role**  YES  NO

If yes, please indicate the number of hours/months of direct interpersonal contact with children, or work in their immediately physical proximity, with limited supervision by a more senior member of personnel:

**Child data role**  YES  NO

If yes, please indicate the number of hours/months of manipulating or transmitting personal-identifiable information of children (name, national ID, location data, photos):

More information is available in the [Child Safeguarding SharePoint](#) and [Child Safeguarding FAQs and Updates](#)

Budget Year:	Requesting Section / Issuing office:	Reasons why consultancy cannot be done by staff:
2025	WASH	The consultancy cannot be performed by UNICEF staff because it requires an independent professional with specialized expertise in WASH services within healthcare settings. The nature of the assignment demands extensive stakeholder engagement, comprehensive assessments, and the formulation of actionable and costed roadmap for WASH in HCFs, all of which require a dedicated and focused approach. Engaging an independent consultant ensures that the project receives the specialized insight and undivided commitment crucial for successful implementation and timely outcomes, ultimately leading to improved WASH conditions in healthcare facilities across Zambia.

<b>Included in Annual/Rolling Workplan:</b> <input checked="" type="checkbox"/> Yes No <input type="checkbox"/> , please justify: It is included and in line with the Systems Strengthening (output 1).			
<b>Consultant sourcing:</b> <input checked="" type="checkbox"/> National <input type="checkbox"/> International <input type="checkbox"/> Both <b>Consultant selection method:</b> <input type="checkbox"/> Competitive Selection (Roster) <input checked="" type="checkbox"/> <b>Competitive Selection (Advertisement/Desk Review/Interview)</b>		<b>Request for:</b> <input checked="" type="checkbox"/> New SSA – Individual Contract <input type="checkbox"/> Extension/ Amendment	
<b>If Extension, Justification for extension:</b>			
<b>Supervisor:</b>  <b>WASH Specialist</b>	<b>Start Date:</b> 1 <sup>st</sup> June 2025	<b>End Date:</b> 31 December 2025	<b>Number of Days (working)</b> 6 months (140 working days)
<b>Work Assignment Overview:</b> Under the overall guidance and supervision of the WASH Specialist, the consultant will work closely with WASH officers for technical oversight and day to day coordination and interactions. The consultant will provide onsite technical support to the Ministry of Health, Technical Working Group for WASH in Health Care Facilities, and Sub National Structures/Staff amongst other key stakeholders to fully support the Interventions.			
<b>Tasks/Milestone:</b>	<b>Deliverables /Outputs:</b>	<b>Timeline (/months)</b>	<b>Estimated Budget (US\$)</b>
A detailed presentation outlining the consultant's understanding of the assignment and proposed methodology	Presentation of proposed methodology and work plan	June 13	5%
Develop a stakeholder engagement plan; facilitate dialogues sessions at the National and sub-national on WASH in Health Care Facilities	Stakeholder engagement plan, meeting summaries	June 23	10%
A published comprehensive report of the situation analysis for WASH in HCF in Zambia (specifically health and WASH policies, governance structures, institutional arrangements, funding streams, and stakeholders). Assess WASH coverage, compliance as well as emergency preparedness and response, identifying gaps and potential improvements.	Published Comprehensive WASH in HCF Situation Analysis Report	July 30	15%
Set detailed targets (with a national costed roadmap) to address gaps and estimate costs (capital investments, rehabilitation, and recurrent costs). Working closely with the technical working group is an effective mechanism to help set these targets and develop a roadmap. Recommendation identified funding sources	An actionable and costed National roadmap for WASH in HCFs	August 15	20%
Establish mechanisms for monitoring the implementation of prioritized WASH improvements in healthcare facilities in the roadmap	Monitoring and Evaluation Framework for Road map	August 25	10%

Identify training needs, Training Plan, Training Materials, and documentation of training sessions conducted	Training needs assessment, Training Plan, Materials and Reports	October 30	35%
Design information-sharing mechanisms and document lessons learned (Briefing note, field note, fact sheet using UNICEF approved format, or peer reviewed journal article).	Learning document	November 30	5%
<b>Estimated Total Consultancy Fees</b>			
Travel Local (please include travel plan) – May require one trip to the provinces to be paid based on receipts	TBD	TBD	
<b>Total estimated consultancy costs<sup>1</sup> in US\$</b>		Inclusive of all costs (Fees, DSA, Domestic Travels costs, and Communication costs)	
<b>Minimum Qualifications required:</b>		<b>Knowledge/Expertise/Skills required:</b>	
<input type="checkbox"/> Bachelors <input checked="" type="checkbox"/> Masters <input type="checkbox"/> PhD <input type="checkbox"/> Other  <b>Enter Disciplines:</b> Master’s degree in public health, Environmental Science, Water and Sanitation Engineering, or a related field.	<ul style="list-style-type: none"> <li>Minimum 7 years of work experience in the WASH sector, with a specific focus on healthcare facilities.</li> <li>Experience conducting assessments, stakeholder engagement, and developing actionable improvement plans for WASH services.</li> <li>Proven experience working with international organizations, NGOs, or government agencies on health-related projects, particularly in WASH and Infection Prevention and Control.</li> <li>In-depth understanding of WASH standards and policies, particularly in relation to healthcare facilities and IPC measures.</li> <li>Strong skills in facilitating workshops, meetings, and discussions with diverse stakeholders, including government agencies, healthcare providers, and community representatives.</li> <li>Experience in designing and delivering training programs for healthcare staff on WASH practices and IPC standards.</li> <li>Proficiency in conducting comprehensive assessments and analyses, with the ability to identify gaps, opportunities, and develop practical recommendations for improvement.</li> <li>Knowledge of Zambia and existing network in country</li> <li>Ability to work independently without guidance and minimal introduction from UNICEF</li> </ul>		
<b>Administrative details:</b> Visa assistance required: NONE <input type="checkbox"/> Transportation arranged by the office: NONE <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Home Based <input type="checkbox"/> Office Based: If office based, seating arrangement identified: <input type="checkbox"/> IT and Communication equipment required: No <input type="checkbox"/> Internet access required: Yes <input checked="" type="checkbox"/>		
<b>Request Authorised by Section Head:</b>		<b>Request Verified by</b>	
Emily Rand		Mahlet Abraham	

Chief WASH	HR Specialist
<p><i>Approval of Deputy Representative Operations (if Operations):</i></p>     <p>_____</p> <p><i>Representative (in case of single sourcing/or if not listed in Annual Workplan/or for Sections reporting to the Rep)</i></p> <p>_____</p>	<p><i>Approval of Deputy Representative Programme (if Programme):</i></p>     <p><b><i>Dr. Nejmudin Kedir Bilal</i></b></p> <p>_____</p>

Costs indicated are estimated. Final rate shall follow the “best value for money” principle, i.e., achieving the desired outcome at the lowest possible fee. Consultants will be asked to stipulate all-inclusive fees, including lump sum travel and subsistence costs, as applicable.

Payment of professional fees will be based on submission of agreed deliverables. UNICEF reserves the right to withhold payment in case the deliverables submitted are not up to the required standard or in case of delays in submitting the deliverables on the part of the consultant

**Text to be added to all TORs:**

Individuals engaged under a consultancy or individual contract will not be considered “staff members” under the Staff Regulations and Rules of the United Nations and UNICEF’s policies and procedures, and will not be entitled to benefits provided therein (such as leave entitlements and medical insurance coverage). Their conditions of service will be governed by their contract and the General Conditions of Contracts for the Services of Consultants and Individual Contractors. Consultants and individual contractors are responsible for determining their tax liabilities and for the payment of any taxes and/or duties, in accordance with local or other applicable laws.