

**United Nations Children's Fund (UNICEF)
Phnom Penh, Cambodia**

Consultant: End-line Assessment of the Project "Improving Maternal and Newborn Healthcare among deprived populations in Cambodia"

Terms of Reference

1. Background

The project "Improving Maternal and Newborn Healthcare among deprived populations in Cambodia" has started after its official record of discussions signed in July 30, 2013 which marks the formal agreement between KOICA and UNICEF to provide financial support for the project. The overall goal of the project is to contribute to the reduction of maternal and newborn mortality through testing and scaling up implementation of evidence-based interventions in the hard-to-reach areas. Specifically, the project aims to improve access and quality of maternal, newborn, and child health services through strengthening the health information system, building clinical capacities and skills of frontline health workers on prenatal, perinatal and postnatal care services. Health staff will improve their skills to provide outpatient consultation for under-five children, and village health volunteers will be equipped with skills to conduct health promotion activities in the communities. There has also been support for the nation-wide communication campaign to promote appropriate care seeking for sick newborns and children with pneumonia through media campaigns and interpersonal communication. The project is expected for completion by December 31, 2016.

As per initial agreement between KOICA and UNICEF at design stage, and as stipulated under the United Nations Evaluation Group's Norms and Standards for Evaluation, the project plans for a post-project end-line assessment to quantitatively and qualitatively analyse the level of achievement of the project by examining the results chain, processes, and contextual determinants.

2. Purpose and Objective

Under the rolling work plan of 2016-2017, UNICEF plans to conduct a final end-line assessment as an independent assessment for the project in its entirety. The assessment will analyse the main trends and outcomes of the interventions, successes and challenges of the project and propose recommendations and corrective actions to address the sustainability of the interventions.

The assessment will collect end-line information on:

- MNCH key trend analysis using data and information from, but not limited to, Health Management Information System, IECD longitudinal survey, health facility assessments, key informant interviews, other quantitative/qualitative data, and ComBI Pneumonia End-Line assessment;
- Consolidation of the overall impact of specific project interventions such as IPPC, CCMN, IMCI and ComBI Pneumonia, which includes both aspects of their attributions and/or contributions;
- Political, cultural, socio-demographic, and other contextual determinants that may have affected trends;
- Key summary of the project's achievements with reference to log-frame outputs and deliverables with physical targets.

3. Work Assignments

Under supervision of the Health Specialist of Child Survival and Development, UNICEF Cambodia, and in close collaboration with relevant project key counterparts at national and sub-national level, the consultant will undertake the following tasks:

- i. Develop work plan for the end project assessment with clear timeline, potential consultation with relevant key programme staff and stakeholders at national as well as at provincial and operational district (OD) levels and areas to be visited.
- ii. Conduct a desk review of relevant maternal, newborn and child health (MNCH) policies, strategies, and guidelines as well as the analysis the trend of MNCH related service coverage and utilization using existing data/information such as the health management information system, IECD longitudinal survey, facility assessment, and ComBI End-Line assessment finding.
- iii. Review and analyse project specific interventions such as IPPC, CCMN, IMCI, ComBI Pneumonia, to identify its overall outcomes and attribution/contribution to the MNCH status, especially in the target area.
- iv. Undertake consultation with relevant key programme staff and stakeholders at national as well as at provincial and operational district (OD) levels (e.g. managers of relevant national programmes/departments, relevant programme managers at provincial and OD levels) to collect additional information (e.g. quality of services, patient satisfaction, etc) not captured by the health information system. Field visits to selected provinces for a minimum 10 days shall be expected.
- v. Consolidate all finding and write up the final report. The draft end project report shall be presented to UNICEF CSD and relevant implementing partners for its finalization with incorporation of comments and recommendations provided. The final end project report shall not exceed 30 pages in length, including an executive summary but excluding annexes.

4. Qualifications or Specialized Knowledge/Experience Required

Qualifications and Experience

- Advanced university degree in Public Health, International Health Policies, Maternal and Child Health, Social Sciences, or related Discipline;
- At least 10 years of experience in health research, health system strengthening, health programming in developing countries and programme assessment/evaluation applied to health service delivery, health promotion and child survival and development.
- Demonstrated experience with MNCH programme assessment/evaluation.

Knowledge and Skills

- Knowledge and skills in health research and programme assessment/evaluation;
- Knowledge of global health issues, specifically relating to maternal, newborn and child health, epidemiological patterns, methods and approaches.
- Knowledge of health system strengthening, health programming and health service delivery in developing countries health.
- Knowledge of Cambodia local contexts as well as local country strategies and policies relevant to UNICEF programmes.
- Strong inter-personal communication skills.

Languages

- Proficiency (writing, reading, speaking) in English
- Working knowledge in Khmer is an asset

Competencies

- Analysing and Formulating Strategies and Concepts
- Communication
- Working with People

5. Location & Duration

The consultant will work mainly at the premise of the UNICEF CSD Office with occasional travel to provinces using transportation arranged by the UNICEF Cambodia office. Access to internet and ICT equipment (printer, scanner, photocopy machine) shall be granted.

Duration of contract will be 30 working days over two and half month-period, starting from the 15th December 2016 to 3rd March 2017.

6. Deliverables (SMART)

Deliverable	Number of Working Days
<u>Deliverable#1:</u> shall be submitted by the end of the 2 nd weeks after the contract work started <ul style="list-style-type: none"> – Work-plan for end project assessment with timeline, potential consultation with key programme staff and stakeholders at national and sub-national levels and areas to be visited identified – Summary of the preliminary finding from desk/programme implementation review with soft copy of relevant document reviewed and proposed plan for further assessment activities. 	10 working days
<u>Deliverable#2:</u> shall be submitted by the end of the 5 th weeks after the contract work started <ul style="list-style-type: none"> – Draft of end project assessment report consolidating all assessment/review finding, which will be the basis for final consultation and finalization of the report 	15 working days
<u>Deliverable#3:</u> submission shall be due 30 days before the consultancy contract expires <ul style="list-style-type: none"> – Final report of the end project assessment with all relevant assessment reports and document reviewed. 	5 working days

7. Reporting Requirements

- Work-plan and summary of preliminary finding from desk/programme implementation review
- Draft end project assessment report consolidating all assessment/desk review finding.
- Final report of the end project assessment with all relevant assessment reports and document reviewed.

8. Payment Schedule linked to Deliverables (SMART)

No entitlement of Medical Insurance Plan (MIP). The consultant will take holiday applied by the Government of Cambodia for 2016 and 2017. The consultant need to have medical insurance by her/his own before starting the work with UNICEF.

Deliverables	Payment	Reporting Requirements
<u>Deliverable#1:</u>	30%	– Work-plan and summary of preliminary finding from desk/programme implementation review with invoice
<u>Deliverable#2:</u>	50%	– Draft end project assessment report consolidating all assessment/desk review finding with invoice
<u>Deliverable#3:</u>	20%	– Final report of the end project assessment with all relevant assessment reports and document reviewed with final invoice

The fees shall be calculated based on the days estimated to complete the assignment in the Terms of Reference and shall be considered the maximum compensation as part of a lump sum contract and agreed on a work plan for submission of deliverables. No additional fees shall be paid to complete the assignment. The payment instalments should be directly linked with satisfactory deliverables at specific time intervals and as certified by the manager.

9. Administrative Issues

- The consultant will be based mainly in UNICEF CSD, Phnom Penh, Cambodia office. Office space, access to internet and other ICT equipment such as printer, scanner and photo copy machine shall be granted by UNICEF.
- As part of the assignment deliverables, the consultant will need to travel to select provinces/OD for 10 days for the consultation/collection of information required. Therefore, the consultant shall be required to include all the relevance costs, including travel cost to/from Cambodia in his/her application as the application submission instruction in this TOR. In-country travel to complete the assignment must be clearly identified and budgeted. Consultants shall be required to include the cost of in-country travel in the financial proposal. It is essential to clarify that: i) travel cost shall be calculated based on economy class travel, regardless of the length of travel; and ii) costs for accommodation, meals and incidentals shall not exceed applicable daily subsistence allowance rates, as promulgated by the International Civil Service Commission.

10. Contract supervisor and other stakeholders

Health Specialist of UNICEF CDS, Cambodia

11. Penalties for Underperformance

Payment of fees to the Contractor under this contract, including each instalment or periodic payment (if any), is subject to the Contractor's full and complete performance of his or her obligations under this contract with regard to such payment to UNICEF's satisfaction, and UNICEF's certification to that effect.

Performance indicators: Consultants' performance will be evaluated against the following criteria: timeliness, quality, and relevance/feasibility of recommendations for UNICEF Cambodia.

12. Termination of Contract

This contract may be terminated by either party before its specified termination date by giving notice in writing to the other party. The period of notice shall be five (5) business days (in the UNICEF office engaging the Contractor) in the case of contracts for a total period of less than two (2) months and fourteen (14) business days (in the UNICEF office engaging the Contractor) in the case of contracts for a longer period; provided however that in the event of termination on the grounds of impropriety or other misconduct by the Contractor (including but not limited to breach by the Contractor of relevant UNICEF policies, procedures, and administrative instructions), UNICEF shall be entitled to terminate the contract without notice.

13. Submission of applications

Interested candidates are kindly requested to apply and upload the following documents to:
<http://www.unicef.org/about/employ/>

1. Letter of Interest (cover letter) with indication of applicant's ability and availability
2. CV or Resume

3. Example of applicant's performance evaluation reports or references of similar consultancy assignments or other references of similar consultancy assignments (if available)
4. Your fee proposal or price proposal by indicating daily/monthly rate (in US\$) to undertake the terms of reference above (including travel and daily subsistence allowance, if applicable). Applications submitted without a daily/monthly rate will not be considered.

14. Assessment Criteria

A two stage procedure shall be utilized in evaluating technical assessment being completed prior to any price proposal being compared. The Contract shall be awarded to candidate obtaining the highest combined technical and financial scores, subject to the satisfactory result of the verification interview.

Applications shall therefore contain the following required documentation:

1. Technical Proposal: Containing a cover letter with indication of applicant's ability and availability, updated CV, and the example of applicant's written report on end project assessment or other references of similar consultancy assignments (if available).
2. Financial Proposal (or Fee Expectation from Applicant): Lump-sum offer with the cost breakdown: Consultancy fee, travel costs, per-diem to cover lodging, meals, and any other cost related to the consultant's travel to provinces as per work assignment.

15. Technical Assessment

For evaluation and selection method, the Cumulative Analysis Method (weight combined score method) shall be used for this recruitment:

- a) Technical Qualification: **max. 100 points**, weight (70 %)
 - Advanced university degree in Public Health, International Health Policies, Maternal and Child Health, Social Sciences or other relevant disciplines **(20 points)**
 - Working experience in health research, health system strengthening, health programming in developing countries and programme assessment/evaluation applied to health service delivery, health promotion and child survival and development **(20 points)**
 - Knowledge of "health system strengthening in developing countries" **(20 points)**
 - Demonstrated experience with MNCH programme assessment **(20 points)**
 - Fluency in English **(20 points)**
- b) Financial Proposal: **max. 100 points** weight (30 %)
 - The maximum number of points shall be allotted to the lowest Financial Proposal that is evaluated and compared among those technical qualified candidates who have attained a minimum 70 points score in the technical evaluation. Other Financial Proposals will receive points in inverse proportion to the lowest price.

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The Contract shall be awarded to candidate obtaining the highest combined technical and financial scores, subject to the satisfactory result of the verification interview.

ANNEX 2: PROJECT TARGET AREA

Name of the Region/Provinces	Name of the Operational District	Health Centres, Villages and Health Staff Targeted (2013-2015)
1. Kratie	1. OD Kratie	- 182 Health Centres
2. Stung Treng	2. OD Chhlong	- 1,474 villages for home care for sick children (HCSC)
3. Rattanak Kiri	3. OD Stung Treng	- 977 villages for the community care of mothers and newborns (CCMN)
4. Mondul Kiri	4. OD Banlong	- 400 midwives (IPPC)
5. Kampong Thom	5. OD Sen Monorom	- 176 health centre staff (IMCI)
6. Preas Vihear	6. OD Kampong Thom	
7. Kampong Speu	7. OD Baray/Santuk	
8. Phnom Penh	8. OD Stong	
	9. OD Tbeng Meanchey	
	10. OD Kampong Speu	
	11. OD Choeung	
	12. OD Kandal	
	13. OD Lech	
	14. OD Tbong	

