

**United Nations Children's Fund** 

## TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS AND CONTRACTORS

Title: National	Funding Code	Type of engagement	Duty Station:
Immunization			
consultant	WBS:		Vientiane, Lao PDR
	2460/A0/06/100/002/008	☐ Individual Contractor Part-Time*	
	Grant: SC220798	☐ Individual Contractor Full-Time *	

#### Purpose of Activity/Assignment:

UNICEF is collaborating with the Ministry of Health to enhance overall immunization outcomes in twenty underperforming districts of Lao PDR. With remarkable achievements, UNICEF provided vital technical expertise, guidance, and resources to bolster the Ministry's efforts in amplifying COVID-19 vaccination coverage across these 20 districts with subpar performance. Tailored interventions are being executed by UNICEF in these districts, specifically designed to augment Routine Immunization (RI) coverage and substantially contribute to achieving comprehensive Expanded Program on Immunization (EPI) objectives.

The selection of the twenty districts was meticulously based on assessments of Routine Immunization (RI) and COVID-19 vaccination coverage data, as per the DHIS2 platform in early 2022. Recognizing the imperative to reach unreached and underserved communities, UNICEF has deployed three national consultants to provide specialized assistance in fortifying routine immunization, particularly focusing on areas with limited access, alongside fostering COVID-19 vaccination uptake across these twenty districts, spanning six provinces—Bokeo, Khammouane, Savannakhet, Saravan, Attapeu, and Sekong.

To discern the impediments and determinants of low RI and COVID-19 vaccination coverage, comprehensive field surveys were conducted in November-December 2022, collaboratively orchestrated by UNICEF and CHSI, involving participation from national, provincial, and district-level government personnel. Employing a mixed-method approach, the survey encompassed focused group discussions (FGDs) and detailed questionnaires, delving into various facets of immunization programming and Risk Communication and Community Engagement (RCCE)/Social and Behavioural Change Communication (SBCC).

Meticulous scrutiny of both qualitative and quantitative data ensued, culminating in the formulation of insightful findings and a meticulously crafted operational/activity plan to bolster support for the identified priority districts. These findings were disseminated and concurred upon at both national and sub-national levels, garnering alignment with governmental stakeholders.

Presently, UNICEF, in collaboration with the Ministry of Health, is actively executing the agreed-upon activities, steadfastly working towards enhancing RI outcomes in the targeted twenty underperforming districts. A pivotal agreement has been reached with the Ministry of Health, designating UNICEF to spearhead the coordination of the Measles-Rubella (MR) campaign across these twenty districts, backed by financial support.

Through concerted efforts and strategic collaboration, UNICEF and the Ministry of Health are paving the way for substantial improvements in immunization coverage, thus safeguarding the health and well-being of communities across Lao PDR.

#### Scope of Work:

The immunization consultant will be deployed at central level to provide technical assistance to Immunization Unit at the Maternal and Child Health Center (MCHC) who plays a vital role in collaborating with the provinces to plan various activities such as cold chain management, data handling, supportive supervision, and service delivery. Additionally, the unit supports provinces, districts, and health centers in planning and executing Routine Immunization (RI) activities. It assists district and health center staff in the selection of Village Health Volunteers (VHVs) for implementing the zero-dose plan, with health center workers overseeing their work. The unit also aids in training VHVs and health center-based supervisors according to guidelines for identifying and vaccinating zero dose children. Furthermore, it supports health center-based health workers in monitoring and supervising VHVs, providing them with refresher training, and estimating the number of eligible children for vaccination. Community-based advocacy meetings are conducted with village chiefs and other leaders to select volunteers if necessary. The unit actively participates in provincial and district-level immunization meetings and provides routine progress reports on immunization coverage and cold chain management.

In addition, the consultant will support following activities in 20 low performing districts:

- Coordinate electronic microplans from all 20 low-performing districts to prepare for budget allocation for Routine Immunization (RI)
- Conduct site visits to districts and Health Centers (HCs) within the 20 low-performing districts to oversee progress toward establishing HCs as models for EPI activities.
- Accompany the data team on field visits to observe Electronic Immunization Registry (EIR) activities at the subnational level.



**Child Safeguarding** 

- Assist data and communication teams in coordinating with the Ministry of Health and provinces to ensure timely implementation of activities.
- Encourage community engagement by collaborating with community and village leaders.
- Establish a feedback mechanism from the community to the central level and from the central level to the subnational level.

The **duration of this consultancy is 16 months.** For planning purpose, the timelines have been indicated in below table. However, the actual timelines will be agreed with the successful applicant based on technical proposal. The deliverables will require extensive planning and travel to achieve the results. Therefore, Consultant will be allowed to travel seven days a month to achieve the deliverables throughout the consultancy period and therefore the lumpsum cost per deliverable could be derived/estimated accordingly.

Is this project/assignment considered as "Elevated Risk Role" from a child safeguarding perspective?				
⊠ YES □ N	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	More information is available in the <u>Child Safeguarding SharePoint</u> and <u>Child Safeguarding FAQs and Updates</u>			
Budget Year:	Requesting Section/Issuing O	office: Reasons wh	/ consu	ultancy cannot be done by staff:
2024	Health	The consulta implementate extensive tra	The consultancy requires a national consultant to support implementation of activities in low performing districts with extensive travel. The current EPI team doesn't have a bandwidth to follow up with districts on a regular basis.	
Included in Annual/Rolling Workplan: X Yes No, please justify:				
Consultant sourcing: Request for:			Request for:	
□ National    □ International    □ Both				New SSA – Individual Contract
Competitive Selection:				Extension/ Amendment
Advertisement Roster				
Single Source Selection [ (Emergency - Director's approval)				
If Extension, Justification for extension: Not applicable				
Supervisor:	Supervisor: Start Date: End Date:			Date:
Shukhrat Rakhimdi	Shukhrat Rakhimdianov, HSS Manager 1st August 2024 3:		31st I	December 2025 (16 months)



Work Assignments Overview	Deliverables/Outputs	Delivery deadline	Estimated Budget (% of payment)
Deliverable 1:	<ul> <li>Provide technical assistance in tracking microplans for routine immunization activities in the 20 low-performing districts, facilitating timely budget disbursement.</li> <li>Conduct visits to selected districts among the 20 low-performing districts to offer support for routine immunization activities.</li> </ul>	Sep 2024	
Deliverable 2:	<ul> <li>Organize monthly online meetings with the 20 low-performing districts (LPDs) to present UNICEF's monthly and quarterly support plan for Routine Immunization (RI) activities.</li> <li>Collect and compile Village Health Volunteer (VHV) profiles and Terms of Reference (ToR) to support activities at the Health Center (HC) level.</li> </ul>	Oct 2024	
Deliverable 3:	<ul> <li>Provide technical assistance for the introduction of IPV2 and participate in coordination meetings. Additionally, support the revision of IPV training materials and the development of operational guidelines.</li> <li>Assist in developing a rollout plan for eLearning modules and ensure progress tracking of implementation.</li> </ul>	Nov 2024	
Deliverable 4:	<ul> <li>Coordinate with the Ministry of Health (MoH), Maternal and Child Health Center (MCHC), and National Immunization Program (NIP) to plan Routine Immunization (RI) activities and facilitate budget disbursement to the 20 low-performing districts (LPDs) for implementation in the fourth quarter of the year.</li> </ul>	Dec 2024	
Deliverable 5:	Organize monthly online meetings with the 20 low-performing districts (LPDs) to present UNICEF's monthly and quarterly support plan for Routine Immunization (RI) activities.  Additionally, conduct field visits to selected districts and Health Centers (HCs) within the 20 LPDs to ensure progress towards establishing HCs as models for Expanded Program on Immunization (EPI) activities.	Jan 2025	
Deliverable 6:	<ul> <li>Prepare and present the annual performance report of the 20 low-performing districts (LPDs) for the year 2024, encompassing achievements, challenges encountered, and plans for 2025.</li> </ul>	Feb 2025	
Deliverable 7:	<ul> <li>Organize monthly online meetings with the 20 low-performing districts (LPDs) to deliver UNICEF's monthly and quarterly support plan on Routine Immunization (RI) activities.</li> <li>Additionally, provide support for community-based advocacy meetings with village chiefs and other village leaders</li> </ul>	Mar 2025	
Deliverable 8:	<ul> <li>Conduct field visits to selected districts and HCs within the 20 LPDs to ensure HCs become EPI models. Support cold chain and communication teams in coordinating with MoH, MCHC/NIP, and provinces for effective implementation of planned activities.</li> </ul>	Apr 2025	
Deliverable 9:	<ul> <li>Hold monthly online meetings with the 20 LPDs to present UNICEF's RI support plan. Provide coordination support with MOH, MCHC/NIP, and provinces for EIR system improvement plan.</li> </ul>	May 2025	
Deliverable 10:	<ul> <li>Visit districts and HCs in 20 LPDs to ensure progress in making HCs EPI models. Coordinate with MoH, MCHC/NIP to plan RI activities and facilitate budget disbursement to 20 LPDs.</li> </ul>	Jun 2025	



Deliverable 11:	<ul> <li>Provide feedback on the RI activities to all 20 LPDs to MOH, MCHC/NIP and 6 target provinces in order to discuss the challenges and next steps towards HC model on RI.</li> </ul>	Jul 2025
Deliverable 12:	<ul> <li>Hold monthly online meetings with 20 LPDs to present UNICEF's RI support plan.</li> <li>Attend necessary training and meetings organized by provinces and districts.</li> </ul>	Aug 2025
Deliverable 13:	<ul> <li>Conduct desk review on the performance of 20 LPDs and design activities to address challenges hindering HC's EPI model status.</li> </ul>	Sep 2025
Deliverable 14:	<ul> <li>Conduct monthly online meetings with the 20 LPDs to deliver UNICEF's monthly and quarterly support plan on Routine Immunization (RI) activity.</li> </ul>	Oct 2025
Deliverable 15:	<ul> <li>Conduct field visits to selected districts and Health Centers (HCs) within the 20 LPDs to ensure progress toward establishing HCs as models for Expanded Program on Immunization (EPI) activities.</li> <li>Coordinate with the Ministry of Health (MoH), Maternal and Child Health Center (MCHC), and National Immunization Program (NIP) in planning RI activities and facilitating budget disbursement to 20 LPDs.</li> </ul>	Nov 2025
Deliverable 16:	Submit final report of achievements, challenges and lessons learnt	Dec 2025
Total		

Estimated Consultancy fee	
Travel International (if applicable)	
Travel Local (please include travel plan)	
DSA (if applicable)	
Health insurance	
Mandatory insurance premium	
Total estimated consultancy costs <sup>i</sup>	

Minimum Qualifications required*:	Knowledge/Expertise/Skills required *:
<ul> <li>☑ Bachelors ☐ Masters ☐ PhD ☐ Other</li> <li>Enter Disciplines</li> <li>Bachelor's degree in medicine or Public Health or any other related field</li> <li>Advanced degree in Public Health will be an advantage</li> </ul>	<ul> <li>Over 10 years of experience in Immunization, cold chain Management and related initiatives at National or Provincial level.</li> <li>Familiarity with the Lao PDR health system context is required.</li> <li>Experience in providing technical assistance to the government staff and capacity building activities.</li> <li>Ability to work in a multidisciplinary team and have the initiative to work independently to meet deadlines.</li> </ul>
Submission of applications:  Letter of Interest (cover letter)  CV or Resume  Performance evaluation reports or references of similar cons  Financial proposal: All-inclusive lump- sum cost including med cost for this assignment as per work assignment	cultancy assignments (if available) dical insurance with medevac cost, travel, and accommodation
Evaluation Criteria (This will be used for the <u>Selection Report</u> ✓ Technical Evaluation (75 points)	(for clarification see <u>Guidance</u> )
Degree Education in (10 points)  ✓ Bachelor's degree in medicine or Public Health of Advanced degree in Public Health will be an adv	•
Knowledge of (20 points)  ✓ National Immunization Programme and its gover ✓ Solid understanding of Immunization guidelines	
Experience in (30 points)  Supporting government in Immunization or other Capacity building of health managers and worke coordinating with provinces and districts	

# Quality of past work (15 points)

- ✓ Assessment of previous work
- ✓ Reference checks
- √ Financial Proposal (25 points)

The maximum number of points shall be allotted to the lowest Financial Proposal that is opened /evaluated and compared among those technical qualified candidates who have attained a **minimum 50 points score** in the technical evaluation. Other Financial Proposals will receive points in inverse proportion to the lowest price.

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



Administrative details:	If office based, seating arrangement identified:	
	IT and Communication equipment required: No	
Visa assistance required:	Internet access required: No	
	Consultant will be deployed at NIP (Government office)	
☐ Home Based ☒ Office Based:	with weekly reporting at UNICEF office	

<sup>1</sup> 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.

The selected candidate is solely responsible to ensure that the visa (applicable) and health insurance required to perform the duties of the contract are valid for the entire period of the contract. Selected candidates are subject to confirmation of fully-vaccinated status against SARS-CoV-2 (Covid-19) with a World Health Organization (WHO)-endorsed vaccine, which must be met prior to taking up the assignment. It does not apply to consultants who will work remotely and are not expected to work on or visit UNICEF premises, programme delivery locations or directly interact with communities UNICEF works with, nor to travel to perform functions for UNICEF for the duration of their consultancy contracts.

UNICEF offers <u>reasonable accommodation</u> for consultants with disabilities. This may include, for example, accessible software, travel assistance for missions or personal attendants. We encourage you to disclose your disability during your application in case you need reasonable accommodation during the selection process and afterwards in your assignment.