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#### United Nations Children's Fund

Title	Funding Code	Type of engagement	Duty Station:
Vaccine Management	Grant:	Consultant	Addis Ababa,
Consultant		Individual Contractor	Ethiopia
	SC190427 & SM230722		
One national consultant			
required	WBS:		
	1410/A0/07/001/002		

#### **Purpose of Activity/Assignment:**

Ethiopia was classified as polio-free from wild poliovirus in 2017. However, since then, cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) are reported in Ethiopia. In 2020, Ethiopia responded to two cVDPV2 outbreaks using the mOPV2 vaccine. In 2021, fourteen new cVDPV2 cases (AFP cases were reported from 21<sup>st</sup> October 2021. A nationwide nOPV2 campaign was also implemented in 2021-22. However, due to the security concern, we couldn't manage to implement it in the Tigray region, some zones of Afar and Amhara and Oromia. The last reported cVDPV2 case in Ethiopia was in 2022 from Awai Zone, B/Gumuz. OPRG has approved the risk response campaign, but we couldn't manage to implement the campaign due to the short expiry of available stock of nOPV2 vaccine in country. Since then, we are waiting for the further guidance from OPRG/RRT team. There is an active cVDPV2 polio virus transmission on-going in the Horn of Africa with the latest cVDPV2 polio case reported from Garissa, Kenya in 2023. Total eight cVDPV2 cases are reported in Kenya in 2023. The other bordering country Somalia has also reported five cVDPV2 case this year and five cases in 2022. Eritrea and Sudan also reported one cVDPV2 case respectively in 2022. Due to ongoing violence in Sudan, second round of outbreak response campaign was postponed until further orders. While in Djibouti, 11 cVDPV2 positive environmental samples were collected in 2022.

Ethiopia remains vulnerable to poliovirus due to the high migration and also importation due to the continued circulation of cVDPV2 in neighboring countries. In Somalia, five cVDPV2 polio case reported in 2023 and there were five cVDPV2 cases reported in 2022. In addition, Ethiopia has high chance of subsequent transmission due to low population immunity resulting from the low routine immunization coverage and high dropout rates (OPV3 and IPV).

The objective of this consultancy is to support proposed synchronized nOPV2 campaign in the Horn of Africa region (Kenya, Somalia, and Somali region of Ethiopia) as well as to support preparedness (in case of polio outbreak in country). Also, to ensure vaccine management is sufficiently and properly managed prior, during and after the vaccination rounds including proper retrieval and destruction process of nOPV2. To mitigate the risk of emergence of VDPV2, the strict adherence to the vaccine management protocols must be enforced. Ensure retrieval of nOPV2 vaccines from all the levels through validation/program visits and confirm no nOPV2 vaccine vials are left in the cold chain, health facilities or at any other level after the completion of response campaign.

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Given the wide geographical scope of response, urgency of the campaign and risk of emergence of a newly reported cVDPV2 cases in the neighboring countries. Country needs team of experts to deal with such type of emergencies/outbreaks, to support local capacity to handling these tasks in near future. Thus, additional skilled workforce with local knowledge is required to mentor the existing human resource, coordinate, and support the operation, retrieval, and proper disposal/distraction of the nOPV2 vials as per GPEI guidelines. Facilitation of this recruitment through UNICEF is ensuring and confirming that UNICEF is committed to this partnership and to its mandate and responsibilities.

The purpose of recruiting this consultant is to provide technical support to Ethiopian Public health institutes (EPHI), National/Regional Health Bureaus, zonal and district health offices on planning and response to vaccine derived Polio virus outbreaks with focus on vaccine management which is consistent with the latest SOPs for outbreak responses.

To proactively address the vaccine and cold chain management challenges and ensure relevant national and subnational authorities (NLWG/EOC/National EPI) have adequate capacity to receive, store, distribute and monitor the upcoming major surge in polio vaccines, UNICEF Ethiopia would like to deploy one national vaccine management (VM) consultant at national level (EPHI).

The consultant will work closely with national and regional Emergency operation center (EOC), the Cold Chain and Vaccine Management -technical working group, EPSS hub manager and regional health bureaus and authorities of the national immunization Programme to accomplish the following:

- Develop/review the outbreak response SIAs supply and logistics plan.
- Establish cold chain functionality and failure report tracking method and coordinate the maintenance activities.

- Develop/review the distribution plan, route, transport and organize the distribution of the nOPV2 outbreak response supply and logistics.
- Develop/review reverse logistic plan, route, transport and organize the nOPV2 vaccine retrieval from risk response/outbreak regions.
- Provide training to SIA facilitators at National, regional and sub regional levels on nOPV2 vaccine management.
- Support country team to plan the vaccine requirement of nOPV2 vaccines for outbreak/risk response campaigns.
- Support in receiving the nOPV2 shipment, coordinate to get the clearance of shipment at the airport and coordinate to keep the received vials safe and at the recommended temperature at all levels during this transit process.
- Support the centra team in record keeping of nOPV2 vaccine and regularly support team to monitor VVM and expiry of vaccine.
- Support central vaccine management team in the management of nOPV2 during the outbreak SIA's.
- Support nOPV2 reverse logistics with accountability for each and every nOPV2 vial received/distributed.
- Support to quantify the required supplies for the outbreak/risk response and support to procure the required supplies as per the UNICEF policy.
- Participate in central/region/ district command post daily coordination meetings and report daily performance to central outbreak response team/command post/
- Organize central level reverse logistics for used and unused nOPV2 vials from previous campaigns.
- Support central level team to organize the destruction and disposal of used nOPV2 from previous campaign.
- At the central level work with Cold Chain and Vaccine Management team at the hub level and document and report on all vaccine and logistics management and retrieval and destruction of used and unused nOPV2 delivered for the SIAs from previous campaigns.

Budget Year:	Requesting Section/Issuing Office:	Reasons why consultancy cannot be done by staff:
2024	Health	There is an urgent need to assign a consultant who will be with the EPHI team of MOH on daily basis for implementation, monitoring and evaluation of polio vaccine management on public health emergencies including disease outbreaks. There is also a persisting capacity gap among the EPHI team specifically around vaccine and cold chain management. The consultant will ensure skills transfer as well as providing daily support to EPHI team of MOH vaccine and cold chain management areas.

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### Included in Annual/Rolling Workplan: Yes No, please justify:

The initial plan was to extend the engagement of previously recruited three consultants. However, due to the delay of the funding, we couldn't be able to the extension on time.

Consultant sourcing:		Request for:		
🛛 National 🔲 International 🗌 Both		New SSA		
Consultant selection method:	Extension/ Amendment			
Competitive Selection (Roster)				
Competitive Selection (Advertisement/De				
If Extension, Justification for extension:				
Supervisor:	Start Date:	End Date:	Number of Days (working)	
<b>Gulilat Eshetie</b> Immunization Officer, Health Section	15 February 2024	14 February 2025	260 days	

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Work Assignment Ov	verview		
Tasks/Milestone:	Deliverables/Outputs:	Timeline:	Estimate Budget (USD)
These deliverables are interlinked and need to be carried out on an on-going basis	Develop/review the outbreak response SIAs supply and logistics plan and establish cold chain functionality and failure report tracking method and coordinate the maintenance activities.	21st Feb 2024	
until the consultancy concludes.	Develop/review the distribution plan, route, transport and organize the distribution of the nOPV2 outbreak response supply and logistics. Provide training to SIA facilitators at National, regional and sub regional levels on nOPV2 vaccine management	20th Mar 2024	
	Support country team to plan the vaccine requirement of nOPV2 vaccines for outbreak/risk response campaigns. Support the centra team in record keeping of nOPV2 vaccine and regularly support team to monitor VVM and expiry of vaccine.	20th April 2024	
	Support nOPV2 reverse logistics with accountability for each and every nOPV2 vial received/distributed and retrieval and destruction of used and unused nOPV2 delivered for the SIAs from previous campaigns.	20th May 2024	
	Support to quantify the required supplies for the outbreak/risk response and support to procure the required supplies as per the UNICEF policy. Participate in central/region/ district command post daily coordination meetings and report daily performance to central outbreak response team/command post/	20th June 2024	
	Organize central level reverse logistics for used and unused nOPV2 vials from previous campaigns.	20th July 2024	

		team to organize the destruction and V2 from previous campaign.	20th Aug, 2024	
	Management team a	vork with Cold Chain and Vaccine t the hub level and document and and logistics management	20th Sept.	
	•	the received vials safe and at the erature at all levels during this transit	20th Oct, and 25th Nov 2024	
		the nOPV2 shipment, coordinate to shipment at the airport and	31st Dec 2024	
Estimated Consultancy fee				
Travel International (if applicable)				NA
Travel Local (please include travel plan)	Monitoring reports on Vaccine and Cold chain Management interventions at the EPSS Hubs, Regional health Bureaus and service delivery point.		Jan, Feb, March, May, June, July, August, Sep, Oct & Nov 2024	
DSA (if applicable)				
Total estimated consultancy costs <sup>i</sup>				
Minimum Qualificati	ons required:	Knowledge/Expertise/Skills required:		
Bachelor's 🔲 Ma Other	aster's 🗌 PhD 📃	<ul> <li>Minimum of three years of relevant management experiences in immur sectors at national level</li> </ul>		
University degree is required (Advanced degree an advantage), preferably in relevant field (e.g., business planning, supply chain management, economics, international development studies, medicine, procurement, logistics, or other quantitative degree). Applicable work experience can substitute in cases where university degree is not aligned to a relevant field.		<ul> <li>At least 5 years of professional work experience at national and decentralized levels in outbreaks response, routine immunization, public health, and other relevant programs.</li> <li>Demonstrated experience providing technical assistance to governments on the implementation of outbreak responses (polio) and for routine immunization activities.</li> <li>Demonstrated experience in managing vaccine and reverse logistics for nOPV2 released for outbreak responses.</li> <li>Demonstrated experience in reverse logistics for nOPV2 released. for previous outbreak responses</li> </ul>		

Approval of Chief of Operations (if Operations):	Approval of Deputy Representative (if Programme)
Request Authorized by Section Head	Request Verified by HR:
Administrative details: Visa assistance required: Transportation arranged by the office: 🛛	<ul> <li>☐ Home Based ☑ Office Based: Seconded in EPSS Head Office and UNICEF CO</li> <li>If office based, seating arrangement identified: ☑</li> <li>IT and Communication equipment required: ☐</li> <li>Internet access required: ☑</li> </ul>
	<ul> <li>Familiarity with the UN system and Polio Eradicationefforts is desired.</li> <li>Demonstrated ability to work in a multi-cultural environment.</li> <li>Effective presenter including ability to adapt the message and visual aids for multiple audiences to deliver concise, impactful presentations.</li> <li>Knowledge of supply chain management and operations</li> <li>Excellent analysis skills</li> <li>Demonstrated ability to work in a multi-cultural environment.</li> <li>Proven track record in interfacing with national ministries of health a distinct advantage.</li> <li>Core Values: <ul> <li>Care</li> <li>Respect</li> <li>Integrity</li> <li>Trust</li> <li>Accountability</li> </ul> </li> <li>Core Competencies: <ul> <li>Nurtures, Leads and Manages People (1)</li> <li>Demonstrates Self Awareness and Ethical Awareness (1)</li> <li>Works Collaboratively with others (1)</li> <li>Builds and Maintains Partnerships (1) -</li> <li>Thinks and Acts Strategically (1)</li> <li>Drives to achieve impactful results (1)</li> <li>Manages ambiguity and complexity (1)</li> </ul> </li> </ul>

<sup>&</sup>lt;sup>i</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