

TERMS OF REFERENCE

Individual Contractor: National Maternal, Neonatal and Child Health (MNCH) Consultant (FULL TIME)

Duty Station: New Delhi

Contract Duration: 11 months (full-time)

Closing Date: 19th July 2022

1. BACKGROUND / RATIONALE

India is committed to achieving the maternal and newborn health targets of the Sustainable Development Goals (SDGs). The SDG 2030 goals entail a reduction of maternal mortality to below 70 per 100,000 live births from the current level of 113 per 100,000 live births as per SRS data. In addition, reduction of neonatal mortality rate to below 12 newborn deaths per 1000 live births from current 23 newborn deaths per thousand live births is a major target. It is estimated that approximately 46% maternal deaths, over 40% stillbirths and 40% newborn deaths take place on the day of the delivery. Investment on the day of birth leads to triple return in terms of reductions in stillbirth rates as well as maternal and newborn mortality and morbidity. A transformational change in the processes related to the care during the delivery, which essentially relates to intrapartum and immediate postpartum care, is required to achieve tangible results. Government of India is putting substantial efforts to improve the quality of care and ensure respectful care to pregnant women and newborn. UNICEF is one of the key partners supporting MoHFW for improving quality of care services for maternal health and newborn health with special focus on girl child survival. The services of individual contractor will be desired for roll out of the above deliverables which was agreed by UNICEF in RWP 2021-22. Evidence has shown that the day of childbirth is the most dangerous for both mother and newborn with 46% of maternal and 40% of newborn deaths happening during labor and first 24 hours of birth. Investing in and improving the quality and coverage of care at birth and first 24 hours of life will yield triple returns on investment in terms of reduction of maternal mortality, still births and neonatal deaths. The next critical period is the first week of life as 73% of all newborn deaths happen in first week of life. The individual contractor will work across the life cycle approach of RMNCH+A, with special focus to improve the quality of care at the time of child birth and first seven days of life to achieve significant gains for reducing maternal and neonatal deaths. In recent years, quality of care and respectful maternity care have gained renewed focus and prioritization even at the highest political level in the country.

2. PURPOSE OF ASSIGNMENT

The purpose of the assignment is to support UNICEF to fast track the quality of maternal & neonatal health services initiatives particularly focusing on the day of birth for reducing maternal & neonatal mortality. The contractor will be supporting the priority interventions for improving the quality and coverage of care for pregnant mothers and their babies for focusing to improve quality of care during labour and in the neonatal period.

3. OBJECTIVE/S

To provide technical support for the implementation of the activities agreed by UNICEF in the RWP 2021-22 towards the implementation of the national and state initiatives to scale-up and strengthen quality of maternal and neonatal health programs, through providing technical assistance to MoHFW and supporting the states on quality of care (QoC) initiatives for maternal & neonatal health services thereby contributing to the reduction of maternal deaths, stillbirths and newborn mortality.

4. MAJOR TASKS TO BE ACCOMPLISHED

Support scale up of the following initiatives (technical guidelines, data analysis, capacity building, supportive supervision), with focus on technical support to Government of India and UNICEF supported districts.

A. Technical assistance for LaQshya:

1. Coordinate with implementing partner (Administrative staff college of India- ASCI) for ensuring quality of mentoring of the selected health care facilities in consultation with Field office staff and other contractors/ consultants
2. Support UNICEF programming 23 states for biannual assessment of LaQshya, WASH and IPC in the health care facilities (HCF) of UNICEF supported aspirational districts
3. Liaise with National Health system resource Center (NHSRC), MH division of MoHFW for fast tracking external assessment of State Certified LaQshya facilities for achieving National LaQshya Certification for HCF in UNICEF supported health care facilities

B. Technical assistance for MusQan and Newborn care:

1. Coordinate with Health specialist of UNICEF supported programming states for mapping the health care facilities for MusQan certification and support strengthening the quality of care in HCF of UNICEF supported aspirational districts
2. Liaise with National Health system resource Center (NHSRC), MH division of MoHFW for fast tracking external assessment of State Certified LaQshya facilities for achieving National LaQshya Certification for HCF in UNICEF supported health care facilities
3. Support the UNICEF programming states for strengthening the quality of newborn care in line with INAP roadmap 2021-2030

C. Technical assistance for RMNCHA Quality of Care (QoC):

1. Support the UNICEF programming states and Aspirational and priority districts in strengthening the capacity to functionalize MPCDSR system, operationalize MPCDSR portal with death mapping, build capacity of the district and facility team for reporting, data analysis including reporting and review for still births and review for innovative solution and practical actions
2. Review the pregnancy tracking tools/MIS, identify gaps and bottlenecks towards system improvement for measurement and tracking of pregnant women under the extended PMSMA including HIV positive PW, monitoring and mapping of districts with pregnancy tracking and ANC coverage and provide technical assistance to MH department for evidence based actions to improve coverage of quality ANC 4
3. Support UNICEF programming states and Aspirational districts and priority districts in strengthening SUMAN notification and NQAS certification
4. Work in close coordination with MH division of MoHFW and National AIDS control organization for fast tracking elimination of mother to child transmission of HIV AIDS by strengthening VHSND platform under UBRAF project

D. Technical support for strengthening QoC in Health care facilities:

1. Support to MoHFW in finalizing the training module on Obstetric HDU/ ICU and support UNICEF programming states for operationalization of Obstetric HDU/ ICU through PIP funds
2. Support UNICEF programming states in strengthening the functioning of First Referral units (FRU) with special focus on strengthening the newborn stabilization units (NBSU)
3. Technical Support to UNICEF and MoHFW for scale up of Midwifery Initiative including support to Midwife Led Care Units, Midwifery Educator and Nurse Practitioner in Midwifery Programme.

E. Technical assistance for documentation based on evidence:

1. Support in development of capacity building materials on maternal and newborn health initiatives.
2. Support in review and analysis of various data sources and surveys including the census, SRS, NFHS, RSOC, CES etc especially for tracking of MNH services during post COVID 19 recovery and resilience phase for on service continuity.
3. Collaborate with experts on communications on developing / refining awareness generation materials.
4. Undertake regular field supportive supervisions and monitoring visits for the MNH programs.

5. DELIVERABLES AND DEADLINES

S. No.	Major Task	Deliverable	Specific delivery date/deadline for completion of deliverable	Estimated travel required for completion of deliverable
1	Support to LaQshya QoC Initiative in Health Care facilities	Submission of Monthly Progress Report on technical support to strengthen QoC, tracking, capacity building, mentoring and partnerships for LaQshya with administrative staff college of India (ASCI) and other critical MNH intervention including roll out of IPC & QOC measures. Report on status of LaQshya interventions including Infection prevention and control services (IPC) in UNICEF supported 256 health facilities covering 50 Aspirational and priority districts.	31 st August 2022	4 days travel
2	Support compliance of WASH/IPC in Health Facilities in UNICEF supported Aspirational Districts	Submission of detailed analysis report on WASH and IPC in Health for 517 health facilities: <ul style="list-style-type: none"> ➤ Support UNICEF State teams in assessment of WASH and IPC in Health Services ➤ Support collation and compilation of bi-annual assessments of WASH and IPC in Health Services in UNICEF supported Aspirational districts 	30 th September 2022	4 days travel
3	Development and roll out of Obstetric HDU ICU Training module	Submission of report for status on development of Obstetric ICU/ HDUs Module: <ul style="list-style-type: none"> ➤ Organizing consultative workshops on Obstetric ICU/ HDUs ➤ Development and dissemination of the Obstetrics HDU and ICU training Module to states 	31 st October 2022	4 days travel
4	Support for Midwifery interventions in UNICEF supported 5 states	Submission of Monthly Progress Report on technical support to strengthen Midwifery initiative in Odisha, Andhra Pradesh, Gujarat, West Bengal and Assam. Submission of Report on status of Midwifery services based on field travel, onsite support, particularly for Odisha, Andhra Pradesh, Gujarat, West Bengal and Assam	30 th November 2022	4 days travel
5	Support for continued MNCHH services	Submission of Monthly Progress Report on technical support to strengthen QoC for MNCH interventions including review and reporting of still births: tracking, capacity building, Midwifery intervention, LaQshya and WASH other critical MNH intervention including roll out of IPC & QOC measures. Submission of 8-10 pager Report compiling best	31 st December 2022	4 days travel

		practices and key learnings on essential MNCH services in UNICEF supported districts.		
6	Documentation of best practices for MHN interventions	Submission of Monthly progress report on technical assistance and secretarial support to UBRAF project in Bihar and Gujarat for MNCH interventions in HIV AIDS.	31 st January 2023	4 days travel
7	Support to improve quality of care for MNH services	Submission of Detailed report on progress of strengthening MNCH interventions with focus on gaps which were addressed and gaps which need to be prioritized, key learnings and challenges with a presentation to UNICEF.	28 th February 2023	4 days travel
8	Support to improve quality of newborn care	Submission of detailed report on quality of care in SNCUs in UNICEF programming states: successful discharge, mortality, referral status, LAMA	31 st March 2023	4 days travel
9	Support to improve facility and community linkages for newborn care	Submission of detailed report on the quality of Home based newborn care in UNICEF programming states	30 th April 2023	4 days travel
10	Support for roll out of MusQan initiative	Submission of detailed report on the status of MusQan roll out in UNICEF programming states	31 st May 2023	4 days travel
11	Strengthening of MPCDSR	Submission of detailed report on status of MPCDSR in the UNICEF programming states including focus on perinatal deaths and still births review and reporting: roll out of new MPCDSR software, review meeting, action taken report	30 th June 2023	4 days travel

6. DUTY STATION

UNICEF India Country Office, Delhi

7. OFFICIAL TRAVEL INVOLVED (ITINERARY AND DURATION)

- i. A total of 11 visits will have to be undertaken to various states of the country in line with the UNICEF office travel policy related to the covid-19 pandemic and post COVID 19 recovery and resilience phase. Each visit is estimated to be of 4/5 days per travel for completion of the below mentioned tasks/ deliverables.
- ii. Travel to various states of the country as per need of the program in line with the UNICEF office travel policy related to the post covid-19 pandemic recovery and resilience phase and with approval of supervisor.
- iii. Total provision for 44 days travel

8. ESTIMATED DURATION OF CONTRACT (FULL TIME)

11 months, full time

9. QUALIFICATIONS / SPECIALIZED KNOWLEDGE / EXPERIENCE/ COMPETENCIES

(CORE/TECHNICAL/FUNCTIONAL) / LANGUAGE SKILLS REQUIRED FOR THE ASSIGNMENT

- Master's degree in medical sciences or Allied Medical Sciences or Degree/Diploma in pediatrics/ obstetrics & gynecology / preventive medicine/ International Health/Public Health / Health management
- Minimum 5 years' experience of working in the Health Sector, preferably in maternal/ newborn/ child health
- Essential - Experience at national and the state level in supporting quality assurance of MNCH health program implementation

- Essential - Analytical skills for Data interpretation, with Competency in MS Office including MS Word, Excel, PowerPoint, Internet mandatory
- Desirable- Strong interpersonal relations, communication and team-work skills.
- Desirable- Programme management, Program review capacity building and supervisory support experience
- Knowledge and proficiency in report writing in English is desirable
- Willingness to provide a substantial amount of his/her time to travel to states for program support

10. TECHNICAL EVALUATION CRITERIA (WITH WEIGHTS FOR EACH CRITERIA)

S. No.	Criteria	Maximum Marks	Minimum Marks
Stage-I	Language and content of cover letter - suitability for position, analytical skills, working with government or UN	5	3
	Relevant Education Qualifications	10	7
	Relevant work experience	25	18
<i>Candidates who score overall 28 marks and above as well as the minimum marks in each of the criteria (1), (2) and (3) will be shortlisted for an Interview</i>			
Stage-II	Interview	30	21
	Total technical score (A)	70	49
Stage-III	Financial Score (B)	30	

- Candidates scoring overall 49 marks in Technical evaluation (A) as well as the minimum marks in each of the technical criteria will be considered technically qualified and their financial offers will be opened.
- Candidate receiving maximum score after combining their Technical Score(A) and Financial score (B) will be selected.

11. PAYMENT SCHEDULE

Monthly payment on submission of progress reports on updated tasks and activity report for supporting the Maternal Health initiatives, duly approved by the supervisors. Payment of per diem and field travels are subjected to approval by supervisor on actuals travel undertaken.

HOW TO APPLY:

The application to be submitted through the online portal and should contain three separate attachments:

- A Cover letter explaining suitability for position **(to be uploaded online under “Cover Letter” tab)**
- Curriculum Vitae (CV) **(to be uploaded online under “Resume” tab)**
- A financial proposal indicating all-inclusive monthly professional fee, as per the template attached. Please do not forget to specify your name in the file while saving **(to be uploaded online under “Financial Proposal” tab).**

Important Note: Please do not indicate financials anywhere else in the online application form, please mark "n/a or 00", under the fee related questions in the online application form.

Without all the above 3 documents, your application will be considered incomplete and invalid and will not be considered further.

- Any attempt to unduly influence UNICEF’s selection process will lead to automatic disqualification of the applicant.
- Joint applications of two or more individuals are not accepted.
- Please note, UNICEF does not charge any fee during any stage of the process.

- Women, trans, non-binary and gender diverse candidates meeting the requirements are strongly encouraged to apply.
- UNICEF is committed to diversity and inclusion and encourages qualified candidates from all backgrounds including persons living with disabilities to apply.
- General Terms and Conditions for the Consultancy Contract is attached, for your reference.
- 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.

For any clarifications, please contact:

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