Terms of Reference Individual Consultant

Title	National Consultancy: Electronic Perinatal Death				
	Surveillance and Response (ePDSR) System and Newborn				
	Care Unit Assessment				
Purpose	Provide technical assistance to Ghana Health Service to				
	implement the ePDSR system and assess the situation of				
	newborn care units in the country				
Location/duty station	Accra, Ghana				
Duration	68 days within a period of 6 Months (October 2021 - April				
	2022)				
Expected Start Date	November 2021				
End Date	May 2022				
Expected Fee	Fee To be determine				
Reporting to	Health Specialist UNICEF, Chief Health & Nutrition UNICEF,				
	Ghana and Director, Family Health Division, Ghana Health				
	Service				
Budget Code/WBS No	WBS/1620/A0/05/801/002/004				
Project and activity	Outcome 1; Output 2				
codes					

1. Background

Ghana has made substantial improvements in increasing access to facility care for pregnant women and in the rates of institutional deliveries. However, this increased access has not been matched with commensurate reductions in perinatal deaths in the country. A key factor to this is the poor quality of care for women in labour and their newborns within health facilities. Improving quality of care in health facilities has been identified as key to improving mortality and morbidity outcomes but these improvements require health care providers to be accountable for perinatal deaths through systematic review of the circumstances leading to these deaths and developing strategies to address these. Perinatal death audits are accepted globally as a mechanism to improve accountability around still births and newborn deaths especially within health facilities.

The Ghana Health Service collaborated with UNICEF in 2019 to pilot the implementation of perinatal death audits in the country. The aim was to develop and test the feasibility and acceptability of rolling out an innovative four-pronged approach for implementing systematic perinatal death audits within selected health facilities in Ghana and documenting key lessons to inform national scale-up.

A total of eight hospitals consisting of six Regional hospitals- Upper West (Regional Hospital, Wa), Upper East (Regional Hospital, Bolgatanga), Ashanti (Regional Hospital, Kumasi South, Kumasi), Eastern (Regional Hospital, Koforidua), Central (Regional Hospital, Cape Coast) and Greater Accra (Regional Hospital, Ridge, Accra) regions, and two UNICEF

supported District hospitals that were implementing the Mother Baby Friendly Health Facility Initiative (MBFHI) - Bawku Municipal and Bongo District hospitals were selected. These facilities cover each of the geographical zones – southern, middle and northern. The four components of the approach were development of a real-time data capture system, formation of functional perinatal death audit committees, facilitation of implementation within facilities and feedback mechanism to promote the use of data to inform quality challenges, increase participation in decision making, promote remedial actions around challenges identified and improve ownership of the intervention.

UNICEF supported the Ghana Health Service to develop a bespoke software – ePDSR software. Staff from the eight hospitals were trained to use the ePDSR software to capture data and conduct effective audits with the ultimate goal of linking it to DHIMS-2. UNICEF procured two laptops for each hospital to facilitate data capture. Funding for the initial phase of implementation of this pilot project was through UNICEF HQ. Lessons learned during the pilot are being documented to inform national scale-up of the programme and it is envisaged that when fully implemented, the system should result in 20% reduction in institutional perinatal death rates.

The goal of the Global Every Newborn Action Plan (ENAP) launched on 3rd September 2020, is for countries to move faster to end preventable newborn deaths and stillbirths by 2030. One of the global ENAP targets is that 80 percent of districts in every country have at least one inpatient level 2 newborn unit by 2030. In line with the National Newborn Health Strategy and Action Plan (2019 – 2023), the Ghana Health Service plans to conduct an assessment to determine the situation of newborn care units in hospitals and develop a roadmap to meet the national newborn targets and ENAP targets in line with the WHO quality of care standards for the small and sick newborn.

2. Purpose of the Assignment

The Ghana Health Service needs technical assistance to accelerate implementation of all the components of the ePDSR system in the pilot hospitals and determine the situation of newborn care units in the country. The purpose of this consultancy is to i) assess the feasibility of reviewing all perinatal deaths versus an alternative that includes a proposed set of criteria for selection of cases for audit and review and building an automated system for this selection, ii) Link the ePDSR to the national health information systems, iii) Conduct joint visits with GHS to implementing regions and provide technical support for organizing PDSR meetings and acting on recommendations, iv) Test a system of participatory feedback and development of response to the health facility's progress in improving quality perinatal care v) Draft a manuscript on the pathways and lessons learned in the development of the ePDSR system in Ghana; vi) document the newborn care unit situation in Ghana. The consultant will work with Ghana Health Service staff and build their capacity to assure available and timely support for the users of the software both in the short- and the long-term.

3. Tasks To be Completed & Deliverables

	in tasks to be performed	Deliverables	Number of Days	Target Delivery Date
1.	Provide technical assistance to Ghana Health Service to assess the feasibility of reviewing all perinatal deaths versus an alternative that includes a proposed set of criteria for selection of cases for audit and review and building an automated system for this selection	Submission of report on feasibility assessment and outcomes of using a set of criteria for selection of cases for audit and review (Report #1)	7	November 15, 2021
2.	Provide technical assistance to the software developer, National Perinatal death audit focal person and the PPMED of GHS to link the ePDSR to the national health information systems	Submission of report on linkage of ePDSR and DHIMS-2 (Report #2)	7	November 30, 2021
3.	Conduct joint visits with GHS to selected implementing regions and provide technical support for organizing PDSR meetings and acting on recommendations	Submission of report on technical support visits to implementing facilities (Report #3)	10	January 31, 2022
4.	Support GHS to test a system of participatory feedback and development of response to the health facility's progress in improving quality perinatal care	Submission of report on participatory feedback system available (Report #4)	10	February 28, 2022
5.	Draft a manuscript on the pathways and lessons learned in the development of the ePDSR system in Ghana	Submission of manuscript drafted and submitted for publication (Report #5)	10	May 15, 2022
6.	Meet with UNICEF GCO Health team (virtual or face-to-face) at least every two weeks and share updates	Submission of summary report of the consultancy (Report #6)	2	From November 1, 2022
7.	Work with GHS and develop a newborn care unit assessment	Submission of brief report on summary of assessment tool	15	December 31, 2021

tool, support health staff to collect data and analyse the data	development and data collection (Report #7)		
8. Convene a stakeholders meeting and share findings from the assessment and solicit inputs, and agree on key actions needed accelerate implementation and achievement of the National Newborn Health Strategy and Action Plan targets.	Submission of final assessment report submitted (Report #8)	7	January 31, 2022
Total		68 days	

9. Supervision and reporting arrangement

The consultant will be directly supervised by Health Specialist, UNICEF with technical supervision by the Deputy Director Family Health Division (RCH) and with oversight from Director Family Health Division and Chief Health and Nutrition UNICEF. The consultant will work with the GHS – PPMED, GHS – Institutional Care Division and GHS – ICT unit.

10. Payment and Payment Schedule

The cost of the consultancy will be negotiated with the recommended consultant. Fees will be paid based upon submission of agreed deliverables and upon certification and approval by the supervisor

Payment schedule will be as follows:

20% payment upon submission of reports #1 and #2 by 15th December 2021 40% payment upon submission of reports #3, #4, #7 and #8 by 15th March 2022 40% payment upon submission of the reports # 5 and #6 by 31st May 2022

Recourse: UNICEF reserves the right to withhold all or a portion of payment if performance is unsatisfactory, if work/outputs is incomplete, not delivered or for failure to meet deadlines.

11. Timeframe

November 2021 to May 2022

12. Official Travel Involved:

The consultancy will be performed in Accra. UNICEF will make travel arrangements and pay for DSA for locations of travels when necessary. In view of the current COVID-19 pandemic, all UN protocol procedure and clearances must be confirmed prior to commencing travel. In the event that UNICEF is not able to provide a vehicle, the consultant may be reimbursed the cost for such field visits based on pre-agreed lumpsum cost. A travel plan and all travel related costs must be pre-agreed with supervisor and in consultation with the Admin section to facilitate reimbursement.

13. Expected Qualifications, Experience, specialised knowledge/skills and competencies

The required qualification and experience for the consultancy are:

- Advance university degree (at least a Master's level) in Medicine, Public Health, Epidemiology, Biostatistics or other related social or medical sciences discipline
- A minimum of five years relevant professional experience in the Public Health field, MNCH monitoring and evaluation and digital health information systems
- Knowledge of WHO/UNICEF guidelines on PDSR, Ghana's Perinatal Death Audit and Maternal Death Audit systems, including MNH Quality of Care standards.
- Research experience in MNCH especially newborn health
- Good understanding of ICT and national health information systems
- Excellent leadership, team building, supervisory, mentoring and coaching skills
- Analytical, conceptual ability; skills in communication and documenting
- Demonstrated ability to work with various stakeholders
- Problem-solving skills, assertiveness and strong initiative
- Fluency in English communication, report writing with critical analysis

14. General Conditions: Procedures and Logistics

The consultant will work remotely with regular meetings at UNICEF when necessary, ensuring strict compliance with COVID-19 protocols. The consultant is expected to use his/her own computer and data storage devices. The consultant's travels outside Accra, where necessary, will be managed by UNICEF, in line with all UN protocols, procedures and clearances.

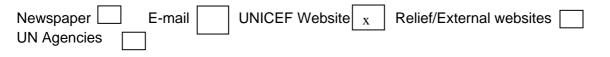
15. Policy both parties should be aware of:

- Under the consultancy agreements, a month is defined as 21 working days, and fees are prorated accordingly. Consultant shall not be paid for weekends or public holidays.
- Consultant is not entitled to payment of overtime. All remuneration must be within the contract agreement.
- No contract may commence unless the contract is signed by both UNICEF and the consultant.
- Unless authorized, UNICEF will buy travel tickets for the consultant.
- Consultant will not have supervisory responsibilities or authority on UNICEF budget.
- Consultant will be required to sign the Health statement for consultants/Individual contractor prior to taking up the assignment, and to document that they have appropriate health insurance, including Medical Evacuation.
- The Form 'Designation, change or revocation of beneficiary' must be completed by the consultant upon arrival, at the HR Section

16. Modality of Dissemination:

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a) Advertising vacancy



Application Procedure:

Interested candidates should apply on-line to the link provided indicate their professional daily fees in Ghana Cedis. The applications will be evaluated based on their CV/Resume. A matrix will be developed according to specific criteria. Interviews planned:

