

## TERMS OF REFERENCE FOR INDIVIDUAL CONTRACTORS AND CONSULTANTS

<b>Title of Assignment</b>	<b>Health Emergency Consultant</b>	
<b>Requesting Section</b>	Health HIV/AIDS	
<b>Location</b>	Place of assignment: Lilongwe, Malawi with frequent visit to districts	
	<input checked="" type="checkbox"/> Home Based <input type="checkbox"/> Office Based:	
<b>Contract Duration</b>	<b>6.5 Months</b>	
<b>Number of working days</b>	<b>130</b>	
<b>Planned Start and End Date</b>	<b>From: 1 December 2022</b>	<b>To: 15 June 2023</b>

### BACKGROUND

In March 2022, the Ministry of Health (MoH) of Malawi announced a Cholera Outbreak in Nsanje District, located in the Southern part of Malawi. The index case originated from Mozambique which eventually evolved into local transmission. To date, a total of 4,420 cholera cases have been registered in 2 districts including 128 deaths (case fatality rate 2.9%), have been reported.

The outbreak remains active in the following districts of Nsanje, Chikwawa, Mwanza, Neno, Phalombe, Mulanje Zomba, Blantyre, Machinga, Balaka, Ntcheu, Lilongwe, Salima, Nkhatakota, Kasungu, Mzimba North, Nkhata Bay, Rumphi, Karonga, and Chitipa. In the last 14 days, 20 districts have continuously been reporting cholera cases. Within 24 hours of 12 October 2022, a total of 69 new cases were reported with two new deaths. There are significant threats for the spread of the disease in the remaining districts.

Inadequate containment measures at health facility, community, and household level remain the main challenge in most districts due to multiple disasters the same health workers have to manage. Specifically, poor hygiene practices such as open defecation are being practiced especially along the lake shore of Nkhota Kota and Nkhata Bay due to limited latrines and collapsible soils. Cholera treatment units have challenges in maintaining effective infection prevention and control including crowd control.

### JUSTIFICATION

Currently Malawi is facing multiple emergencies whilst recovering from two major tropical storms Ana and Gombe. Polio and COVID-19 are ongoing campaigns which are intensive and country-wide. The outbreak of cholera has occurred during a period which is unusual for Malawi but at the same time gradually spreading to now 24 districts out of the 28.

In order to intensify and ensure adequate focus on effective cholera preventive, response, and control measures, additional human resource to support and provide technical assistance in districts is required before the on-coming rainy season. The services of the Health Emergency consultant is therefore needed to facilitate support for districts to respond to any upsurge of cholera cases.

UNICEF Malawi Office is hence seeking to engage a Health Emergency consultant to support the preparedness, prevention, and response activities for cholera in the high-risk districts as identified by the Ministry of Health.

## **PURPOSE OF THE ASSIGNMENT**

In line with UNICEF's cholera response at the country level, the Health Emergency Consultant will support the district response, coordinate and implement technical activities directed towards the cholera readiness and response, and scale-up of the implementation of evidence-based interventions.

The consultant is expected to provide technical support in all the affected cholera district as follows:-

- Support the national level (MoH) and affected districts with planning, implementation, monitoring and reporting of the cholera response, prevention and control.
- Monitor the utilization of cholera response and containment supplies in targeted districts.

## **SCOPE OF WORK/OBJECTIVE(S)**

Support national and district efforts towards the cholera response through technical assistance at the national or sub-national level. Under the direct supervision of UNICEF's Health Emergency Specialist, the consultant will perform, within the framework of UNICEF and policy documents, the following:

1. Conduct joint project monitoring and supportive supervision to cholera affected districts as per the Project Monitoring Visit (PMV) Plan and as needed.
2. During PMVs, participate in district coordination meetings for health emergency preparedness and response; actively coordinate UNICEF-supported activities with districts, WHO and other partners engaged in cholera preparedness and response activities.
3. Participate in health coordination and working group meetings and engage with key partners to promptly deploy in those districts newly affected, increase the effectiveness and efficiency of cholera activities; share relevant updates to ensure the effective application of relevant Health in Emergency programming and tools.
4. In collaboration with other partners (WHO, UNHCR, MRCS, MSF), support districts with effective planning, implementation, monitoring and reporting on Infection Prevention and Control (clinical, community and prevention activities).
5. Support districts with planning, pre-positioning, distribution and monitoring of health and WASH emergency supplies in the target districts.
6. Conduct user monitoring of cholera supplies and check availability/stocking levels of cholera supplies at district and facility level.
7. Support the dissemination of technical and operational guidance for emergency preparedness and response activities.
8. Support districts to prepare the necessary supporting documentation to access UNICEF support; ensure appropriate use of UNICEF resources and timely reporting.
9. Prepare weekly progress updates on emergency preparedness and response activities in the prescribed format.
10. Provide inputs to rapid needs assessments, humanitarian performance planning, immediate needs and other Malawi Country Office documents relating to the cholera response.

11. Provide inputs to the weekly Situation Analysis Reports and other related regular and ad-hoc surveillance reports.
12. Undertake regular field supervision visits to assess and evaluate the cholera response and surveillance activities in the affected districts, identify gaps and recommend corrective actions based on Key Performance indicators KPIs.
13. Conduct infection control training for health workers at cholera treatment centers.
14. Perform any other incident-specific related consultancy services as required by the contract supervisor.

## REPORTING REQUIREMENTS

### To whom will the consultant report (supervisory and any other reporting /communication lines):

The Health Emergency consultant will be reporting to UNICEF's Health Emergency Specialist and will consult regularly with MOH Director for Health Technical Support Services (HTSS) on Cholera Supply needs .

### What type of reporting will be expected from the consultant and in what format/ style will the submissions of reports/outputs be done:

Weekly summaries and monthly consolidated reports based on the required deliverables and scope of work.

### How will the consultant consult and deliver work and when will reporting be done:

The Health Emergency Consultant will be home based with frequent travel to fields and will provide monthly deliverables based on an agreed workplan and delivery schedule.

The consultant will on a regular basis preferably first week of the month produce a workplan for the month in consultation with the supervisor where the key deliverables will be outlined based on the terms of reference which will be signed by the consultant and the supervisor. Where amendments arise during the month, a formal email will be shared and attached to the monthly report.

## EXPECTED DELIVERABLES

In alignment with the scope of work as described above, the Health Emergency Consultant will be expected to perform the following activities and deliverables as per the schedule and estimated dates below. Due to the emergency response nature of this assignment, the consultant will carry out response activities which is mostly similar in output across the months for which there will be monthly payments based on satisfactory performance-service delivery.

Task/Milestone	Deliverable/Outcome (e.g. Inception, progress, final reports, training material, workshop, etc.)	Estimated # of days	Planned Completion date	% of total fee payable
Participate in established cholera coordination mechanism at: 1. National level (cholera coordination meeting platforms) 2. Districts coordination meetings (District cholera Incidence Management meeting	Minutes of National/district Monthly Cholera meetings attended at National and or district with MOH and/or with WHO.	Across the consultancy period as per the detailed workplan	Ongoing until 31 <sup>st</sup> May 2023  Ongoing until 31 <sup>st</sup> May 2022	Monthly Lumpsum

Follow up on action points from coordination meetings and document progress on action points by each partner and share with relevant partners including UNICEF cholera task team	Monthly Progress Report on Minutes of Coordination Meetings (with key highlights of UNICEFs contribution)			
Monitor the application of Infection Prevention and Control (IPC) at health facility level and hygiene activities at community and school level Facilitate the provision of essential supplies and their effective use	Field Assessment Report			
Conduct user monitoring of cholera supplies and check availability/stocking levels of cholera supplies at district and facility level (chlorine, Hand washing facility (HWF), or soap cholera beds and drugs, Intra Venous fluids (IV) Support in requisitioning of supplies	User Monitoring report/ supplies stocks list			
Support in distribution of relevant technical guidelines to frontline workers and their applications	SOPs and guidelines circulated or shared			
Monitor the effective use of health supplies and logistics on cholera prep and response at district level	Field Reports / distribution of supplies			
Undertake regular field supervision visits to assess and evaluate the cholera response and surveillance activities in the affected districts	Report outlining the gap and corresponding corrective actions			
Support Water Sanitation and Hygiene (WASH), Social Behaviour and Community Engagement activities in the field	Report outlining the support			
Draft / input to progress reports on cholera weekly/monthly activities	Input in Weekly/Monthly Cholera SitAn report			

However, as the actual starting date may impact the dates estimated in the TOR, a detailed workplan with exact timeframes and actual delivery dates will be jointly agreed upon between the consultant and the supervisor upon contract signature.

#### PERFORMANCE INDICATORS FOR EVALUATION OF RESULTS

The performance of work will be evaluated based on the following indicators:

- Completion of tasks specified in TOR
- Compliance with the established deadlines for submission of deliverables
- Quality of work
- Demonstration of high standards in cooperation and communication with UNICEF and counterparts
- Submission of reports

## **PAYMENT SCHEDULE**

All payments, without exception, will be made upon certification from the supervisor of the contract, of the satisfactory and quality completion of deliverables and upon receipt of the respective and approved invoice. Once monthly reports are approved and signed by the supervisor, the consultant will issue a receipt for payment against the approved monthly report.

Travel costs for approved field travel will be reimbursed on actual expenditures and upon presentation of original supporting documents. Living expenses during official field trips will be paid in accordance with UNICEF financial rules.

## **DESIRED COMPETENCIES, TECHNICAL BACKGROUND AND EXPERIENCE**

### **Academic qualification:**

#### **Essential:**

- University degree in medicine, nursing, epidemiology or statistics, or public health from an accredited/recognized institute.

#### **Desirable:**

- Advanced university degree in public health, post graduate certification in public health, tropical medicine, data base management or health related training in communicable diseases.

### **Work experience:**

#### **Essential:**

- At least five (5) years related experience at the national or international level in the implementation of cholera outbreak or health emergency response.
- Experience working with government agencies, local authorities, international organizations, NGOs and communities in the environment of cholera emergency response in health care facilities and Cholera treatment units to a large extent and community response to a lesser extent
- A minimum of 2 years of experience working or collaboration with either the UN and/or NGO

#### **Desirable:**

- Prior working experience at field level with MOH, other UN agencies, health cluster partners, NGOs or recognized humanitarian organizations with expertise in disaster and outbreak response
- Knowledge of WASH/Infection Prevention Control protocols will be an asset
- Strong facilitation and coordination skills, including participatory group discussion;
- Strong interpersonal, teamwork, and self-management skills, as well as mature judgment
- Ability to perform under pressure while maintaining a sense of humor

### **Technical skills, knowledge and strength areas:**

- Demonstrated knowledge and experience in public health fieldwork, controlling outbreaks of communicable diseases with focus on cholera and/or other diarrheal diseases
- Good knowledge on Infection prevention and control within health facilities or cholera treatment units
- Familiarity with Health programmes in Malawi or similar countries in the region is an advantage
- Strong coordination and collaborative abilities within the health sector and across other sectors especially WASH sector.
- Ability to review and structure standard operating procedures (SOPs) under WASH/Infection Prevention and Control
- Strong sense of team spirit, diplomacy
- Good interpersonal skills, ability to build and maintain partnerships across government and NGOs, ability to work in multi-cultural settings and culturally sensitive communities.

- Innovative and resourceful mindset to make solutions work in adverse conditions
- Ability to work under stressful conditions and flexible approach in undertaking the assignment within a rapidly changing environment.
- Essential knowledge of Microsoft Office applications, working knowledge of online data collection applications, statistical analysis packages (SPSS, Stat etc.)
- Commitment to the UNICEF's values and guiding principles

**Language:**

- Fluency in English – both excellent written and verbal skills are required

## ADMINISTRATIVE ISSUES

UNICEF will regularly communicate with the consultant and provide feedback and guidance and necessary support so to achieve objectives of the work, as well as remain aware of any upcoming issues related to the performance and quality of work.

As per policy on consultants and individual contractors, the individual will be expected to complete a list of mandatory training, including policies on Prohibiting and Combatting Fraud and Corruption, Prohibition of discrimination, harassment, sexual harassment and abuse of authority and other relevant policies for their information and acknowledgment upon acceptance of the offer.

Prior to the issuance of the official contract, the individual consultant is requested to:

- complete the applicable mandatory trainings
- self-certify that he/she is fully vaccinated against SARS-CoV-2 (Covid-19) with a World Health Organization (WHO)-endorsed vaccine. 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.

The Health Emergency Consultant will be working from his personal environment and whenever need arises in the consultants' bay at the UNICEF offices. There will be frequent travels to districts. On need basis, the consultant will visit the Ministry of Health and relevant governmental bodies.

Consultant must ensure use of his/her computer, able to communicate using direct calls and or WhatsApp and any other approved electronic communication. For Convenience, the Consultant will be provided a UNICEF email and ID for Accessing the Office only during the contract period.

## CONDITIONS

- The consultancy will be over a period of Six and half months; however, the consultant will only work for 130 days during this contract period.
- The candidate selected will be governed by and subject to UNICEF's General Terms and Conditions for consultants.
- No contract may commence unless the contract is signed by both UNICEF and the consultant.
- The consultant will be based in Lilongwe with field travel.

- The consultant will be paid an all-inclusive fee (stationary, communication and other miscellaneous expenses) as per the stipulated deliverable and payment schedule.
- Under the consultancy agreements, a month is defined as 21.75 working days, and fees are prorated accordingly for actual days worked.
- The consultant is not entitled to payment for overtime, weekends, or public holidays.
- Transport will be provided to the consultant during in-country field travel, if planned and approved.
- No travel should take place without an email travel authorization from section prior to the commencement of the journey from the duty station.
- Standard UNICEF procedures will apply for invoicing and all other financial management requirements set out in the contract.
- Standard penalty clauses will also apply for late and poor-quality deliverables. The supervisor of the contract will provide the consultant with the criteria for the evaluation of the quality of each deliverable.
- Additional details of UNICEF rules, regulations and conditions will be attached to the contract.
- The consultant will not have supervisory responsibilities or authority on UNICEF budget.
- 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 assignment is an on and off-site support.

## HOW TO APPLY

Interested consultants should provide the following:

1. Curriculum Vitae
2. Brief technical proposal (no longer than five pages) demonstrating the consultant’s understanding of the assignment and approach/methodology to the assignment
3. Financial proposal including a breakdown of their all-inclusive fees (including professional fees, travel, living cost, visa and other costs). Complete the attached form.



Financial  
Proposal.xlsx

4. References details