

TERMS OF REFERENCE

SHORT TITLE OF ASSIGNMENT

Long Term Agreement for engagement of baby friendly hospital initiative (BFHI) Consultants in Pacific Island Countries

BACKGROUND

Promotion of Breastfeeding is a high impact intervention that plays a crucial role in ensuring children receive adequate nourishment. Breastfed children have a significantly reduced risk for both wasting and later childhood overweight or obesity.

The Pacific Island Countries and Territories (PICTs) face a triple burden of malnutrition, encompassing child undernutrition, micronutrient deficiencies and overweight and obesity. UNICEF is actively involved in systems strengthening across 14 PICTs (Cook Islands, Fiji, Kiribati, Republic of Marshall Islands (RMI), Federated States of Micronesia (FSM), Nauru, Niue, Palau, Samoa, Solomon Islands, Tokelau, Tonga, Tuvalu, and Vanuatu), supporting the respective Ministries of Health (MoHs) to deliver optimal nutrition and health services. These 14 PICTs are home to 2.3 million people, including 1.2 million children and youth, living on more than 660 islands and atolls spanning 17.2 million square kilometres of the Pacific Ocean, an area comparable to the combined size of the United States of America and Canada. Despite the efforts made to date, sub-optimal breastfeeding practices persist. On average, only 62% of infants are initiated breastfeeding within the first hour of birth and just over half are exclusively breastfed during the first 6 months. Furthermore, continued breastfeeding up to two years is observed in just over half of all infants.

As outlined in UNICEF Pacific Multi-Country Programme Document (MCPD) for 2023- 2027, UNICEF is committed to supporting MoHs along with their partners in strengthening capacities for improved, affordable, and equitable quality primary health care and nutrition services, including during emergencies. Within this framework, UNICEF works with MoHs and other partners to ensure that the health care system are conducive to protect, promote and support breastfeeding practices.

In 1991, UNICEF and WHO jointly launched the Baby Friendly Hospital Initiative (BFHI), which consolidated evidence on promoting breastfeeding within health facilities. The BFHI included "Ten Steps to Successful Breastfeeding", which were subsequently updated and superseded by guidelines published in 2018. These guidelines titled, "Protecting, promoting and supporting breastfeeding" are anticipated to be used in facilities providing maternity and newborn services to attain "Baby Friendly" status. Currently implementation status of these steps in hospitals vary significantly by countries in the Pacific.

UNICEF would like to engage the services of individual consultants for helping the MoHs advance the implementation of BFHI across PICTs (indicative list: Fiji, RMI, FSM, Tonga, Kiribati, Solomon, Vanuatu, and Tuvalu).

OBJECTIVE / SCOPE OF WORK

The overall objective is to set up a Long-Term Agreement to facilitate and expedite the process by which UNICEF in Pacific will hire individual consultants as required to provide technical assistance, capacity building support, and coordination for MoHs in specific PICTs to ensure successful BFHI implementation. More specifically, the assignment in each country includes:

1. Review and identify bottlenecks in BFHI implementation:
The consultant will review the current implementation status of BFHI in selected countries. The focus will be on identifying the steps that are lagging behind and their bottlenecks, including capacity gaps.
2. Propose actions to address bottlenecks:
The consultant will propose approaches to addressing the identified bottlenecks in consultation with MoHs. For identified capacity gaps, the consultant will develop a capacity building plan with approach tailored to each country context. This may involve through on-job site sessions, off-job site trainings,

and development of a team of trainers for continuous professional development to address longer-term needs. Coaching and mentorship mechanism should be embedded in the capacity building approach to ensure that knowledge and skills obtained through training will translate into the lasting practices.

3. Provide support for integration and institutionalization:

The consultant will collaborate with MoHs to integrate the BHFI's 10 steps into quality of care assessments / continuous quality improvement mechanism within health facilities or other existing initiatives/frameworks. The consultant will also support efforts to include BHFI in pre-service training of health workers or other similar capacity building platforms.

ACTIVITIES, DELIVERABLES AND TIMELINES, PLUS BUDGET PER DELIVERABLE IN EACH COUNTRY			
ACTIVITY	DELIVERABLES	ESTIMATED TIME TO COMPLETE	PAYMENT
<p>Inception Report, including:</p> <ul style="list-style-type: none"> • <i>Brief description of BFHI Implementation status:</i> Based on initial brief interaction with MoH and desk review, outline the implementation status of BFHI in each country, along with main setbacks. • <i>Proposed approach to undertake the assignment:</i> Outline all proposed key milestones for the consultancy and their expected timelines including stakeholder consultation and capacity building 	<ul style="list-style-type: none"> • A short report outlining an overview of implementation status of BFHI in a targeted country, while also including the proposed approach and workplan for the whole assignment 		
<p>Identify bottlenecks, propose actions to address them, and support capacity building</p> <ul style="list-style-type: none"> • Conduct in-depth consultation with MoH (at national, sub-national levels) • Identify bottlenecks • Develop BFHI implementation plan, including key steps, actions to address bottlenecks and sustainably build in-country capacity, and long term sustainability plans through institutionaliation. • Undertake comprehensive capacity building, including at minimum: 1 Training of Trainers (ToT); initial health workers training; training of Internal Assessors. 	<ul style="list-style-type: none"> • Brief on BFHI Implementation Bottlenecks and Proposed Programmatic actions incorporating a sustainability plan • Capacity Building Report 		
<p>Final updated report</p> <ul style="list-style-type: none"> • Provide technical support to the Ministry of health in integration of the Ten Steps into quality of health care assessments/continuous quality of care improvement mechanism, pre-service training, etc. Narrate the support provided into a report, which should also consolidate earlier reported ones on milestones 	<ul style="list-style-type: none"> • Final report updated from the above report including integration of the Ten Steps into Quality of Care assessments / Framework and Pre-service training, etc. 		
Total			

QUALIFICATIONS, SPECIALIZED EXPERIENCE, AND ADDITIONAL COMPETENCIES

Bachelors Masters PhD Other

Education:

A medical or advanced university degree in one of the following fields: nutrition, midwifery, public health, pediatric health, family health, or other related disciplines.

Experience:

- A minimum of 5 years of professional experience in breastfeeding related work including in clinical contexts.
- Experience in conducting BFHI training and mentorship. Preferably a certified trainer and BFHI Assessor with certification issued by IBFAN or a recognized lactation management certification.
- Work experience serving in a developing country is required. Work experience in the Pacific Islands region is an asset.
- Experience working in UNICEF or a UN system agency is an asset.

Skills:

- Able to work effectively with people - internal and external stakeholders
- Excellent pedagogical skills for training
- Communicates clearly and concisely
- Excellent analytical and conceptual skills
- Proven ability to work independently under difficult conditions

Knowledge:

- Health care systems, the BFHI approach

Language:

- Fluency in English is required, and knowledge of a local language would be an asset.

CONDITIONS OF WORK AND CLARIFICATION ON SUPERVISION

Management, Organization, and Timeframe:

The Long Term Agreement (LTA) will be established for a period of 24 months with the possibility of renewal for a subsequent year on the same rates, terms and conditions, subject to satisfactory performance evaluation and continuing need for the service. The LTA to be signed will have a fixed fee rate for 24 months. However, UNICEF does not warrant that any quantity of services will be purchased during the term of the LTA as this will depend on the individual country needs.

Contracts created against the LTA: Whenever BFHI consultancy services are required, details of the requirement/deliverables including quantities¹ and deadlines will be presented to the top-ranking LTA holder. Should this consultant not be available for this assignment, UNICEF will contact the second ranked consultant and so on. Upon receipt of confirmation of availability and interest in the assignment, a contract will be issued based on the unit prices/fees agreed in the LTA. The consultant must sign the contract prior to commencement of work.

Payment will be made after completion of deliverables and submission of invoices for the actual work completed, subject to satisfactory performance.

The consultant will be based in a target country to perform most of the assignment, while s/he can work remotely on the inception and final reports at the beginning and end of the assignment. All costs related to the work will be included in the financial proposal and subsequent contract. Monitoring and overall supervision will be provided by the Health and Nutrition Specialist, UNICEF Pacific Multi-Country Office, in close collaboration with the Nutrition Specialist. While in-country with UNICEF Field Office staff presence (RMI, FSM, Kiribati, Solomon, Vanuatu), day-to-day supervision would be provided by the relevant UNICEF staff in-country.

¹ Depending on MoH immediate needs, some deliverables may be dropped.

ADMINISTRATIVE ISSUES

- Individuals engaged under a consultancy 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. Consultants 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 for ensuring 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, program 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 reasonable accommodation 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 afterward in your assignment.
- No contract may commence unless the contract is signed by both UNICEF and the consultant.
- Consultant will be required to complete mandatory online courses (e.g. Ethics, Prevention of Sexual Exploitation and Abuse and Security) upon receipt of the offer and before the signature of the agreement/contract.
- Deliverables that require payment within less than 30 days should be lumped together for ease of transaction.

The below is to be included in the advert.

NOTE FOR CONSULTANTS:

Please submit the following application documents:

- A cover letter explaining suitability for position
- Curriculum Vitae (CV)
- Technical proposal
- Financial offer in a separate attachment, stating a **lump sum amount for all the deliverables (per country)** with a break down for the following:
 - Daily fees– based on the deliverables in the Terms of Reference
 - Travel (economy air ticket where applicable to take up assignment if in country support is required, as well as any in country travel)
 - Living allowance for international consultant that will need to relocate to PICTs, for the duration of in-country assignment
 - Miscellaneous- to cover visa, health insurance (including medical evacuation for international consultants), communications, and other costs.