

United Nations Children's Fund

TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS AND CONTRACTORS

Title: Regional Vaccine	Funding Code:	Type of engagement	Duty Station:
Management Consultants	SM210562		Makeni,
(VMS) in Sierra Leone (3		Consultant (National)	Kenema and
posts – based in Freetown,	WBS:	☐ Individual Contractor Part-	Freetown
Makeni, and Kenema)	3900/A0/08/881/002/010	Time	(including
		Individual Contractor Full-	travel to
		Time	districts)

Background:

Timely and equitable immunization services is amongst the most cost-effective development interventions with sustained and long-term health and economic dividends for nations. An effective end-to-end vaccine stock management is critical to ensure that life-saving vaccines are always available up to the last mile, coverage goals are met, and no child is left behind.

However, each year at least one-third of low- and middle-income countries (LMICs) experience one or more vaccine stockouts lasting for one month or more. By reviewing annual government reported supply chain indicators over the last ten years, LMICs have seen an increase in the number of stock outs of at least one routine antigen from 30% in 2010 to 45% in 2019.

Sub-optimal stock management not only increases the operational and opportunity costs of vaccination but can also play a significant role in broadening inequities and stagnating demand, specifically affecting under-served, urban poor, insecure and hard-to-reach populations. UNICEF and WHO Joint Reporting Form (JRF) analysis indicate 46% of developing countries has witnessed service interruptions due to stock outs in 2019, an increase from 30% in 2014. The COVID-19 pandemic has further strained global supply chains with resulting supply and programmatic disruptions including vaccine stockouts and missed immunization sessions.

In Sierra Leone, following the confirmation of the first COVID-19 case in March 2020, the Ministry of Health and Sanitation (MoHS) swiftly and aggressively scaled up the prevention and control measures. As a result, a sharp drop of routine service utilization experienced due to COVID-19 at the early stage of outbreak was restored within a few months. While immunization service was most severely affected and its uptake in April 2020 was 20% less than the previous year, the number of doses delivered per month was back to 2019-levels by end July 2020. As part of the COVID-19 containment measures, Sierra Leone officially started the nationwide rollout of COVID-19 vaccine on 22 March 2021. While initial uptake was very slow, with increased availability of COVID-19 vaccines and operational funds to accelerate the vaccination efforts mostly through monthly/bi-monthly surge campaigns, the coverage increased significantly in 2022. As of 14 November 2023, Sierra Leone vaccinated 3,023,982 persons fully (60.8% of the target population and 40.1% of the total population), and 3,828,547 persons of the target population (76.9%) with one dose of COVID-19 vaccines. For regular child immunization, 92% of children 0-11 months received 3 doses of Pentavalent vaccines with 14 out of the 16 districts achieving above 80% coverage.

In 2023, the country will integrate COVID-19 vaccination into routine immunization services. In order to consolidate the gains already achieved in both COVID-19 and routine immunization services and ensure the seamless transition from campaign to routine mode, the country is seeking for a surge capacity (a national consultant) to support the COVID-19 and routine vaccine management processes, including



effective vaccine stock and cold chain management to ensure an equitable distribution of quality COVID-19 and routine vaccines.

Purpose and objectives:

The purpose of the consultancy is to effectively manage COVID-19 and routine vaccine deliveries, build capacity and support national authorities in planning, storage, distribution, temperature tracking, monitoring, accountability and waste management and other relevant commodities, and support routine immunization activities.

Methodology and Technical Approach:

The regional consultants will provide data-driven technical assistance through an effective coordination with district health management teams (DHMTs) and partners present at sub-national level, capacity building support including day-to-day on-the-job knowledge transfer, and document lessons learnt and recommendation (with clear prioritization) to improve vaccine stock management of both COVID-19 vaccination and routine immunization.

Specific Tasks of the Consultancies:

- 1. Build the capacity of health staff at district and health facility levels through training and supervision especially those at service delivery level and to monitor the overall implementation of integrated delivery of both COVID-19 and routine immunization services at district level in all aspects including cold chain, logistics and vaccine management through:
 - Facilitating the distribution and optimal use of vaccines and consumables according to micro plans and ensure that receipts comply with the distribution plan.
 - Ensuring the proper storage of vaccines and consumables at each level of the supply chain.
 - Provide on the job orientation on the basic planned preventive maintenance (PPM) of cold chain equipment at district and health facility levels for enhanced effectiveness and long-term functionality of the equipment.
 - Collect and analyze COVID-19 and routine vaccine stock and utilization status at all levels of the supply chain weekly. Work closely with DHMTs and ensure complete and timely submission of weekly reports on COVID-19 vaccination.
- 2. Undertake field visits to the district health management teams (DHMTs) and health facilities to provide support towards the effective implementation of the campaigns, if any, and other activities of routine immunization services.
- To provide continuous on-the-job training, coaching, mentoring and supportive supervision for district staff on the use and reporting of monthly Stock Management Tool (SMT), including the newly introduced online version of the SMT (eSMT).
- 4. To coordinate the conduct of monthly physical count of Immunization supplies (vaccines and syringes) and sharing such data with central level both for routine immunization services and for COVID-19 vaccination.
- 5. To support the updating of national cold chain inventory to inform future installation of CCE countrywide.
- 6. To provide support to data management and timely reporting at district and health facility levels.
- 7. To support the implementation of improvement plans for both the countrywide cold chain and EVM assessments at district and health facility levels.
- 8. Undertake any other tasks assigned by the supervisor.



Start date: 15" January 2023 End date: 31" December 2023
Child Safeguarding
Is this project/assignment considered as "Elevated Risk Role" from a child safeguarding perspective?
☐ YES ☒ NO If YES, check all that apply:
Direct contact role YES 🔀 NO
If yes, please indicate the number of hours/months of direct interpersonal contact with children, or work
in their immediately physical proximity, with limited supervision by a more senior member of personnel:
Child data role YES 🔀 NO
If yes, please indicate the number of hours/months of manipulating or transmitting personal-identifiable
information of children (name, national ID, location data, photos):
More information is available in the Child Safeguarding SharePoint and Child Safeguarding FAQs and
Updates

Expected Output/Deliverables		Timeframe	Payment ¹ Schedule
			and conditions
1.	Detailed monthly updates on integrated delivery of	Throughout	
	both Covid-19 and routine vaccine stock	contract period	
	management.		
2.	Staff at service delivery level are supervised and	Throughout	Monthly payment – final
	'hands-on' trainings provided for effective	contract period	payment upon approval of
	implementation of the monthly campaigns and routine Covid-19 vaccine stock management.		all deliverables submitted
3.	Physical count of supplies is conducted monthly,	At the end of	
	and reports shared with central level	every month	
4.	District cold chain inventories are updated, and	At the end of	
	reports shared monthly	every month	
5.	Gaps in the implementation of integrated delivery of	Throughout	
	services for both Covid-19 vaccine stock	contract period	
	management are identified, and plans developed to address the gaps		
6.	Timely and accurate reporting through eSMT from	Throughout	
	districts	contract period	
7.	Improvement plans for both the countrywide cold	Throughout	
C	chain and EVM assessments are implementation	contract period	
8.	Final technical report	End of	
		assignment	

 $^{^{1}}$ In general, payments should be made against delivery of services / products. Advance payments on signature of contract are discouraged and need to be explicitly justified.

Budget Year:	Requesting Section/Issuing Office:	g Reasons w	hy consultancy cannot be	done by staff:
2022-2023	Health and Nutrition Section	pressure of The currer overstretch vaccine sto both rou manageme support for assistance delivery lev UNICEF st health faci chain equip country lev outbreak redelivery in funds from accelerating child immute the current of the country level outbreak redelivery in funds from accelerating child immute the current of the cu	management. This work requires dedicated, full-time support for UNICEF to deliver the expected technical assistance and capacity building support at service delivery level, which is not possible with the current UNICEF staffing strength. Capacity at district and health facility levels to manage vaccines and cold chain equipment remain inadequate, even though the country leveraged extra support provided for polio outbreak response and accelerated COVID-19 vaccine delivery in the past two years. UNICEF HQ mobilised funds from Gavi to provide surge capacity for accelerating COVID-19 vaccination and sustaining child immunization services in 39 selected countries, including Sierra Leone.	
Included in Annual/Rolling Workplan: Yes No, please justify: At the time of developing work plan, time efforts and intensity of technical assistance required for COVID-19 vaccine deployment were underestimated.				
Consultant sourc	ing:		Request for:	
National		New SSA – Individual Contract		
Consultant selection method:		Extension/ Amendment		
☐ Competitive S	election (Roster)			
Competitive Selection (Advertisement/Desk Review/Interview)				
If Extension, Justification for extension: N/A				
Supervisor: Imm	nunisation Specialist	Start Date: 15 th January 2023	End Date: 31st December 2023	Number of Days (working): 11.5 months



Estimated Consultancy fee		11.5 months	
Travel International	Per actual		
Travel Local (please include travel plan)	Per actual		
DSA (local travels)	Per actual		
Total estimated consultancy costs ⁱ			
Minimum Qualifications required: Bachelors Masters PhD Other Enter Disciplines: University degree is required (Advanced degree an advantage), preferably in relevant field (e.g., public health, 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.	haalth aana		onsible field work old chain, supply ed field in primary related to effective ent practices and delivery of ercises with national dvantage. With UN agencies or ations is an asset. Inguage, both oraling skills. Excellent ability to action to results. The property of eaction action to results. The property of eaction action to results. The property of eaction action action to results.
Administrative details: Visa assistance required: Transportation arranged by the office: Request Authorised by Section Head	☐ Home Based ☒ Office Based: If office based, seating arrangement identified: ☒ TBD IT and Communication equipment required: ☒ Internet access required: ☒ Request Verified by HR:		
Approval of Chief of Operations (if Operations): Programme)	Approval of De	eputy Represe	entative (if



¹ 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

Text to be added to all TORs:

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.