

Individual Contractor: National Maternal, Neonatal and Child Health (MNCH) Consultant (FULL TIME) - Open to Indian Nationals only.

Duty Station: New Delhi with travel to programme interventions States

Contract Duration: 11 months (full-time)

Closing Date: 4th May 2021

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 consultant 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 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.

1. Technical Support to UNICEF supported 256 districts and MoHFW for scale up of new initiative for zero preventable maternal and newborn deaths with a focus on community engagement for maternal and newborn health.
2. 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.
3. Support for scaling up interventions for eliminating mother to child transmission of HIV and Syphilis by fast tracking the targets for EMTCT. Special focus on NHM and NACO collaborative initiatives, district EMTCT interventions etc.
4. Support state teams in standardization of labor rooms at delivery points as per LaQshya guidelines.
5. Support improvement of WASH functionality at delivery points with alignment to aspirational districts through timely implementation of WASH supportive supervision.
6. Support improvement of Infection prevention and control (IPC) interventions and functionality at delivery points with alignment to aspirational districts through timely implementation of IPC supportive supervision.
7. Support strategies for increasing institutional deliveries including mapping of high home delivery districts and blocks and development of national and state strategies to scale up institutional deliveries.
8. Strengthening the implementation of Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA).
9. Strengthening obstetric intensive care units (ICU)/ obstetric high dependency units (HDUs).
10. Strengthening partnership of health care professional associations support to maternal, and newborn health program.
11. Support in development of capacity building materials on maternal and newborn health initiatives.
12. 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 COVID 19 for on service continuity.
13. Collaborate with experts on communications on developing / refining awareness generation materials.
14. Undertake regular field supportive supervisions and monitoring visits for the MNH programs.
15. Support in coordination of convergent sectors (C4D; WASH/IPC; Child Protection; CAP; nutrition) on maternal and neonatal health programs joint areas of concern

5. DELIVERABLES AND DEADLINES

A total of 7 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. Each visit is estimated to be of 4/5 days per travel for completion of the below mentioned tasks/ deliverables.

S. No.	Major Task	Deliverables	Deadline for completion of deliverable	Estimated travel required for completion of deliverable
1	Support to LaQshya QoC Initiative, WASH and IPC in Health Care facilities	Submission of Monthly Progress Report on technical support to strengthen QoC, tracking, capacity building, LaQshya and WASH and other critical MNH intervention including roll out of IPC & QOC measures. Report on status of LaQshya and WASH interventions including Infection prevention	30 th June 2021	No Travel required

		and control services (IPC) in UNICEF supported 256 health facilities covering 50 Aspirational and priority districts.		
2	Support to fast track ENTCT interventions in UNICEF supported states	Submission of Monthly Progress Report on technical support to strengthen QoC, tracking, capacity building, ENTCT intervention, LaQshya and WASH and other critical MNH intervention including roll out of IPC & QOC measures. Report on status of EMTCT programme in UNICEF Supported states	31 st July 2021	4 days travel
3	Development and roll out of Obstetric HDU ICU Training module	Submission of report for 4 online webinars on Obstetric ICU/ HDUs: <ul style="list-style-type: none"> ➤ Organizing 4 online webinars on Obstetric ICU/ HDUs ➤ Development and dissemination of the Obstetrics HDU and ICU training Module to states 	31 st August 2021	No Travel required
4	Support to roll out Midwifery initiative in UNICEF supported NMTIs	Submission of Monthly Progress Report on technical support to strengthen QoC, tracking, capacity building, EMTCT, Midwifery intervention, LaQshya and WASH and other critical MNH intervention including roll out of IPC & QOC measures. Report on status of Midwifery services based on field travel, online remote support, particularly for UNICEF supported states	30 th September 2021	4 days travel
5	Support for continued MHH services amidst COVID 19 pandemic	Submission of Monthly Progress Report on technical support to strengthen QoC for MNH interventions: tracking, capacity building, EMTCT, Midwifery intervention, LaQshya and WASH other critical MNH intervention including roll out of IPC & QOC measures. Submission of 8-10 pager Report compiling best practices and key learnings on continuation of services during COVID 19 in UNICEF supported districts.	31 st October 2021	No Travel Required
6	Documentation of best practices for MHN interventions	Submission of Monthly progress report on technical support for MNH interventions. Submission of Document comprising of 5 Human interest stories/case studies across MNH, Midwifery, EMTCT and QoC.	30 th November 2021	4 days travel
7	Support for Midwifery interventions in UNICEF supported 5 states	Submission of Monthly Progress Report on technical support to strengthen QoC, tracking, capacity building, Midwifery intervention, LaQshya and WASH other critical MNH intervention including roll out of IPC & QOC measures.	31 st December 2021	5 days travel

		Submission of Report on status of Midwifery services based on field travel, online remote support, particularly for Assam, Odisha, West Bengal, Telangana & Tamil Nadu.		
8	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 	31 st January 2022	5 days travel
9	Support to Fast Track EMTCT interventions	Submission Monthly progress report on technical support for MNH interventions. Submission of Report on EMTCT pre validation and best practices on EMTCT	28 th February 2022	4 days travel
10	Support to home based newborn care services	Submission of Monthly progress report on technical support for MNH interventions. Submission of Document comprising of best practices for outreach/home based MNH services 3 stories of health care providers and FLWs on service continuity based on field visit and compilation from state	31 st March 2022	4 days travel
11	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.	30 th April 2022	No Travel required

6. DUTY STATION

UNICEF India Country Office, Delhi

7. OFFICIAL TRAVEL INVOLVED (ITINERARY AND DURATION)

- Travel to various states of the country as per need of the program in line with the UNICEF office travel policy related to the covid-19 pandemic and with approval of supervisor.
- Total provision for 30 days travel

8. ESTIMATED DURATION OF CONTRACT (PART TIME / FULL TIME)

11 months (full time), 1st June 2021 to 30th April 2022.

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	Minimum
Stage-I	(1) Language and content of cover letter - suitability for position, analytical skills, working with government or UNICEF, motivation and willingness to undertake field visit	5	3
	(2) Relevant Education Qualifications	10	7
	(3) Relevant work experience	20	14
	Candidates who score overall 24 marks and above as well as the minimum marks in each of the criteria (1), (2) and (3) will be shortlisted for an Interview		
Stage-II	Interview	35	25
	Total technical score (A)	70	49
Stage-III	Financial (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 should contain three separate attachments:

- A Cover letter explaining suitability for position, analytical skills, working with government or UNICEF, motivation and willingness to undertake field visit **(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 and other expenses 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)**

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.

For any clarifications, please contact:

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