

United Nations Children's Fund

TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS

National Consultant for Development of	Funding Code	Duty Station:
National Integrated Management of		Phnom Penh, Cambodia
Acute Malnutrition (IMAM) guideline and	N/A	
protocols		

Project Overview:

In response to the global WHO guideline release, the Government of Cambodia has recognized a unique opportunity to revamp its protocols concerning severe acute malnutrition (SAM) management. Additionally, there is a pressing need to develop protocols specifically tailored to prevent and treat moderate acute malnutrition (MAM). The objective is to seamlessly integrate these protocols into a cohesive framework through the creation of National Guidelines for the Integrated Management of Acute Malnutrition (IMAM). This pivotal initiative aligns with UNICEF's unwavering commitment to supporting the national endeavor in preventing and treating wasting, as outlined in the National GAP Roadmap and the jointly endorsed workplan by the Ministry of Health (MOH) and UNICEF. Notably, the funding essential for this initiative has been secured through resources mobilized from Children's Investment Fund Foundation (CIFF), highlighting the critical backing from this organization.

In summary, this consultancy represents a significant stride towards addressing acute malnutrition through a continuum of care by bridging the gap between global guidelines and localized implementation.

<u>Develop Comprehensive National IMAM Guidelines:</u> The primary objective is to formulate comprehensive National Guidelines for the Integrated Management of Acute Malnutrition (IMAM) in Cambodia. This task involves synthesizing global guidance and recommendations, amalgamating them with local expertise and best practices. By leveraging both international insights and local experiences, these guidelines will serve as a robust framework for addressing acute malnutrition in the country.

<u>Create Protocols for MAM Management and Program Tools:</u> Another key aspect of this assignment is to craft a protocol specifically dedicated to managing Moderate Acute Malnutrition (MAM). In addition to the protocol, practical tools will be developed. These tools are designed to guide the implementation of programs and initiatives led by development partners, non-governmental organizations (NGOs), and civil society organizations (CSOs) in the short term.

<u>Integration of MAM Protocols into Existing Systems:</u> Ensuring the seamless integration of MAM protocols into the current frameworks is crucial. This involves harmonizing MAM management strategies with the established protocols for inpatient and outpatient treatment of Severe Acute Malnutrition (SAM) as well as community mobilization efforts.

<u>Update the existing SAM protocols:</u> The consultant will revise the current SAM protocols to reflect the recommendations and changes in the latest WHO Guideline on acute malnutrition and adapt to the country context. The changes will be incorporated in to the three protocols, encompassing outpatient management of SAM, inpatient management of SAM, and community mobilization protocols.

The implementation of this initiative will be overseen by the National Maternal and Child Health Center/National Nutrition Program of the Ministry of Health (MoH) in Cambodia, with technical support provided by UNICEF, World Food Programme (WFP) and Helen Keller as well as the IMAM steering committee comprising experts in acute malnutrition. UNICEF's country and regional offices will offer technical leadership on Severe Acute Malnutrition (SAM), while the WFP country and regional offices and HKI will provide essential technical support for Moderate Acute Malnutrition (MAM). The national consultant will play a pivotal role in coordinating the entire IMAM guideline development process and



protocol updates and will work as and team with an international consultant hired by WFP and HKI with clearly delineated responsibilities.

Scope of Work:

- 1. Review the new WHO guideline on Prevention and Treatment of Acute Malnutrition and develop inception report with clear plan for development of national IMAM guideline.
- 2. Conduct a comprehensive desk review of national documents and relevant materials, guidelines, on acute malnutrition in Cambodia prepare summary and provide for analysis. (Literature review along with global level evidence will be supported by international consultant hired by WFP and HKI)
- Conduct mapping of the existing MAM and SAM programs/projects supported by Gov., UN and CSO
 partners. Prepare detailed report based on a on mapping exercise which include location, scale of
 the project and input provided.
- 4. Translate/adapt observation and consultation tools developed by the international consultant (hired by Helen Keller and WFP) for local use.
- 5. At national and subnational levels, facilitate and conduct in-depth technical consultation with technical steering committee members
- Using tools developed by the international consultant and approved by the steering committee, conduct field visits to four target provinces for observations and information gathering on sampled MAM and SAM program implementation supported by various partners (selection of provinces will be determined later)
- Conduct interviews and FGDs among healthcare providers, village health support groups (VHSGs), operational districts, etc.) and translate the findings in English for further analysis by the international consultant.
- 8. Facilitate national and subnational consultative meetings on draft IMAM guideline and protocols.
- 9. Support the MOH/NNP on dissemination of the guidelines and produce workshop reports

Deliverables:

- Inception report
- Data collection tools for partners consultations
- Report of MAM and SAM program mapping
- KII and FDG reports
- Consultation workshop reports

• Final draft guideline and protocols in Khmer (the English version will be a deliverable of the international consultant)		
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:		
There would be no direct contact with children		

Budget Year:	Requesting Section	Reason	s why consultancy cannot be	done by staff:
2024	/ Issuing Office:	With lir	mited staff and multiple press	sing priorities, dedicating 75
	Health and Nutrition		rys solely to the developmen	_
		-	ols can significantly disrupt of	
			rucial tasks. Hiring a consultar	_
			on their existing responsibil s the specialized task eff	
			me. Consultants often bring a	•
			g on similar projects in va	<u>-</u>
		-	al perspective can bring fresh	_
		develop	oment process and offer an	unbiased perspective since
		they are	e not influenced by internal p	rocedures.
Included in Annual/Rolling Workplan: Yes No, please justify:				
Consultant so	•			
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Compositive S	alastian.			
Competitive S Advertisem			Informal competitive (Low V	alue Contract)
/ navereisen	ienenoste.		j ililorillar competitive (2011 1	
Single Source Selection [(Emergency - Director's approval)				
If Extension, J	ustification for extension	on:		
Supervisor:			Start Date:	End Date:
Nutrition Spec	ialist		15 March 2024	15 October 2024
		7		
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):				
interminable information of children (name, national 15, location data, photos).				
No personal-identifiable data				
More information is available in the Child Safeguarding SharePoint and Child Safeguarding FAQs and				
Updates				



Work Assignments Overview	Deliverables/Outputs	Delivery deadline	Estimated Budget (Percentage of payment)
Develop detailed operational plan	Deliverable 1: Inception report (Minimum 4 pages)	March 15, 2024 (5 workdays)	7%
Develop data collection tools, share draft to IMAM steering committee, incorporate feedback and finalize the tools	Deliverable 2: Data collection tools for partners consultations	March 29, 2024 5 workdays	7%
Conduct desk review on national available policies, strategies, and program documents. Conduct mapping of SAM and MAM interventions supported by government and development partners	Deliverable 3: Desk review and MAM and SAM program mapping report (Minimum 10 pages)	April 15, 2024 15 workdays	20%
Identify respondents for KII and FDGs, conduct interviews and submit report	Deliverable 4: KII and FDG reports (Minimum 10 pages)	June 1, 2024 20 workdays	27%
Coordinate among partners for national level consultation workshop to review the draft IMAM guideline and related protocols	Deliverable 5: Consultation workshop report (Minimum 8 pages)	July 25, 2024 10 workdays	12%
Translate the final draft guideline and protocols in Khmer Language	Deliverable 6: Final draft guideline and protocols in Khmer	Oct 15, 2024 20 workdays	27%
Total		75 workdays with	100%



Minimum Qualifications required*:	Knowledge/Expertise/Skills required *:	
Bachelors Masters PhD Other Enter Disciplines Bachelor Nutrition, Public Health or related field	 Sound knowledge of Nutrition, specifically on acute malnutrition, identification, and treatment Previous experience to support national Gov and /or CSOs in SAM/MAM program management Experience in development of guidelines Previous experience in Food Security and Nutrition for at least 5 years Fluency in English and Khmer 	
*Minimum requirements to consider candidates for competitive process	*Listed requirements will be used for technical evaluation in the competitive process	

Submission of applications:

- Letter of Interest (cover letter)
- CV or Resume
- Performance evaluation reports or references of similar consultancy assignments
- Financial proposal: All-inclusive lump-sum cost including, consultancy fee, 20 travel days to four target provinces for information gathering (name of provinces to be determined); accommodation cost for this assignment as well as the medical health insurance as per work assignment.



Evaluation Criteria (This will be used for the Selection Report (for clarification see Guidance) A) Technical Evaluation (points <u>75</u> out of 100) Experience in areas of Nutrition and health programs: 25 points Previous experience in supporting national authorities in treatment of acute malnutrition 25 points Experience on Guideline development: 15 points Specific role/ engagement in supporting identification and treatment of SAM and MAM 10 points B) Financial Proposal (points 30 out of 100) The maximum number of points shall be allotted to the lowest Financial Proposal that is opened /evaluated and compared among those technical qualified candidates who have attained a minimum $(\underline{60})$ points score in the technical evaluation. Other Financial Proposals will receive points in inverse proportion to the lowest price. The Contract shall be awarded to candidate obtaining the highest combined technical and financial scores, subject to the satisfactory result of the verification interview. Administrative details: Visa assistance required: **If office based,** seating arrangement identified: IT and Communication equipment required: Home Based Office Based: Email/O365 access required: Internet access required: He/she is expected in the UNICEF office for meetings only, no siting desk required. The consultant will use his/her own laptop to carry out the tasks

Transport and DSA (for days out of Phnom Penh) separately estimated in addition to professional fee.

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.

The selected candidate is solely responsible to ensure 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

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.



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, 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.

UNICEF offers <u>reasonable accommodation</u> 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 afterwards in your assignment.