

### TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS AND CONTRACTORS

<b>Title:</b>  CHW Programme Consultant	<b>Funding Code:</b>	<b>Type of Engagement</b>  <input checked="" type="checkbox"/> Consultant (National)	<b>Duty Station:</b> Freetown, Sierra Leone (including travel to districts)
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**Background:**

Despite the significant recent decline of maternal mortality from 717 to 443 in the past 5 years and the 60% decline of under-five mortality in the past three decades, Sierra Leone remains still one of the countries with the highest neonatal, infant and under-five mortality rates at 31, 76 and 101 per thousand live births. In 2021 it has been estimated that over 27,000 under-five children have died. According to estimates by the Institute of Health Metrics and Evaluation, the leading causes of death in Sierra Leone include malaria, pneumonia, and diarrhoeal diseases, with undernutrition contributing to nearly half of the deaths. Over 70% of the deaths in under-five children occur in the age group between 1 month and 5 years. These causes of death of under-five children are either preventable (with immunisation, good nutrition, sanitation and hygiene, and use of bed nets) or treatable through timely administration of antimalarial drugs (ACT), antibiotics or ORS-Zinc by trained health providers at community and facility levels.

In response to the unacceptable mortalities among women and children and to advance their wellbeing, the Government of Sierra Leone launched the *National Community Health Worker (CHW) programme* as its main platform for empowering communities to improve family care practices, and to bring essential primary health care services right to people's doorsteps. Through this programme, CHWs serve as a bridge between communities and the facility-based health care system and provide a package of life-saving interventions for women and children in their villages, including promotional home visits for pregnant women, mothers and children, detection of young children who missed their immunization, vitamin A schedule including those with zero doses, linking them to service delivery points. CHWs provide treatment of malaria, pneumonia, diarrhoea, with ACT, amoxicillin dispersible tablets, and ORS-zinc, respectively. They also screen children for undernutrition; provided nutrition counseling; identification of danger signs among women, mothers, newborns, and children, referring them to health facilities for care. CHWs detect and notify emergency events such as disease outbreaks and pandemics social mobilization and risk communication with response as demonstrated during the Ebola epidemic and Covid19 pandemic.

UNICEF Sierra Leone has been at the forefront to provide technical, financial and logistics support to the government of Sierra Leone to establish a strong Primary Health Care and institutionalised national CHW program and which has been a success specifically since 2012 a year the first national CHW policy was launched.

However, following the launch of the 2021 policy which resulted in significant restructuring of the CHW program there are systemic components which are yet to be fully operationalised. The community health information system (CHIS/DHIS2), supply chain, incentive and remuneration, supervision, and performance monitoring systems are among the areas which need due focus and more efforts.

As a result of the commitment and remarkable efforts to advance community health and nutrition by the Ministry of Health, Sierra Leone has become one of the 15 priority countries which have benefited from the 7% set aside grant allocation by the UNICE Executive Director for the period 2024 and 2025. The overall objective of this catalytic funding is to facilitate for the accelerated institutionalisation of integrated community health and nutrition programmes in Sierra Leone through elevating to the highest level of

visibility and prioritisation of the national Community Health and Nutrition program and maximizing the allocation and efficient use of resources to enhance programme effectiveness.

**Objective of the consultancy**

The purpose of this consultancy is to support primary health care and CHW programme hub in implementation of planned activities to build strong community health system with well institutionalized national community health worker program.

**Justification:**

Under the CHDP (Community Health Delivery Partnership) programme there are series of timebound activities UNICEF and CHW hub need to complete jointly. This needs extra-support to deliver the expected results in time and quality for which this consultancy will assist in the next six months.

**Methodology and Technical Approach:**

This is assignment provide technical support to the CHW hub/Directorate of PHC, MoH and District Health Management Teams (DHMTs) in planning, implementation of pre-service and refresher training on CHW program package, supportive supervision and mentoring/coaching, performance reviews in partnership with different players.

**Specific Tasks:**

- Support DPHC/CHW hub in launching and dissemination of the revised Community Health Strategy and the national Community Health Program investment case.
- Support the DPHC/CHW hub in the finalization and dissemination of the national CHW program sustainability plan.
- Support in preparation and execution of national CHW program annual review and preparation of report
- Support coordination meetings (TWGs) Community Health workers, Partners, programs at all levels quarterly (national) and monthly at district and PHU levels (selected districts)
- Support in mapping, and gap analysis of national CHW and MSG workforce, mop up recruitment and training.
- Support to conduct mop-up preservice training of CHWs to fill the gap created by attrition, absence of recruited individuals during the 2022 training.
- Support in coordination and execution of continuous capacity building through mentoring and coaching (integrating linkages with MSG's and other community structures to complement the work of CHWs in selected districts.
- Create a pool of competent national and district master trainers and mentors/coaches through competency-based training and follow up.
- Support with monitoring of quality improvement using the iCCM/IMNCI guidelines and QI standards.
- Support strengthening the CHW sensitive integrated supply chain with capacity building for quantification, prepacking, procurement, last mile distribution, and monitoring use and reporting through CHIS/DHIS2
- Pre-packing and procurement of essential ICCM, nutrition and IPTp/IPTi commodities, job aids to equip CHWs to deliver the interventions.
- Support in establishing linkages between CHWs and Mother support Groups or other community structures through training, supervision, and monitoring.

- Support the DPHC and selected districts to improve social accountability and community feedback mechanisms using the community scorecard involving CHWs and their supervising PHU.
- Support with program monitoring (PMVs) and quality assurance monitoring visits

**Management, Organization and Timeframe:**

This is an individual consultancy for a 6-month assignment. The Consultant will be stationed in Freetown with an estimated 60 days of travel to provincial sites.

The Community Health Programme Consultant will work under the direct supervision of the of the Health Specialist, Community Health, and Child Health (P4) at UNICEF Sierra Leone office. The consultant will work in close coordination with the Community Health Specialist (NOC) and Health and Nutrition Officers at UNICEF Field Office. She/he will work with the CHW Hub. Directorate of PHC, DHMTs, PHUs and other relevant health and nutrition partners.

Consultants are be expected to provide their own work tools including laptop and other communication tools required.

**Mode of Submission of Applications**

Candidates will be required to submit a technical proposal and a financial proposal and the financial proposal should quote a lump-sum inclusive of fees, travel costs and communication costs. Financial proposals may be negotiated.

<b>Work Assignment Overview</b>			
<b>Tasks/Milestone:</b>	<b>Deliverables/Outputs:</b>	<b>Timeline*</b>	<b>Payment Schedule</b>
<ul style="list-style-type: none"> <li>Prepare and submit inception report after discussion with supervisor and national child health programme, MoH</li> </ul>	Inception report	First 2 weeks	4% of total contract sum
<ul style="list-style-type: none"> <li>Support in the preparation, launching and dissemination of the national CHW investment case and strategy.</li> <li>Technical support to DPHC/CHW Hub/MOH in preparation and conduct of midterm status review of the national CHW program.</li> </ul>	Investment case and strategy cleared by MoH and launched/Dissemination completed. Review meeting conducted and activity report/ recommendation submitted	September- Nov 2024	6% of total contract sum payable each month (total 18% for 3 months)
<ul style="list-style-type: none"> <li>Support to DHC/CHW Hub-MoH conduct mop-up recruitment and training of CHWs to fill the gap due to attrition and absence during the 2022 training.</li> </ul>	Recruitment and mop-up training conducted	Sept 2024- February 2025	4% of total contract sum payable each month (24% in 6 months)
<ul style="list-style-type: none"> <li>Prepare monthly/quarterly activity plans with clear targets.</li> <li>Support quarterly and monthly TWG meeting nationally and at DHMT levels.</li> <li>Technical support and monitoring for the training and implementation of the <b>Community scorecard</b> in the selected districts.</li> <li>Monthly Supportive supervision and mentoring, coaching visits and to PHUs of Kenema, Moyamba, and other selected districts</li> <li>Providing support for strengthening CHW sensitive supply chain through quantification, prepacking and last mile distribution with monthly field visits.</li> <li>Prepare and maintain monthly and quarterly consolidated progress reports on training and mentoring / coaching / supportive supervision visits and other activities</li> </ul>	<ul style="list-style-type: none"> <li>Monthly plan with target,</li> <li>Specific activity reports, -TWG-meeting minutes. - Supervision/monitoring report as activity completed</li> <li>Consolidate monthly/quarterly report</li> </ul>	Monthly (Sept 2024 to February 2025)	9% of total contract sum payable every month (54% in 6 months)
<b>Total duration of consultancy</b>		6 months	100%

*\*Expected timelines for completion are estimated and may vary depending on progress.*

<b>Consultant sourcing:</b> <input checked="" type="checkbox"/> National <input type="checkbox"/> International <input type="checkbox"/> Both  <b>Consultant selection method:</b> <input type="checkbox"/> Competitive Selection (Roster) <input checked="" type="checkbox"/> Competitive Selection (Advertisement/Desk Review/Interview)		<b>Request for:</b> <input checked="" type="checkbox"/> New Consultancy <input type="checkbox"/> Extension/ Amendment	
<b>Supervisor:</b>	<b>Start Date:</b> 20 <sup>th</sup> Sept 2024	<b>End Date:</b> 19 <sup>th</sup> March 2025	<b>Number of Months (working):</b> Six

Consultancy fees to be paid on % basis per month as per deliverables		
Local Travel (to be included in lumpsum)	60 days	
Communication (to be included in lumpsum)		
<b>Total estimated consultancy costs in the 6-month consultancy period<sup>1</sup></b>		

<b>Minimum Qualifications required:</b> <input checked="" type="checkbox"/> Bachelors <input type="checkbox"/> Masters <input type="checkbox"/> PhD <input type="checkbox"/> Other  Enter Disciplines: <ul style="list-style-type: none"> <li>• Bachelor) in Health Sciences, Public Health, Nutrition, Community Health, Health Management</li> <li>• Higher Diploma in Community Health is an asset.</li> <li>• Advanced degree in Public Health is an added advantage.</li> </ul>	<b>Knowledge/Expertise/Skills required:</b> <u>Experience</u> <ul style="list-style-type: none"> <li>• Essential - At least 5 years of progressively responsible field experience in child health with demonstrated skills in iCCM/IMNCI training, supervision, and mentoring.</li> <li>• Experience in national and regional coordination and management of Child health and CHW program</li> <li>• Experience in providing clinical services at primary health care facility level in the Sierra Leone's context.</li> <li>• Experience in health data collection, analysis, assessment, monitoring, and evaluation.</li> <li>• Experience in team working in culturally diverse contexts.</li> <li>• Familiarity with the UN system, including similar prior work in the UN system, is desirable.</li> </ul> <u>Skills required.</u> <ul style="list-style-type: none"> <li>• Excellent analytical and organizational skills, including effective communication and people skills; ability to communicate and coordinate with various stakeholders and to express ideas and concepts concisely and clearly in written and oral form.</li> <li>• Language proficiency: Fluency in oral and written English is mandatory.</li> </ul>
<b>Administrative details:</b> Visa assistance required: <input type="checkbox"/> Transportation arranged by the office: <input checked="" type="checkbox"/>	<input type="checkbox"/> Home Based <input checked="" type="checkbox"/> Office Based: If office based, seating arrangement identified: <input checked="" type="checkbox"/> IT and Communication equipment required: <input checked="" type="checkbox"/> Internet access required: <input checked="" type="checkbox"/>

<sup>i</sup> 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.

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 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 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 afterwards in your assignment.