**United Nations Children's Fund** 

#### TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS AND CONTRACTORS

Title:	Funding Code:	Duty Station:
UN Joint Programme National		Vientiane, Lao PDR
Consultant on community	WBS: 2460/A0/06/100/003/004	
RMNCAH for central level	Grant: SC220284	

# Purpose of Activity/Assignment:

The UN Joint Programme (UNJP) phase 3 (2022-2025) for Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCAH) supports the Ministry of Health of Lao PDR to implement the national RMNCAH Strategy and Action Plan 2016-2025 at aiming to improve the health status of women, newborns, children, and young people in Lao PDR. UNJP support includes capacity development of the national RMNCAH Secretariat, the Primary Health Care Unit as well as capacity development of selected provinces to coordination the implementation of the RMNCAH Strategy and Action Plan at national and sub-national level. The UNJP on RMNCAH aims to contribute to improving the health status of women, newborns, children, and young people in Lao PDR. The joint programme supports RMNCAH policy advice, knowledge transfer at the national level, and sub-national support is critical to put policies, guidelines, tools, and approaches into practice and to generate results and lessons that can be used to inform national scale-up.

A core function of the UNJP phase 3 is institutional capacity development. This includes capacity development of national entities and individuals in those entities that are responsible for the coordinated implementation of the national RMNCAH Strategy and Action Plan at national and subnational level: the RMNCAH Secretariat, the SO Sub-Committees, and the RMNCAH focal points in UNJP focus provinces (Savannakhet, Bokeo, Borikhamxay), as well as the MoH/DHHP/PHC that will lead the implementation of the RMNCAH community package. The capacity of these entities has been developed through supporting selected positions in these institutions and providing intensive knowledge transfer, mentoring, and coaching. Increased institutional capacity will support the achievement and sustainability of the UNJP's outputs and objective and the achievement and sustainability of the national RMNCAH Strategy's Objectives and Goal.

Within the UNJP support, UNICEF has supported the Ministry of Health to develop the national integrated RMNCAH community package or VHV toolkit on the RMNCAH home visit, which was endorsed by the Minister of Health in September 2023. It has been rolled out in the provinces. As part of on-going efforts for community health system strengthening, and implementation of VHV toolkit for community RMNCAH home visit with UNJP support, UNICEF seeks to hire a national consultant with strong experience on the implementation, coordination, and monitoring of community health programme.

This national consultant will assist the UNJP partners and the PHC division of MOH/DHHP in planning, coordination, and implementation of VHV toolkit on RMNCAH home visit and other community based RMNCAH package supported by UNJP. The activities include the technical assistance in strengthening the coordination of different RMNCAH strategic objective sub-committees for community based RMNCAH, building the linkage and feedback of lessons learned between national and sub-national level work on community RMNCAH, and provide technical support to RMNCAH provincial focal points in UNJP focus provinces. The consultant will be based within the Primary Health Care Division of the Department of Hygiene and Health promotion at the Ministry of Health (and supported by UNJP).

#### Scope of Work:

The Consultant will support various streams of work on community based RMNCAH. This will include the following:

- 1. Provide technical support for Coordination of MoH Departments and Units responsible for community RMNCAH.
  - Technical support to the PHC Division, Ministry of Health, in coordinated planning, implementation, monitoring and reporting on community RMNCAH in collaboration with all relevant units in Provincial and District Health Offices and UNJP partners.
  - Provide support for coordination with relevant Health Departments, Centres, Strategic Objective (SO) sub-committee for community RMNCAH and assist the PHC Division in convening quarterly technical meetings of SO6 sub-committee with relevant stakeholders on community RMNCAH.
- 2. Provide support to MOH PHC Division to build linkages and feedback of lessons learned between national and sub-national level on community RMNCAH.
  - Facilitate linkages, strengthen coordination and communication between Central and sub-national level on community based RMNCAH interventions.
  - Provide support to convene online quarterly review meetings with target provinces and districts to monitor the progress made towards the implementation of community RMNCAH activities and facilitate acceleration of implementation.
  - Coordinate with LuxDev project to ensure synergy between UNJP and LuxDev project on community RMNCAH.
- 3. Provide support to provincial focal points in the implementation of community RMNCAH and ensure that supported interventions at national and community level reinforce each other.
  - Provide support to provincial focal points in UNJP focus provinces (Bokeo, Bolikhamxay and Savannakhet) in rolling-out the VHV toolkit and community RMNCAH activities.
  - Undertake field visits to provinces and districts to support the capacity building of subnational health staff in organizing VHV training, conduct regular monitoring and supportive supervision visits to trained VHVs.
  - Assist in development of demonstration Video on RMNCAH counselling for VHV home visit that will be used for improving quality of VHV training and counselling during home visit.
- 4. Facilitate collaboration between local authorities and the health sector to strengthen local health governance and community engagement, including building enabling environment for village health volunteers (VHVs) to function as expected by the MoH.
  - Coordination and technical support for community-based activities with ongoing CONNECT (Community Network Engagement for Essential health services and COVID-19 responses through Trust) Initiative for coherent approach to local health governance and community engagement in UNJP focus provinces.
  - Assist to review the existing guidelines on quarterly community meeting for building linkages with communities and strengthening community engagement.
  - Support provinces and district teams in rolling out of quarterly community meetings in target provinces.

5. Other related tasks assigned by supervisor.  For the planning purpose, the timelines have been indicated in the table below. However, the actual timelines will be agreed with the successful applicant based on the technical and financial proposal. The deliverables will require extensive planning and travel to the field to achieve the deliverables throughout the consultancy period. Therefore, the lumpsum cost has been derived/estimated accordingly.			
Child Safeguard Is this project/a	_	s "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 <u>Child Safeguarding SharePoint</u> and <u>Child Safeguarding FAQs and Updates</u>			
Budget year:	Requesting	Reasons why consultancy cannot be done by staff:	
2024 and 2025	Section/Issuing Office:	The consultancy requires a national consultant to support capacity building of PHC Division of the Department of Hygiene and Health Promotion, Ministry of Health, and provincial	
	Health	RMNCAH focal points in three UNJP focus provinces (Bokeo, Borikhamxay, and Savannakhet) on the implementation of the community based RMNCAH interventions with the support from UN Joint Programme phase 3 (2022-2025) on RMNCAH. This Technical Assistance is in line with the UNJP phase 3 proposal, which was developed by the UNJP partners (UNICEF, UNFPA, WHO) and approved by the Government of Luxembourg, who is the donor for the UNJP phase 3.	
Included in Annual/Rolling Workplan: Yes No, please justify:			
Consultant sourcing: National International Both			



Competitive Selection:  \( \sum \) Value Contract)	Advertisement	Roster	☐ Informal competitive (Low		
Single Source Selection: (	Emergency - Directo	or's approval)			
If Extension, Justification for extension: Not applicable					
Supervisor:	Start Date: 3 <sup>rd</sup>	June 2024	Total duration:		
	End Date: 31st	October 2025	17 months		
Onevanh Phiahouaphanh,					
Health Specialist					

Work Assignments Overview	Deliverables/Outputs	Delivery deadline	Estimated Budget (Percentage of payment)
Deliverable 1: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 1.	<ul> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus provinces for organizing training of 210 VHVs on VHV toolkit.</li> <li>Conduct monitoring and supervision field visit to one UNJP focus province to monitor VHV training and home visits in one district. Trip report with recommendations.</li> <li>Coordinate with LuxDev project to ensure synergy between UNJP and LuxDev project on community RMNCAH.</li> <li>Convene the quarterly technical meeting of SO6 sub-committee and stakeholders on community RMNCAH. Minutes of meeting prepared.</li> </ul>	June 2024	(6.27%)
Deliverable 2: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of	<ul> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus provinces for organizing training of 200 VHVs.</li> <li>Support necessary preparation for and conduct field visit to UNJP focus province to facilitate the</li> </ul>	July 2024	(6.27%)

community RMNCAH implementation in UNJP focus provinces.	development of demonstration Video on RMNCAH counselling for VHV home visit.  Complete the development of guideline on quarterly community meeting (QCM).		
Deliverable 3: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 3.	<ul> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus provinces for organizing training of 150 VHVs.</li> <li>Support DHHP to convene online quarterly review meetings with target provinces and districts. Minutes of meeting prepared.</li> <li>Conduct field visit to to organize the orientation workshop for provincial and district levels on quarterly community meeting (QCM).</li> </ul>	August 2024	(6.27%)
Deliverable 4: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 4.	<ul> <li>Conduct field visit to organize two batches of training of trainers for participants from 13 additional districts from UNJP focus provinces on VHV toolkit.</li> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH UNJP focus provinces for organizing training of 150 VHVs.</li> <li>Support DHHP to convene the quarterly technical meeting of SO6 sub-committee and stakeholders on community RMNCAH.</li> </ul>	September 2024	(6.27%)
Deliverable 5: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 5.	<ul> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus provinces for organizing training of 200 VHVs.</li> <li>Conduct monitoring and supervision field visit to one UNJP focus province to monitor VHV training, and RMNCAH home visit in one district. Trip report with recommendations.</li> <li>Coordinate with LuxDev project to ensure synergy between UNJP and LuxDev project on community RMNCAH.</li> </ul>	October 2024	6.27%)

Deliverable 6: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 6.  Deliverable 7: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 7.	<ul> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus provinces for organizing training of 200 VHVs.</li> <li>Conduct monitoring and supervision field visit to one UNJP focus province to monitor VHV training, home visits, and quarterly community meeting (QCM) in one district. Trip report with recommendations.</li> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus provinces for organizing training of 200 VHVs.</li> <li>Conduct monitoring and supervision field visit to one UNJP focus province to monitor VHV training, RMNCAH home visit, and quarterly community meeting in one district. Trip report with recommendations.</li> <li>Support MOH/DHHP to convene online quarterly review meetings</li> </ul>	November 2024 December 2024	(6.27%)
Deliverable 8: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 8.	<ul> <li>Update the list of trained VHVs in UNJP focus provinces.</li> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus provinces for organizing training of 200 VHVs.</li> <li>Convene the quarterly technical meeting of SO6 sub-committee and stakeholders on community RMNCAH at central level. Minutes of meeting prepared.</li> <li>Develop annual workplan of SO6 community RMNCAH.</li> <li>Coordinate with LuxDev project to ensure synergy between UNJP and LuxDev project on community RMNCAH.</li> </ul>	January 2025	(4.95%)

Deliverable 9: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 9.	<ul> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus provinces for organizing training of 150 VHVs.</li> <li>Conduct monitoring and supervision field visit to one UNJP focus province to monitor VHV training, home visits, and quarterly community meeting (QCM). Trip report with recommendations.</li> <li>Support DHHP to convene online quarterly review meetings with target provinces and districts. Minutes of meeting prepared.</li> </ul>	February 2025	(6.27%)
Deliverable 10: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 10.	<ul> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus provinces for organizing training of 150 VHVs.</li> <li>Conduct monitoring and supervision field visit to one UNJP focus province to monitor VHV training, and RMNCAH home visits in one district. Trip report with recommendations.</li> </ul>	March 2025	(6.27%)
Deliverable 11: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 11.	<ul> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH implementation in UNJP focus provinces for organizing training of 150 VHVs.</li> <li>Convene the quarterly technical meeting of SO6 sub-committee and stakeholders on community RMNCAH at central level. Minutes of meeting prepared.</li> <li>Update the list of trained VHV on VHV toolkit for RMNCAH home visit.</li> </ul>	April 2025	(4.95%)
Deliverable 12: Provision of technical support to central PHC Division and provincial health offices for coordinated	Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus provinces for organizing training of 150 VHVs.	May 2025	(6.27%)

planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 12.	Conduct monitoring and supervision field visit to one UNJP focus province on VHVhome visits, and quarterly community meeting (QCM) in one district. Trip report with recommendations.		
Deliverable 13: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 13.	<ul> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus provinces for VHV supervision and quarterly community meetings.</li> <li>Support DHHP to convene online quarterly review meetings with target provinces/districts.</li> <li>Support DHHP to convene the quarterly technical meeting of SO6 sub-committee and stakeholders on community RMNCAH. Minutes of meeting prepared.</li> </ul>	June 2025	(4.95%)
Deliverable 14: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 14.	<ul> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus provinces for VHV supervision and quarterly community meetings.</li> <li>Conduct supervision field visit to one UNJP focus province on VHV home visits, and monitor the quarterly community meeting in one district. Trip report with recommendations.</li> </ul>	July 2025	(6.27%)
Deliverable 15: Provision of technical support to central PHC Division and provincial health offices for coordinated planning, implementation, and monitoring of community RMNCAH implementation in UNJP focus provinces 15.	<ul> <li>Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus provinces for VHV supervision and quarterly community meetings.</li> <li>Support DHHP to convene online quarterly review meetings with target provinces and districts.</li> </ul>	August 2025	(4.95%)
Deliverable 16: Provision of technical support to central PHC	Follow up, coordinate, and assist provincial PHC focal points on community RMNCAH in UNJP focus	September 2025	(6.27%)

Estimated Consultancy fee		
Consultation fee	\$	Deliverable for June 2024 – October
		2025
Travel International (if applicable)	0	
Travel Local (please include travel plan)	\$	\$ per trip x 12 trips
DSA (if applicable)	\$	\$ per trip x 12 trips
Health insurance	\$	
Mandatory insurance premium (for	\$	
International Consultant is USD 137.53 and		
National Consultant is USD 24.40)		
Total estimated consultancy costs <sup>i</sup>	\$	

Minimum Qualifications required*:	Knowledge/Expertise/Skills required *:
☐ Bachelors ☐ Masters ☐ PhD ☐ Other	Have hands-on experience of managing
	community health including community
Enter Disciplines:	based RMNCAH would be an advantage.
	Familiarity with the Lao PDR community
	health system context is required.



- Post-graduate degree in Public Health, Social Sciences, International Development or another relevant area.
- At least three years of relevant experience in planning, coordination, and implementation of community based primary health care at central and sub-national level with a specific focus on community RMNCAH.
- The ability to work and collaborate with Government, UN agencies and NGOs.
- Experience in providing technical assistance to the government staff and capacity building activities.
- Ability to work in a multidisciplinary team and have the initiative to work independently to meet deadlines.
- Excellent analytical, report writing and communication skills.
- A good command of English (speaking and writing) is required.

## **Submission of applications:**

- Letter of Interest (cover letter)
- CV or Resume
- Performance evaluation reports or references of similar consultancy assignments (if available)
- Financial proposal: All-inclusive lump-sum cost including travel, accommodation cost and insurance with medevac for this assignment as per work assignment.

# Evaluation Criteria (This will be used for the <u>Selection Report</u> (for clarification see <u>Guidance</u>) A) Technical Evaluation (75 points)

# Degree Education in ....... (10 points)

 Post-graduate degree in Public Health, Social Sciences, International Development or another relevant area.

## Knowledge of ..... (15 points)

- Primary health care including community based RMNCAH
- Facilitating skills for training of village health volunteers.
- Communication and counselling skills.
- Community engagement.
- Social behaviour change.

### Experience in ...... (30 points)

- At least three years of relevant experience in planning, coordination, and implementation of community based primary health care at central and sub-national level with a specific focus on community RMNCAH.
- Have hands-on experience of managing community health including community based RMNCAH.
- Experience in providing technical assistance to the government staff and capacity building activities.

# Quality of past work (20 points)

- Assessment of previous work including written and analytical skills
- Reference checks



B) Financial Proposal (25 points)  The technical and financial evaluation points should total 100 points.  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 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, if required.			
Administrative details:	If office based, seating arrangement identified:		
Visa assistance required:	IT and Communication on times at required.		
IT and Communication equipment required:			
	Internet access required:		
	Consultant will be deployed at MOH/DHHP		
	(Government office)		

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 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.

<sup>&</sup>lt;sup>1</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.



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.