

United Nations Children's Fund

TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS AND CONTRACTORS

Title: Child Health Consultant	Funding Code:	Type of Engagement <input checked="" type="checkbox"/> Consultant (National)	Duty Station: Freetown, Sierra Leone (including travel to districts)
<p>Background:</p> <p>Despite the significant 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 is still one of the countries with the highest neonatal, infant and under-five mortality rates at 31, 76 and 101 per thousand live births respectively. In 2021 it was estimated that over 27,000 under-five children died in Sierra Leone. According to estimates by the Institute of Health Metrics and Evaluation, the leading causes of death include malaria, pneumonia, and diarrhoeal diseases, with underlying undernutrition contributing to nearly half of the deaths. Over 70% of the deaths in under-five children occur between 1 month and 5 years. These causes of death of under-five children are either preventable (with immunisation, good nutrition including micronutrient supplementation, sanitation and hygiene, and use of insecticide impregnated nets) or treatable through timely administration of antimalarial drugs (ACT) for malaria, antibiotics for pneumonia or ORS-Zinc for diarrhoea by trained health providers at community and facility levels.</p> <p>The Government of Sierra Leone and its partners are committed to achieving SDG 3.2 to reduce under-five mortality from the current 101 to at least 25 deaths per 1000 live births, and neonatal mortality from the current 31 to at least 12 deaths per 1,000 live births by 2030. This ambitious goal is only achievable if the country can overcome the challenges in access to quality health and nutrition services and information by establishing and maintaining an institutionalised community and facility-based primary health care delivery system reaching children and women in need on time, leaving no one behind.</p> <p>In response to high mortality among under-five children, with emphasis on those aged between 1 month and 5 years, the Government of Sierra Leone launched the <i>National Child Survival Action Plan (CSAP)</i> in 2023 to help Sierra Leone in accelerating progress towards achieving the Sustainable Development Goal (SDG) 3.2 by 2030. The Ministry of Health has established and launched a Child Health Program (NCHP) separated from the previous CH/EPI Program, to give more focused and dedicated governance and coordination of Child Health and operationalization of the CSAP.</p> <p>UNICEF Sierra Leone has been at the forefront providing technical, financial and logistics support in the conceptualisation, development and launching of the CSAP, establishment and launching of the NCHP. This support builds on years of experience backing the Government of Sierra Leone to establish a strong Primary Health Care and institutionalised national CHW program, with its strong National CHW Coordination Hub.</p> <p>As a result of the commitment and remarkable efforts to advance child survival and development and community health and nutrition by the Ministry of Health, Sierra Leone has become the priority country to accelerate Child Survival Action for a period of one year, from March 2024 to February 2025. The objective of this partnership is to support the Government of Sierra Leone in advancing their CSA (2023-2025) at national level and by demonstrating a comprehensive approach to quality child health services in Kenema district.</p> <p>Objective of the consultancy</p> <p>The purpose of this consultancy is to assist the implementation of planned activities jointly with Child Health Program, MoH and Kenema District Health Management Team (DHMT) in their efforts to operationalise the CSAP, more specifically in the below areas.</p>			

- Strengthening Child Survival governance and coordination at the national and district level to ensure the continuum of care to reduce the under-five mortality rate.
- Strengthening the newly established National Child Health Programme (NCHP) under the Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCAH) Directorate.

Methodology and Technical Approach:

This assignment will consist of technical support to the Child Health Program, MoH and the Kenema DHMT) in planning and implementation of monitoring and evaluation of the Child Survival Action Plan in Sierra Leone.

Specific Tasks:

- Support in strengthening the child survival coordination mechanism (TWG-meetings) at national (quarterly) and Kenema (monthly) levels.
- Support mop-up training of PHU workers on IMNCI/iCCM strategy.
- Support for quarterly Integrated IMNCI/iCCM Supportive Supervision and Mentoring and capturing of assessment data presentation during TWG meetings.
- Technical support for Monthly and quarterly monitoring of quality improvement activities in PHUs using the IMNCI / iCCM guidelines and WHO QI standards.
- Support strengthening the PHU/CHW sensitive integrated supply chain with capacity building for quantification, prepacking, procurement, last mile distribution, and monitoring for rational use, and timely reporting through CHIS/DHIS2
- Support Kenema DHMT in conducting quarterly CHC in-charges' evidence-based performance review and planning meeting.
- Support with program (PMVs) and quality assurance monitoring visits
- Prepare updates and briefs and participating in UNICEF and MoH regular coordination meeting.
- Support with coordination for Donor visit to implementation sites in Kenema district.
- Support project visibility and Human-Interest material preparation in coordination with UNICEF Comms and MoH (NCHP, Kenema DHMT)
- Support documentation and dissemination of lessons learned from the La Caixa-UNICEF project.

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 Consultant will work under the direct supervision of the of the Health Specialist - Community Health and Child Health at UNICEF Sierra Leone office. The Consultant will work in close coordination with the Community Health Specialist and Health and Nutrition Officers at UNICEF Field Office Kenema. S/he will collaborate with the National Child Health Program, National Quality of Care Program, Kenema DHMT, PHUs and other relevant Child survival 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.

Work Assignment Overview			
Tasks/Milestone:	Deliverables/Outputs:	Timeline*	Payment Schedule
Prepare and submit Inception report after discussion with supervisor and national child health programme, MoH	Inception report	First 2 weeks	5% of total contract sum
<ol style="list-style-type: none"> 1. Prepare monthly activity plans with clear targets. 2. Support Kenema DHMT in conducting TWG- monthly meetings. 3. Support mop-up Kenema training of PHU health workers and DHMT in Quality Improvement linking to the IMNCI/iCCM strategy in Kenema district. 4. Provide monthly support for strengthening CHW/PHU sensitive supply chain through quantification, prepacking and last mile distribution and end user monitoring. 5. Monthly monitoring and tracking of quality improvement activities using the IMNCI / iCCM guidelines and WHO QI standards in Kenema district covering all 34 CHCs in one quarter. 	Prepare and maintain monthly activity progress reports (training, supportive supervision with mentoring/coaching visits, PMVs + other activities)	Monthly (Sept 2024 to February 2025)	10% of total contract sum payable each month (totalling 60% of consultancy fees in 6 months)
<ol style="list-style-type: none"> 1. Support NCHP in conducting quarterly TWG-meetings. 2. Support Kenema DHMT in conducting quarterly evidence-based performance review and planning meeting by CHC in-charges and DHMT program focal persons (M&E, Child Health, CHW, Malaria, EPI, Nutrition) 3. Support quarterly IMNCI/iCCM supportive supervision and mentoring 	Meeting minutes and Supervision and mentoring report as per the guide/modules	Quarterly (October/Nov 2024 and Jan/Feb 2025)	10% of total contract sum payable each quarter (20% in 6 months)
Support in preparation of updates and briefs and participating in UNICEF (CO, RO, HQ) regular coordination meeting, including field preparation for UNICEF-La Caixa joint mission	Briefs notes for MoH, RO, HQ, CO (UNICEF) and Donors on the progress	Quarterly (October/Nov 2024 and Jan/Feb 2025)	5% of total contract sum payable each quarter (10% in 6 months)
Support the NCHP in documentation and dissemination of lessons to stakeholders (end of contract)	Documentation report	Feb 2025	5% of total contract sum
Total duration of consultancy		6 months	100%

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

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

Consultancy fees to be paid on % basis per month as per deliverables.		
Local travel (to be included in lump sum)	60 days	
Communication as applicable (to be included in lump sum)		
Total estimated consultancy costsⁱ		

Minimum Qualifications required: <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"> Bachelor's degree in Health Sciences, Medicine, Nutrition Higher Diploma in Health/MNCH discipline Advanced degree in Public Health is an added advantage. 	Knowledge/Expertise/Skills required: <u>Experience</u> <ul style="list-style-type: none"> Essential - At least 5 years of progressively responsible field experience in MNCH/Child Health with demonstrated skills in iCCM/IMNCI, QoC training, supervision, and mentoring. Experience in national and regional coordination and management of Child Health Experience in providing clinical services at primary health care facility level in the Sierra Leone's context. Experience in health data collection, analysis, assessment, monitoring, and evaluation. Experience in team working in culturally diverse contexts. Familiarity with the UN system, including similar prior work in the UN system, is desirable. <u>Skills required</u> <ul style="list-style-type: none"> 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. Language proficiency: Fluency in oral and written English is mandatory.
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Administrative details: Visa assistance required: <input type="checkbox"/> Transportation arranged by the office: <input 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"/>
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ⁱ 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.