

TERMS OF REFERENCE

Section:	Health Programme	Date:	March 2024
Title:	Still Birth and Neonatal Mortality Audit- Policy Support	Duty station:	Beirut
Reporting to:	Health Section	Contract type:	Institutional Contract
Duration:	5 months	Start date:	Q2 2024

Section	Content
Background	<p>Lebanon has been able to maintain low neonatal mortality rates for several decades now. However, the current economic crisis on top of COVID-19, Cholera outbreak, the Syrian refugee crisis and the exodus of Health care providers, the health system starting crumbling leading to increase in maternal and neonatal mortalities.</p> <p>Lebanon has a National Hospital Based Mortality Notification system (HMS) was established at the beginning of 2017 in collaboration with the World Health Organization (WHO) and in cooperation with the Syndicate of hospitals as an expansion of the maternal and neonatal death reporting system established in 2011. The system consists of anonymous online reporting of deaths based on an excerpt of the official death certificate form. Focal points were assigned and trained in more than 150 public and private hospitals operating in Lebanon. After reporting the information, quality checks are initiated through constant communication between the statistics department and the hospitals' focal points. After that, the underlying cause of death is selected from the reported causes of the death. The system includes software developed by WHO, which integrates both IRIS for selection of UCOD and ANACONDA for quality checks and completeness.</p> <p>In addition, in efforts to reduce maternal mortality and improve maternal and child health (MCH) outcomes, the Vital Data Observatory (VDO) was initiated in 2016. The VDO monitors and evaluates health data specific to the maternal and child health population (of all nationalities) in Lebanon. This data helps drive the identification of MOPH's MCH priorities.</p> <p>The VDO Network includes all hospitals that provide delivery services and midwives clinics certified by the Lebanese Order of Midwives (LOM) across Lebanon. A total of 25 Governmental Hospitals, 101 Private Hospitals and 51 Midwives Clinics.</p> <p>In the last year, the maternal mortality in the country was multiplied by three and proper tracing of also mortalities was already done through a previously established system by United Nations Fund for Population (UNFPA). At the same time, the neonatal mortalities have also increased, especially among Syrian refugees, however no tracing or audit is being implemented and thus the data does not provide concrete evidence to utilize for strengthening the neonatal health care program.</p> <p>Furthermore, more than 40% of hospitals did not report the data for 2022 yet, increased rumors of newborn deaths occurring before official registration, between the house and the hospital, in the hospital ER or at the community level are being circulated, with no proper channels to capture. In addition to the above, the communication between both HMS and VDO is very weak to non-existent. WHO Lebanon is leading with Ministry of Public Health (MOPH) Statistics department on the matters of notification systems quality, upgrading and integration, while UNICEF (United Nations International Children's Emergency Fund) will be supporting MOPH on the development of the audit system for still birth and neonatal mortality.</p>

Purpose and Objectives	The purpose of the assignment is to support the Ministry of Public Health (MoPH) in the development of comprehensive roadmap for introducing a stillbirths and neonatal mortality facility-based audit system within MOPH internal processes. The primary focus would be to craft a system that encompasses the 3-tier reporting structure: tier 1 at the hospital level, tier 2 at the District/Governorate level, and tier 3 at the National level. By ensuring the accuracy and completeness of neonatal mortality data, the consultancy will aim to empower MoPH in implementing effective policies and systems to ensure the advancement of neonatal healthcare on a national scale.
Scope of work	<ol style="list-style-type: none"> 1. Needs Assessment: <ul style="list-style-type: none"> • Conduct an in-depth needs assessment to understand the specific requirements and challenges to be mitigated at the national, district and facility based level in order to introduce of stillbirth and neonatal mortality audits. • Identify existing legal and structural issues to be addressed. • Identify existing capacities and resources. 2. Desk Review for Best Practices: <ul style="list-style-type: none"> • Review global best practices for the integration of neonatal mortality audit structures at different administrative levels. • Review and study the lessons learned from the success of the Lebanese maternal mortality audit. • Identify successful models and lessons learned that can be adapted to the context of the Ministry of Public Health in Lebanon. 3. Stakeholder Engagement: <ul style="list-style-type: none"> • Engage with key stakeholders at the national, district and facility levels, including health officials, medical professionals, and relevant administrative staff. • Facilitate workshops and consultations to gather insights, best practices and buy in from stakeholders. 4. Development of Integration Roadmap: <ul style="list-style-type: none"> • Formulate a detailed roadmap outlining the recommended structure for the integration of still births and neonatal mortality audits within the structural processes of Lebanese Ministry of Public Health. • Recommend functional accountabilities and political, technical, and administrative support requirements at each level of the road map. • Include specific steps, timelines, and responsibilities at the national, district and facility level. 5. Capacity Building Plan: <ul style="list-style-type: none"> • Develop a comprehensive plan for recommended capacity building at each administrative level. • Provide recommendations for training programs and skill development initiatives. 6. Monitoring and Evaluation Framework: <ul style="list-style-type: none"> • Establish a robust monitoring and evaluation framework to assess the effectiveness of the integrated still births and neonatal mortality audit structure. • Include key performance indicators and mechanisms for continuous improvement.
Stakeholders	<ul style="list-style-type: none"> • UNICEF Health Section • Ministry of Public Health • National Newborn and Prematurity Committee • Newborn Experts • Lebanese Pediatric Society • Lebanese Order of Hospitals

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Deliverables and Schedules	<table border="1"> <thead> <tr> <th style="background-color: #f4a460;">Deliverables</th> <th style="background-color: #f4a460;"># of working days</th> </tr> </thead> <tbody> <tr> <td> Deliverable 1: Conduct Needs Assessment including desk review, field visits, stakeholder discussions, and consultative meetings <ul style="list-style-type: none"> Consultancy inception plan Needs Assessment and gap analysis report (report 1) </td> <td>15 days</td> </tr> <tr> <td> Deliverable 2: Desk Review on best practices, both global Guidelines and examples and from the Lebanese National Maternal Mortality Audit <ul style="list-style-type: none"> Best Practices Summary Report including Lessons learned (report 2) Recommendations on best contextualized model for Lebanon </td> <td>10 days</td> </tr> <tr> <td> Deliverable3: Stakeholder engagement and interviews <ul style="list-style-type: none"> Stakeholders' engagement documentation. (report 3) Stakeholders' engagement summary report (2 pages) </td> <td>15 days</td> </tr> <tr> <td> Deliverable 4: Road Map Development (report 4) <ul style="list-style-type: none"> Integration Road map document (national, district and facility) Road map PowerPoint presentation </td> <td>20 days</td> </tr> <tr> <td> Deliverable 5: Capacity Building and Monitoring Framework <ul style="list-style-type: none"> Detailed Capacity Building Plan with timeframe and required expertise. (report 5) Monitoring and Evaluation Framework </td> <td>10 days</td> </tr> <tr> <td> Deliverable 6 Final Report (report 6) <ul style="list-style-type: none"> Final consulting report Advocacy report (2 pagers) PPT presentation on final findings, roadmap and recommendation Deliver any additional documentation, such as data quality scorecards or improvement guidelines </td> <td>15 days</td> </tr> <tr> <td>Total working days:</td> <td>85 days</td> </tr> <tr> <td colspan="2"> <p>*** Materials under this assignment are the property of UNICEF and MOPH.</p> <p>***UNICEF needs to approve deliverables prior to moving to a next phase.</p> </td> </tr> </tbody> </table>	Deliverables	# of working days	Deliverable 1: Conduct Needs Assessment including desk review, field visits, stakeholder discussions, and consultative meetings <ul style="list-style-type: none"> Consultancy inception plan Needs Assessment and gap analysis report (report 1) 	15 days	Deliverable 2: Desk Review on best practices, both global Guidelines and examples and from the Lebanese National Maternal Mortality Audit <ul style="list-style-type: none"> Best Practices Summary Report including Lessons learned (report 2) Recommendations on best contextualized model for Lebanon 	10 days	Deliverable3: Stakeholder engagement and interviews <ul style="list-style-type: none"> Stakeholders' engagement documentation. (report 3) Stakeholders' engagement summary report (2 pages) 	15 days	Deliverable 4: Road Map Development (report 4) <ul style="list-style-type: none"> Integration Road map document (national, district and facility) Road map PowerPoint presentation 	20 days	Deliverable 5: Capacity Building and Monitoring Framework <ul style="list-style-type: none"> Detailed Capacity Building Plan with timeframe and required expertise. (report 5) Monitoring and Evaluation Framework 	10 days	Deliverable 6 Final Report (report 6) <ul style="list-style-type: none"> Final consulting report Advocacy report (2 pagers) PPT presentation on final findings, roadmap and recommendation Deliver any additional documentation, such as data quality scorecards or improvement guidelines 	15 days	Total working days:	85 days	<p>*** Materials under this assignment are the property of UNICEF and MOPH.</p> <p>***UNICEF needs to approve deliverables prior to moving to a next phase.</p>	
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Timing	<p>Duration of assignment: 85 days (within a period of 5 months).</p> <p>Start date: March 2024</p>																		
Reporting Requirements	<p>The Contractor will report directly to UNICEF Lebanon's Health Officer.</p> <p>The contractor will coordinate with MOPH</p> <p>The contractor will coordinate and collaborate with different scientific societies.</p>																		

	<p>A technical and financial proposal should be submitted. The technical and financial proposals should be submitted in separate envelopes. No financial information should be included in the technical proposal.</p> <p>Below is a list of items that should be submitted in the separate technical and financial proposals.</p> <p>Technical Proposal should include the following:</p> <ul style="list-style-type: none"> • Consultancy Profile & registration documents • List of previous similar project undertaken • Minimum 3 reference from previous clients (UN agency or other international organisations if available) • Workplan for implementation of the contract • Methodology • Team Composition • CV's of all proposed team members <p>Financial Proposal should include all costs associated with implementation of the TOR, including:</p> <ol style="list-style-type: none"> a) Resource Costs: Daily rate multiplied by number of days b) Content development: Include all operational costs c) Testing and delivery <p>UNICEF does not provide transport, accommodation, insurance or other logistical support for the Suppliers' staff and all costs should be included in the lump sum financial proposal.</p> <p>These lines of communication and liaison will remain open for regular contact throughout the assignment, and staff will remain available to assist and participate in the assignment as necessary or appropriate. Ultimately however, the institution is expected to have the self-sufficiency to work independently in Lebanon.</p> <p>Only registered companies with local presence in Lebanon are eligible to apply to the tender</p>
<p>Profile Requirements</p>	<p>The institution consists of a team of individuals who will be coordinating directly with the Health Team at the UNICEF LCO. The applicants should have a combination of both policy development and mortality audit background. Fluency in Arabic and English amongst the team overall is a must to understand needs and ensure all the tools can delivered in both languages. The team leader should have at least 7 years of work experience in developing similar products.</p> <p>The composition of the team would need to combine the following expected profiles and skills: The Project manager will be responsible to ensure timely and effective implementation of the contract. The proposed person should have experience of undertaking a similar role. All other proposed personnel should have qualifications and experience applicable to the position that they are being proposed for.</p> <p>Experience:</p> <ul style="list-style-type: none"> • Experience in Newborn Health and Maternal Health programs. • Experience in Policy and roadmap development. • Experience in Mortality audit systems. • Experience in working with Lebanese Ministry of Public Health <p>Technical knowledge:</p> <ul style="list-style-type: none"> • Know the theoretical framework needed for working on issues related to Maternal and Newborn Health. • Understands the value and impact of stillbirth and neonatal Mortality audit • Know and understand the local context including medical institutions dynamics vis a vis newborn health.

	<ul style="list-style-type: none"> • Strong health policy making and advocacy expertise. • Understands the dynamics in Lebanon across population cohorts and different settings. • Thorough knowledge on the Lebanese Health System <p><i>Only registered companies with local presence in Lebanon are eligible to apply to the tender</i></p> <p>Languages:</p> <p>Mastering Arabic and English reading, writing and speaking.</p>																					
<p>Evaluation Process and Method</p>	<p>Technical Evaluation Criteria:</p> <ul style="list-style-type: none"> • <i>Service Providers are encouraged to ensure they meet the below requested evaluation and qualification criteria.</i> • <i>Technical evaluation is composed of 70 points.</i> • <i>Minimum successful score for the technical evaluation is 45 points.</i> <table border="1" data-bbox="300 622 1485 1469"> <thead> <tr> <th colspan="3">Evaluation criteria</th> </tr> <tr> <th>Criteria</th> <th>Marks</th> <th>Benchmarks</th> </tr> </thead> <tbody> <tr> <td>Overall concord between the Request for Proposals and the submission, with clear methodology and approach based on understanding of UNICEF requirements.</td> <td>10</td> <td> <ul style="list-style-type: none"> • Briefly outline the proposed methodology for the assignment (5 pts) • Specific timeline vis a vis the assignment deliverables (5pts) </td> </tr> <tr> <td>Expertise in development of Health Policy advocacy documentation</td> <td>20</td> <td> <ul style="list-style-type: none"> • Production of at least one health advocacy paper/documentation (10 points per previous assignment) </td> </tr> <tr> <td>Expertise of the team in Mortality audit systems, Health policy and integration of new components under governmental systems</td> <td>30</td> <td>Relevant resumes of team leader and other team members. (10 points per resume)</td> </tr> <tr> <td>Previous experience working closely with the MoPH and UN agencies or similar large-scale organizations.</td> <td>10</td> <td>Provide reference letters or project reports/ evaluations of previous partnership with agencies on similar projects. (5 points per letter of reference)</td> </tr> <tr> <td>Total</td> <td></td> <td></td> </tr> </tbody> </table> <p>Financial Evaluation Criteria:</p> <ul style="list-style-type: none"> • <i>Only bidders obtaining the minimum pass mark in the technical evaluation (45 points) will be considered for the financial evaluation.</i> <p><i>Financial evaluation is composed of 30 points. The lowest financial offer will obtain 30 points.</i></p>	Evaluation criteria			Criteria	Marks	Benchmarks	Overall concord between the Request for Proposals and the submission, with clear methodology and approach based on understanding of UNICEF requirements.	10	<ul style="list-style-type: none"> • Briefly outline the proposed methodology for the assignment (5 pts) • Specific timeline vis a vis the assignment deliverables (5pts) 	Expertise in development of Health Policy advocacy documentation	20	<ul style="list-style-type: none"> • Production of at least one health advocacy paper/documentation (10 points per previous assignment) 	Expertise of the team in Mortality audit systems, Health policy and integration of new components under governmental systems	30	Relevant resumes of team leader and other team members. (10 points per resume)	Previous experience working closely with the MoPH and UN agencies or similar large-scale organizations.	10	Provide reference letters or project reports/ evaluations of previous partnership with agencies on similar projects. (5 points per letter of reference)	Total		
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<p>Administrative Issues & Logistical Activity</p>	<p><u>Administrative issues:</u></p> <ul style="list-style-type: none"> • The overall review process will be led by the UNICEF LCO. • The team will be working directly with UNICEF LCO and report to this organization for technical guidance and approval of draft and final products. • The institution should have a team leader who will closely coordinate with the Health Team at UNICEF LCO. • Assignment to be a combination of office/desk work and field work; with frequent consultations, meetings and site visits throughout Beirut and the rest of Lebanon. • The Contractor is expected to be able to work independently to ensure the smooth running of the assignment. • The Contractor will need to organize its logistics for meetings, workshops and FGDs, as well as transport means needed for the field visits and local level consultations. 																					

	<ul style="list-style-type: none"> • The Contractor is required to provide his/her own computer and communications equipment (laptops, telephones, etc.). • The Contractor is not entitled to payment of overtime. All remuneration must be within the contract agreement. • No contract may commence unless the contract is signed by both UNICEF and the Contractor. <p><u>Logistical Activity:</u></p> <p>Any travels shall be included in the costed proposal, data collection related or others. The unit cost for each travel shall be stated in the financial proposal.</p> <p>All the meetings, consultations and interviews will be organized by the Contractor together with UNICEF Lebanon and its partners who will support in organizing and coordinating relevant meetings with partners and other key stakeholders (trainees, etc.).</p>
<p>Budget*</p>	<p>This Project falls under UNICEF’s Health Programme</p> <p>The cost of the consultancy will be negotiated with the recommended consultant. Fees will be paid based upon submission of agreed deliverables and upon certification and approval by the supervisor</p> <p>Payment schedule will be as follows:</p> <p>10% payment upon submission of reports 1 & 2</p> <p>35% payment upon submission of reports 3 & 4</p> <p>25% payment upon submission of report 5</p> <p>30% payment upon submission of report 6</p> <p>Recourse: UNICEF reserves the right to withhold all or a portion of payment if performance is unsatisfactory, if work/outputs are incomplete, not delivered or for failure to meet deadlines.</p>