TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANT

Emergency Obstetric and New-Born Care (EmONC) Needs Assessment

TERMS OF REFERENCE (to be completed by Hiring Office)	
Hiring Office:	UNFPA Jordan Country Office
Purpose of consultancy:	Background: The medical technology to prevent almost all deaths from common obstetric complications includes, for example, blood transfusions, administering antibiotics, oxytocics, and anticonvulsants, assisted delivery, manual removal of placenta, removal of retained products, and cesarean section
	Many of the common obstetric complications can be managed before they become emergencies, and almost all can be treated even if they do become emergencies. But the key challenge is to ensure that these interventions reach all women. Safe motherhood means ensuring that all women receive the care and opportunities they need to be safe and healthy throughout their lives and throughout pregnancy and childbirth.
	One of the critical pathways to reducing maternal mortality and morbidity is assessing and improving the accessibility, utilization, and quality of services to treat complications during pregnancy and childbirth. In this regard, using the process indicators is a crucial component in monitoring progress in Emergency Obstetric and New-Born Care (EmONC) services. Specific process indicators or a shortlist of 'signal functions' allow assessing availability, use, and quality of emergency obstetric and neonatal care services.
	UNFPA Jordan Country Office prioritizes and envisages a comprehensive EmONC needs assessment to generate evidence on the amount of basic and comprehensive EmONC services, geographic distribution and distance, quality of care, and available referral mechanism to inform health policymaking and programming.
	Purpose The main purpose of the comprehensive Emergency Obstetric and New-Born Care (EmONC) Needs Assessment is to provide a clear picture concerning EmONC in maternity facilities, while focusing specifically on: • Identification of capabilities of facilities at central and field level to provide high-quality EmONC: what EmONC services are available; how are they functioning; staff training and equipment needs; referral system and what factors limits women's access to these services; • Identification of the main gaps on EmONC based on current evidence base – namely WHO/UNICEF/UNFPA recommendations and process indicators such as "availability of EmONC," "Geographic distribution of services," "Proportion of expected birth in EmONC facilities," "Met need for EmONC," "Caesarean delivery as a percent of expected birth" and "Case fatality rate." • Establish a baseline useful in realizing a national plan of action to improve EmONC services. • Highlighting barriers, identifying problems, possible obstacles, and reporting on anticipated problems in the implementation of an EmONC approach; • Formulating proposals for future interventions to improve EmONC services at each level of service provision within EmONC approaches.

Scope of work:

(Description of services, activities, or outputs)

The national consultant is expected to carry out tasks in all phases of the assessment: planning, implementing, reporting, and disseminating results/recommendations. The national consultant will work closely with MOH and UNFPA to undertake the following tasks:

- Introduce standard EmONC methodology and modules and share previous experiences and lessons learned on undertaking EmONC needs assessments;
- Build a common consensus among key stakeholders on geographic areas to be prioritized for the assessment;
- Identify and agree on roles and responsibilities of different stakeholders in the EmONC needs assessment exercise;
- Lead the efforts to identify and share relevant resources prior to the fieldwork, to enable information and orientation around EmONC context in the country;
- Assess the maternities for the following areas:
 - Organization of health units within geographic regions and their connection with collaborating units, possibility to cover the needs of patients of that region;
 - Available resources at the moment of the assessment: human resources, broken down by profile and age; equipment, based on specifications; list of available needed medicines and emergency (lifesaving) medicines - WHO; spatial conditions;
 - Summary of last year's work: number of treated patients by diagnosis, clinical condition, and outcomes, disaggregated by months;
 - Detailed recording of cases of maternal deaths and newborn health (in cases there were);
 - Evaluation of all detailed signal functions which categorize the health unit as Basic or Comprehensive EmONC: use of antibiotics, administration of uterotonics, use of injectable anticonvulsants, manual removal of placenta, removal of residua, assisted vaginal delivery, neonatal reanimation, caesarian section, administration of blood and derivate:
 - Assessment of technical advancement of qualifications completed trainings and focused trainings of few interviewees selected randomly;
 - Level of control of intra- hospital infections;
 - The situation of neonatal units with regards to the use of clinical guidelines, equipment, and staff;
 - Evaluation of the situation and operations/work of the delivery rooms;
 - Evaluation of the surgery rooms for C-section (if there is one);
 - Use of partograms for checking several files randomly selected;
 - The situation with regards to evidence of perinatal statistics, use of registry books, recording of important parameters in perinatology.
- Lead the development of an assessment plan/agenda with timeline and tools to be used; target audiences to be engaged; composition of teams to conduct the assessments, and other needed elements);
- Prepare a list of forms that the Ministry of Health would send to facilities prior to the visits:
- Conduct, facilitate, and coordinate the assessment/fieldwork;
- Review and fill out the interview questionnaire per the used methodology;
- Facilitate the communication and coordination with other key stakeholders active in the field;
- Provide technical support and prepare a presentation of the key preliminary findings and recommendations from the assessment, based upon the request of the relevant institutions/bodies;
- Provide a package of materials/forms/documents necessary to ensure implementation of recommendations by the MoH, embedded in the Jordan National SRH Strategy Action Plan and the measures for reducing maternal and newborn mortality and morbidity.

	 Methodology: a. Geographic scope and types of facilities included - secondary and tertiary health facilities in Jordan; b. Administrative areas and facilities surveyed - numbers and names. Health facilities to be assessed will be randomly selected; c. Needs assessment tools/questionnaires (attached): (1) National-Level Information (This information will be collected from MoH officials and other relevant authorities' prior field visits. This is not a part of the facility-level practice exercise); (2) Human Resources; (3) EmONC services; (4) Equipment, Supplies & Essential Drugs (the availability and sufficiency of supply/essential drugs and equipment will be evaluated applying room by room method); and (5) Facility Case Summary Form. d. Data collection: The assessment team comprises a national consultant, MOH, local authorities, and IP staff who will undertake a cross-sectional, descriptive assessment of selected hospitals' activities. The process will involve discussions with health managers and health professionals, reviewing registers/logbooks, observations, etc.
Duration and working schedule:	44 working days spread over the period of 1st of July to 30th September 2021
Place where services are to be delivered:	 Working from Home; Meeting with partners and IPs at their premises; Field visits to SDPs. The consultant will meet with the SRH Programme Specialist at the UNFPA Amman Office or telecommunication upon request.
Delivery dates and how work will be delivered (e.g., electronic, hard copy, etc.):	Ongoing through emails and hard copies. Delivery dates to be identified by the consultant (upon submission the work plan proposal). Delivery dates will be further discussed with the UNFPA SRH Specialist (delivery dates are adjustable based on mutual agreement).
	 Schedule of payments: 40% upon finalization of the drafted initial report. 60% upon finalization the final report.
Monitoring and progress control, including reporting requirements, periodicity format, and deadline:	The consultant is expected to contribute and lead the completion of the following deliverables by the following deadlines: 1. Define the plan of the visits – June 2021; 2. Questionnaires sent by the MoH to all health units subject to assessment – June 2021; 3. Complete gathering materials from health units sent by the Ministry of health – early July 2021; 4. Fieldwork of the assessment – mid-July, 2021; 5. Initial draft report – mid-July, 2021; 6. Discussion of the initial draft with UNFPA and MOH team – first week of August 2021; 7. Final report – mid-August, 2021.
Supervisory arrangements:	Based in Amman, under the direct supervision of the UNFPA SRH Programme Specialist in Amman, the EmONC consultant will work closely with the SRH Programme Analyst, SRH Programme Associate, camp, and field coordinators at the UNFPA Jordan Country office. The consultant will also work closely with the Ministry of Health Maternal and Child Health Directorate, local authorities, NGOs, and partners.
Expected travel:	Travel across governorates during the field phase is expected.

Required Qualifications and Experience expertise. Medical Doctor or Gynecologist with Master's degree or higher in Public qualifications, and competencies, Health or Reproductive Health or relevant field of study with 7 years of including language requirements: experience. Demonstrable experience in conducting complex assessments, reviews, and trainings in the field of SRH; Familiarity with UN and/or UNFPA mandate and activities; Ability to consolidate, synthesize and analyze information; Excellent organization, management, and facilitation skills; Languages: Fluency in oral and written English and Arabic; Excellent interpersonal and general communication skills. The consultant will receive guidance from the Ministry of Health and the UNFPA Inputs / services to be Jordan Country Office. The consultant is expected to be working jointly with relevant provided by UNFPA or stakeholders through all phases of the comprehensive EmONC needs assessment. implementing partner (e.g., The consultant is also expected to arrange for the meetings with partners and IPs, support services, office and transportation. The UNFPA Amman Office will provide the consultant with the equipment), space, relevant programme documents, and other agreed support during the assignment. applicable: Other relevant information Interested Consultant(s) need to submit a proposal that include a brief description of approach to work/technical proposal and financial proposal separately. Delivery or special conditions, if dates will be further discussed with the UNFPA SRH Specialist (delivery dates are any: adjustable based on mutual agreement).

UNFPA Work Environment:

UNFPA provides a work environment that reflects the values of gender equality, teamwork, respect for diversity, integrity and a healthy balance of work and life. We are committed to maintaining our balanced gender distribution and therefore encourage women to apply. UNFPA is committed to workforce diversity and inclusion and promotes equal opportunities for all including persons with disabilities.

Payments will be paid upon satisfactory completion of each deliverable.

How to apply:

Interested candidates are kindly requested to provide us with their P11s, copy of academic credentials, motivation letter along with a technical proposal (includes a brief description of approach to work) and financial (in a separate file attachment), through the email address: jco-consultants@unfpa.org, indicating the Consultancy Title in the e-mail's subject, by 24 June 2021, 23:59 pm.

Candidates whom their proposals are seriously being considered will be contacted.

Please note that selected consultants will be asked to submit a series of documents (health insurance; passport, vendor form, security certificates etc.) before starting their assignment.