Terms of reference



GENERAL INFORMATION

Title: Consultant to Support the Revitalisation of the Prison Health Information System

Project Name: UNODC Sub-Programme 4 **Reports to:** National Programme Officer

Duty Station: Jakarta

Expected Places of Travel (if applicable): -

Duration of Assignment: 142 Working day within July 2020 – April 2021

REQUIRED DOCUMENT FROM HIRING UNIT

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		TERMS OF REFERENCE			
	4	CONFIRMATION OF CATEGORY OF LOCAL CONSULTANT, please select:			
		(1)	Junior Consultant		
		(2)	Support Consultant		
		(3)	Support Specialist		
		(4)	Senior Specialist		
		(5)	Expert/ Advisor		
		CATEGORY OF INTERNATIONAL CONSULTANT, please select:			
		(6)	Junior Specialist		
		(7)	Specialist		
		(8)	Senior Specialist		
	Χ	APPROVED e-requisition			

REQUIRED DOCUMENTATION FROM CONSULTANT

Χ	CV / P11 with three referees
Х	Copy of education certificate
Х	Completed financial proposal
Х	Completed technical proposal

Need for presence of IC consultant in office:

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partial (explain): The cont	ractor will be b	ased in Jaka	arta during his/her consultancy. No requirement to attend daily
to the office, however to be available	lable for any m	eeting requ	est by the supervisor.
☐ intermittent (explain):			
$\ \square$ full time/office based (ne	eds justificatio	on from the	Requesting Unit)
Provision of Support Services	s:		
Office space:	□Yes	■No	
Equipment (laptop etc.):	□Yes	■No	
Secretarial Services	□Yes	■No	

If yes has been checked, indicate here who will be responsible for providing the support services: < Enter name>

I. BACKGROUND

In 2016, it was estimated that there were 640,443 people living with HIV/AIDS in Indonesia. Number of HIV positive cases continue increasing, data up to September 2019 revealed that 363,536 people are living with HIV and AIDS and 121,927 of them are on anti-retroviral therapy (ART). In addition, it is estimated that the number of fatalities among PLHAs in Indonesia is 40,000 people since the first

HIV case was reported. Various efforts have been undertaken by the Government of Indonesia to involve multi-sectors/other related institutions to control HIV-AIDS. However, approximately 46,000-48,000 new cases are still reported every year.

Since 2013 Indonesia has begun to record and report HIV diagnoses in a web-based application, SIHA (system information for HIV and STI), and followed with SITT (System information for TB programme). Data is being collected at the service providers/health facilities and reported to district and provincial health offices and finally reported to the Ministry of Health. The development of SIHA is a major milestone to enhance the HIV information system in Indonesia and will provide comprehensive data for HIV programmes.

Pursuant to the Minister of Health Regulation No. 21 of 2013, one of the specific populations that need serious attention are detainees, children, and inmates in correctional centers. Currently there are a total of 522 prison facilities existing in the country. In an effort to mitigate and respond to HIV/AIDS problems in prison setting in Indonesia, the Directorate General of Corrections (DGC) of the Ministry of Law and Human Rights has implemented HIV-AIDS programme for inmates and detainees since 2005 through the issuance of its HIV-AIDS Management Strategies in Detention Centers /Penitentiaries (2005-2009). Additionally, DGC has recently endorsed its recent framework - the National Action Plan for the Management of HIV programme in prison setting (2020-2024).

In 2009, in an effort develop a complete, accurate, and timely data and information system for evidence-based decision making in all levels of management, the DGC developed a "one door" reporting system through the Correctional System Database (SDP). Furthermore, within the SDP a feature on prison health information is also developed. Currently, after more than ten year of the SDP application, DGC has identified several challenges related to the application of the prison health feature. Specifically, challenges include the following:

- 1. The individual baseline data does not properly link to the various features and functions in the system;
- 2. The SDP is not integrated with the SIHA and SITT of the Ministry of Health;
- 3. High workload among officers due to requirement to input data into different systems; and
- 4. No dedicated officer for service data recording and reporting.

To deal with the existing challenges, it is necessary to improve and strengthen the SDP recording and reporting system so that data can be made available on time, with high accurate. Addressing these issues will allow the data to be used for improved reporting, decision making, and policy making regarding HIV-AIDS and TB responses in prison settings.

As the lead agency for the UNAIDS response to strengthen HIV responses for people who use drugs and in prison setting, UNODC will support the Directorate General of Correction to improve its existing health information system to include, at minimum, HIV, TB and Drug Treatment programmes. These outputs are linked to the Ministry of Health HIV (SIHA) and TB (SITT) information system to monitor progress on the 90-90-90 HIV performance and indicator in prison setting. UNODC therefore seeks to obtain the services of an individual consultant who can support this initiative.

II. SCOPE OF WORK, ACTIVITIES, AND DELIVERABLES

Scope of Work

Under the direct supervision of the National Programme Officer and the overall supervision of the Country Manager, the consultant will:

- Conduct rapid assessment to determine baseline data, by assessing and identify:
 - ✓ The range of prison health information system feature under the existing of Prison Data

- System (SDP);
- ✓ The Ministry of Health information system relate to HIV (SIHA), TB (SITT); and
- ✓ The Ministry of Social Affairs database management system (DBMS) for drug treatment providers
- Develop and submit a full assessment report which consist of functions to accommodate: TB, HIV-AIDS, Hepatitis, Drug Dependence Treatment, Basic Health Care Services and medicines, medical waste system, meals for prison inmates, mortality/death, and referral system to hospitals or other health services out of prison Develop the proposed design of business process for all functions identified in the assessment report
- Develop integrated functions of recording and reporting system on prison health information system featuring, HIV-AIDS and TB programmes and link them with SIHA and SITT
- Facilitate workshop for IT software function testing
- Upgrade the functions of recording and reporting system following the result of software function testing and the piloting in selected prisons
- Develop the technical guideline/manual for the utilization of the HIV-AIDS and TB functions
- Conduct capacity building for prison data administrators
- Submit assessment and training reports to UNODC
- Perform any other tasks deemed necessary to ensure the success of the programme.

Expected Outputs and deliverables

- a) Submission of assessment report which include proposed design of all prison health functions to include TB, HIV-AIDS, Hepatitis, Drug Dependence Treatment, Basic Health Care Services and medicines, medical waste system, meals for prison inmates, mortality/death, and referral system to hospitals or other health services out of prison.
- b) Submission of version one of the integrated functions for the recording and reporting system for HIV-AIDS and TB
- c) Submission report of function testing workshop for HIV-AIDS and TB
- d) Submission of version two of the integrated function for recording and reporting system for HIV-AIDS and TB
- e) Submission the technical guideline/manual for the utilization of the HIV-AIDS and TB function on prison health information feature
- f) Submission of version three (final software) of the integrated function of recording and reporting system for HIV-AIDS and TB

III. WORKING ARRANGEMENTS

Institutional Arrangement

The consultant will perform its work under the supervision and report directly to the National Programme Officer, UNODC Indonesia. The UNODC Country Manager will provide overall guidance and supervision

During the consultancy, the consultant is expected to coordinate closely and liaise with the Directorate of Prisoner Healthcare and Rehabilitation, and Directorate of Information, Technology and Cooperation of the Directorate General of Corrections, Ministry of Law and Human Rights. The selected consultant will be given access to the existing prison information system.

Duration of the Work

142 Working day, starting July 2020 – April 2021

	Deliverables/ Outputs (all documents submitted as deliverables are to be in English and Bahasa)	Estimated number of working days	Completion deadline	Percentage
a.	Submission of assessment report which include proposed design of all prison health functions for TB, HIV-AIDS, Hepatitis, Drug Dependence Treatment, Basic Health Care Services and medicines, medical waste system, meals for prison inmates, mortality/death, and referral system to hospitals or other health services out of prison. (Bahasa and English version)	28	September 2020	20%
b.	Submission of version one of the integrated function of recording and reporting system for HIV-AIDS and TB	50	December 2020	35%
C.	Submission report of IT integrated function for the recording and reporting system function testing workshop for HIV-AIDS and TB (Bahasa and English version)	14	January 2021	10%
d.	Submission of version two of the integrated function forrecording and reporting system for HIV-AIDS and TB	20	February 2021	14%
e.	Submission of the technical guideline/manual for the utilization of the HIV-AIDS and TB function on prison health information feature	20	March 2021	14%
f.	Submission version three (final version) of the integrated function of recording and reporting system for HIV-AIDS and TB	10	April 2021	7%

Duty Station

The contractor will be stationed in Jakarta during his/her consultancy period. No requirement to attend daily to the office, however to be available for any meeting request by UNODC.

IV. REQUIREMENTS FOR EXPERIENCE AND QUALIFICATIONS

Academic Qualifications:

• A bachelor Degree in IT/ICT

Years of experience:

• Minimum six (6) years' of experience in related area of system information and database development

- Experience in developing system information and its manual for private and public institutions
- Experience working with the Directorate General of Correction, Ministry of Law and Human Rights would be an advantage
- Experience in planning and organizing training events;

III. Competencies and special skills requirement:

- Ability to designing, coding software and web application
- Strong motivation and good team player.
- Demonstrated ability to work in harmony with person of different ethnicity and cultural background;
- Strong reporting, communication and interpersonal skills;
- Ability to work under pressure and handle multi-tasking situations; and
- Proficient in English and Bahasa languages, spoken and written.

V. EVALUATION METHOD AND CRITERIA

Cumulative analysis

When using this weighted scoring method, the award of the contract should be made to the individual consultant whose offer has been evaluated and determined as:

- a) responsive/compliant/acceptable, and
- b) Having received the highest score out of a pre-determined set of weighted technical and financial criteria specific to the solicitation.
- * Technical Criteria weight; [70%]
- * Financial Criteria weight; [30%]

Only candidates obtaining a minimum of 70 point would be considered for the Financial Evaluation

Criteria	Weight	Maximum			
		Point			
<u>Technical</u>					
Criteria A: qualification requirements as per TOR:	70%	70%			
 A bachelor Degree in IT/ICT Minimum six (6) years' of experience in related area 	20 % 20 %	20 20			
 of system information and database development Experience in developing system information and its manual for private and public institutions 	10 %	10			
Experience working with the Directorate General of Correction, Ministry of Law and Human Rights would he are adventage.	10 %	10			
 be an advantage Experience in planning and organizing training events; 	10 %	10			
Criteria B: Brief Description of Approach to Assignment.	30%	30%			
Understanding assignment specified in the TOR	15%	15			

Approved by,

Collie F. Brown

Country Manager UNODC