TERMS OF REFERENCE (ToR)

<table>
<thead>
<tr>
<th>Reference No.</th>
<th>PN/FJI/107/21</th>
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<tbody>
<tr>
<td>Consultancy Title</td>
<td>HIV/TB M&amp;E Strategy Development Consultant</td>
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<tr>
<td>Project Name:</td>
<td>Multi-country Western Pacific Integrated HIV &amp; TB Programme</td>
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<tr>
<td>Location</td>
<td>Home-based</td>
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<tr>
<td>Application deadline</td>
<td>16th December 2021</td>
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<tr>
<td>Type of Contract</td>
<td>Individual Contractor</td>
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<tr>
<td>Post Level</td>
<td>International Consultant</td>
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<tr>
<td>Languages required:</td>
<td>English</td>
</tr>
<tr>
<td>Duration of Initial Contract:</td>
<td>105 working days (Dates of assignment: 01 February to 5 August 2022)</td>
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BACKGROUND

The United Nations Development Programme (UNDP) is the UN’s global development network, advocating for change and connecting countries to knowledge, experience, and resources to help people build a better life. We are on the ground in 170 countries and territories, working with governments and people on their own solutions to global and national development challenges to help empower lives and build resilient nations.

UNDP contributes to public health and development partnerships through collaborations with the Global Fund to Fight AIDS, Tuberculosis and Malaria (the ‘Global Fund’), Roll Back Malaria, Stop TB Partnerships, and special programmes on human reproduction and infectious diseases that disproportionately affect poor populations. As part of its wider engagement with the United Nations, the Global Fund has partnered with UNDP since 2003 to ensure that grants are implemented, and services are delivered in countries facing complex challenges. The partnership focuses on three closely linked areas of work: implementation support, capacity development, and policy engagement. For implementation support UNDP serves as an interim Principal Recipient (PR) (currently in 25 countries) in a variety of settings including countries that face capacity constraints, complex emergencies, poor governance environments, political upheaval, or donor sanctions. It does so upon request by the Global Fund and/or the Country Coordinating Mechanism (CCM) and when no national entity is able to assume the role at the time. UNDP’s role as PR is an interim arrangement until national entities can assume full responsibility for implementation and the capacity of national partners (Government and CSOs) is also strengthened to ensure long-term sustainability of health outcomes.

In December 2020, UNDP was once again nominated by the PIRMCCM for the role of PR for two grants in the Western Pacific region: 1) Malaria, covering Vanuatu only; and 2) Multi-Country HIV/ TB Programme covering 11 Pacific Island Countries (PICS) namely Cook Islands, Federated States of Micronesia, Kiribati, Nauru, Niue, Palau, Republic of Marshall Islands, Samoa, Tonga, Tuvalu and Vanuatu. The current funding cycle is for 1 January 2021 – 31 December 2023.
The Project Goals are:

• To halt the spread of HIV among the population of the Western Pacific and maintain HIV incidence rates below 0.1 percent annually;
• To reduce AIDS-related mortality by strengthening HIV case finding and case management;
• To reduce the prevalence, incidence and mortality from all forms of TB in the 11 Pacific Island Countries, thereby contributing to the post-2015 global TB strategy; and
• To promote universal and equitable access to quality diagnosis and appropriate treatment of TB, MDR-TB, TB/DM and TB/HIV patients across 11 Pacific Island Countries.

The GF has requested UNDP to submit, in form and substance satisfactory to the Global Fund, the updated national plan for monitoring and evaluating Programme Activities (the “Updated National HIV/TB M&E Plan”), which shall be consistent with the HIV and TB National Strategic Plan/ Regional Strategic Plan/ National Health Strategic Plan for the 11 countries (Cook Islands, Federated States of Micronesia, Kiribati, Nauru, Niue, Palau, Republic of Marshall Islands, Samoa, Tonga, Tuvalu and Vanuatu) supported under the Multi-Country Western Pacific Integrated HIV/TB Programme. In particular, the National HIV/TB M&E Plan shall include the following items:

• Indicator definitions and measurements that includes all the indicators included in the performance Framework in addition to all the indicators used to measure progress of the National HIV/TB program.
• Routine data collection -data collection and reporting tools including reporting frequency and timelines, information and report flow and feedback mechanism.
• Program review, evaluation and surveys – describing the scheduled plans during the NSP duration to conduct program reviews, surveys or other scheduled surveillance.
• Data Quality assurance mechanisms and related supportive supervision- monitoring and supervision checklist that includes standard operating procedures for conducting supportive supervision at all levels.
• Strategies and mechanisms for introducing harmonized HMIS E-Modules for HIV and TB surveillance, individual patient management, and CBO reporting, as well as regional integration of HMIS data in order to monitor/compare results as well as analyze and use the data for regional programming and planning and use the data for regional programming and planning.
• establishing and supporting other regional clinical expert hub/groups to consider setting up and expanding a regional network of expert clinicians to diagnose and manage both drug-sensitive and drug-resistant TB.
• M&E Costed workplan and Budget showing resource contribution of the national Ministry of Health of individual countries including in-country partners;

The HIV/TB M&E Strategy Development Consultant will engage in a participatory process with relevant stakeholders to produce the deliverables noted above. He/she will report to and be guided by the Programme Manager at the Programme Management Unit (PMU) of UNDP Fiji, with close collaboration to the M&E Analyst of PMU. The Programme Analysts at PMU UNDP will provide all the coordination related support.

The consultant will also work closely with national counterparts from the Ministry of Health’s National HIV/TB Programme, National M&E officers, Civil Society Organizations (CSOs), the Policy and Planning Unit, PIRMCCM executives/ subcommittees as well as in country technical partners such as WHO, UNAIDS, DFAT etc.
DUTIES AND RESPONSIBILITIES

Key duties and responsibilities include:

- Review of relevant documentation related to the 11 PICs HIV/TB including global and regional documents, the HIV/TB grant documents, strategic plans, and other relevant documents.
- Meetings with key stakeholders on the M&E system in countries, the plan and budget
- Develop draft documentation, as per the requirements listed above, and share with relevant stakeholders for feedback
- Incorporate all relevant feedback into the documents
- Submit a full set of 11 PICs documents, as per the requirements above, to UNDP to submit to GF;
- Respond to comments/feedback received from LFA/GF to finalize the documents.
Any other tasks as assigned by the Programme Manager.

Expected Outputs and Deliverables:

- Inception work plan which outlines the proposed activities and days to complete the assignment (3 days- February 1 to February 10, 2022)
- Draft Updated National HIV/TB M&E Plan including the following items (10 working days per country- February 10 to July 22, 2022):
  - The budget (the “M&E Budget”) for the entire life of the Updated National HIV/TB M&E Plan and showing the resource contribution of the Ministry of Health, CSOs and other partners;
  - Indicators measurement as per the Performance Framework (i.e., indicator definitions and measurement methods); routine data collection (including data collection and reporting tools, and data/report flows); data management (including data storage, electronic management system, processing, and transmission); data quality assurance mechanisms; evaluation and surveys and human resource capacity building plans; and
  - A monitoring and supervision checklist that includes standard operating procedures for conducting supportive supervision at all levels, among others.
- Final documents, after incorporating feedback from stakeholders, the LFA, GF and UNDP (3 days- July 22- August 5, 2022).

<table>
<thead>
<tr>
<th>Deliverable</th>
<th>Due date</th>
<th>Percentage</th>
<th>Review and Approvals Required</th>
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<tbody>
<tr>
<td>1. A) Inception work plan which outlines the proposed activities and days to complete the assignment. Present the plan to UNDP PMU, PIRMCCM executives and all subcommittees. B) Share National HIV/ TB M&amp;E skeleton structure for review.</td>
<td>6 Feb 22</td>
<td>2.7</td>
<td>Acceptance of detailed work schedule outlining the proposed activities to days to complete the assignment</td>
</tr>
<tr>
<td>2. Country 1 Final submission of Updated National HIV/TB M&amp;E Plan which would include “M&amp;E Budget”. Indicators measurement as per the Performance Framework, monitoring and supervision checklist with SOPs</td>
<td>27 Feb 22</td>
<td>8.6</td>
<td>Acceptance of Final M&amp;E Plan, M&amp;E Budget, Performance Framework and supervision checklist with SOPs by MOH and UNDP</td>
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<tr>
<td>Country</td>
<td>Submission Date</td>
<td>Approval Date</td>
<td>Approval Details</td>
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<td>3. Country 2</td>
<td>Final submission of Updated National HIV/TB M&amp;E Plan which would include “M&amp;E Budget”. Indicators measurement as per the Performance Framework, monitoring and supervision checklist with SOPs</td>
<td>20 Mar 22</td>
<td>8.6</td>
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<td>4. Country 3</td>
<td>Final submission of Updated National HIV/TB M&amp;E Plan which would include “M&amp;E Budget”. Indicators measurement as per the Performance Framework, monitoring and supervision checklist with SOPs</td>
<td>10 Apr 22</td>
<td>8.6</td>
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<td>5. Country 4</td>
<td>Final submission of Updated National HIV/TB M&amp;E Plan which would include “M&amp;E Budget”. Indicators measurement as per the Performance Framework, monitoring and supervision checklist with SOPs</td>
<td>24 Apr 22</td>
<td>8.6</td>
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<td>6. Country 5</td>
<td>Final submission of Updated National HIV/TB M&amp;E Plan which would include “M&amp;E Budget”. Indicators measurement as per the Performance Framework, monitoring and supervision checklist with SOPs</td>
<td>8 May 22</td>
<td>8.6</td>
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<tr>
<td>7. Country 6</td>
<td>Final submission of Updated National HIV/TB M&amp;E Plan which would include “M&amp;E Budget”. Indicators measurement as per the Performance Framework, monitoring and supervision checklist with SOPs</td>
<td>22 May 22</td>
<td>8.6</td>
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<td>8. Country 7</td>
<td>Final submission of Updated National HIV/TB M&amp;E Plan which would include “M&amp;E Budget”. Indicators measurement as per the Performance Framework, monitoring and supervision checklist with SOPs</td>
<td>5 Jun 22</td>
<td>8.6</td>
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<td>9. Country 8</td>
<td>Final submission of Updated National HIV/TB M&amp;E Plan which would include “M&amp;E Budget”. Indicators measurement as per the Performance Framework, monitoring and supervision checklist with SOPs</td>
<td>19 Jun 22</td>
<td>8.6</td>
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<tr>
<td>10. Country 9</td>
<td>Final submission of Updated National HIV/TB M&amp;E Plan which would include “M&amp;E Budget”. Indicators measurement as per the Performance Framework, monitoring and supervision checklist with SOPs</td>
<td>3 Jul 22</td>
<td>8.6</td>
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<tr>
<td>11. Country 10</td>
<td></td>
<td>17 Jul 22</td>
<td>8.6</td>
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Final submission of Updated National HIV/TB M&E Plan which would include “M&E Budget”. Indicators measurement as per the Performance Framework, monitoring and supervision checklist with SOPs.

| Country 11 | Final submission of Updated National HIV/TB M&E Plan which would include “M&E Budget”. Indicators measurement as per the Performance Framework, monitoring and supervision checklist with SOPs | 31 Jul 22 | 8.6 | Acceptance of Final M&E Plan, M&E Budget, Performance Framework and supervision checklist with SOPs by MOH and UNDP |
| 13. | Final documents, after incorporating feedback from stakeholders, the LFA, GF and UNDP. | 5 Aug 22 | 2.7 | Acceptance of updated Final 11 PICs TB/ HIV M&E Plan by MOH and UNDP |

Institutional Arrangement
- The consultant will report directly to the Programme Manager of the Multi-County Western Pacific grant.
- The Consultant will work closely with UNDP PMU team, Ministries of Health in 11 PICs, National HIV/TB Programme, National M&E officers, CSOs, technical working groups, Partners and stakeholders of programme, WHO TB Technical Officer, UNAIDS etc.
- The consultant is required to provide for his/her own computer.
- Since this is a home based assigned no travel will be involved.

Duration of the Work
- The assignment duration is for 7 months and services will be required for 105 working days only!
- The start date is upon signing of contract and consultant’s availability but no later than 1 February 2022.
- The end date of the contract is 5 August 2022.

Duty Station
The consultancy is home based. The support to be provided through email communications, skype and other online means.

COMPETENCIES

Organizational Competencies:
- Demonstrates integrity by modeling the UN’s values and ethical standards
- Promotes the vision, mission, and strategic goals of UNDP
- Displays cultural, gender, religion, race, nationality and age sensitivity and adaptability

Functional:
- Strong analytical, negotiation and communication skills, including ability to produce high quality practical advisory reports and knowledge products

Project and Resource Management:
- Strong organizational skills
• Ability to work independently, produce high quality outputs
• Sound judgment, strategic thinking and the ability to manage competing priorities

Partnership building and teamwork:
• Excellent diplomacy, negotiating and networking skills
• Demonstrated ability to work in a multi-cultural environment

Communications and Advocacy:
• Strong ability to write clearly and convincingly, adapting style and content to different audiences and speak clearly and convincingly
• Strong presentation skills in meetings with the ability to adapt for different audiences
• Strong analytical, research and writing skills with demonstrated ability to think strategically

REQUIRED SKILLS AND EXPERIENCE

Educational Qualifications:
• Advanced university degree or equivalent in Monitoring & Evaluation, Public Health, social sciences or any other relevant subject.

Experience
• A minimum of 5 years of proven experience in planning, designing and implementing M&E systems
• Proven experience in the development and implementation of strategic M&E frameworks in the context of development projects
• Substantial experience in project management and evaluation
• Familiarity with UN planning and M&E procedures is an important asset will be added value
• Experience in GF grant management or projects will be an added value
• Work experience in Western Pacific highly desirable

Language requirements
• Fluency written and spoken English language is required.

EVALUATION

Evaluation method and criteria
Individual consultants will be evaluated based on the following methodology:

Cumulative analysis
The award of the contract shall 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 set of weighted technical criteria (70%), and financial criteria (30%). Financial score shall be computed as a ratio of the proposal being evaluated and the lowest priced proposal received by UNDP for the assignment.

Only candidates obtaining a minimum of 49 points (70% of the total technical points) would be considered for the Financial Evaluation.

Technical criteria for evaluation (maximum 70 points)
• Criteria 1: Minimum Master’s degree in medicine, Public or any relevant the fields of studies preferred – 15 points
• Criteria 2: Technical expertise on required experience and knowledge for assignment – 40 points
• Criteria 3: Understanding of Pacific context will be added advantage – 15 points

Interviews maybe conducted for the technically qualified consultants as part of the validation process.

Only candidates obtaining a minimum of 49 points (70% of the total technical points) would be considered for the Financial Evaluation.

Price proposal
Consultant must send a financial proposal based on Lump Sum Amount. The total amount quoted shall be all-inclusive and include all costs components required to perform the deliverables identified in the TOR, including professional fee, travel costs, living allowance (if any work is to be done outside the IC’s duty station) and any other applicable cost to be incurred by the IC in completing the assignment. The contract price will be a fixed output-based price regardless of extension of the herein specified duration.

In the event of unforeseeable travel not anticipated in this TOR, payment of travel costs including tickets, lodging and terminal expenses should be agreed upon, between the respective business unit and the Individual Consultant, prior to travel and will be reimbursed.

Schedule of payments
Payment shall be provided upon satisfactory completion of the deliverables outlined in the Expected deliverables and timeline section and upon submission and acceptance.

• Upon completion of deliverable 1-5 – 30% (upon acceptance of deliverables)
• Upon completion of deliverable 6-8– 30% (upon acceptance of deliverables)
• Upon completion of deliverable 10-13– 40% (upon acceptance of deliverables)

Payment request submitted by the consultant must be certified by the UNDP Programme Manager and UNDP Programme Analyst and accompanied by payment invoice.

• Payment is to be made within 30 days from receipt of the invoice/Certificate of Payment.

DOCUMENT SUBMISSION

Documentation required
Interested individual consultants must submit the following documents/information to demonstrate their qualifications.

• Current curriculum vitae, indicating all past experience from similar projects, as well as the contact details (email and telephone number) of the Candidate and at least three (3) professional references.
• Technical proposal: including a) a brief description of why the individual considers him/herself as the most suitable for the assignment; and b) a methodology, on how they will approach and complete the assignment.
• Letter of Confirmation of Interest and Availability and Financial Proposal using the template provided in Annex II. Financial Proposal to be submitted in United State Dollars (USD) Financial Proposal that indicates the all-inclusive fixed total contract price, supported by a breakdown of costs, as per template provided. If an Offeror is employed by an organization/company/institution, and he/she expects his/her employer to charge a management fee in the process of releasing him/her to UNDP under Reimbursable Loan Agreement (RLA), the Offeror must stipulate that arrangement at this
point, and ensure that all such costs are duly incorporated in the financial proposal submitted to UNDP.

**Note:** Successful individual will be required to provide proof of medical insurance coverage before commencement of contract for the duration of the assignment.

Incomplete and joint proposals may not be considered. Consultants with whom there is further interest will be contacted. The successful consultant shall opt to sign an Individual Contract or a Reimbursable Loan Agreement (RLA) through its company/employer with UNDP.

All required templates are available on the UNDP Procurement website: [www.pacific.undp.org](http://www.pacific.undp.org)

**Annexes**
- Annex I - Individual IC General Terms and Conditions
- Annex II – Offeror’s Letter to UNDP Confirming Interest and Availability for the Individual IC, including Financial Proposal Template

**Proposal Submission**
- All applications must be clearly marked with the title of the consultancy (**HIV/TB M&E Strategy Development Consultant**) with reference (PN/FJI/107/21) and by 11.59pm, 16th December 2021 (Fiji Time) online via UN Jobs website [https://jobs.undp.org/](https://jobs.undp.org/) or etenderbox.pacific@undp.org
- For further information concerning this Terms of Reference, please contact UNDP Pacific Office by email: imran.khan@undp.org, cc procurement.fj@undp.org

**Women applicants are encouraged to apply**