

TERMS OF REFERENCE (TOR) FOR SECOND PHASE CONSULTANCY FOR HEALTH SYSTEM ASSESSMENT TO STRENGTHEN ROUTINE VITAMIN A SUPPLEMENTATION FOR CHILDREN AGED 6 TO 59 MONTHS IN MAINLAND TANZANIA

1. Introduction and Background

Request for support: In January 2019, the Ministry of Health Community Development Gender Elderly and Children (MOHCDGEC) requested for support from Nutrition International (NI) to assess health system to strengthen routine Vitamin A Supplementation (VAS) for children aged 6 to 59 months. The request aimed to strengthen VAS through routine primary health care services and strategically transitioning to routine approach from campaign, in mainland Tanzania. Specifically, “to conduct a thorough readiness assessment of the health system to strengthen routine VAS and to develop comprehensive national transition plan”.

With support from NI, and the hired international consultant, the MOHCDGEC conducted a national level information search from key Child Health and Nutrition Month (CHNM) players and phased the exercise into three stages. The first phase, in February to March 2019, established a national steering group which led and guided attainment of common vision of the assignment among national stakeholders.

The steering group includes members from President’s office Regional Administration and Local Government Authority (PORALG), Prime Minister’s Office (PMO), MOHCDGEC, Ministry of Education, Science, Technology and Vocational Training (MoESTVT), Tanzania Food and Nutrition Centre (TFNC), Medical Store Department (MSD), Nutrition International and UNICEF Tanzania. The group were provided with practical recommendations on how to efficiently move toward the integration of VAS into routine PHC system.

For the second to third phase, the Ministry of Health is looking for a local consultant to team up with the international consultant under the guidance of the steering group, to conduct sub-national health system readiness assessment and develop national VAS transition plans for the Government of Tanzania to efficiently shift to routine services.

The assignment will involve data collection from selected regions, councils, facilities and communities, analysis, report writing, endorsement of transition plans and national level dissemination.

2. Overall Objective

The overall objective of this consultancy is to assess the readiness of the Tanzania mainland health system to deliver VAS via routine health system delivery points and develop national plans for the Government of Tanzania for efficient transition.

3. Geographic Coverage

The assessment will cover for mainland Tanzania including; National, Regional, District Councils, facilities and communities.

4. Tasks and responsibilities of the consultant

The consultant will actively engage the steering group from mainland Tanzania to conduct health system assessment and develop national transition plans for Mainland Tanzania.

5. Specific tasks and responsibilities will involve: -

1. Facilitate participatory development of appropriate methodologies and tools for data collection, analysis for assessing the extent to which the health system in Tanzania mainland can efficiently deliver VAS to children 6-59 months through the routine PHC delivery systems.
2. Provide guidance and oversee the collection and analysis of data using agreed methodologies and developed tools.
3. Use information drawn from data analysis and prepare report and transition plans of which will clearly indicate: -
 - (a) Framing/naming of the initiative as either focusing on routinizing of VAS alone i.e. “integrating and strengthening routine VAS services for child survival” or routinizing of VAS along with deworming and other health and nutrition interventions i.e. “Integrating and strengthening routine child survival health and nutrition services”
 - (b) All possible and practical routine delivery platforms considered to be priority option(s) especially for children at the age of 6 month and above 18 months.
 - (c) How to improve perception of health system staff at all levels from national to facilities/communities and social influencers for effective consideration and positioning of VAS as key priority child survival intervention and not a measure to reduce Vitamin A Deficiencies.
 - (d) Criteria for selecting Regions/Councils/facilities/communities that fit for efficient transitioning of VAS/child health and nutrition services from campaign to routine.
 - (e) All possible and practical approaches for low cost-effective social mobilization at community level that will motivate/incentivize caregivers to regularly bring children for care especially those at age 6 month and older than 18 months; and/or reward community volunteers/other influencers to meet set caregiver mobilization targets.
 - (f) In procedural on how Vitamin A Capsule can be considered as a tracer medicine and indicated in the national list of tracer medicine; and how to integrate and strengthen forecasting, procurement, supply and distribution management of VAS/survival health and nutrition commodities into existing Electronic Management Information System (ELMIS). Note: ELMIS - is a system used by health facilities, councils and other health system organizations to forecast, order and track supply of essential drugs and other commodities.
 - (g) Establishment of shifting of shares for procurement and/or shipping cost from donor support (Nutrition International and Unicef) to the Government of Tanzania.
 - (h) Detail on how routine VAS should be recorded and uploaded regularly by health workers into the Multisectoral Nutrition Information System (MNIS) or the Health Management Information System (HMIS) through the District Health Information System (DHIS-2) at the lowest feasible administrative level i.e. health facilities; and to review and revise vitamin A supplementation indicators reported at all levels in mainland Tanzania.
 - (i) How to establish correct denominators or children age appropriate targets based on facilities or communities’ local birth records or local knowledge of individual households
 - (j) What are the key risks factors to poor performance of the delivery of VAS through the routine PHC delivery system in Mainland Tanzania?
4. Facilitate national level stakeholders’ meetings for the validation of the health system readiness report and national transition plans.
5. Finally, facilitate final validation meeting of the report and transition plans by the steering group and its endorsement by the Ministry of Health mainland.

6. Management and accountability

The local and international consultants will work under technical guidance of NI & MoHCDGEC with effective involvement/engagement of the steering group and the regional and council health management teams.

7. Expected output

This assignment is expected to be completed in 30 working days and come up with the following outputs:

- Approved, detailed health system readiness assessment report with practical recommendations on integration and strengthening of VAS/child survival health and nutrition services into primary health care services.
- Endorsed, national comprehensive plan document for implementing routine VAS/child survival health and nutrition services in Tanzania mainland.
- A reviewed/improved Health Management Information System(s) for effective and timely routine data collection and reporting.

Note: All reports and materials should be in English.

8. Deliverables and consultancy timeline

No	Activities	Sub-activities	Timeline
1.	Develop appropriate methodology and tools for data collection, actual data collection, analysis and report writing	Develop, pretesting and validation of data collection tools. Data collection including extensive discussions with key stakeholders at sub-national, facilities and communities on routine VAS Data analysis, reporting writing	10 days
2.	Develop health systems readiness report and national transition plan indicating stepwise implementation of integrated and/or strengthened VAS/child survival health and nutrition into primary health care services.	Based on findings of the health system assessment develop an assessment report with practical recommendations Based on recommendations from health system readiness assessment develop a zero draft national transition plans to implement routine VAS Convene a one-day stakeholders' meeting(s) to validate a health system readiness assessment report and national transition plan National VAS Plan and health system assessment report finalization; endorsement; and dissemination of the plan	10 days
3.	Review existing health information system(s) and recommend for effective and regular ways to document and report on routine VAS.	Review VAS related indicators in the District Health Management Information System II i.e. MTUHA/DHMIS II and the MNIS Convene a one-day VAS stakeholders' meeting to share proposed improvement of indicators and suggested effective and timely way of data collection and reporting	10 days
	Total Consultancy working days		30 days

9. Consultancy Profile

For the purpose of this assignment, the consultant/consultancy firm should have the following qualifications and skills: -

- At least 10 years' experience in Health System Strengthening or supply chain management and evaluation in Tanzania preferably.
- Proven experience in health and nutrition program design, monitoring and evaluation.
- Experience in database management/programming.
- Experience in working with local government authorities and communities.
- Excellent communication and writing skills.

10. Requirements

a) Technical Proposal

- Interested consultant/consultancy firm should submit the following documents to the
- Proposal not exceeding 5 pages, describing the consultant's understanding of the task; proposed methodology; roles and responsibilities of the key stakeholders and detailed work plan
- Detailed Curriculum vitae.
- Testimonials, including three reports/documents from previous related work

b) Financial Proposal:

- Budget proposal for the tasks and responsibilities mentioned above (Including daily fee rate and expenses) and any advance required. Please note that NI does not advance fees.

11. Application Process

Complete Proposals should be submitted by email to bidsTANZANIA@NUTRITIONINTL.ORG so as to be received on or before **04th August, 2020 at 5.00PM**. Only complete applications will be reviewed. Late submissions will not be accepted.

12. Clarification

Clarification related to this Procurement should not be received not later than 1300hrs on 02nd August 2020 and can be addressed to: procurementTANZANIA@NUTRITIONINTL.ORG