

TERMS OF REFERENCE

Assignment n°23SANIC859

I. General Information

Assignment title	Support RBC in assessing the emergency and critical care services for child care (neonatology and pediatrics)			
Component(s)	HSS			
Thematic area(s)	Prevention and Care Continuum			
Recipient(s)	Rwanda Biomedical Centre			
Country of intervention	Rwanda			
Estimated total number of working days	140 days spread over 8 to 10 months			
Estimated date for completion of deliverables	Mid-April 2024			
Expertise France contact	Full name	Contact details		
	Marie VICART	Marie.vicart@expertisefrance.fr		

II. Assignment rationale

Rwanda was one of the few African countries who achieved MDG 4, mostly by improving access to essential health services. Despite this enormous achievement, the under-5 mortality rate is still 45 deaths per 1,000 live births whereby HIV/AIDS and malaria are among the main causes of death for children under 5. Low quality of care has now become the main bottleneck in driving this number further down. This is attributable to a shortage of (qualified) staff as well as lack of essential equipment but also to ineffective collaboration across the levels of care.

This project focuses on strengthening the health system in the Eastern and Northern provinces which have an under 5 mortality of 56/1000 and 57/1000 respectively. The Northern region is a mountainous area with limited infrastructure and a population of 5 million. In this area it is difficult for patients to access health services, often coming in advanced stages of disease leading to high mortality as well as catastrophic health expenditure.

The Rwandan Ministry of Health, together with its implementation arm RBC, set out a strategy for child health in its Maternal Newborn and child Health Strategic Plan (2018–2024). This strategic plan emphasizes the need to accelerate from siloed-interventions to more integrated, people-centred models of prevention, treatment and care, so that individual holistic health needs are met both for HIV, TB and malaria diseases, and pandemic preparedness. For this, Health System Strengthening (HSS) is a major focus point, offering methodologies to improve care on more holistic levels.

Prior to designing an intervention to strengthen the emergency and critical care services in the Northern and Eastern provinces, RBC wishes to assess the current facilitators and barriers to providing





timely and adequate child care (neonatology and paediatrics) in the right location in emergency and critical care services from primary care to secondary health facilities.

The findings will inform the design of a potential intervention to address gaps in paediatric emergency and critical care services in the Eastern and Northern provinces, looking both at existing and new technologies and implementation approaches to strengthen the capabilities and capacity of the emergency and critical care system.

III. Objective and expected outcomes

1) Overall objective

Support RBC in assessing current facilitators and barriers of adequate and timely emergency and critical care services for child care (neonatology and paediatrics) in Eastern and Northern provinces of Rwanda on district and provincial levels.

2) Expected outcomes

- A description of child mortality (causes, numbers, locations) is provided, in relation with critical care services in Eastern and Northern provinces
- Critical and emergency care services are analysed in terms of technical readiness, quality and capacity and adequacy ;
- Recommendations of efficiency gains to strengthen critical and emergency systems for child care are elaborated including spillage reduction, various resource optimizations, capacity building training, technology etc.

Gender mainstreaming

In line with France's International Strategy for Gender Equality 2018-2022, L'Initiative asks consultants to integrate a gender approach into their assignment. A webinar (in French) is available to help identify assignment-specific challenges and develop gender-mainstreaming objectives (https://www.initiative5pour100.fr/encourager-prise-en-compte-du-genre).

These issues cover mainly:

Assignment type: governance support, diagnostic and organizational support, administrative and financial support, program support, data collection and analysis, access to quality drugs.

Selected methodology: desk review, interviews, participatory workshop, conference and seminar, training, report or guide.

During the assignment scoping and methodology development phase, the consultants and recipient will define at **least two gender-related objectives** for the assignment and will undertake to implement what is required to meet them and to self-assess when writing the final assignment report.

IV. Assignment description

The assessment will seek to explore the following points:

- Which emergency and critical care services are available at a district level for paediatric and neonatal patients in primary and secondary care





- How are referral chains functioning within the health system
- How is care organised within facilities, what facilitators and barriers exist to providing timely and adequate care (human resources, equipment, patient related barriers, etc.)
- What is the availability and quality of existing data on referrals, admissions, bed occupancy rates and mortality, resource utilisation and other key elements relating to emergency and critical care
- Which (digital) systems are currently used for providing emergency and critical care services in paediatrics and neonatal care at primary care and secondary care levels
- What are the facilitators and barriers from regulatory, human resource, funding and other perspectives relating to sustainable implementation and scale-up of the intervention(s) for the next phase.

For this purposed, the following key steps must be the basis of the proposed work schedule:

1) Key milestones and activities of assignment

As part of the assignment, the consultant will carry out the following activities:

- Scoping meeting: present the proposed methodology to RBC and partners, adjust the proposed assessment roadmap, present the list of documentation needed, and share preliminary lists of locations, selected healthcare facilities and key informants to be involved in the assessment. The meeting will seek to obtain validation from the participants on the proposed methodology, list of facilities to be assessed and key informants to be interviewed;
 - A combination of qualitative and quantitative data collection methods will be employed,
 - Various perspectives will be integrated in the assessment, including healthcare providers, MOH, RBC and partners as well as service users
 - Existing digital infrastructure and capacities (HR digital-literacy, equipment and digital solutions, actual usage of these solutions etc.) will be particularly looked into;
- **2. Assessment preparation**: based on the scoping meeting discussions, adjust the assessment methodology and organize the assessment logistics together with RBC: prepare the interview and FGD lists of questions; data collection grids, data entry mask etc.
- **3.** Conduct the assessment together with RBC, following the detailed planning; Regular meetings will be held to share progress on the field work in order to share potential difficulties and identify solutions;
- 4. Data analysis followed by discussion with partners: the assessment findings will be analysed by the expert, then discussed with local health facility management teams and health authorities in order to inform recommendations and localized action plans per hospital paired with its referral primary care facilities;
- **5. Presentation of total action plan, recommendations and assessment findings** to MoH/RBC and partners on steps forward: a workshop will close this assessment and dissemination material will be made available to further share the assessment conclusions.

<u>Capacity building of assignment recipient:</u> with a view to sustaining the assignment's results and recipients' ownership of the deliverables, the consultant should pay particular attention to capacity





building throughout the assignment. Joint training and deliverables development with gradual recipient empowerment are encouraged. The consultant must propose a methodology in their technical proposal to be discussed with and approved by Expertise France and the assignment recipient.

2) Expected deliverables

- Scoping meeting minutes
- Other technical working group minutes;
- Assessment methodology and data collection tools
- Assessment report: complete report + findings presentation (Powerpoint findings presentation + 1-pager summary
- Localized action plans for hospital-primary care facilities
- Total action plan with recommendations to MoH / RBC for strengthening the emergency and critical care services in Eastern and Northern provinces
- Dissemination supports presenting the assessment findings as well as the proposed recommendations
- A report (maximum of 15 pages using the template provided) must be emailed to Expertise France after each field visit or key milestone within 10 days. This report, written in English, will be distributed to all partners involved in the assignment, following approval by Expertise France.
- -

3) Coordination and accountability

3.1. Coordination provided by Expertise France

In the context of this assignment, Expertise France will ensure coordination between the various partners involved in designing, implementing and/or monitoring the assignment and organizes regular follow-up sessions with the consultant and partners throughout the assignment as a minimum;

In order to facilitate follow-up by Expertise France, the contact person will be copied into all important discussions between the consultant, the recipient and partners involved in the assignment.

The role of Expertise France may change depending on the assignment's progress.

3.2. Coordination with technical and financial partners and the France team

RBC's Research, Innovation and Data Science Division of RBC will pinpoint partners to for a technical working group in charge of monitoring and validating the assessment key stages. Liaison with Technical working group child health, Rwanda Paediatric Association, and other relevant stakeholders will be facilitated by RBC.

The expert will report to the Cooperation and Cultural Action Service (*Service de Coopération et d'Action Culturelle* - SCAC) at the French Embassy at the start and end of the assignment for a meeting with the SCAC (the Regional Cooperation Advisor for Health/the Cooperation Representative - COCAC) and the focal point of the French Development Agency (AFD) office.

3.3. Consultant accountability





The expert will report on assignment progress and challenges directly and regularly to the Expertise France contact person.

Assignment deliverables are produced for the benefit of the assignment recipient. The final version of the deliverables is submitted to Expertise France for final validation with the assignment recipient.

V. Location, duration and implementation methods

- 1) Estimated start date: mi-august 2023
- 2) Assignment duration: 8 to 10 months

<u>Assignment with estimated number of days in the ToR</u>: 'The actual duration of the assignment (working days) is estimated at 140 days. The recipient and Expertise France, upon receipt of the consultant's technical proposal, will validate the work schedule'.

The assignment will end with an assignment debriefing session with the recipient following the validation of the deliverables by the latter.

3) Estimated deliverables due date: mid-April 2024

4) Organizing logistics and security guidance from Expertise France

The assignment recipient, RBC will provide the consultant with an office space/meeting room with an Internet connection, photocopying and printing equipment.

The consultant will be responsible for other logistical aspects of their assignment (hotel reservation, local transports, etc.) unless otherwise specified by Expertise France.

The budget required for the dissemination workshop will be included in the consultant offer.

Consultants are required to adhere to Expertise France's security guidance. In particular, for each field visit, the following is requested.

VI. Expertise and profile requirements

1) Number of consultants: 1. Expertise France encourages applications from women.

2) Consultant profile

Position: Public health expert, specialized in critical and emergency services for child care

- A. <u>Qualifications and skills:</u>
 - University degree (graduate level) in Medicine
 - Specialization/experience in the fields of health service management (district and hospital level), Health Systems Strengthening (HSS)





- High level qualities/skills in:
 - Communications
 - Teamwork and interpersonal skills
 - Knowledge transfer
 - Supervision
 - Analysis and problem solving
 - Decision-making and initiative
- Excellent command of English (written/oral), French and Kinyarwanda
- Desired gender skills: Gender training
- B. <u>General professional experience</u>
 - At least 10 years professional experience in health services management in Rwanda at hospital level (and district level if possible);
 - Experience of gender mainstreaming interventions in previous assignments and/or projects
- C. Specific professional experience
 - Strong knowledge of Rwanda health system organization
 - Experience in initiatives aimed at improving healthcare outcomes and health system strengthening
 - Experience in similar assignment : conducting assessment of facilitators and barriers to quality patient-centered health services
 - Affinity in working with the RBC, MoH, local authorities, as well as international NGOS and donors
 - Understanding of and interest in innovation and technology solutions related to health care

VII. Monitoring and Evaluation

In the both the recipient's and Expertise France's interest, the indicators will support evaluation during and after the assignment, and ultimately measure how far assignment-specific objectives have been achieved.

<u>Gender-related objectives indicators:</u> the consultant will report on achieving the objectives in the final assignment report.

Performance indicators

Assignment objectives and outcomes	Indicators	Lead	Means of verification
Overall objective of the assignment:	On the basis of the	Consultant	Dissemination workshop
Support RBC in assessing current	assessment findings,		report
facilitators and barriers of adequate and	the related		
timely emergency and critical care	recommendations		
services for child care (neonatology and	are validated by RBC		
paediatrics) in Eastern and Northern	and partners		
provinces of Rwanda on district and			
provincial levels			
Expected outcome 1	The assessment	Consultant	Technical working group
A description of child mortality (causes,	findings are	Consultant	minutes
numbers, locations) is provided, in	presented and		Assessment report





relation with critical care services in Eastern and Northern provinces	shared to RBC and partners		
Expected outcome 2 Critical and emergency care services are analysed in terms of technical readiness, quality capacity and adequacy ;			
Expected outcome 3 : Recommendations of efficiency gains to strengthen critical and emergency systems for child care are elaborated - including spillage reduction, various resource optimizations, capacity building training, technology etc.	Recommendations and localised action plans are co- constructed with local health facility management teams	Consultant	Local action plans

VIII. Technical and financial proposals

The interested consultant is invited to send a full proposal comprising:

- 1. Technical proposal (maximum 15 pages) including:
 - A CV for the consultant;
 - A description of the consultant's background and experience in relation to this terms of reference;
 - Their understanding of the current situation in relation to the issues outlined in the assignment;
 - A detailed presentation of the proposed methodology based on the objectives and activities described in this terms of reference. Particular attention must be given to recipient capacity building;
 - A detailed work schedule (activities, dates, location, number of days) based on key milestones specified in these terms of reference.
- 2. A financial proposal in Euros.
 - Other services : an estimated amount of 2500EUR could be proposed per workshop

