

Terms of Reference (TOR)

A. Project: Promotion of durable solutions in Darfur, South Kordofan and Blue Nile

Item No.	Item Description
Lot 1	Increasing access to quality health and nutrition in Bambodi, Wad El Mahi locality, Blue Nile State

C. Scope of Services, Expected Outputs and Target Completion

Objective 1: To improve health and nutrition services status among vulnerable community in Blue Nile – Bambodi.

Expected output: Vulnerable communities in Bambodi have access to quality health and nutrition services.

Target beneficiaries: Local communities -especially the project catchment areas including: Bambodi.

Scope of services

1. Community mobilization including coordination meeting with SMOH.

- Work closely with **IOM, State Ministry of Health (SMOH) in Blue Nile (Bambodi) and the Sector leads in health and nutrition as well as the local key informants** and the partner will mobilize the communities to ensure that planned activities and objectives are introduced to the target community.
- Accountability for target beneficiaries will be ensured during all phase of interventions. The IP will be requested in closely working with IOM field focal point and community to promote community initiative and leadership in the implementation of community based services (e.g. health and nutrition awareness campaigns, SRH “ANC, PNC, FP, Delivery” , the establishment of mother to mother support groups, etc.).

2. Support sustainable primary health and nutrition services through on-job training.

There is a need to ensure access to sustainable health and nutrition services through capacity building for the clinic staff, community health workers (CHWs) including nutrition workers and volunteers. Hence under this LOT, the following refresher training/on-job trainings will be carried out.

2-1. On the job training for clinic staff through on-job training:

- a) Organize and conduct **on-job training** for the target clinic staff (a total of **5 staff**) to ensure that a quality of MBSP are delivered to the communities. This will include:

- Support the facilitators/technical advisors assigned from MoH where conducting on-job training (2-3 days) for the clinic staff on a minimum basic primary health service package (MBSP). This includes: logistic preparation, transportation to the training site (Bambodi area), preparation of training materials such as stationaries for clinic recording, etc.
- Provision of at least hygiene and sanitation equipment.
- Provision of at least 4.5 months salary for the clinic staff.

IMPORTANT! The selected implanting partner will be requested to provide weekly based reports to the relevant local authorities or FMOH/MOH.

2-2. Refresher training/on-the job training for at least two community midwives (CMs):

A refresher training for the existing community midwives (CMs)-at least two will be conducted and the IP will be requested to support in organizing the refresher training as follows:

- a) Support the facilitators/technical advisors assigned from MoH where conducting the refresher training (2-3 days) for the identified CWs. e.g. logistic preparation including: transportation cost where the facilitators/IOM are organizing the training; essential delivery kits for Medical Staff and CWs, etc.
- b) The refresher training topic will be determined based on technical advices from SMOH and it may include but not limit to: supporting maternal and child health such as promotion of immunization, referral support, antenatal and postnatal care (ANC based on minimum 4 visits, PNC 1 visit), family planning, etc.
- c) On-job training for the CMs will be delivered through:
 - Identify catchment areas of each CMs to promote the continuity of their services.
 - Support the trained CMs for their continuous services such as delivery services, antenatal and postnatal services through home-visits.
 - Support the trained CMs to participate community-let health, nutrition and protection campaigns.
 - Monitor each CM's services and report to IOM.

2-3. On-job training for at least 4 CHWs (including volunteers, health promoters, nutrition workers to facilitate community based health & nutrition services.

- Support the selection of CHWs (this includes: volunteers, health promoters, nutrition workers) and identify catchment areas of each CHWs to promote the continuity of their services.
- Support salary/insensitive for at least 4.5 months.
- Support the facilitators/technical advisors assigned from MoH where conducting on-the job training. e.g. logistic preparation including transportation cost where the facilitators/IOM are organizing the training, provision of stationaries, provision of essential services materials as needed (e.g. MUAC screening kit, Information Communication-IC materials)

- On-job training (see a), b)) will prioritize community-based malnutrition management such as MUAC Screening technique, malnutrition follow-up, health and nutrition promotion services through home-visit. It also covering other topics such as: an importance of basic maternal care: prenatal care and postnatal care; STI management; good feminine hygiene practices. On-job training will also focus on enhancing CHWs' skills on community mobilization and linkage with clinic, etc.
- A short training session (half day) will be conducted by the facilitators/advisors assigned by SMOH before actual practices.

As part of on-the job training, the following services will be carried out by the trained CHWs:

a) Organize and conduct at least one MUAC screening through home-visit or campaign:

- Support on strengthening follow-up services for cases of children and PLWs suffering from malnutrition in coordination with the sector leads, SMOH. Follow-up screening will be conducted by the CHWs and volunteers.
- If the partners **organize and conduct community-let health and nutrition promotion campaign, the following topic will be addressed:**
STI management; good feminine hygiene practices; promotion of a regular prenatal and postnatal check-up, delivery assisted by skilled midwives, infant vaccination and promotion of better infant and young child feeding practices (IYCF), etc. The cover topic will be determined having the technical advices from FMOH/SMOH as well as the key informants in field.

Clinic Staff	Medical Assistant: 1	Nurse:1	Midwife:2	Nutrition Assistant: 1
Community Workers	Community midwives: 2	CHWs: 4		

D. Deliveries:

Lot 1. Increasing access to quality health in Blue Nile (Bombodi)		
October 2020	November 2020- Mid of January 2021	January to February 2021
Community mobilization Material mobilization	Conduct one-the job training for clinic staff/CWs/CHWs	<ul style="list-style-type: none"> • M&E • Follow-up training as needed
M&E NOTE: The selected implementing partner will be requested to conduct a joint monitoring and evaluation mission with IOM after the completion of project. The timing of M & E mission will be discussed. Key challenges, good practices and lesson learns should be captured through the mission.		
		Submission of final report: (7 Feb. 2021)

E. Institutional Arrangement

The selected implementing partner should compose a team of experts in area of health and nutrition. The implementing partner shall work with close cooperation with IOM sub-office of Blue Nile, as well as IOM Khartoum office. The implementing partner will be responsible for implementation of the project per this TOR, IOM Khartoum and Blue Nile offices will provide guidance to the implementing partner during this process.

The selected implanting partner will be requested to provide progress report using IOM report format (every two week). IOM will share the reporting format upon finalization of the implementation agreement.

F. Duration of the Work

The Implementing Partner shall commence the activities **as soon as signing** the agreement and fully and satisfactorily complete them including the submission of final report by **February 7, 2021**.

G. Eligible applicants:

The International Organization for Migration (IOM) is pleased to invite interested local NGOs/CSOs registered in Sudan which **have previously access to Blue Nile**. The interested agencies also have a valid proof of registration from a relevant authority (Accreditation and registration documents must be attached to the proposal).

Applying organizations must **present proof of the following requirements to be eligible:**

- Have access to target location.
- Valid proof of registration from a relevant authority: Accreditation and registration documents must be attached to the proposal.
- Demonstrated Operational presence in the target areas, with having permanent staff, office and adequate equipment for their proposed operation.
- At least 3-4 years of relevant professional work experience in health and nutrition.
- Quality of services and experience in area of health and nutrition activities: having experiences supporting communities in Blue Nile, considered an advantage.
- Financial capacity to deliver the planned interventions: Letter of credit to confirm availability of funds of minimum \$20,000 or in equivalent SDGs

NOTE: The maximum amount paid in advance should not exceed USD 5,000.

H. Criteria and required documents :

Submitted technical and financial proposals will be compared with each other and selected based on the following criteria-therefore the following component should be discussed and included in the proposals:

Criteria for technical proposal

a. **Understanding of the project concept: (20 points):**

- Provide a context analysis and gaps/needs in health and nutrition services of the project target areas and beneficiaries (10 points).
- Clearly define objective to be in lined with the implementation outputs (10 points).

b. **Adequacy and soundness of proposed activities and work plan in response to the Terms of Reference: (20 points):**

- Demonstrate impact of proposed interventions on achieving the improvement of health and nutrition services for the target communities/beneficiaries: This should be demonstrated through clear description of proposed activities, expected outputs/results (10 points).
- Provide feasible work plan within **table (see TPF-7: Activity (Work) Schedule)**, covering from **Oct 2020 to Feb 7, 2021**. The work plan should include evaluation and monitoring framework (10 points).

c. **Organizational capacity and experiences in the requested activities and locations:(40 points):**

- Demonstrated experience related to primary health and nutrition services (5 points)
- Demonstrated Operational presence in the target area, with having permanent staff, office and adequate equipment for their proposed operation (5 points)
- At least 3-4 years of relevant professional work experience in health and nutrition (10 points)
- Quality of services and experience in area of health, nutrition and protection services: Having experiences supporting communities in Blue Nile, considered an advantage (5 points).
- Financial capacity to deliver the planned interventions (10 Points).
- Having experiences supporting communities in target areas is considered an advantage (5 points).

D. **Key professional staff qualifications and competence for the assignment related to to primary health and nutrition services and community-based health and nutrition activities (20 points).**

This section should include the comprehensive curriculum vitae (CVs) of key personnel that will be assigned to support the implementation of the proposed methodology, clearly defining the roles and responsibilities. CVs should establish competence and demonstrate qualifications in areas relevant to the TOR.

- Task Manager/Team leader (5 points)

General Qualification

- Diploma/BA Degree in related fields.
- 3-5 years' relevant professional work experience in primary health, nutrition and protection services, with at least 3 years leading and coordinating similar activities.
- Fluency in English; Arabic would be considered an asset.
- Supporting staff (15 points).
 - 2-4 years' relevant professional work experience in primary health and nutrition services.
 - Fluency in English; Arabic would be considered an asset.

Criteria for financial proposal

The Financial Proposal of Service Providers/ Consulting Firms who passed the qualifying score shall be opened, the lowest Financial Proposal (F1) shall be given a financial score (Sf) of 100 points. The financial scores (Sf) of the other Financial Proposals shall be computed based on the formula :

$$Sf = 100 \times FI / F$$

Where:

Sf - is the financial score of the Financial Proposal under consideration,
FI - is the price of the lowest Financial Proposal, and
F - is the price of the Financial Proposal under consideration.

The proposals shall then be ranked according to their combined (Sc) technical (St) and financial (Sf) scores using the weights¹ (T = the weight given to the Technical Proposal = 0.80; F = the weight given to the Financial Proposal = 0.20; T + F = 1)

$$Sc = St \times T\% + Sf \times F\%$$

Required Documents that must be Submitted to Establish Qualification of Proposers

The following shall constitute the Documents to be submitted by the applicants:

- **Technical proposal referring to the following forms:**
- TPF-1: Technical Proposal Submission Form;
- TPF-2: Service Providers/ Consulting Firms Organization;
- TPF-3: Description of the Approach, Methodology and Work Plan for Performing the Assignment;
- TPF-4: Team Composition and Task Assignments
- TPF-5: Format of Curriculum Vitae (CV) for Proposed Professional Staff;
- TPF-7: Activity (Work) Schedule.

2)Financial proposal referring to the following forms:

- **Budget proposal (see Annex A);**
- FPF-1: Financial Proposal Submission Form
- FPF-2: Summary of costs.

NOTE!

- **All IOM payments are to be made by bank transfer to an account in the name of the Implementing Partner (not in the name of a third party, or an individual).**
- **The language of the budget shall be in English.**
- **USD quotation will only be accepted.**
- **Please do NOT include overhead cost in proposed budget.**

¹ May vary depending on the requirement of the Mission; normally, weight assigned to Technical is .80 and .20 for the Financial.