Terms of Reference International Consultant: Midterm Review of UNDP-GEF Project

(Updated 14 August 2018)

Type of Contract: Individual Contract Languages Required: English Duration: Estimated August 2018-February 2019 (app. 55 working days over 7 months) Location: Home based with missions Application Deadline: 29-March-2018

1. Background In accordance with UNDP and GEF Monitoring & Evaluation policies and procedures, all full and mediumsized UNDP-supported GEF-financed projects are required to initiate a midterm review (MTR) process before the submission of the second Project Implementation Report (PIR). These terms of reference (TOR) sets out the expectations for this MTR of the full-sized project titled "Reducing UPOPs and Mercury Releases from the Health Sector in Africa." The overall objective of this full-size project, implemented by UNDP Istanbul Regional Hub (IRH) in partnership with WHO and the NGO Health Care Without Harm (HCWH), is to implement best environmental practices and introduce non-incineration healthcare waste treatment technologies and mercury-free medical devices in four Sub-Saharan African countries (Ghana, Madagascar, Tanzania and Zambia) to reduce harmful releases from the health sector.

The project promotes best practices and techniques for healthcare waste management (HCWM) with the aim of minimizing or eliminating releases of Persistent Organic Pollutants (POPs) to help countries meet their obligations under the Stockholm Convention on POPs. The project also supports these countries in phasing down the use of Mercury-containing medical devices and products, while improving practices for Mercury-containing wastes with the objective to reduce releases of Mercury in support of countries' future obligations under the Minamata Convention. Finally, because the project improves healthcare waste management systems (e.g. through improved classification, segregation, storage, transport and disposal) the project also contributes to the reduction of the spread of infections both at healthcare facility level as well as in places where healthcare waste is being handled.

The project document has been designed to address the following components (regional and national): • Activity 1. Disseminate technical guidelines, establish mid-term evaluation criteria and technology allocation formula, and build teams of national experts on BAT/BEP at the regional level (Regional component - implemented by UNDP Istanbul Regional Hub and national component); • Activity 2. Health Care Waste National plans, implementation strategies, and national policies in each recipient country (National component);

REDUCING UPOPS AND MERCURY RELEASES FROM THE HEALTH SECTOR IN AFRICA MTR - FINAL REPORT

• Activity 3a. Make available in the region affordable non-incineration HCWM systems and mercury-free devices that conform to BAT and international standards (Regional component); • Activity 3b. Demonstrate HCWM systems, recycling, mercury waste management and mercury reduction at the model facilities, and establish national training infrastructures (National component); • Activity 4a. Evaluate the capacities of each recipient country to absorb additional nonincineration HCWM systems and mercury-free devices and distribute technologies based on the evaluation results and allocation formula (Regional component); • Activity 4b. Expand HCWM systems and the phase-out of mercury in the recipient countries and disseminate results in the Africa region (National component and regional component).

2. Description of Responsibilities The objectives of the MTR are to assess progress towards the achievement of the project objectives and outcomes as specified in the Project Document, and assess early signs of project success or failure with the goal of identifying the necessary changes to be made in order to set the project on-track to achieve its intended results. The MTR will also review the project's strategy, its risks to sustainability.

The MTR consultant will first conduct a document review of project documents (i.e. PIF, Project Document, ESSP, Project Inception Report, PIRs, Finalized GEF focal area Tracking Tools, Financial and Administration guidelines used by Project Team, project operational guidelines, manuals and systems, etc.) provided by the Project Team. The MTR mission will then consist of interviews and visits to UNDP Istanbul Regional Hub and project sites in Ghana, Madagascar, Tanzania and Zambia.

The MTR consultant will assess the four categories of project progress and produce a draft and final MTR report. See the Guidance for Conducting Midterm Reviews of UNDP-Supported, GEF-Financed Projects for these categories and requirements on ratings. (http://web.undp.org/evaluation/documents/guidance/GEF/midterm/Guidance_Midterm%20Review%2 0_EN_2014.pdf)

The MTR consultant will include a section in the MTR report setting out the MTR's evidence-based conclusions, in light of the findings. The MTR consultant will also rate the countries' and pilot facilities' progress based on the criteria (approved by the project board) to decide on which countries would be able to accept additional non-incineration HCWM systems and mercury-free devices during the second procurement round of the project. Additionally, the MTR consultant is expected to make recommendations to the Project Team. Recommendations should be succinct suggestions for critical intervention that are specific, measurable, achievable, and relevant. A recommendation table should be put in the report's executive summary. The MTR consultant should make no more than 15 recommendations total.

84

Duration

The Contract will enter into effect upon signature by both parties, expected for 7 (seven) months of duration. The international consultant is expected to start in August 2018.

Travel requirements

The evaluator is expected to conduct field missions, 3 days to Istanbul-Turkey and 5 days each, to AccraGhana, Antananarivo-Madagascar, Dar es Salaam-Tanzania and Lusaka-Zambia as primary locations with additional visits to projects sites as deemed necessary in each country; and 2 days mission (venue/date TBC) to present final MTR report during the regional project meeting in December 2018 or January 2019. Additional travels may be requested by the IRH over the duration of the assignment within the estimated workload (such as annual project meetings, etc.) All missions will be arranged by IRH and will be covered

REDUCING UPOPS AND MERCURY RELEASES FROM THE HEALTH SECTOR IN AFRICA MTR - FINAL REPORT

85

separately as per UNDP Rules and Regulations; therefore, related travel costs should be excluded from the financial proposal. Schedule of payments and expected outputs

The total number of days of work is estimated approximately 55 working days. The breakdown corresponds to the expected outputs and schedule of payments as follows: • 20% of payment upon submission of the MTR inception report and mission travel plan; o Inception report: Evaluator provides clarifications on timing, method and mission plan of the evaluation (approx. 4 working days; due date – 31 August 2018) • 30% of payment upon submission of evaluation mission reports; o Completion of evaluation missions and submission of mission reports: 3 days mission to Istanbul-Turkey; 5 days missions to each of Ghana, Madagascar, Tanzania and Zambia; and 5 days for mission reports (approx. 28 working days; due date –30 November 2018) • 50% of payment upon approval of the final MTR report and presentation of the MTR report; o Draft final report: Full report with annexes (approx. 18 working days; due date – 31 December 2018); o Final report: Revised report after comments/feedbacks (approx. 2 working days; due date – 31 January 2019); o Presentation: 2 days mission (venue/date TBC) to present final MTR report during the regional project meeting (approx. 3 working days; due date – 28 February 2019)

3. Competencies Corporate 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; • Treats all people fairly without favoritism; • Fulfills all obligations to gender sensitivity and zero tolerance for sexual harassment.

Functional competencies:

• Ability to analyze policy documents and make constructive policy suggestions; • Strong interpersonal skills, communication and diplomatic skills, ability to work in a team; • Capacity building skills and flexibility depending on the public; • Demonstration of commitment to the Project's mission, vision and values; • Good writing and reporting skills; • Good presentation skills; • Ability to work under pressure and stressful situations, and to meet tight deadlines.

4. Qualifications Education: • Minimum Master's degree in Environmental Engineering, Public Health or a closely related field is required;

REDUCING UPOPS AND MERCURY RELEASES FROM THE HEALTH SECTOR IN AFRICA MTR - FINAL REPORT

86

Experience: • At least 5 years' relevant experience in health-care waste management; • Previous experience with results-based management evaluations; • Previous experience in gender sensitive evaluation and analysis is an asset; • Previous work experience in non-incineration medical waste treatment technologies is an asset; • Previous work experience in mercury elimination in health sector is an asset; • Work experience with the requirements of the Stockholm Convention on POPs, Minamata Convention on Mercury and Best Available Techniques/Best Environmental Practices guidelines is an asset; • Previous experience in environmental health, infection control and prevention, and health delivery systems is an asset; • Experience working with the UN and GEF is an asset. • Relevant work experience in Africa is an asset;

Languages: • Excellent writing and oral communication skills in English; • Proficiency in written and spoken French is an asset.

Consultant Independence: • The consultant cannot have participated in the project preparation, formulation, and/or implementation (including the writing of the Project Document) and should not have a conflict of interest with project's related activities.

5. Evaluation of Applicants Individual consultants will be evaluated based on a cumulative analysis taking into consideration the combination of the applicants' qualifications and financial proposal. The award of the contract should be made to the individual consultant whose offer has been evaluated and determined as: 1) Responsive/ compliant/acceptable; 2) Having received the highest score out of a pre-determined set of weighted technical (P11 desk reviews) and financial criteria specific to the solicitation.

Only the highest ranked candidates who would be found qualified for the job will be considered for the Financial Evaluation.

Technical Criteria - 70% of total evaluation – max. 70 points:

Criteria A Educational background – max points: 5; Criteria B Relevant experience in health-care waste management (preferably with nonincineration treatment technologies and mercury elimination in health sector) – max points: 20; Criteria C Relevant experience with results-based management evaluations and gender sensitive evaluations – max points: 20; Criteria D Experience with Stockholm Convention (on POPs), Minamata Convention (on Mercury) and Best Available Techniques/Best Environmental Practices guidelines – max points: 5; Criteria E Relevant experience in environmental health, infection control and prevention, and health delivery systems – max points: 5; Criteria F Relevant experience working with the UN and GEF – max points: 5;

REDUCING UPOPS AND MERCURY RELEASES FROM THE HEALTH SECTOR IN AFRICA MTR - FINAL REPORT

87

Criteria G Relevant work experience in Africa – max points: 7; Criteria H Proficiency in French – max points: 3.

Financial Criteria - 30% of total evaluation – max. 30 points.

6. Application procedures Qualified candidates are requested to apply online via this website. The application should contain:

- Cover letter explaining why you are the most suitable candidate for the advertised position. Please paste the letter into the "Resume and Motivation" section of the electronic application. - Filled P11 form including past experience in similar projects and contact details of referees (blank form can be downloaded from

http://www.eurasia.undp.org/content/dam/rbec/docs/P11_modified_for_SCs_and_ICs.doc); please upload the P11 instead of your CV.

- Financial Proposal* - Total lump sum amount in USD for tasks specified in this announcement. Mission related costs must NOT be included in the price offer as they will be covered separately as per UNDP rules and regulations. - Incomplete applications will not be considered. Please make sure you have provided all requested materials. Please combine all your documents into one (1) single PDF document as the system only allows to upload maximum one document.

* Please note that the financial proposal is all-inclusive and shall take into account various expenses incurred by the consultant/contractor during the contract period (e.g. fee, health insurance, vaccination, personal security needs and any other relevant expenses related to the performance of services...).

Payments will be made only upon confirmation of UNDP on delivering on the contract obligations in a satisfactory manner.

Individual Consultants are responsible for ensuring they have vaccinations/inoculations when travelling to certain countries, as designated by the UN Medical Director. Consultants are also required to comply with the UN security directives set forth under dss.un.org

General Terms and conditions as well as other related documents can be found under: http://on.undp.org/t7fJs.

Qualified women and members of minorities are encouraged to apply.

Due to large number of applications we receive, we are able to inform only the successful candidates about the outcome or status of the selection process.