



UNITED NATIONS DEVELOPMENT PROGRAMME

TERMS OF REFERENCE

1. Context

The United Nations Development Programme (UNDP) is the UN's global development network, an organization advocating for change and connecting countries to knowledge, experience and resources to help people build a better life. UNDP provides policy advice and helps build institutional and human capacity that generates equitable growth. In South Sudan, UNDP is committed to promoting good governance at all levels of society and building coalitions for actions on issues critical to sustainable human development and conflict prevention.

The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) was set up as an international financing institution to increase resources to fight the three diseases namely HIV/AIDS, Tuberculosis (TB) and Malaria. The Global Fund has supported large scale prevention, treatment and care program against the three diseases. The purpose of GFATM is to attract, manage and disburse resources in public-private partnership that will make sustainable and significant contribution to the reduction of mortality and morbidity caused by the three major diseases and contributing for achievement of millennium development goal.

UNDP is a key partner to the GFATM and is the UN Agency assuming the role of Principal recipient of GFATM grants in South Sudan. As Principal Recipient for GFATM, assisting the country to meet its main goals in reducing mortality and morbidity from HIV, TB and Malaria, UNDP South Sudan Country Office is responsible for the financial and programmatic management of the GFATM grants as well as for the procurement of health and non health products. In all areas of implementation, it provides capacity development services to relevant national institutions, Sub-Recipients and implementing partners. Currently, UNDP as Principal Recipient bears full responsibility for the operational and financial management of New Funding Model for HIV/AIDS and New Funding Model for Tuberculosis.

The Round 9 HSS Phase 1 Grant began in October 2010 and ended in September 2012. Phase 2 started in October 2012 and ended in September 2015. The grant was aimed to address constraints identified by the National Health Policy: lack of appropriate equipment and supplies; lack of well-functioning disease surveillance and response systems; and poor infrastructure and support services. The grant focuses on strengthening health systems throughout the country, and contributes to the attainment of Health Sector Development goals. A strengthened health system will lead to improvement in the management of HIV/AIDS, TB malaria and other diseases.

Goal: To strengthen the health system of South Sudan to scale up HIV/AIDS, TB and Malaria services.

Objectives

- To assist the population of South Sudan with skilled health workforce
- To ensure that the population of South Sudan has access to safe and effective drugs
- To strengthen the existing Health Information System in order to provide reliable health data
- To provide HSS related services including laboratory service, safe blood banks, Antenatal Care (ANC) and Prevention of Mother to Child Transmission of HIV (PMTCT) strengthening and Community centres

Activities

- Strengthening of the National Training System already in place by rehabilitation and renovation of training institutions and supply of equipment; recruitment of qualified tutors and admission and training of student trainees
- Building, renovating and equipping state warehouses; procuring, installing, and operating pharmaceutical and hospital waste incinerators in the state Hospitals and supportive supervision to Ministry of Health (MOH) at all level.
- Strengthening of the health management information system and initiate the National Integrated Health Management Information System (HMIS) system; printing and distribution of tools and registers; training state, county and central Monitoring and Evaluation (M&E) staff in HMIS and District Health Information System (DHIS) software; conducting data quality audits, supportive supervision and annual M & E reviews.
- Renovations, rehabilitations, constructions and equipping of laboratories, antenatal/maternity clinics and community resource centers ; establishment, equipping and operating state blood banks; training health workers on various aspects of blood safety, universal precautions and infection control, and on Maternal and Neonatal Child Health (MNCH/PMTCT) to improve service delivery at the facility level and recruit and retain volunteers to promote the usage of the community resource centres

In accordance with the CO's Monitoring and Evaluation Plan and requirement by the GFATM, UNDP South Sudan GF project plans to execute an end of project evaluation for Round 9 HSS project.

UNDP South Sudan Global Fund project is looking for an individual international consultant to lead end of project evaluation for the R9 HSS project

2. Purpose of the Evaluation

The independent evaluation aims to assess the overall contribution of the Round 9 HSS Project towards strengthening the health system of South Sudan to scale up HIV/AIDS, TB and Malaria services. The evaluation will be forward looking and utilisation-focused, and will distil lessons and best practices to inform future programming. This evaluation will assess relevance, effectiveness, efficiency, impact of the project as well as sustainability of the results. The evaluation will assess the intended and unintended outcomes of the HSS Project and make recommendations to enhance operational and programmatic effectiveness of similar initiatives in comparable situations. MOH and partners who are implementing HSS interventions in South Sudan are the users of the evaluation findings. Furthermore GF will also use the findings to tailor future investment in South Sudan.

The evaluation findings will be disseminated to all stakeholders including to the Government of South Sudan, the Global Fund, UN agencies and other implementing partners.

3. Scope of the evaluation

4.1 Scope

The evaluation will cover all Round 9 HSS project target areas in all the 10 states of South Sudan over the implementation period (October 2009 to September 2015). The evaluation will cover programme conceptualisation, design, implementation and monitoring and evaluation of results. The evaluation will focus on indicators agreed with the GF as per the performance framework. The evaluation will include review of the project design, and assumptions made during programmes development process.

The end of project evaluation will assess the relevance, effectiveness and efficiency of the HSS Project as well as understand the key factors that have contributed to the achieving or not achieving of the intended results; determine the extent to which the HSS Project contributed to forging partnership at

different levels, including with government, donors, UN agencies, Sub-recipients and beneficiaries; sustainability of the HSS project for continued realisation of results generated by the project; and to draw lessons learned and best practices and make recommendations for future programming of projects of similar nature. The evaluation will also assess the synergy between the HIV, TB and malaria projects implemented in South Sudan with the support of the GFATM and suggest ways of creating more synergy.

Specific evaluation objectives are:

1. To determine the relevance of the HSS project and whether the initial assumption remained relevant the whole duration of the project;
2. To assess the effectiveness of the HSS project in terms of progress towards agreed outputs and identify the factors that influenced achievement of results;
3. To assess the efficiency of project planning and implementation (including managerial arrangements, partnerships and co-ordination mechanisms);
4. To identify best practices and lessons learned from the HSS project implementation and provide actionable recommendations for future projects; and
5. Identify the unintended outcomes of the HSS project as well as sustainability of the results.

4.2 Evaluation Questions

The following key questions will guide the end of project evaluation:

i. **Relevance**

- To what extent are the programme in line with UNDP's and GFATM mandate, national priorities and the requirements of targeted women and men?
- How did the programmes promote UNDP principles of gender equality, human rights and human development?
- To what extent was HSS grant selected method of project implementation appropriate to the development context?
- To what extent was the theory of change presented in the outcome model a relevant and appropriate vision on which to base the initiatives of the HSS grant?

ii. **Effectiveness**

- To what extent have outcomes/targets been achieved or has progress been made towards their achievement as per the agreed performance framework?
- How have corresponding outputs delivered by HSS grant affected the outcomes, and in what ways have they not been effective?
- What has been the contribution of partners and other organizations to the outcome, and how effective have HSS partnerships been in contributing to achieving the outcome?
- What were the positive or negative, intended or unintended, changes brought about by HSS grant implementation?
- To what extent did the outcomes achieved benefit women and men equally?

iii. **Efficiency**

- To what extent have the project outputs resulted from economic use of resources?
- To what extent were quality outputs delivered on time?
- Could a different approach have produced better results?
- To what extent were partnership modalities conducive to the delivery of outputs?
- How is the programme management structure operating?

iv. **Sustainability**

- What indications are there that the project outcomes will be sustained, e.g., through requisite capacities (systems, structures, staff, etc.)?
- To what extent has a sustainability strategy, including capacity development of key national stakeholders, been developed or implemented?
- To what extent are policy and regulatory frameworks in place that will support the

continuation of benefits?

- To what extent have partners committed to providing continuing support?

The above evaluation questions will be agreed upon among users and other stakeholders and accepted or refined in consultation with the evaluation team.

4. Methodology for the evaluation

The end of project evaluation will be carried out in accordance with UNEG Evaluation Norms and Standards of Evaluation and Ethical Standards as well as OECD/DAC evaluation principles and guidelines and fully compliant with the DAC Evaluation Quality Standards (206). The evaluation involves qualitative and quantitative methods from primary and secondary sources to evaluate the HSS project implementation and performance and to make recommendations for the next programme cycle.

5.1 Data Collection

The evaluation process will include the following:

- Document review and analysis;
- Interviews and discussions with key beneficiaries and key stakeholders including donors, government officials, UN agencies, SRs
- Field visits;
- Participatory observation and
- Incorporation of stakeholder feedback to the draft evaluation report.

The following documentation will be provided as reference:

- Annual Work Plans and UNDP Country Programme Action Plan (CPAP), Country Programme Document (CPD) and United Nations Development Framework (UNDAF)
- HSS performance framework, budget and workplan
- GF projects annual reports
- Grants agreement, proposals, progress reports
- Field monitoring reports
- Global Fund grant rating for HSS grant
- R 9 HSS Grant M&E plan
- Annual HMIS report and DHIS data
- Health service readiness data, state and County M&E capacity assessment data

5. Time frame

Activity	Deliverable	Time allocated
Revise evaluation design, methodology and detailed work plan	Inception report	3 days
Inception Meeting Initial briefing		
Documents review and stakeholder consultations	Draft report	15 days
Field visits to selected implementation sites and health facilities to see project implementation results.		
Data analysis, debriefing and presentation of draft Evaluation Report to CCM, HSS TWG, partners, UN agencies and stakeholders		
Validation Workshop		
Finalization of Evaluation report	Final evaluation report	3 days

incorporating additions and comments provided by all stakeholders and submission to UNDP South Sudan.		
Total number of working days	21 working days. The schedule can be rearranged as needed.	

Note: The schedule is subjected for revision if there is a need from the organization

6. Deliverables

Under the supervision of the Global Fund M&E Specialist and guidance of HSS TWG and the HSS evaluation reference group, the consultant shall provide the following deliverables:

- a) **Inception report:** The evaluator will prepare an inception report which details the evaluators understanding of the evaluation and how the evaluation questions will be addressed. This is to ensure that the evaluator and the stakeholders have a shared understanding of the evaluation. The inception report will include the evaluation matrix summarizing the evaluation design, methodology, evaluation questions, data sources and collection analysis tool for each data source and the measure by which each question will be evaluated. (**Structure Annexe 2**)
- b) **Draft end of project evaluation report** - The consultant will prepare the draft evaluation report for cognizant of the proposed format of the report and checklist used for the assessment of evaluation reports (see annexes). The report will be submitted to MOH, CCM members, HSS TWG members, HSS partners and evaluation reference group for validation. Comments from stakeholders will be provided within 5 days after receiving the Draft Report. The report will be reviewed to ensure that the evaluation meets the required quality criteria. The report will be produced in English.
- c) **Final end of project evaluation Report.** The final report (30-50 pages) will include comments from MOH, CCM members, HSS TWG members, HSS partners and evaluation reference group will be submitted in 3 days after receiving all comments. This will be submitted to PPSU for validation. It will include recommendations, policy options and conclusions. (**Structure in Annexe 3**)

7. Competencies

- Functional competencies
- Extensive expertise, knowledge, and experience in the field of health systems strengthening, familiarity with the GFATM policy and procedures, previous experience in conducting country programme evaluations and HSS projects in particular, familiarity in results based M&E framework and health systems in general;
- Excellent writing skills with a strong background in report drafting;
- Demonstrated ability and willingness to work with people of different cultural, ethnic and religious background, different gender, and diverse political views;
- Ability to use critical thinking, conceptualize ideas, and articulate relevant subject matter in a clear and concise way.
- Corporate competencies
- Demonstrated integrity by upholding the United Nations' values and ethical standards;
- Appreciate differences in values and learning from cultural diversities;
- Promotes UNDP vision, mission and strategic goals;
- Displays cultural, gender, religion, race, nationality and age-based sensitivity and adaptability;
- Demonstrates diplomacy and tact in dealing with sensitive and complex situations.
- Professionalism
- Demonstrates professional competence and mastery of subject matter;
- Demonstrated ability to negotiate and apply good judgment;
- Is conscientious and efficient in meeting commitments, observing deadlines and achieving

<p>results.</p> <ul style="list-style-type: none"> • Planning & Organizing • Establishes, builds and maintains effective working relationships with colleagues to achieve the planned results.
<p>8. Qualifications of the successful consultant</p> <p>Education: Master's in Health Monitoring and Evaluation, Masters in Public Health, with Bachelors Degree in Health Sciences. A Masters in Social Sciences or any other related field.</p> <p>Experience</p> <p>An individual consultant with the following expertise</p> <ul style="list-style-type: none"> • Proven experience of a minimum of 10 years preferably with UN experience. Knowledge and familiarity of the United Nations system, its reform process and UNDP programme policies, procedures. • Familiarity with the GFATM projects, UNDP Multi-Year Funding Framework and other results based M&E frameworks. • Previous experience in conducting country programme evaluations and HSS projects in particular is an added asset. • Knowledge of the political, cultural and economic situation in south Sudan or ability to quickly acquire such knowledge is desirable • Knowledge and skill in health system strengthening • Grant manager familiarity with financial function knowledge on global fund financial system will be an asset • Knowledge of Procurement and Supply Chain Management System at international level, • Knowledge of Monitoring and evaluation of HSS projects • Extensive experience of programme formulation, monitoring and evaluation; <p>Language</p> <ul style="list-style-type: none"> • Strong communication skills - Excellent knowledge of written and spoken English. Knowledge of local languages will be an added advantage
<p>9. Institutional arrangements</p> <p>The consultant will work full time, based in UNDP South Sudan. Office space and limited administrative and logistical support will be provided. The consultant will use her/his own laptop and cell phone.</p> <p>The consultant will report to the UNDP Programme and Partnership Support Unit Team Leader and the evaluation reference group that will review progress and will certify delivery of outputs.</p> <p>UNDP will:</p> <ol style="list-style-type: none"> a) Provide the consultant with all the necessary support (not under the consultant's control) to ensure that the consultant undertake the study with reasonable efficiency. b) Appoint a focal point in the programme section to support the consultant during the evaluation process. c) Collect background documentation and inform partners and selected project counterparts. d) Meet all travel related costs to project sites as part of the project evaluation cost. e) Support to identify key stakeholders to be interviewed as part of the evaluation. f) The programme staff members will be responsible for liaising with partners, logistical backstopping and providing relevant documentation and feedback to the evaluation team. g) Cover any costs related to stakeholder workshops during dissemination of results. h) Organize inception meeting between the consultants, partners and stakeholders, including Government prior to the scheduled start of the evaluation assignment.

10. How to apply

Please submit the following documents:

- Profile (max. 6 pages) detailing suitability, experience and proposed methodology to successfully accomplish the task; **NOTE:** Applications submitted without proposed methodology will not be considered.
- Completed P11 form downloaded from http://procurement-notices.undp.org/view_notice.cfm?notice_id=23478;
- Financial proposal as per Section 12 below.

11. Financial Proposal

The financial proposal must be expressed as an all-inclusive lump sum amount in USD, presented in the following template:

	Unit cost (USD)	No.	Total
a) Professional fee:			
b) Daily Subsistence Rate:			
c) Other costs (specify):			
Total (lump sum):			

Notes:

1. The information in the breakdown of the offered lump sum amount provided by the Offeror will be used as the basis for determining best value for money, and as reference for any amendments of the contract;
2. The agreed contract amount will remain fixed regardless of any factors causing an increase in the cost of any of the components in the breakdown that are not directly attributable to UNDP;
3. Approved local travel related to this assignment will be arranged & paid by UNDP South Sudan;
4. The Contractor is responsible for arranging and meeting the cost of their vaccinations and medical/life insurance.

12. Selection criteria

Offers received will be evaluated using a combined scoring method, where the qualifications, experience and proposed approach will be weighted 70%, and combined with the price offer, which will be weighted 30%.

Breakdown of technical proposal on 100% which will be brought to 70%:

Criteria	Weight	Max. Point
At least Master's degree in Health Monitoring and Evaluation, Masters in Public Health, with Bachelor's Degree in Health Sciences. A Masters in Social Sciences or any other related field.	10 %	10
Extensive expertise, knowledge, and experience in the field of health systems strengthening, familiarity with the GFATM policy and procedures, previous experience in conducting country programme evaluations and HSS projects in particular, familiarity in results based M&E framework and a minimum of 10 years' experience preferably with UN experience.	20 %	20
Overall methodology	40%	40
Experience of programme formulation, monitoring and evaluation;	20%	20

experience in evaluating similar programmes.		
At least 10 years of experience in working with international organizations and donors; and demonstrable experience working for the United Nations System	5%	5
Fluency in English and a working knowledge of one of the other language	5%	5
TOTAL	100%	100

Only candidates obtaining a minimum of 49 points in the Technical Evaluation will be considered for the Financial Evaluation.

Financial evaluation (total 30 points):

All technically qualified proposals will be scored out of 30 based on the formula provided below. The maximum points (30) will be assigned to the lowest financial proposal. All other proposals receive points according to the following formula:

$$p = y (\mu/z)$$

where:

- p = points for the financial proposal being evaluated
- y = maximum number of points for the financial proposal
- μ = price of the lowest priced proposal
- z = price of the proposal being evaluated.

13. Evaluation team

The evaluation team will comprise three independent members (one international and two national) who were, at no point directly associated with the design and implementation of any of the activities associated with the HSS project. The international consultant will be the team leader.

14. Annexes

Annex 1: Recommended List of Documents

1. UNEG standard for evaluation in the UN system, UNDP evaluation policy
2. UNDP handbook on planning, monitoring and evaluation of development results
3. UNDP Guidance on outcome level evaluation
4. Country Programme Action Plans (2012-2013) and the revised CPAP (2012-2016)
5. CPAP M&E framework
6. HSS project proposal and grant agreements
7. HSS Project Annual Work Plans and Budget
8. GF Projects Annual Reports
9. HSS PUDRs, Performance framework, M&E plan
10. CCM meeting minutes and audit reports
11. Field visit reports

Annex 2: Structure of inception report

Introduction	1.1. Objective of the evaluation 1.2. Background and context 1.3. Scope of the evaluation
Methodology	2.1. Evaluation criteria and questions

	2.2. Conceptual framework 2.3. Evaluability 2.4. Data collection methods 2.5. Analytical approaches 2.6. Risks and potential shortcomings
Programme of work	3.1. Phases of work 3.2. Team composition and responsibilities 3.3. Management and logistic support 3.4. Calendar of work
Annexes	1. Terms of reference of the evaluation 2. Evaluation matrix 3. Stakeholder map 4. Tentative outline of the main report 5. Interview checklists/protocols 6. Outcome model 7. Detailed responsibilities of evaluation team members 8. Reference documents 9. Document map 10. Project list 11. Project mapping 12. Detailed work plan

Annex 3: Structure for outcome evaluation report

Indicative Section	Description and comments
Title and opening pages	Name of programme or theme being evaluated Country of programme Name of the organization to which the report is submitted Names and affiliations of the evaluators Date
Table of contents	
List of acronyms and abbreviations	
Executive summary	This should be an extremely short chapter, highlighting the evaluation mandate, approach, key findings, conclusions and recommendations. Often, readers will only look at the executive summary. It should be prepared after the main text has been reviewed and agreed, and should not be circulated with draft reports.
Chapter 1: introduction	Introduce the rationale for the evaluation, including mandate, purpose and objectives, outline the main evaluation issues including the expected contribution at the end of the project, address evaluability and describe the methodology to be used. Refer to the outcome model and evaluation matrix, to be attached as annexes.
Chapter 2: the Development	In addition to providing a general overview of historical trends and development challenges, specifically address the evaluation theme. Explain how the theme is

challenge	addressed by government(s), and how it is reflected in national policies and strategies. Also provide information on the HSS activities of other development partners in the area.
Chapter 3: R 9 HSS Grant response and challenges	Against the background of Chapter 2, explain what UNDP as a PR for the GFATM has done in this area (purely descriptive, not analytical). Provide the overarching outcome based on the project proposal, work plan and budget, specifying the results based on the agreed performance frameworks as per the service delivery areas (SDAs), as well descriptions of some of the main contributions of the HSS grant to the three diseases (TB, HIV/AIDS and malaria).
Chapter 4: Contribution to results	<p>Against the background of Chapters 2-3, analyse findings without repeating information already provided. Also, minimize the need to mention additional factual information regarding projects and programmes (these should be described in Chapter 3). Focus on providing and analysing evidence relating to the evaluation criteria.</p> <p>Preferably, structure the analysis on the basis of the main evaluation criteria:</p> <ul style="list-style-type: none"> • Relevance (of UNDP's and GFATM involvement and its approach) • Effectiveness (in contributing to the achievement of outcomes). <i>Pay particular attention to this criterion, demonstrating how HSS project initiatives have, or have not, contributed to the achievement of outcomes.</i> • Efficiency (in delivering outputs) • Sustainability (of the outcomes) <p>In addressing the evaluation criteria, the narrative should respond to the corresponding questions identified in the evaluation matrix and provide a summary analysis of the findings. Partnerships play a key role in ensuring that primary stakeholders achieve outcomes. As such, all evaluation criteria should cover relevant aspects of partnership: i.e., how were they relevant; how effective were they in contributing to the achievement of outcomes; how efficiently were they managed; and how sustainable are they?</p> <p>Where appropriate, discuss cross-cutting themes separately using the main evaluation criteria.</p> <p>Do not allow the discussion to drift into conclusions and recommendations.</p>
Chapter 5: Conclusions and Recommendations	<p>Conclusions are judgements based on evidence provided in Chapter 4. They are pitched at a higher level and are informed by an overall, comparative understanding of all relevant issues, options and opportunities.</p> <p>Do not provide new evidence or repeat evidence contained in earlier chapters.</p> <p>Recommendations should be derived from the evidence contained in Chapter 4. They may also, but need not necessarily, relate to conclusions. In line with the nature of the evaluation, some recommendations may be more strategic in nature while others may be more action-oriented. Recommendations should be</p>

	important and succinct. Please limit to 5-10.
Annexes	<ul style="list-style-type: none"> • ToR for the end of project evaluation. • List persons interviewed, sites visited. • List documents reviewed (reports, publications). • Data collection instruments (e.g. copies of questionnaires, Survey, etc.). <ul style="list-style-type: none"> ○ Assessment of the progress in relevance to the nationally defined goals; photos and stories worth telling (Most Significant changes [MSC])

Annex 3: Sample Evaluation Matrix

Relevant evaluation criteria	Key Questions	Specific Sub-Questions	Data Sources	Data collection Methods / Tools	Indicators/Success Standard	Methods for Data Analysis

Notice: UNDP, as a matter of practice, does not charge any application, processing or training fee at any stage of the recruitment process.