

UK Partnerships for Health Systems

Terms of Reference for responsibilities of THET Health Systems Strengthening Consultant, Sierra Leone

1. Introduction

Funded by the UK Department for International Development and managed by the Tropical Health and Education Trust (Annex 1), the UK Partnerships for Health Systems (UKPHS) programme (Annex 2) aims to leverage UK expertise to help low and lower middle-income countries (LMICs) build stronger and more resilient health systems. UKPHS will see 6-8 strategic grants awarded in 10 LMICs, including Sierra Leone, to deliver improved health worker and health service performance for poor and vulnerable populations. In addition, smaller grants will also be awarded across a much larger range of countries that test innovative approaches to specific health system challenges, and seek to embed health partnerships in learning and development approach for the health workforce.

A total of £24m is allocated to grants running from 2020 to mid-2023. Up to £400,000 is available for each strategic grant, and up to £50,000 for each smaller grant.

THET London is overall responsible and accountable for the delivery of the programme. The Grants Management team based in the UK will co-ordinate the selection, contracting, payments and reporting of all grant holders. The UK Monitoring, Evaluation and Learning (MEL) team, along with the Liverpool School of Tropical Medicine, will provide MEL tools and resources for grant holders and the programme team to use. These teams will ensure a standardised approach, tools and systems for the delivery in each country, adapted as necessary to the local context.

In each country an in-country THET representative will engage the grant holders to co-ordinate national oversight and engagement with the grant holders, and to ensure the grant holders are implementing quality projects efficiently and effectively. This document serves as a Terms of Reference for the type of work the THET Consultant should expect to carry out as part of this.

2. Workstreams

We envisage that the activities expected of the Consultant as part of this scheme will fall into the following workstreams:

1. Inception phase
2. National stakeholder engagement and alignment
3. In-country monitoring and capacity development of grant holders
4. Facilitate and stimulate learning and collaboration between grant holders, and with other health system strengthening and development programmes
5. Support grant holders to deliver effective and sustainable projects in line with national plans.
6. In-country risk management
7. Provide basic support to smaller grants in neighbouring countries



Activities in red are those that are core requirements of the Consultant. Other activities will add great value to the programme but should only be undertaken if time allows.

Workstream 1: Inception phase

***Objective:** To ensure the effective set up of the programme in-country – to ensure that subsequent grant calls are based on a solid understanding of country needs and priorities and respond to the priorities of national health systems.*

Activities:

- Facilitate the scoping assessment (see Annex 2), including setting up and participating in meetings and reviewing country scoping study report
- Stimulate health partnership supply (from LMIC institutions interested in establishing partnerships with UK institutions) and liaise with THET London to provide a match-making role between UK and LMIC institutions
- Set up the National Oversight Mechanism (NOM- see Annex 2)
- Co-ordinate the NOM to provide input into the call for proposals, and feedback on grant applications

Workstream 2: National stakeholder engagement and alignment

***Objective:** To ensure the programme is accountable to national stakeholders and aligned with national priorities and plans*

Activities:

- In collaboration with THET London, adapt and implement stakeholder engagement strategy to ensure a joined up and strategic approach to engaging with and ensuring the buy-in, and ownership of, national stakeholders (including all stakeholders who play a key role or have influence in Partnerships for Health Systems, and who represent key marginalised socially excluded groups). Support and guidance on methodologies will be provided by THET London. This activity will include regular meetings or updates with the MoHS, DFID country office and others
- Co-ordinate quarterly or biannual NOM conference calls, including in-person annual review meetings
- Contribute to planning for the grant holder pre-commencement workshop (currently anticipated to be held in, and organised by, the UK);
- In collaboration with THET London, organise the Sierra Leone UKPHS launch event once grants are awarded - promoting networks between HPs and national and sub-national stakeholders and ensuring grant holders have a strong grasp of programme expectations and requirements.
- Identify and engage in relevant Technical Working Groups (TWGs) and other key national/ sub-national fora.
- Where appropriate, represent partnerships at meetings with key stakeholders, e.g. relevant working groups/steering committees, or secure invitations for partners to such meetings;
- Where appropriate, accompany partners to meetings (including at district/hospital level if required) to offer clarification on the model and raise the project profile.
- Secure the attendance of national stakeholders at partnerships' conferences/events and programme events

- Provide regular updates to THET London on the above, as well as changes in health sector priorities, stakeholder relations, changes in the operating environment, media engagement opportunities and upcoming events.

Workstream 3: In-country monitoring of grant holders

Objective: To accompany progress of the projects.

Activities:

- Conduct at least biannual visits to the partner institutions throughout the programme, and hold more regular phone calls, to accompany progress, ensure that challenges identified through reports and monitoring visits are being successfully overcome and that any new challenges, concerns, developments or opportunities are identified quickly.
- Contribute to the review of quarterly grant holder reports (UK-led activity) and provide feedback to the THET Grants Management team
- Support monitoring visits from the London team, or occasionally conduct monitoring visits independently of the London team.
- Identify any changes to the personnel amongst the grant holders involved

Workstream 4: Facilitate co-ordination between grant holders and other health system strengthening and development programmes

Objective: To ensure learning, synergies and sustainability, and to avoid duplication

Activities:

- Lead on all in-country programme events or meetings, e.g. sharing and learning, dissemination, national stakeholder meetings, annual reviews etc;
- Facilitate introductions, and strengthen relationships, between health partnerships and other relevant programmes and organisations;
- Establish relationship with other health system strengthening and development programmes and networks working in similar areas to ensure maximum effectiveness and to minimise duplication.

Workstream 5: Supporting health partnerships to deliver effective and sustainable projects in line with national plans.

Objective: To facilitate the effective delivery of projects and support partners, particularly the LMIC partner, to have the capacity to take a leadership role within the partnership.

Activities:

- Building on the partnership assessment and development plans developed for each grant holder and ongoing assessment in-country, and in collaboration with the THET Grants Management team, identify areas where THET can provide capacity development support throughout the project and agree plans to provide this
- Work with the THET Grants Management team to ensure that in-country partners understand what is required of them with regards project management (including M&E, finances, activity plan and reporting, partnership relations, procurement etc.) and support them where necessary to overcome identified challenges.

- Advise grant holders on how activities can be scaled up, and support linkages with the MOHS, appropriate regulatory bodies, other donors and programmes etc, ensuring that projects are embedded into the health system.
- Attend or present at grant holder events
- Provide logistical support around health partnership events/visa processes/ethical approvals, UK volunteers, etc

Workstream 6: In-country risk management

Objective: To ensure any potential risks are identified and mitigated as soon as possible.

Activities:

- **Maintain country risk registers to monitor the operational, delivery, reputational, safeguarding and fiduciary risks, in conjunction with the London team**
- **Alert the London team and grant holders to heightened risks as appropriate.**
- Work with the in-country partner to ensure they have a robust risk register in place.

Workstream 7: Provide basic support to smaller grants situated in neighbouring countries

- *Ad hoc depending on time available.*

3. Proposed timeframe

54 consulting days from March 2020 to February 2021. The Consultant will be expected to work just over one day a week, although there will be significant flexibility within this (some weeks will require much more capacity, others less). The successful candidate **MUST** be available for a whole week in April or early May (timing tbc) in order to take part in the scoping assessment. Towards end of the year, THET will agree with the Consultant whether to extend the contract for the following year.

4. Contractual Responsibilities

Reports to: THET Head of Grants Management, based in London. The Consultant will be responsible for managing the workload and conducting the activities in a timely and efficient manner as set out in this document. The Consultant will have regular reporting points with the Head of Grants Management, largely through monthly Skype meetings and quarterly reports, and will be expected to keep them informed on progress and key issues.

5. Terms and Conditions

The Consultant must have the right to live and work in Sierra Leone, and they will ideally be based in Freetown. The maximum sum available for this contract is **GBP £10,260 for 54 days' work**. The consultant will invoice THET on a monthly basis. Please note that this is non-negotiable and will cover all expenses apart from project-related travel expenses. The travel allowance is up to £100 per month.

6. Knowledge, Skills and Experience for the Consultancy

To successfully undertake this assignment, the Consultant should meet the following minimum requirements:

- Recent experience of liaising with the Ministry of Health and Sanitation in Sierra Leone.
- Experience of health systems strengthening in Sierra Leone.
- Strong project management experience in the health sector in Sierra Leone.
- Experience of working in a senior position in an INGO context (desirable).
- Experience of working in partnership with others to promote capacity building.
- Experience of managing security and risk
- Degree level education. [Public health or related discipline preferred.]
- Analytical skills and demonstrable ability to think strategically
- Excellent representational, written and verbal communication skills in English and other local languages.
- Proven financial skills (budget preparation and monitoring)
- Proven organisational and administrative skills with sound IT skills (Word and Excel)
- Flexibly and adaptability in the context of working within a small organisation and in a complex environment.
- Well organised with the ability to work independently and take the initiative.

7. Expression of Interest

The Consultant that meets the above requirements and is available within the time period indicated above should submit an expression of interest which describes how their background reflects the above competencies. They should also include a copy of the candidate's CV with two references and send these to jobs@thet.org by **Wednesday 26th February**, with the heading 'THET Sierra Leone Consultant'. Selected candidates will be called for an interview over Skype in w/c 2nd March.



Annex 1 – Tropical Health and Education Trust (THET)

One billion people will never see a qualified health worker in their lives. For over thirty years, THET – www.thet.org - has been working to change this, training health workers to build a world where everyone has access to affordable and quality healthcare. We do this by leveraging the expertise and energy of the UK health community, supporting health partnerships between hospitals, colleges and clinics in the UK and those overseas.

From reducing maternal deaths in Uganda to improving the quality of hospital care for injured children in Myanmar, we work to strengthen local health systems and build a healthier future for all. In the past seven years alone, THET has reached over 84,000 health workers across 31 countries in Africa, the Middle East and Asia in partnership with over 130 UK institutions and UK health workers who have contributed over 60,000 days of their time as volunteers. The programme has contributed to more effective and efficient health systems in low- and lower middle- income countries (LMICs).¹ It also benefits the UK health sector through improved health professional competencies, motivation, health service innovations and global influence.²

THET is a fund manager for health partnership grants programmes on behalf of UK government and corporations. Health partnerships are long-term, institutional relationships between health organisations in the UK and their counterparts in LMICs, and are based on ideas of co-development, reciprocal learning and mutual benefit. Staff from UK health institutions volunteer their time developing and carrying out health systems strengthening activities at their LMIC partner institution, be that training, curriculum development, leadership and governance, etc.

¹ Tripleline, HPI, *HPS Evaluation Synthesis Report*, 2016: http://iati.dfid.gov.uk/iati_documents/5641071.pdf

² THET, *In our mutual interest*, 2016: <http://www.thet.org/resource-library/in-our-mutual-interest>



Annex 2 – UK Partnerships for Health Systems

DFID has funded health partnerships between the UK and developing countries since the International Health Links Funding Scheme was launched in 2009. In 2019 DFID contracted the Tropical Health and Education Trust (THET) and the Liverpool School of Tropical Medicine (LSTM) to manage and implement the UK Partnerships for Health Systems (UKPHS) programme and deliver the expected results over the lifetime of the programme. This programme has a value of £28.5m and a time frame of December 2019 to July 2023.

The aim of UKPHS is to work with partners in LMICs through Health Partnerships to achieve **health system performance and strengthen and build stronger and more resilient health systems** to enable progress towards Universal Health Coverage (UHC), especially for poor and vulnerable populations. The programme will achieve this by supporting the development of stronger health systems, with better governance, information, quality standards and management of health systems and better skilled and competent health workforces. Building institutional capacity will also help countries, where appropriate, to transition to different forms of external assistance and ultimately to reduce longer-term need for external support.

The model to achieve this is **UK-LMIC health partnerships**. These are institutional relationships between UK and LMIC health delivery and academic institutions, where UK health workers volunteer their time to co-develop strategies and share skills and knowledge to address priority health system issues. As national governments scale up their ambitions to achieve UHC, it is recognised that the focus and scale of Health Partnerships must respond to meet this ambition.

UKPHS will promote health partnerships that are aligned to the health strategies of that country, focusing on quality and the priorities of the most disadvantaged. The programme will enable the co-development of the parameters of these partnerships, the design of grant programmes to deliver these and the stimulation of relevant bids that will assure quality, and support HPs to meet those goals. The programme will be aligned with national country health system goals, is committed to quality improvement, achieving Value for Money and promoting Gender Equality and Social Inclusion.

A scoping assessment undertaken at the start of the programme by THET and LSTM will identify and engage key stakeholders from the national and sub-national levels and gain a better understanding of health system priorities and challenges to establish the contribution HPs can make in supporting countries to build sustainable health systems for achieving UHC. These assessments will also form part of the baseline for the programme and contribute to stakeholder relationship development.

In-country oversight, which the Consultant will co-ordinate, will be provided by the **National Oversight Mechanism (NOM)**. This body will consist of 1-2 Ministry of Health and Sanitation representatives, the DFID Health Adviser, and 1-2 Health Systems Strengthening experts. They will provide an advisory function, to ensure national oversight and ownership of the design and delivery of the programme in each country, and to align with national policies and programmes and provide an open and transparent choice for LIC/LMIC stakeholders. They will achieve this by contributing to the scoping assessment, reviewing the grant call design, contributing to the review of grant applications and overseeing the delivery of the grants programmes once awarded, suggesting alterations based on insights and concerns. The NOM will meet annually in person, for an annual review of progress.