

## TERMS OF REFERENCE – TECHNICAL ASSISTANCE (SYRIA HEALTH SYSTEM / MONITORING AND EVALUATION)

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### THET

THET works to create a world where everyone, everywhere, has access to quality healthcare. We achieve this by training and educating health workers in low- and middle-income countries (LMICs).

We are best known for our Health Partnership approach. Health Partnerships are a model for improving health services based on the idea of linking staff within hospitals and clinics in high-income countries with their LMIC counterparts in ways that deliver opportunities for mutual learning. It is an approach that is recognised by the World Health Organization in their Twinning Partnerships for Improvement programme, and actively championed by a number of European Governments such as the UK, Germany, Norway, and Switzerland.

THET works closely with national governments, is a signatory of the UN Global Compact, a member of the UHC2030 Civil Society Coalition, and an NGO in Official Relations with the World Health Organization (WHO). We run programmes and manage grants schemes with partners including the UK Department of Health and Social Care, Johnson and Johnson, Novartis Social Business and the Bill and Melinda Gates Foundation. For the UK Government, THET has managed over \$65m of funds in the past ten years, consistently scoring A or A\* in every annual review and independent evaluation.

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### WORK IN NORTHWEST SYRIA

The EU has invited THET to consider how it could contribute to the strengthening of medical education priorities in Northwest Syria (NW Syria), working with and responding to the priorities of the Syrian Board of Medical Specialities (SBOMS) and other partners, and reflecting on systems already in place in other parts of Syria. Several areas have been identified by the EU and stakeholders based in NW Syria, resulting in the identification of four results areas which THET will focus on during the course of a yearlong programme:

- Strengthened HRH/HSS leadership and governance of selected parameter-compliant actors possibly including the Syrian Board of Medical Specialities (SBOMS), Medical Syndicates, Leagues and/or Associations;
- Improved delivery of postgraduate medical education with a focus on shortage specialties (through areas such as: curriculum reform, improved clinical skills teaching and modern teaching approaches competency-based assessment procedures, placements, resources and tools and/or application of learning technologies, based on scoping findings);
- Improved understanding of and recommendations for the strengthening of undergraduate medical education; and

- Improved understanding of health workforce capacity gaps and needs through a detailed scoping assessment, dialogue and engagement of key local stakeholders to identify problems and test solutions.

THET's first priority will be to carry out a robust scoping study and needs assessment, which will outline key implementation steps in the subsequent months. This scoping study will take place during the first 3 months of the programme, with the subsequent 9 months used for taking forward priorities identified during the preliminary assessment. Several key activities will be undertaken during the scoping assessment:

- Stakeholder analysis to identify key individuals and institutions from the following categories: faculty; trainees; health service providers (training sites); regulators; professional associations (syndicates) etc.; donors.
- Desk review and interviews (as appropriate) to understand current context/challenges/opportunities, including:
  - Training histories (how many enter/how many 'graduate' etc.).
  - Quality assessments of training (what's working/not working, how many specialists to train how many trainees).
  - Review of assessment methodologies, intakes and selection criteria (particularly in as far as gender, vulnerability and displacement status).
- Assessment of health workforce needs/vs specialist training numbers/spread etc.
- Quality of training placements (health facilities): Standards/assessment/equipment/staff (trainers)/links to SBOMS.
- Capacity of SBOMS including policies/procedures/staff capacity/recognition/coordination with health facilities/ universities/ specialists (Nature of authority to 'regulate/ accredit' training).
- Regulation/ accreditation of training including review into the current and desired division of labour as well as any gaps in as far as regulation and accreditation in NW Syria, in addition to a review of standards in place in regime-controlled areas which will inform a comparative analysis and suggest recommendations for next steps.

Some of the above work may be carried out by other external partners. For example, a number of UK Royal Colleges will be engaged in understanding the priorities for postgraduate medical education, including scoping numbers of specialities, suitability of training, standard of curricula/training, and capacity to deliver the training.

Once the scoping assessment has been completed, a report outlining the findings and recommendations for addressing identified priorities will be developed. This will then be reviewed and signed off by the Stakeholder Oversight Mechanism (a group consisting of key stakeholders working in NW Syria), and a plan of action for taking this work forwards during the final 9 months of the programme will be finalised.

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## ROLE OF CONSULTANT

Initially the Consultant will contribute to the scoping assessment being carried out during the first 3 months of the project, and then, depending on the results of the scoping exercise and the priorities identified, the consultant will contribute to delivering other work in the following 9 months. Key activities during the scoping assessment will include:

- Carrying out a desk-based assessment into priorities for the health workforce in NW Syria in line with other key partners and stakeholders;
- Stakeholder mapping to understand roles and responsibilities of key players in the health system in NW Syria;
- Key Informant Interviews with stakeholders to understand further their priorities;
- Assessment of health workforce needs/vs specialist training numbers/spread etc.;
- Contribute to an assessment of SBOMS governance systems and mechanisms;
- Coordination and oversight of all partners gathering data;
- Development of report outlining key priorities for medical education in NW Syria including recommendations for final 9 months of programme activities.

It is anticipated that during the scoping assessment, the consultant will travel to Gaziantep at least twice – once for the initial project kick off meeting, and then again at the end of the scoping period to help deliver the findings to the Stakeholder Oversight Mechanism. It may be that further travel is required during the scoping assessment but that is at the discretion of the consultant. Travel during the implementation phase will be discussed once the priorities identified during the scoping assessment have been finalised.

After the initial scoping assessment has been completed, the consultant will continue to play a role throughout the remainder of the programme, helping to calibrate activities to ensure they continue to align with recommendations.

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## DELIVERABLES

The key deliverable for this work will be the development of a scoping assessment report, outlining findings from the scoping assessment and making recommendations for work to be delivered during the implementation phase.

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## CONTRACTUAL RESPONSIBILITIES

Reports to: THET Programme Manager, 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 Programme Manager, largely through regular Teams meetings and quarterly reports, and will be expected to keep her informed on progress and key issues.

There will be regular internal programme meetings which the consultant will be expected to attend, which will provide opportunity for re-calibrating activities and outcomes as appropriate.

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## KNOWLEDGE SKILLS AND EXPERIENCE FOR THE CONSULTANCY

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

- Recent experience of working with or in the health system in NW Syria.
- Experience of delivering mixed method scoping assessments/ research.
- Analytical skills and demonstrable ability to think strategically.
- Excellent representational, written and verbal communication skills in English and Arabic.
- Flexibly, adaptability and experience of working in a complex environment.

- Well organised with the ability to work independently and take the initiative.
- Ability to travel to Gaziantep from time to time (if based outside Turkey).

Though not essential, the following would also be beneficial for the Consultant to have:

- Experience of working in partnership with others to promote capacity building.
- Ability to travel into NW Syria if necessary (this is not anticipated but may be valuable).

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## TERMS AND CONDITIONS

The maximum sum available for this contract is **EUR593.74 per day for up to 60 days' work**. We would expect up to 40 days of this work to be carried out during the 3-month scoping assessment, with the remaining 20 days spread through the remaining 9 months. Work during this period will be based on priorities identified through the scoping assessment.

The consultant will invoice THET on a monthly basis. Please note that this is non-negotiable and will cover all expenses excepting travel.