**Terms of Reference**

**SURVEY IMPLEMENTATION TEAM**

**Frontline service readiness assessments:**

**Strengthening real-time health services tracking and monitoring in the context of the COVID-19 pandemic**

1. **Purpose**

The purpose of this contract is to support the implementation of the frontline service readiness assessments to assess health system and services performance during the COVID-19 pandemic in [country] under the leadership of the Ministry of Health.

1. **Background**

Over the past 10 months, the COVID-19 pandemic has challenged public health systems and health services globally, revealing that even robust health systems can be rapidly overwhelmed and compromised by an outbreak. Countries are confronting a multitude of questions that must be addressed to prepare for and respond directly to the COVID-19 pandemic, while simultaneously maintaining the delivery of other health services. Key decisions and actions to mitigate the risk of potential health system collapse must be informed by accurate and real-time data. In response to this challenge, the WHO has developed a suite of innovative facility and community assessment tools and approaches to detect and monitor health systems bottlenecks and health facility capacity and readiness gaps throughout the course of the pandemic. The recommended survey approach is through rapid and regular phone interviews (using electronic tool) in a sample of sentinel facilities, with data feeding into automated analysis chartbooks/dashboards for real-time decision making and use. Through documentation, adaptation and learning, the aim is to integrate and scale the survey approach for a real-time monitoring and early warning system for health services in the event of future crises. See enclosed concept note for further information on the tools, approach, and methodology.

The survey will be implemented [frequency] over the course of 2021. This contract is for the survey implementation team that will lead implementation of these tools.

1. **Planned timelines** (subject to confirmation)

Start date: DD/MM/2021 End date: DD/MM/2021

Total duration: [#] days (over the contract period)

NB: The first round of the survey will be planned and implemented in the first month of the contract. Each subsequent round of the survey will be completed over the course of one week [frequency] throughout the contract.

1. **Roles and responsibilities**

The survey implementation team will work closely with the Ministry of Health (MoH) and survey coordinating group (if relevant) to prepare for, implement, analyze and share findings of the frontline service readiness assessments. Summaries of the roles and responsibilities of the key parties involved are outlined below.

* **Ministry of Health:** The MoH is responsible for overall coordination and steering of survey implementation. The MoH is responsible for oversight of the survey implementation team, defining the scope and frequency of the survey, coordinating survey implementation, ensuring access to the master facility list and permission of the health facilities, and presenting and ensuring the use of this data to define and update policy and planning to address continuity of EHS and improve COVID-19 responses. As relevant the MoH may also establish a survey coordinating group with relevant partners.
* **Survey coordinating group:** Depending on involvement of relevant stakeholders and partners, a survey coordinating group may be established under the leadership of the Ministry of Health and involving key partners (e.g. WHO, UNICEF, WB, GFF, TGF). The survey coordinating group provides oversight of survey implementation, provides technical inputs on survey tools and protocols, helps to define the scope and frequency of the survey, and guides adaptation of the questionnaire. Where there is not a survey coordinating group, all above responsibilities will be coordinated by the MoH.
* **Survey implementation team:** The survey implementation team leads all operational and implementation aspects of the survey and data collection under the leadership of the MoH and survey coordinating group. The survey implementation team is responsible for providing technical oversight and quality assurance on key steps and activities for survey implementation
1. **Requirements – Key positions and work to be performed by the survey implementation team**

The survey implementation team should consist of the following key positions/functions:

* **Survey manager**
Responsibility: Plans and coordinates overall survey implementation at country level and oversees data collection team and validation of responses

Quantity: 1

Key functions:

* 1. Develop and execute detailed survey implementation plan
	2. Coordinate and finalize sampling
	3. Organize and lead adaptation of standard modules
	4. Test and finalize country-specific modules
	5. Secure and manage functioning equipment and resources
	6. Recruit, train, and supervise interviewers
	7. Conducts or manages pre-data collection outreach
	8. Develop detailed daily call schedule for interviewers
	9. Coordinate and verify online tool links and tokens
	10. Manage day-to-day operation, including trouble shooting
	11. With data manager, monitor survey progress and data quality
	12. With data manager, participate in results interpretation
	13. With data manager, participate in results dissemination and data use
	14. Co-organize policy dialogue with Ministry of Health and/or survey coordination group to develop action plan
* **Team leader/supervisor**Responsibility:oversees interviewer team and validates questionnaires
[NB: Most survey implementation teams may not require a team leader/supervisor if all responsibilities can be completed by the survey manager]

Quantity: 1(if different from the survey manager)
Key functions:

* 1. Organize/schedule data collection telephone interviews
	2. Prepare the necessary materials for data collection
	3. Ensure data collectors/interviewers are ready for data collection
	4. Supervise data collection activities
	5. Ensure data collection protocols are followed
	6. Check submitted questionnaires at the end of each day for completeness /errors
	7. Inform the survey manager if facilities could not be contacted (to provide alternative site)
	8. Back up data file nightly
	9. Report to survey manager and data manager/analyst at the end of each day
* **Data manager/analyst**

Responsibility: Manages national database and real-time analyses

Quantity: 1

Key functions:

* 1. Download and clean data, and produce basic field check data daily
	2. With survey manager, monitors survey progress and data quality
	3. Creates an analysis dataset
	4. Calculate estimates for key indicators
	5. Update chartbook and produces survey results
	6. With survey manager, participate in results interpretation
	7. With survey manager, assist in results dissemination and data use
	8. Participate in policy dialogue with Ministry of Health and/or survey coordination group to develop action plan
* **Data collectors/interviewers**

Responsibility: Complete questionnaires through phone interviews with facilities and community key informants.

Quantity: (see annex to support calculation of interviewer requirements)

Key functions:

* 1. Call facility contact persons
	2. Collect data and inputs through electronic questionnaire
	3. Ensure questionnaires are complete and correct prior to submission
	4. Submit final questionnaires through electronic instrument
	5. Record results of all calls
	6. Track re-scheduled or dropped calls
	7. Report to the team leader/ supervisor at the end of each day of data collection
1. **Inputs**

The WHO team and MoH will provide inputs and supporting materials to facilitate the completion of required work. This includes a series of survey implementation team training webinars that the survey implementation team must participate in.

1. **Characteristics of the provider**

Members of the contracting survey implementation team should have the following characteristics:

* **Survey manager and/or team leader/supervisor**
Qualifications

Advanced academic qualification in public health, statistics, epidemiological research, monitoring and evaluation, health system evaluation, at the master degree level (minimum) or doctoral degree (desirable).

Experience

At least 10 years of relevant and demonstrated professional experience in the development and implementation of health facility and community surveys

Demonstrated experience collaborating with Ministry of Health and global partners.

Demonstrated experience working in country context

Skills / Competencies

Demonstrated technical knowledge of health facility and community survey methods, tool, and data analysis and use.

Excellent verbal and written communication skills

Ability to work independently and collaboratively in multicultural environment

Ability to produce results under pressure

Language: [insert]

* **Data manager/analyst**

Qualifications

Advanced academic qualification in statistics, epidemiological research, monitoring and evaluation or equivalent at the master degree level (minimum) or doctoral degree (desirable)

Experience

At least 5 years of relevant and demonstrated professional experience in health systems and services performance analysis (quantitative + qualitative)

Demonstrated experience in data analysis and use to inform policy actions

Demonstrated experience working in country context

Skills / Competencies

Demonstrated technical knowledge of statistical methods to synthesize health system and programme performance.

Strong analytical skills in quantitative and qualitative methods

Excellent verbal and written communication skills

Ability to work independently and collaboratively in multicultural environment

Ability to produce results under pressure

Language: [insert]

**Data collectors/interviewers**Experience
At least 3 years of professional experience in completing facility and community interviews
Demonstrated experience working in country context

Skills / Competencies
Excellent verbal and written communication skills
Ability to work independently and collaboratively
Ability to produce results under pressure
Language: [insert]

1. **Place of assignment**

Work is to be completed off-site.

**Annex. Calculating interviewer requirements**

Interviewer requirements will depend on the scope and frequency of the survey. It is expected that a single interviewer will be able to complete 4-5 phone interviews in a given day. As such and given the approach to use a sample of sentinel facilities, only a small group of interviewers will be needed. The interviewer should consist of enough interviewers to complete data collection in one week. The table below provides illustrative examples to help calculate the human resource requirements.

|  |  |  |
| --- | --- | --- |
| **Example** | **Interviews completed** | **Budget calculation** |
| **Illustrative example 1:** **100 health facilities**(assumption 1 interviewer can cover 4 facilities per day)  | * 1 surveyor can cover 20 facilities per week
* 5 surveyors can cover 100 facilities per week
 | Training:5 surveyors x [daily rate] x [training days per year]Pre-interview outreach:5 surveyors x [daily rate] x [outreach days per year] Data collection: 5 surveyors x [daily rate] x [5 working days] x [frequency per year] |
| **Illustrative example 2:** **50 community interviews** (assumption 1 interviewer can cover 5 communities per day)  | * 1 surveyor can complete 25 community interviews per week
* 2 surveyors can complete 50 community interviews per week
 | Training: 2 surveyors x [daily rate] x [training days per year]Pre-interview outreach: 2 surveyors x [daily rate] x [outreach days per year]Data collection: 2 surveyors x [daily rate] x [5 working days] x [frequency per year] |