

Terms of Reference for Field Coordinators to Work on the Implementation of Community Performance Based Financing

Background

The Ministry of Health (MoH) has obtained funds from the World Bank to support maternal child health and nutrition service delivery in all regions and to undertake the piloting of community Performance Based Financing (cPBF) system in eight (8) selected districts under the the Maternal Child Health and Nutrition Improvement Project (MCHNP). A major part of the project will be implemented through the Ghana Health Service (GHS), whilst the MoH provides policy guidance and oversight. Overall, the project aims at improving access and utilization rates of community-based health and nutrition services by women of reproductive age, pregnant women, and children under the age of two years. This will be carried out by increasing availability of high impact health and nutrition interventions, and addressing access barriers using existing community-based health service delivery strategies and communication channels to expand services and to inform, sensitize and motivate care-givers, community leaders and other key audiences.

Project Development Objectives (PDO) Level Indicators

The following indicators will be used to track achievement of the PDO:

1. Proportion of pregnant women making first antenatal visit in the first trimester.
2. Births (deliveries) attended by skilled health personnel (number).
3. Proportion of children under two attending community growth promotion activities.
4. Proportion of children 0-6 months exclusively breastfed in the past 24 hours
5. Proportion of new acceptors of modern contraceptives (females, 15-49)
6. Direct project beneficiaries (number).
7. Direct project beneficiaries that are female percentage).

The project has been restructured from two to three components (to include the third component) as follows:

Component 1: to be implemented by the GHS will focus on strengthening supply, creating demand, and increasing ownership and accountability of district level stakeholders, outreach workers, community leaders and household members. The component will support the uptake of a package of essential community nutrition and health actions (ECNHA) and address gaps in knowledge and community practices such as reproductive behavior, nutritional support for pregnant women and young children, recognition of illness, home management of sick children, disease prevention and care-seeking behavior.

Component 2: to be implemented by the MOH would address institutional strengthening capacity building, supervision, monitoring and evaluation, and project management. This will be done through financing needed technical assistance, policy reviews, national workshops, and also provide the sector oversight, monitoring and evaluation to support the GHS and its decentralized levels in the implementation of key interventions under Component 1.

Component 3: Epidemic Preparedness and Control to assist Ghana strengthen its health systems with more effective epidemic preparedness plans to respond adequately to disease outbreaks. This is in response to the recent outbreak of Ebola Virus Disease (EVD) in West Africa.

Community Performance-based Financing Pilot

A sub-component of the World-Bank supported MCHNP seeks to pilot a community performance-based financing (cPBF) system. The cPBF is to be piloted in two districts each in four target regions namely Northern, Upper East, Upper West and Volta. The pilot selected districts are North Gonja, West Gonja, Bawku West, Talensi, Lawra, Nandom, Agotime Ziope, and Kadjebi.

Performance-Based Financing (PBF) is a system approach which seeks to create demand and strengthen focus on results, both quantity and quality; and to address equity by increasing coverage of high impact interventions. This approach entails making facilities autonomous agencies that work for the benefit of health-related goals and their staff.

The role offers a highly attractive opportunity to work and contribute to policy implementation in the health sector and supports the preparation and completion of documents according to project management guidelines.

Project implementation will require full time attention to coordination and ensuring the necessary processes are implemented in a timely manner. In view of the need to provide consistent support, information and guidance especially to service delivery levels (districts, sub districts, and the community levels) during implementation of the project, approval has been given for the recruitment of field coordinators to support the GHS in the implementation of the project in all the regions. This role offers a highly attractive opportunity to work and contribute to the health sector's work towards providing health care to rural populations and to pregnant women, children and other vulnerable groups

The selected candidates will be based in Accra and work with the respective zones. The selected candidates will also travel a minimum of four weeks in each quarter to the zone they will be working with. Transport expenses and DSA cost will be provided by the project and not included in the remuneration.

Objective

The main objective of the assignment of the Field Coordinators is to provide technical assistance to cPBF secretariat and district to plan and implement cPBF, generate periodic reports, monitor and undertake project implementation activities. This TOR outlines the scope of work and task to be performed under this position.

A. Ghana cPBF

The four target regions of the cPBF pilot were selected based on their high burden of maternal and child health conditions, especially among the lowest wealth quintile. The selection of the 8 districts was based on a ranking performed by the Impact Evaluation (IE) team, using maternal and child health and nutrition indicators from the District Health Information Management System (DHIMS2).¹ The selection of the intervention and control sub-districts for the pilot was based on a scientific randomization.

¹ Districts were selected from the middle tier of the ranking based on the z score ranking of 9 maternal, child health and nutrition indicators in DHIMS2.

The Ghana cPBF model is a pilot implemented within the national health system, which will be targeted at the Community-based Health Planning and Services (CHPS) zone level. The cPBF pays for results based on the achievement and verification of maternal, child health and nutrition indicators achieved through outreaches, static clinics, home visits, and community durbars amongst others.

This cPBF introduces incentives targeting the Community Health Officers (CHOs) and a team of active Community Health Volunteers (CHVs)—collectively referred to as Community Health Teams, to improve health behaviors and health service utilization. Community Health Teams (CHTs) will be rewarded with incentives for performance, based on agreed quantity and quality target indicators achieved on a quarterly basis. Additionally, midwives associated with the CHPS zones would be rewarded based on pre-defined indicators.

The incentivized Quantity and Quality indicators will be verified on a quarterly basis by the Internal Verification Team, composed of the District Assembly and the District Health Team. In initial phases, the cPBF indicators will be reported manually in paper forms, however within the first quarter of cPBF implementation it is expected that an electronic mechanism will be introduced, also known as the “Dashboard.” The Dashboard will be an Operations Management Portal which will be an easy-to-use and flexible data capture and management tool with data entered electronically directly at the CHPS level. The Dashboard will be a real-time mechanism to view indicators and trends at each level of the health system- it will constitute a supervision and management tool for the CHPS level, and will enable the automatic calculation of the CPBF payout per CHPS Zone,

Scope of Work

Upon initiation of the contract, the field coordinators will undertake an initial scoping exercise in collaboration with the cPBF secretariat to fully understand the aspects of the consultancy. The Field Coordinators will support the cPBF secretariat for timely and high-quality program implementation and support mainly through filed work supervision.

The cPBF field coordinators will provide ongoing support to the Ghana Health Service (GHS) on the implementation of the cPBF pilot in the 8 districts.

The Field Coordinators will be based in Accra but will spend at least 80% of his/her time traveling to the eight (8) cPBF pilot districts to provide technical support to the districts, sub-districts and implementing CHPS zones. The 8 cPBF pilot districts in the four regions are as follows:

1. **Northern:** North Gonja and West Gonja
2. **Upper East:** Bawku West and Talensi
3. **Upper West:** Lawra and Nandom
4. **Volta:** Agortime Ziope, Kadjebi

Activities/Tasks to be Performed

- i. Conduct regular visits to the 8 cPBF districts, their sub-districts and CHPS zones (spend at least 80% of his/her time in the districts) to assist in the business planning, contracting, verification and feedback processes.
- ii. Collaborate with the project team to prepare summary reports and tables (including project data) on implementation activities to implementation timelines
- iii. Assist with implementation of cPBF M&E framework, i.e. the “Dashboard” system implemented in the 8 districts
- iv. Provide support to the District assembly, District, sub district and CHPS levels in ensuring that all requirements defined in the cPBF manual are met (including filing system, deadline, reporting, etc.)
- v. In the districts which have initiated cPBF, provide ongoing monitoring and supervisory assistance and guidance to ensure the cPBF principles are respected
- vi. Support in the conduct of training workshop and annual review meetings
- vii. Liaise with the various stakeholders involved in the project implementation to ensure smooth roll out of the project.
- viii. Ensure accurate reports are submitted in a timely manner for all activities occurring within the project sites.

Deliverables

The Field Coordinators will report directly to the Project Coordinator and will provide the following deliverables:

- Project reports (including project data) according to required schedules and as assigned
- Reports of proceedings of workshops, trainings events and and supervision assignments
- Development and Revision of manuals for training, project implementation and reporting
- Submission of Financial statements reports
- Analysis and report on performance of implementing regions according to agreed indicators

Supervision of Project Officer

- The Project Coordinator shall supervise and oversee all activities and duties performed by the Field coordinators in line with the project deliverables and shall provide clear directives and all relevant project documents related to the project and assignments.

Duration of Assignment

- The contract is a time-based type of consultancy for a period of one year. The Field Coordinators shall work full time for twelve (12) man months each consistent with the

public sector (MoH) regulations on hours of work per day, working week and annual leave commensurate with their grade.

Qualification and Experience

1. A university degree in a relevant field and at least 2 years relevant working experience in the health sector project management. A master's degree will be an added advantage
2. Demonstrated ability to work respectfully and constructively with local partners, including community committees and governments agencies.
3. Commitment to the principles of participatory team management and community-oriented development.
4. Effective verbal and written communication, multi-tasking, organizational skills.
5. Proven proficiency in the use of Microsoft Office applications, i.e., MS word, Excel, PowerPoint and Email software
6. Proven ability to work effectively both independently and in a team based environment
7. Demonstrated willingness to be flexible and adaptable to changing priorities

Evaluation Criteria

The consultant shall be selected based on the individual consultant selection method of the World Bank's consultant selection guidelines. Main criteria for the selection will be relevant work experience and qualifications.