



Meghalaya Health Systems Strengthening Project

Government of Meghalaya



No: DHS/H-3/MHSSP/Hiring/2022-23 (XXVIII)

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Expression of Interest

The Meghalaya Health Systems Strengthening Project (MHSSP) under the DoH&FW, Government of Meghalaya is inviting eligible consultants to apply for the post of Comprehensive Primary Health Care (CPHC) and Rashtriya Bal Swasthya Karyakram (RBSK) Consultant for implementation of the CPHC and RBSK Programs across the State. The detailed Terms of Reference and other Terms & Conditions for the post can be downloaded from the Project website: <https://www.meghssp.org> under the Recruitment tab.

Sd/-

Ramkumar S, IAS

Project Director, MHSSP

The document is digitally approved. Hence signature is not needed.



Meghalaya Health Systems Strengthening Project

Dept. of Health & Family Welfare, Government of Meghalaya

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TERMS OF REFERENCE FOR TERMS OF REFERENCE FOR CPHC And RBSK CONSULTANT UNDER THE MEGHALAYA HEALTH SYSTEMS STRENGTHENING (MHSS) PROJECT

RFP: CPHC and RBSK Consultant-Individual

Introduction to the Project

Meghalaya, a small state in the North East India, carved out of Assam in 1972, has a Legislative Assembly and three autonomous Hill Councils, covering all 11 districts. With a population of 3 million (2011), the state is on average poorer than rest of India, but more equitable, as only 12 percent of the population live below the national poverty line in comparison to 22 percent at the national level (2011-12). The state is predominantly rural (80 percent), with a hilly terrain, rapid urbanization and poor connectivity. With 86 percent of the population categorized as Scheduled Tribe, Meghalaya's main ethnic communities are the Khasis, the Garos and the Jaintias. The complexities in the governance structures provide unique challenges to social and health outcomes, that need local solutions.

The Government of Meghalaya is committed to improving the health status of its citizens. Despite considerable challenges, the state has shown progress in various health indicators over the last decades. To further accelerate the progress, the Department of Health and Family Welfare (DoHFW), Government of Meghalaya with technical and financial support from the World Bank, is implementing 'Meghalaya Health Systems Strengthening Project' (MHSSP) in the state. The MHSSP intends to improve accountability, quality and utilization of health services in Meghalaya, especially among public facilities at primary health center (PHC), community health center (CHC) and district hospital levels. In order to achieve its objectives, the MHSSP will over the next five years adopt a system approach to combine results-based financing and input-based financing with the aim of achieving enhanced performance management in the public sector.

The project activities are structured across 4 broad areas, while the first three address different parts of the project development objective (Accountability, Quality and Utilization), the fourth area is related to Contingent Emergency Response Component. The details are as under:

Area 1: Improve accountability and strengthen governance through Internal performance agreements: This will support the creation of an enabling environment for reforms at each level (state, district and sub-district), enhance performance of the DoHFW and its subsidiaries, and improve efficiency of the public health administration.

Area 2: Strengthen Systems to Sustain Quality of health service: This will focus on improving the quality of care through a comprehensive quality assurance for health service; augmenting systems related to human resource management, bio-medical waste management, procurement and supply chain, and project management capacity.

Area 3: Increase coverage and utilization of quality health services: This will mainly focus on increasing the coverage of the state health insurance program, pilot for strengthening primary care response through the Health and Wellness Centers, strengthening community interventions and engagement.

Area 4: Contingent Emergency Response Component: A mechanism for provision of immediate response to an Eligible Crisis or Emergency, as needed.

Scope of Work:

The consultant will be working on the Meghalaya Health Systems Strengthening Project (MHSSP) under the Department of Health and Family Welfare, Government of Meghalaya. They will work in collaboration with the State Training Centre and the Training Team at MHSSP.

The consultant will be in charge of:

1. Comprehensive Primary Health Care Program Implementation across the State:

Training:

- a. Training of primary health care providers at block and district level in CPHC
- b. Developing training modules for various health care provider cadres.
- c. Developing the training plan for all identified health facilities in the State.
- d. Implementing the training plan which includes travelling to the facilities and providing comprehensive training to the staff.
- e. Conduct long-term evaluation and effectiveness of the training on a regular basis

Implementation and Coordination of healthcare pathways:

- a. Streamlining the activities of screening, diagnosis, and management of all diseases, including NCDs and cancers, covered by HWCs in the state of Meghalaya.
- b. Providing referral systems to tertiary care centres in the State and at the National Level.

2. RBSK Programme Implementation:

Training

- a. Training of RBSK teams at block and district level in screening and diagnosis of children across the state, includes travelling to the facilities and providing comprehensive training
- b. Developing interactive and multi-media training modules for RBSK teams.
- c. Developing a systematic training plan and reskilling plan for all RBSK teams in the State.
- d. Conduct long-term evaluation and effectiveness of the training on a regular basis

Implementation and Coordination of healthcare pathways

- a. Streamlining the activities of screening, diagnosis, and management of the 4 Ds covered by the RBSK Program in the state of Meghalaya.
- b. Creation of a referral system for specialist care of detected issues, and collaboration with institutions in Meghalaya and in other states for management of various health issues. For example, cardiac disease, orthopaedic deformities, cleft lip, intellectual disability, etc. These programs will need to be built on a sustainable and long-term foundation to ensure continuity of care and training.
- c. Strengthening the digital reporting and tracking systems in the RBSK Program.

3. Data collection and analysis in the areas of CPHC and RBSK to build knowledge on disease burden in the state to help formulate future health policy.

Deliverables:

1. Successful roll-out of the CPHC program specifically for non-communicable diseases and cancer screening and treatment:
 - a. Training Modules created
 - b. Training Plan developed
 - c. Implementation of approved Training Plan – Attendance Sheets of all training sessions to be submitted
 - d. Submission of Training Assessment Reports as per the agreed timeline
 - e. A structured screening and diagnosis system set up in the health facilities
 - f. An effective Referral System created and in place for the State to use
2. Successful roll-out of RBSK training and coordination with national tertiary care centres for early interventions not available in Meghalaya.
 - a. Training Modules created
 - b. Training Plan developed
 - c. Implementation of approved Training Plan – Attendance Sheets of all training sessions to be submitted
 - d. Submission of Training Assessment Reports as per the agreed timeline
 - e. A structured screening and diagnosis system set up in the health facilities
 - f. An effective Referral System created and in place for the State to use
3. Submission of a report detailing the changing disease burden of the State as per various types of diseases including MCH, Infectious, and NCDs, and the way forward in the implementation of effective health care pathways

Appointment:

The duration of the assignment is for a minimum period of 1 year which may be extended based on mutually agreed terms and conditions.

Place of Posting:

Shillong, Meghalaya MHSSP office as a base location on a full-time basis. Travel across the State is expected.

Desired Educational Qualification and Experience:

1. MBBS with Masters in Public Health from recognized and reputed universities/institutions.
2. Clinical experience in maternal and child health, nutrition, and primary health care systems.
3. At least 15 years of experience in managing health systems strengthening and training health care staff at scale.
4. Experience in creating a training curriculum for comprehensive health care providers
5. Experience in creating training modules for the RBSK program
6. Ability to create collaborations between public health systems and higher centres of treatment not available locally

7. Familiar with usage of digital health reporting systems
8. Knowledge of social behaviour change strategies.

Selection Process:

For the selection of the Candidate, 80% weightage will be given to the suitability of the candidate based on the above parameters, and 20% weightage will be given to the remuneration sought by the candidate.

Deployment:

The Selected Candidate would be required to travel extensively within the State. The Selected candidate would be paid a monthly remuneration/professional fee. Costs relating to official travel etc. will be borne by MHSSP.

Submission of Offer:

Offers for the position should include a detailed resume with supporting documents (including salary slips/invoices of previous work experience), a write-up on the candidate's suitability for the assignment, and expected remuneration. The Offer must reach MHSSP electronically (pmu.admin@meghssp.org) with the subject line-Individual Consultant on or before 5:00 PM of 17th Aug 2022. Each Application submitted electronically would be acknowledged and only this acknowledgement will constitute proof of submission.