



TERMS OF REFERENCE FOR END TERM EVALUATION

A NATIONAL TENDER

FOR THE PROCUREMENT OF A CONSULTING FIRM TO UNDERTAKE THE END TERM EVALUATION

OF

**COMMUNITY SYSTEM STRENGTHENING TO RESPOND TO TB/HIV AND MALARIA
AND OTHER HEALTH ISSUES FOR BETTER HEALTH OUTCOMES IN RANGWE SUB
COUNTY, HOMABAY COUNTY.**

14TH OCTOBER 2020

The End Term Evaluation of Community System Strengthening (CSS) to respond to HIV, TB, Malaria, MNCH and other health issues for better health outcomes in Rangwe Sub County, Homabay County.

1. Summary of the CSS Evaluation

- 1.1. Purpose:** The End Term Evaluation is to provide an assessment of the integrated community system strengthening project, the achievement of its objectives as well as document lessons learnt/best practises, case studies and most significant change in Rangwe Sub County, Homa Bay County.
- 1.2. Partners:** ADS Nyanza M&E and program representative and County and Sub County HMT
- 1.3. Duration:** 30 – 35 days
- 1.4. Estimated Dates:** 2nd November 2020 to 19th February 2021.
- 1.5. Geographical Location:** Rangwe Sub County, Homa Bay County
- 1.6. Target Population:** All
- 1.7. Deliverables:** Inception Report, Draft and Final Evaluation Report, Documentation booklet covering Human Interest Stories, Most Significant Change, Case studies including Emerging and promising practices and lessons learnt that should inform scale up
- 1.8. Methodology:** Apply both Quantitative and Qualitative Approaches
- 1.9. Evaluation Management Team:** KRCS M&E and program representatives, ADS Nyanza M&E and program representative and Homa Bay County and Rangwe Sub County HMT.

2. Background Information

Kenya's Community Health Strategy recommends the integration of service provision at community level. The strategy defines the role of CHVs in basic healthcare with emphasis on integrated model of preventive and promotive health service delivery. In this project, KRCS and ADS Nyanza piloted an integrated model on the implementation of the three diseases that is TB, HIV and Malaria together with Maternal New-born and Child health in Rangwe Sub County in Homa bay County aimed at improving Community Health Systems as well as health outcomes for HIV, TB, Malaria and Maternal and Child Health using an integrated community health approach.

Improved health is the result of an array of policies, services, and other activities, which are developed and implemented by a wide range of actors. These actors include government or public health systems (made up of public health facilities, regulatory and governance bodies, and state-employed health care professionals), as well as community groups, community-based organizations and networks, non-governmental organizations, faith-based organizations and private sector organizations – both formal and informal. Together, these actors constitute the complex overall system that serves to protect and promote health and human rights.

Within this complex overall system, **community systems** are the structures, mechanisms, processes, and actors through which communities act on the challenges and needs they face. They are made up of different types of entities: community members, formal and informal community organizations and networks, and other civil society organizations. They are usually less formalized and less clearly defined as a “system” than health systems. What the entities that make up community systems have in common is that they have close links with communities and, therefore, better understand the issues facing those that are most affected by different health challenges.

Community System Strengthening (CSS) is particularly important for ensuring that programs reach excluded and marginalized populations whose health and human rights are compromised. This includes “key populations” in the particular context of HIV and AIDS. Under the Global Fund’s definition, CSS is a package designed to support the development of functional community organizations and networks and build the capacity of existing community sector organizations to monitor health and human rights services and programs; to advocate for change and accountability; to strengthen community organizing and mobilization; and to deliver services effectively.

In this project, CSS focused on *strengthening* communities and community organizations to play a variety of roles in service delivery, social mobilization, accountability and advocacy. The core CSS interventions are;

- *Intervention 1: community- based monitoring for accountability*
- *Intervention 2: advocacy for social accountability*
- *Intervention 3: social mobilization, building community linkages, collaboration and coordination*
- *Intervention 4: institutional capacity building, planning and leadership development in the community sector.*

In line with full integration, community generated data were expected to flow from the community to the national health information system (DHIS and TIBU).

3. Project Goals and Objectives

3.1 Main objective

To improve health outcomes for HIV, TB, Malaria and Maternal and child health using an integrated community health approach in Homabay, Vihiga and Kwale Counties by 2017.

3.2 Specific objectives

- i. To identify and document the current approaches for community health interventions in the three counties.
- ii. To develop and implement an integrated approach to community health for TB/HIV malaria and Maternal Child health using the community health strategy.
- iii. To improve community based health information system in the three counties.
- iv. To demonstrate results in terms of health outcomes, efficiency gains, partner coordination, County ownership and best practices.
- v. To enhance the functionality of Community Health systems for effective health service delivery.

3.3 Integrated approach to community health services

The proposed framework includes 5 major key steps namely:

1. Understanding the current situation and barriers to integrated community health services.
2. Implementation of integrated community health services. This consist of four key components:
 - a. Community networks, linkages, partnerships and coordination –enabling effective service delivery mechanisms and advocacy and maximizing on resources and impacts
 - b. Resources mobilization and capacity building – including human resources with appropriate personal, technical and organizational capacities, financing (including operational and core funding) and material resources (infrastructure, information and essential medical and other commodities and technologies).

- c. Community activities and service delivery – accessible to all who need them, evidence-informed and based on community assessment of resources and needs.
 - d. Organizational and leadership strengthening – including management, accountability and leadership for organizations and community systems.
3. Demonstrating results:
- a. Enhanced community health systems functionality for effective health service delivery
 - b. Improved research and documentation of impact and successful models in community programming to inform policy, programming and scale up
4. In this integrated approach to community health services, two cross-cutting issues are proposed namely
- a. Monitoring and evaluation and planning. This is monitoring and evaluation, evidence-building and research, learning, planning and knowledge management.
 - b. Enabling environments and advocacy. These include community engagement and advocacy for improving the policy, legal and governance environments. County ownership and partnership will be strengthened.

4. Evaluation Purpose, Scope & Deliverables

4.1 Purpose:

KRCS and ADS Nyanza are committed to upholding accountability to the communities and stakeholders. Both are seeking to evaluate the integrated Community System Strengthening project to provide the extent to which the project realised its objectives in Rangwe Sub County, Homa bay County and document Emerging and Promising Practices/lessons learnt, most significant change and case studies. This will be important to inform the future adoption of the integrated community health approaches when implementing integrated HIV, TB and Malaria services.

4.2 Evaluation Objectives:

- i. To assess the sustainability of the integrated approach to community health for TB/HIV, malaria and maternal child health using the community health strategy.
- ii. To appraise the community systems strengthening (CSS) model, its functionality for effective health service delivery, and its effectiveness in the provision of an integrated community health services for TB/HIV, malaria and maternal child health.
- iii. To determine the accountability levels of the integrated approach using community based health information system in the sub county.
- iv. To assess level of community engagement, partner coordination and effectiveness in improving health outcomes of the target beneficiaries.
- v. To determine the extent to which CSS approach promoted the development of informed, capable and coordinated communities' structures to improve health outcomes in the project.
- vi. To determine the extent to which the Six Core Components of Community Systems under the GF CSS Framework was implemented and the results/outcomes from each component. https://www.theglobalfund.org/media/6428/core_css_framework_en.pdf
- vii. To document key Emerging and promising practices/lessons learnt, best practices, most significant change and case studies to help to further improve the definition and scope of CSS, which will continue to be revisited and modified in the light of lessons learned.

4.3 Scope of Work:

- **The project period:** 2016 to 2019.
- **Geographical coverage:** 26 Community Health Units in Rangwe Sub-county, Homa bay County.
- **Target groups:** The evaluation will target all community members, community health volunteers and networks within Rangwe sub-county. The integrated community system strengthening was being implemented in the entire sub-county.
- **Expected Outputs:**
 - a) A technical and financial response to the call for applications outlining the understanding of the task, detailing the evaluation methodology, data analysis plan, work plan with tentative timelines and summary budget.
 - b) Initial discussions with the consulting firm on the evaluation work plan, methodology and logistics. This will lead to the approved work plan and road map with clear timelines.
 - c) An inception report of the desk review prior to field work to demonstrate a clear understanding and a practical work plan for the evaluation.
 - d) Meeting with KRCS and ADS Nyanza team to discuss inception report feedback.
 - e) Submission of appropriate tools, approaches and plan for data collection as well as data analysis plan for input and approval by the KRCS and ADS Nyanza team.
 - f) Conduct field data collection in a consistent and comprehensive manner
 - g) Data analyses and submission of the draft evaluation report for review and input. The report should not be limited to executive summary, introduction, methodology, findings/discussions, lessons learnt and best practices, case studies and human interest stories, conclusion and recommendations.
 - h) Meeting with KRCS and ADS Nyanza team to discuss the draft evaluation report and provide feedback to the evaluation team.
 - i) Submission of the final evaluation report to KRCS and ADS Nyanza, including:
 - i. The raw data, the database which has been cleaned (both qualitative and quantitative, including original field notes for in-depth interviews and focus group discussions. Copies of original and cleaned data sets with codebook.)
 - ii. All recorded material including video and audio recording and photos.
 - iii. A logical inventory of material handed over.
 - iv. KRCS/ADS Nyanza will have sole ownership of all final data and any findings shall only be shared or reproduced with the permission of KRCS/ADS Nyanza.

4.4 Deliverables:

The evaluation will be phased with deliverables at agreed intervals that will be discussed and agreed with the consulting firm. However, at the minimum;

- a. Inception report detailing the methodology to be applied, work plan and data collection tools, and financial proposal.
- b. A draft and final end term evaluation report covering executive summary, introduction, methodology, findings/discussions, conclusion and recommendations.

- c. Documentation booklet covering Human Interest Stories, Most Significant Change, Case studies including Emerging and promising practices and lessons learnt that should inform scale up.

5. Evaluation Criteria and Key questions.

The process will pay attention and not be limited to the following:

5.1 Relevance:

- i. Does the community realize the need for the project?
- ii. Do the beneficiaries identify any benefits from the interventions? From their perspective, how has the intervention helped them?
- iii. How relevant are /were the interventions to county/national government priorities

5.2 Effectiveness:

- i. To what extent was the project expected results achieved (output and outcomes)?
- ii. What changes can be attributed to the project (positive, negative, expected and unexpected)
- iii. Were all the activities carried out? If not, why?
- iv. Is there any need to adjust the project response to the changes in the project environment? If yes, what adjustments were made and were they timely?
- v. To what extent were gender equity issues integrated throughout the project cycle?

5.3 Efficiency

- i. Were all activities undertaken on time as planned?
- ii. Were all activities done within the budget? If there were any significant variances (whether early or late, over or under expenditure), what caused them?
- iii. How did the efficiency affect the effectiveness of the project?

5.4 Sustainability:

- i. To what extent has the project integrated environmental sustainability into its relevant activities?
- ii. What measures have been put in place to ensure financial sustainability?
- iii. What measures have been put in place to ensure institutional sustainability?
- iv. To what extent have socio-cultural factors affected uptake of project interventions? And what measures have been/should be taken to address the same?

5.5 Beneficiary participation and accountability

- i. How much do the beneficiaries understand the project?
- ii. How much were beneficiaries involved in the project decision making?
- iii. By the time of evaluation, what has been the community contribution to the interventions?
- iv. What do the beneficiaries feel is the effect of the project on their lives in the short term and in the long run?
- v. To what extent were community groups and volunteers involved in the project activities? Have these groups begun to identify, plan, implement and manage their project related activities independently?
- vi. What are the strategies used for Beneficiary communication and complains mechanism?

5.6 Organizational Learning and best practices

- i. What strategies were employed? Which ones worked best? Which ones did not?
- ii. Are there any lessons learnt and good practices can be deduced from the project?

5.7 Partnerships, stakeholder management and Integration:

- i. What were the respective responsibilities and contributions of donor partners, implementing partner and other local partners?
- ii. To what extent were the interventions integrated into the Kenya government national programs, policies and orientation?
- iii. To what extent was capacity building of the local partners done and what were their positive and negative effects?
- iv. What are the advantages and disadvantages of the integration sector components?
- v. To what extent was advocacy (e.g., attempts to influence donors, partners, government concerning their policies and actions) considered and what were their positive and negative effects?

6. Survey/Evaluation Methodology

The KRCS and ADS Nyanza highly recommend that the evaluator considers effective approaches and design that responds to the evaluation objectives and scope of this assignment, which should take into account the available program data throughout the project cycle. The lead consultant may recommend other effective approaches to meet the data requirements for the evaluation as agreed with KRCS and ADS Nyanza team.

The lead consultant will also be required to recommend sampling techniques for the evaluation, which adheres to the laws of Statistical Regularity and Inertia of large numbers. All findings should be scientific, evidenced and critically evaluated for validity and reliability. The data collection and analysis methods must be comprehensively explained in all reports.

7. Evaluation Quality & Ethical Standards

The consultant shall take all reasonable steps to ensure that the evaluation is designed and conducted to respect and protect the rights and welfare of the people and communities involved and to ensure that the evaluation is technically accurate and reliable, is conducted in a transparent and impartial manner, and contributes to organizational learning and accountability. Therefore, the evaluation team shall be required to adhere to the evaluation standards and applicable practices as recommended by International Federation of Red Cross and Red Crescent Societies.

- i. **Utility:** Evaluations must be useful and used.
- ii. **Feasibility:** Evaluations must be realistic, diplomatic, and managed in a sensible, cost effective manner.
- iii. **Ethics & Legality:** Evaluations must be conducted in an ethical and legal manner, with particular regard for the welfare of those involved in and affected by the evaluation.
- iv. **Impartiality & Independence;** Evaluations should be impartial, providing a comprehensive and unbiased assessment that takes into account the views of all stakeholders.
- v. **Transparency:** Evaluation activities should reflect an attitude of openness and transparency.
- vi. **Accuracy:** Evaluations should be technical accurate, providing sufficient information about the data collection, analysis, and interpretation methods so that its worth or merit can be determined.

- vii. **Participation:** Stakeholders should be consulted and meaningfully involved in the evaluation process when feasible and appropriate.
- viii. **Collaboration:** Collaboration between key operating partners in the evaluation process improves the legitimacy and utility of the evaluation.

8. Qualifications and Experience for Consultants

For the purposes of this evaluation, the Consultancy firm should have extensive experience and knowledge in evaluation of health programs in the region. Among the desirable qualifications for lead consultant are:

- i. Firms in academia, social research, or evaluations with a background in Research Methods, HIV/AIDS, Health Systems Strengthening or other related fields.
- ii. Extensive experience of conducting evaluations along OECD- DAC assessment criteria, ideally leading an evaluation team and experience of designing mixed methods studies / tools, data analysis etc.
- iii. Master's in social sciences (Community Health, MPH, Statistics or other relevant field)
- iv. More than 10 years of experience in conducting evaluations in the region
- v. Experience and knowledge Health Systems Strengthening in Kenya.
- vi. In-depth knowledge of quantitative and qualitative research methods.
- vii. Competent in designing and using mobile phone technology for data collection, statistical packages for quantitative and qualitative analyses.
- viii. Excellent analytical (qualitative and quantitative) and writing in English
- ix. A good grasp or knowledge of local language would be an added advantage.
- x. Good understanding and proven track record in safeguarding / do not harm principle
- xi. Experience in conducting data collection during the COVID-19 pandemic to ensure safety of both researchers and respondents is a critical requirement
- xii. Excellent presentation and writing skills.
- xiii. Experience working in Nyanza, highly recommended

9. Management of the evaluation

Duration:

The entire survey will take a minimum of maximum of 25 days (5 days preparation, 10 days data collection and 10 days analysis, report writing and dissemination).

In addition, the documentation and writing of human interest stories, case studies and emerging and promising practices will take a maximum of 10 days (5 days in the field and 5 days writing)

The scheduled start date is 2nd November 2020 and end date is 19th February 2021

9.1 Deliverables:

DELIVERABLE	FORM
Technical Proposal	2 Hard Copies in own envelope and a Soft copy
Financial Proposal	2 Hard Copies in own envelope and a Soft copy
Inception Report	2 Hard Copies and Soft copy
The Data Submission	Soft and Flash disc
Draft Report	Printed and soft
Final Report	4 Hard Copies Printed and bound, CD ROM and Soft Copy
Printed Booklet of Documentation	500 Printed copies and the Soft Copy

9.2 Evaluation Management Team:

The project management teams will include the implementing partners namely ADS Nyanza, KRCS and Homabay County/Rangwe Sub County HMT. Their roles are envisaged but not limited to the following;

1. Role of ADS Nyanza (project and M&E team)
 - a) Procure the consulting firm
 - b) Provide logistical support to the team of consultants
 - c) In coordination with the lead consultant, recruit the research team.
 - d) Coordinate Logistics and field work
 - e) Payment of the Evaluation team as agreed with the consulting firm.
 - f) Provide Consulting team with all documents as required.
 - g) Organize dissemination meeting

2. Role of KRCS (project and M&E team)
 - a) Review and approval of the terms of reference (ToR)
 - b) Assist in technical evaluation of the tenders
 - c) Oversight and technical support
 - d) Disburse funds to ADS – Nyanza for the exercise.
 - e) Review and approve Evaluation report
 - f) Review and approve Documentation booklet

3. Role of CHMT and SCHMT
 - a) Provide oversight in the coordination of data gathering including abstraction
 - b) Participate in the validation and dissemination meeting
 - c) Provide feedback to the consulting team

10. Application Requirements

- For Application format, refer to the annex 1 - Technical Proposal Format and Annex 2 – Budget Template
- For required documents as evidence of qualification, refer to Annex 1- Technical Proposal Format
- For understanding how the bid will be evaluated, refer to Annex 3 – Tender Evaluation Criteria

11. Submission of proposal

State the application deadline date and time for the proposal.

- The application deadline is on or before 11.00 am, Thursday 29th October 2020.
- Tender Opening is scheduled for 02.30 pm on Thursday, 29th October 2020 through Zoom.
- Join Zoom Meeting
<https://us02web.zoom.us/j/85748554819?pwd=NHkwQktWVVoXSW9YcnBxcllZMkZWdz09>

Meeting ID: 857 4855 4819

Passcode: 965915

Proposal to be addressed to

Complete Tender Documents (Separate Technical and Financial Proposals), enclosed in one outer sealed envelope **MUST** be clearly marked by tender number and description

“TENDER: PROCUREMENT OF CONSULTING FIRM TO CONDUCT END TERM EVALUATION OF CSS IN RANGWE SUB COUNTY, HOMABAY COUNTY.”

and should be addressed to;

**The Executive Director,
ADS-Nyanza
P.O. Box 2490-40100 Kisumu, Kenya
Email-ads@ads-nyanza.org**

And must be deposited in the **Tender Box** located at the Reception on the **ADS Nyanza Office** in **Kisumu, Milimani** behind Kisumu County Headquarters, Church Road, St. Peters Church Building, on or before **01.00 pm., Thursday 29th October 2020**. Late submissions will not be accepted. **Technical Proposals will be opened at 02:30 pm** on the same day in the presence of the bidders and/or their representatives who choose to attend the **online ZOOM meeting**.

**Finance and Administration Manager
For, Executive Director**

ANNEX 1: TECHNICAL PROPOSAL FORMAT

1. **Introduction:** description of the firm, the firm’s qualifications and statutory compliance. <Max 1 page>.
2. **Back ground:** Understanding of the project, context and requirements for services, key questions. <Max 2 pages>.
3. **Proposed methodology** – Describe the proposed design for the evaluation. Indicate methods to be used for each objective and highlight any areas where adjustment may be recommended. The targeted respondents should be indicated for each objective. Proposed detailed questions should be indicated. Detailed sample calculation methods and sampling procedure needs to be indicated. <Max 5 pages>.
4. **Firms experience** in undertaking assignments of similar nature and experience from the geographical area for other major clients (Table of: *Name of organization, name of assignment, duration of assignment (Dates), reference person contacts*). <Max 2 pages>.
5. **Proposed team** composition as per the table below. <Max 1 page>.

Name of Team Member	Highest Level of Qualification	General Years of Experience related to the task at hand	Number of days to be engaged	Roles under this assignment

6. **Work plan** (Gantt chart of activity and week of implementation) – 1 page –

ANNEX 2: BUDGET TEMPLATE

2A: The consultant shall only quote for the items below as ADS Nyanza will manage other costs related to all logistics, research enumerators and field supervision.

Item	Unit of Measure	# of Units	Unit Cost	Total Cost (Ksh.)
Consultancy Fee (for the whole evaluation period) • Itemise team members and their costs				
Consultancy Fee (for the documentation) field work and narrative writing • Itemise team members and their costs				
Field data Collection • Itemise team members and their costs				
Office expenses (Printing, photocopy, binding, communication costs etc.)				
Others (specify)				
Grand Total				

2B: Documentation Booklet: The consultant shall only quote for the development of the document as the writing is covered in the evaluation scope above.

Item	Unit of Measure	# of Units	Unit Cost	Total Cost (Ksh.)
Design and Layout of the document (<i>approximately 100 pages</i>)				
Full colour printing of the 500 copies of the booklet				
Others (specify)				
Grand Total				

ANNEX 3: TENDER EVALUATION CRITERIA

A three stage evaluation procedure will be used to evaluate all proposals from bidders that meet the **Administrative compliance**. The total number of points which each bidder may obtain for its proposal is:

- Eligibility compliance - **Pass**
- Technical Proposal **60 marks**
- Oral presentation **30 marks**
- Financial Proposal **10 marks**

1. Eligibility Criteria

Applicants will have to be a legal entity registered in Kenya with the right to enter a contractual agreement with ADS Nyanza. The applicant must have no history of legal proceedings related to fraud or corruption. The applicant must be

1. A qualified entity (firm /company) with
2. Valid Registration,
3. PIN certificate,
4. Tax compliance
5. Two Sample reports of previous assignments.

Only applications who meet all the above eligibility requirement will move to the tender evaluation.

2. Evaluation of the Technical Proposal

The technical proposal shall be evaluated on the basis of its responsiveness to the TOR. Specifically, the following criteria shall apply:

Evaluation Criteria	Maximum Points Possible	Bidders score	Remarks
Introduction: description of the firm, the firm's qualifications and statutory compliance	5		
Background: Understanding of the project, context and requirements for services	10		
Proposed Methodology: The proposed methodology MUST provide an indication of its effectiveness and added value in the proposed assignment.	20		
Firms Experience in undertaking assignments of similar nature and experience from related geographical area for other major clients: Provide a summary and supporting information on overall years of experience, and related technical and geographic coverage experience	10		
Proposed Team Composition: <ul style="list-style-type: none">• Tabulate the team composition to include the general qualifications, suitability for the specific task to be assigned and overall years of relevant experience to the proposed assignment.• The proposed team composition should	5		

balance effectively with the necessary skills and competencies required to undertake the proposed assignment. • Lead Consultant Qualifications – should be as per the TOR			
Work Plan: A Detailed logical, weekly work plan for the assignment MUST be provided.	10		
TOTAL SCORE	60		

Any firm with at least a score of 42 (70%) from the technical evaluation, will proceed and invited for the second stage - oral presentation.

3. Oral presentation

Criteria	Maximum Points Possible	Bidders score	Remarks
Understanding of the assignment and clarity on the proposed methodology	15		
Roadmap is realistic and aligned to the methodology	10		
Presentation of: detailed CVs of team to be involved, evidence of legal Compliance (Registration, PIN certificate, tax compliance etc.) and two Sample reports of previous assignments.	5		
Total	30		

For the firm to proceed to the last stage – financial proposal opening and evaluation, the minimum score must be 63 (70%) of the combined technical proposal and the oral presentation.

4. Evaluation of the Financial Proposal

The Financial Proposal shall be prepared in accordance to **Annex 2**. The maximum number of points for the Financial Proposal shall be **10% (10 points)**. This maximum number of points will be allocated to the realistic and logical Financial Proposal that is within the local market rates. All other Financial Proposals will receive points in an inverse proportion according to the below formula:

Points for the Financial Proposal being evaluated =

$$\frac{(Maximum\ number\ of\ points\ for\ the\ financial\ proposal) \times (Lowest\ price)}{(Price\ of\ proposal\ being\ evaluated)}$$

A total score obtained including Technical, Oral and Financial Proposals is calculated for each proposal. The bid obtaining the overall highest score will be the winning bid.