**Initiative for Hygiene, Sanitation, and Nutrition (IHSAN)**

**REQUEST FOR CONSULTANCY SERVICE**

**REVISION AND DEVELOPMENT OF NUTRITION SOPs**

|  |  |
| --- | --- |
| Title of Consultancy | Revision of Nutrition Guideline and development of Nutrition SOP  |
| Type of Consultancy  | Individual consultant  |
| Section | Nutrition  |
| Location | Kabul – Afghanistan |
| Duration | 90 working days(30 working days for the Revision of nutrition SOP guide and 60 da7ys for the development of SOP for nutrition components. |
| Nationality  | Afghan National  |
| Gender  | Any |

FHI 360 , IHSAN project

June 10, 2019



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# BACKGROUND:

The United States Agency for International Development (USAID)-funded Initiative for Hygiene, Sanitation, and Nutrition (IHSAN) project supports assisting the Government of the Islamic Republic of Afghanistan (GIRoA), civil society organizations (CSOs), and the private sector to implement and scale up evidence-based nutrition and water, sanitation and hygiene (WASH) interventions to improve the nutritional status of women and children less than five years old, with a focus on the first 1,000 days of life (conception to 24 months of age). IHSAN will emphasize multi-sectoral and multi-channel interventions, especially social and behavior change communication (SBCC) activities to intensify programming and the use of formative research and continuous monitoring to guide programming, mid-course corrections, and program learning. The expected outcomes of IHSAN are to decrease stunting by at least five percent (i.e. two percentage points reduction from the current rate) over five years and reduce anemia among women of reproductive age by at least 10 percent.

Although there have been improvements in some indicators of nutritional status of the Afghan population during the past decade, the 2013 National Nutrition Survey indicates that the public health burden of malnutrition is still among the highest in the world. Furthermore, there is substantial variation in the prevalence of various indicators of nutritional deficiency, especially among women and young children, across the nation’s provinces. Findings of the 2013 national nutrition survey indicate that although there have been some improvements in the nutritional status of the Afghan population over the past decade, substantial proportions of the population continue to suffer from malnutrition. It should be noted that the prevalence of stunting among Afghan children increases from birth until 5 years of age and this indicates the urgency of interventions at the early life stages. This is likely because the fetus is relatively “protected” while in the womb, but is exposed to harsh environmental and dietary risks over time following birth so that the rate of growth slows as the child grows older. Also, it is important to note that the overall mean height-for-age Z-score of -1.55 among < 5-year-olds in Afghanistan is shifted to the left of the mean height-for-age Z-score of 0.0 of the international growth standard. This indicates that even among those Afghan children with heights above the cut-off for stunted growth, a very large proportion may not have achieved their full physical growth Although the prevalence of acute malnutrition (or wasting) did not substantially change in 2013 (9.5%) compared to 2004 (8.7%) nationwide, very large differences in the prevalence of this indicator was found across the country’s provinces in 2013 – from <4% in Faryab to ~22% in Urozgan. Vitamin and mineral deficiencies are highly prevalent among women of childbearing age and young children in Afghanistan. However, the iodine status of the population appears to be substantially improved, and the prevalence of iodine deficiency among women of childbearing age and children 7 – 11 years old (urinary iodine (UI) <100 µg/L) has declined from about 75% and 72% respectively in 2004, to about 41% and 30%, respectively in 2013. This is most likely due to the impact of the national salt iodization program which started in 2003 and now includes 38 iodized salt production facilities in 15 provinces of the country. The 2013 survey data indicates that 66% of households nationwide consume salt containing >15 ppm iodine.[[1]](#footnote-1)

# GOAL:

To improve the quality of nutritional services at the primary and secondary level ( BPHS and EPHS)

## OBJECTIVE:

To assist the Public Nutrition Directorate in the process of the revision of Nutrition Guideline and the development of user-friendly nutrition SOPs

* To revise the current nutrition guideline, develop standards operation procedures (SOPs) manual and adapt it to a user-friendly document that could be easily used by the health staff at the primary and secondary level of health care facilities.
* To work closely with the PND, identifying and developing the missing nutritional SOPs.
* Developing Powerpoint presentations from the revised guideline for the training purposes.

# SCOPE OF WORK AND DETAILED DESCRIPTION OF TASKS:

FHI360 seeks to hire a consultant to work with the PND and the partners to revise the current Nutrition Guideline and SOP (2014) based on the revised separated Nutrition Guidelines (IMAM, MIYCN, MN, Surveillance, NiE, CBNP, NCP, NSCM, BFCC, C-GMP) and develop the SOPs for all mentioned parts. The consultant will be reporting to Nutrition Specialist, of INHSN project.

The aim is to develop a package of SOPs that are in a very simple language, brief, clear and concise with the relevant guidelines. The level of detail should provide adequate information to keep performance according to the standards while keeping it brief and practical. They should be in agreement with the existing policy, strategy, and guidelines. The SOPs should be tested before they are finalized and submitted for the official approval. In regard, to follow the task after the finalization, initiating the implementation there is a need that a core group experts to be involved in the process to work closely with the consultant. Thus, the consultant will be working with the Capacity Development & Coordination including the Senior Officer/PND/MoPH, Nutrition Specialist/IHSAN, and the relevant focal points from the partners.

After completion, finalization and endorsement of the package by the CDTWG, there should be a Training of Trainers (ToT) to be conducted for the national trainers in the presence and main support of the consultant.

## Review and revise the current Nutrition Guideline and Standards Operation Procedures (SOP):

The existing Nutrition Guideline with few SOPs in the first few pages of the guideline was developed by Public Nutrition Directorate (PND) of MoPH with the support of the partners. The sources of the Nutrition Guideline are the existing public nutrition training packages, protocols, and guidelines (BFCC, IYCF- C-GMP, IMAM, Micronutrients, Surveillance, NiE, CBNP, NCP, NSCM, etc.). The contents of these documents are in every detail and represent a huge amount of information. Though the health staffs have been trained on the subject, yet the day to day use of such a big package is challenging and simply not practical. The aim of this consultancy is to summarize the content of these documents into a brief, simple and user-friendly document that can be easily used by the health care providers at different levels.

## Developing new nutrition SOPs:

Though PND has worked very hard to create a better environment for the provision of quality nutrition services, still there is a lot of room for the improvements. Through this consultancy, the PND would like to develop the missing SOPs that are crucial for the management of patients with nutritional issues. They will be used in the daily management of the program and the standardization of nutritional services. The revised and the new SOPs will be compiled in a package and make it ready for the use.

# DELIVERABLES/MILESTONES & DUE DATES

## **Table -1:** The consultancy tasks and deliverable

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Expected due date | Tasks  | Deliverables  | Expected LOE (days) | Remarks  |
|  | Revision of the existing Nutrition Guideline. | Submission of SOP for the existing nutritional guideline PND/FHI360. | 30 days | The expected due date to be included in the consultant proposal. |
|  | Developing the list of missing SOPs in close agreement with the PND. | The list of the missing SOPs is submitted to PND/FHI360. | 10 days |  |
|  | Developing the new SOPs based on the missing SOPs list. | The package of the new SOPs as per the list of the missing SOPs is developed. | 30 days |  |
|  | Preparation of the PowerPoint presentations from the package to be used in the training. | The presentations should be in both Pashto and Dari local languages or different health staff categories (MD, Nurses/Midwives, CHS) | 5 days |  |
|  | Testing the SOPs before they are finalized and submitted for the official approval | The testing report. | 5 days |  |
|  | Conducting the orientation for the national trainers of PND | The orientation report | 5 days |  |
|  | Submission of the final report | The final report of the consultancy is submitted to FHI360. | 5 days  |  |

# REQUIRED SKILLS AND QUALIFICATIONS:

## Skills Description:

* Having experiences in the development of standard operating procedures, standards, training packages, guideline, protocols, and other public health interest documents.
* Has technical and public health experience in the area of Public Nutrition.
* Has a skill of team works, able to review a huge amount of information and coordinating the task on time with the relevant partners
* Having effective communication skills and computer literacy

## Education:

Having high education in medicine, public health, nutrition or any other relevant area

## Job Location:

FHI360, Kabul office

# AWARD TYPE & SELECTION CRITERIA

Submissions will be evaluated in accordance with the following criteria:

* Demonstrated understanding of public nutrition
* Available within the timeframe and for the duration required
* Years of relevant experience
* Best value

## Required Documentation

Submission of proposals responding to the scope of the work which must include the following components:

* Current CV
* Cover letter
* Budget Lump Sum in local currency AFN
* Complete FHI 360 biodata form

# DELIVERABLES, TECHNICAL OVERSIGHT, AND PAYMENT SCHEDULE

|  |  |  |  |
| --- | --- | --- | --- |
| Tasks  | Deliverables  | % of the payment to be processed | Remarks  |
| Revision of the existing Nutrition Guideline. | Submission of SOP for the existing nutritional guideline PND/FHI360. | 30% |  |
| Developing the new SOPs based on the missing SOPs list. | The package of the new SOPs as per the list of the missing SOPs is developed. | 30% |  |
| Preparation of the PowerPoint presentations from the package to be used in the training. | The presentations should be in both Pashto and Dari local languages or different health staff categories (MD, Nurses/Midwives, CHS) | 10% |  |
| Testing the SOPs before they are finalized and submitted for the official approval | The testing report. | 10% |  |
| Conducting the orientation for the national trainers of PND | The orientation report | 10% |  |
| Submission of the final report | The final report of the consultancy is submitted to FHI360. | 10% |  |

# DISCLAIMER AND FHI360 PROTECTION CLUSES

* FHI 360 may cancel the solicitation and not award
* FHI 360 may choose to award only part of the activities in the solicitation or issue multiple awards based on the solicitation activities
* FHI 360 reserves the right to waive minor proposal deficiencies that can be corrected prior to award determination to promote competition
* FHI 360 will be contacting each offeror to confirm contact person, address and that bid was submitted for this solicitation
* FHI 360 may reject any or all responses received
* Issuance of the solicitation does not constitute an award commitment by FHI 360
* FHI 360 reserves the right to disqualify any offer based on the failure of the offeror to follow solicitation instructions
* FHI 360 will not compensate any offeror for responding to a solicitation
* FHI 360 reserves the right to issue an award based on the initial evaluation of offers without further discussion

# Proposal Submission Deadline:

22 June 2019 no later than 4:00pm

How to Apply
Interested and qualified candidates should email their Documentation to: **IHSANSolicitation@fhi360.org**

1. National Nutrition Strategy 2019-2023 [↑](#footnote-ref-1)