Term of Reference Independent Verification Service of C/S-SDGs assessment

Project Title: Cambodia Nutrition Project (CNP) **Project No.**: P162675, IDA Credit 6394-KH

Duty Station: Base in Phnom Penh and 7 Target Provinces

Duration : 2020-2024

Basis : Firm/NGO Consultancy Contract

1. BACKGROUND

The Cambodia Nutrition Project (CNP) is a flagship initiative of the Royal Government of Cambodia (RGC) co-supported by the World Bank Group (WBG), the Global Financing Facility in Support of Every Woman Every Child (GFF), Australian Department of Foreign Affairs and Trade (DFAT), the German Development Bank (KFW), and the Multi-Donor Trust Fund of the Health Equity and Quality Improvement Project (H-EQIP MDTF). The implementation of CNP will span over five years (2019-2024) costed at US\$53 million to improve utilization and quality of priority maternal and child health nutrition services for seven priority provinces in Cambodia. All activities financed through the project are organized by components, namely: Component (i) Strengthening the delivery of priority health services; Component (ii) stimulating demand and accountability at the community level; and Component (iii) ensuring an effective and sustainable response.

The development objective of the CNP is to improve utilization and quality of priority maternal and child health and nutrition services for targeted groups in Cambodia. These priority services are aimed at reducing neonatal mortality, improving maternal and child nutrition, and improving routine immunization coverage. The priority services were defined in accordance with the expectation of the Royal Government of Cambodia (RGC) to converge interventions with known effectiveness to increase sustainability and efficiency of RMNCAH-N financing. Targeted groups include pregnant and lactating women and children in the first 1,000 days of life living in 302 C/S of 49 District Municipality Administrations (DMAs) located in 7 targeted provinces including Mondul Kiri, Ratanak Kiri, Kratie, Stung Treng, Preah Vihear, Kampong Chhnang, and Koh Kong provinces.

As the implementing agency (IA) under the CNP, the National Committee for Sub-national Democratic Development Secretariat (NCDDS) is responsible for Component 2 of the project which focuses on stimulating demand and accountability at the community level by working with sub-national administrations.

The component objectives are to (a) strengthen the links between the sub-national administration, the public health providers, and the citizens; (b) create demand and increase access to priority health and nutrition services; and (c) strengthen public sector commitment and accountability to improve the availability and quality of priority health and nutrition services; and (d) use performance-based grants to improve Sub-national

Administration (SNA) delivery and sustainable financing of relevant social service activities linked with the project's priority services.

The component provides a performance-based grant (e.g. service delivery grant or SDG) to Commune/ Sangkat (C/S) to enable the scale up of the Commune Program for Women and Children's (CPWC) community-based health, nutrition, and Health Equity Fund (HEF) promotion activities. The C/S SDG adapts the successful Ministry of Health (MOH) SDG system and applies the principles to the sub-national administration. C/S-SDG will provide discretionary support to communes/Sangkats over and above the C/S Fund to ensure the delivery of activities according to the CPWC guidelines. The role of the DMAs and Provincial Administration (PA) is to provide capacity development and conduct the C/S-SDG assessment. The C/S SDG fund for each C/S is depending on the result of this assessment. Furthermore, to make sure the accuracy of C/S SDG assessment, an independent verification of the assessment is required.

A key function of NCDDS will be to build capacity of PA/ DMA on the C/S-SDG Assessment Tools and procedures, as well as, support DMA to assist C/S on preparation to meet assessment criteria to achieve positive results of assessment. The overall approach for the C/S-SDG process is to use regular assessments on quality of C/S to deliver the community health and nutrition platform through implementation of CPWC activities packages. DMA and PA teams will play a crucial role in both the quality assessments and the coaching to strengthen capacity and performance of C/S. The DMAs and C/S will be under performance-based frameworks to strengthen their functions. A pay for performance assessment mechanism will be used. This mechanism will be applied to each performance contract (local administration or local community actors). A system of

of internal assessments will assess results before payment. Subsequently, an independent verification agent will be engaged to ensure validity of the results through a mix of systematic random sampling and risk-based approaches.

1.1. THE C/S-SDG ASSESSMENT AND VERIFICATION

There are two types of assessment including ex-ante assessments and ex-post verification.

- **Assessment** is conducted before payment is made. The assessment uses internal mechanisms and conducted by PA and DMA certified assessors.
- **Verification** is done after payment has been made. This verification uses independent agency mechanism.

1.2. THE FREQUENCY OF ASSESSMENTS AND VERIFICATION

- Assessment at:
 - **C/S level:** Assessments at the C/S level will be conducted by a group of certified assessors from DMA and PA. The assessment should be completed within a one-month period following the end of the semester.
 - **DMA level**: Assessments at the DMA level will be conducted by a group of certified assessors from PA (these PA assessors are not the same assessors

- who supported the C/S assessment as mentioned above). The assessment should be completed within a one-month period following the end of the semester.
- Assessment schedule: both C/S and DMA assessments should be carried
 out in July and January. After each assessment, with support by PA, DMA
 assessors conduct coaching support (based on areas identified in the
 assessment) to C/S to improve their performance to get better score in
 upcoming assessment. PA will also provide coaching to DMA assessors after
 each DMA assessment.
- Verification. Following with assessment, the verification is conducted to assess
 the quality and validate the assessment. Verification will be done by the
 Independent Verification Agency. The verification uses a mix of systematic random
 sampling and risk-based approaches to assess the quality and validity of the
 assessment.

1.3. TIMETABLE FOR ASSESSMENT AND VERIFICATION

| Assessment date | Verification date | Year |
|-----------------|-------------------|------|
| July | August-September | 2020 |
| January | February-March | 2021 |
| July | August-September | 2021 |
| January | February-March | 2022 |
| July | August-September | 2022 |
| January | February-March | 2023 |
| July | August-September | 2023 |
| January | February-March | 2024 |
| July | August-September | 2024 |

2. PURPOSE OF THE SERVICES

The NCDDS seeks a qualified firm/ NGO to be the independent verification agency (IVA) to certify the results obtained through the C/S and DMA SDG assessment. This activity is called the "independent verification of C/S and DMA SDG assessment scores".

3. SCOPE OF SERVICES

According to the above-mentioned objective and outline of tasks, the IVA is tasked to conduct 9 rounds of an independent verification of selected administrations on a semester basis as outlined in the C/S-SDG operational manual, provide capacity development support to NCDDS on topics related to assessment and report to the project director of Component 2 of CNP.

3.1 Independent verification

The independent verification will use a protocol with a mix of systematic random sampling and risk-based selection of C/S and DMA administrations to assess the quality and validity of the C/S and DMA SDG assessment scores in these selected

administrations. "At Risk" administrations are defined as such C/S and DMA administrations that showed a discrepancy exceeding a mutually defined threshold between the results of the C/S and DMA SDG assessment and the independent verification in the previous verification round.

As the independent verification is a new instrument in the C/S and DMA performance-based payment, the tools, methodologies and process will be developed and tested.

Table: Institutions, tasks and sample size for assessment and verification

| Administration Assessment | | Verification | | |
|--|--|--|--|--|
| C/S | Conducted by certified assessors from DMA and/or PA For all C/S administrations Conducted before payment | Conducted by certified Independent Verification Agency 10% of C/S randomly selected and risk-based selection. The total C/S selected for independent verification is 30 C/S per round. Conducted after payment | | |
| Conducted by certified assessors from the PA For all DMAs Conducted before payment | | Conducted by Independent Verification Agency There are 5 DMAs randomly select for verification per round. Conducted after payment | | |

The verification will use the same tools, methodologies and indicators as the assessment. The verification tools, methodologies and processes are described in C/S SDG implementation guideline. Therefore, the IVA is required to have the key field verification staff certified as assessors by the same trainers and training curriculum for the DMA/PA assessors such that they can carry out the verification according to established guidelines and protocols.

The selected IVA will be tasked to carry out effective and efficient verification visits. In so doing, the agency shall:

- Received training on C/S and DMA SDG assessment and certified.
- Select administrations to be visited (through random and risk-based selection), to be confirmed by NCDDS.
- Organize logistics (route and transport).
- Provide examples and explanations of additional fraud control measures.
- Devise team composition for the visits.
- Communicate with the authorities to be visited.
- Organize all verification tasks, including interviews, home visits, phone calls, and other activities within the C/S, DMA, and PA.
- Provide data collection and reports through the standard reporting system (initially paper-based, subsequently ICT-enabled).
- Establish and maintain communication channels for submission of feedback.

 Review the process and making recommendations for improvement of the verification tools, methodologies and processes described in the C/S-SDG implementation guideline.

3.2. Responsibilities of Client

3.2.1. National Committee for Sub-national Democratic Development Secretariat (NCDDS)

The NCDDS will be responsible for securing the administrative approvals for the assignment and will also ensure close support on the assignment by the sub-national authorities.

3.2.2. The Independent Verification Agency

The IVA shall be fully responsible for all cost of expert's travels, accommodations, office supplies, communication, equipment, tax and insurance.

The IVA will be responsible to hand over their verification capacity to the NCDDS.

After each verification round, the IVA shall provide experiences and lessons learned with regard to the operations of the verification through face-to-face meetings to discuss on verification process and verification techniques, on job training through jointly conducting the whole verification cycle and effective semesterly verification, class room training on expected service standards and topics related to assessment and verification, and production of reports with highlighted outputs of assignment and its lesson learned and recommendations.

3.3. Reporting

The IVA will be responsible to produce 2 types of reports:

- **a). Verification report:** after conducting each round of verification, the agency shall submit verification report to CNP project director of NCDDS through project manager. After receiving the verification report, PMSD-MEID of NCDDS (DLI-C focal point) will screen and consolidate the scoring, then submit to NCDDS SDG working group for review before submitting to project manager for reviewing and submit to project director for approval The verification report format is described in C/S-SDG implementation guideline.
- **b). Assignment report:** inception, mid-term and final report is required to be submitted to the CNP project director of NCDDS through project manager. The mid-term report shall be summitted after fifth round of verification in 2022 and the final report shall be submitted after the last round of verification in 2024.

4. Qualification

4.1 Organization of the Services

The independent verification agency shall be registered as firm or NGOs and shall be rendered for a period for 20 months, whereas the first 12 months will be the core task of

verification, evaluation, and capacity development support to NCDDS following the above proposed schedule. In the following 08 months, the consultant firm may request for flexibility with prior agreement from the project director.

4.2 Firm qualification

- Firm/NGO has at least 4 years experiences with the same or similar project,
- Firm/NGO has at least 7 years of relevant experience working with international organization and/or development partner,
- Experiences working with government counterparts and understand subnational administration structure and working procedures,

4.3 Staffing qualification

The agency services shall be rendered by a team of <u>international and national long-term</u> and <u>short-term staff</u> as well as other professional and administrative support staff. Efficient management and backstopping services shall be made available.

• Team Composition

The key staff to be proposed by the agency will include:

- 1. International team leader 1 person
- 2. National deputy team leader 1 person
- 3. Computer database management specialist 1 person
- 4. Local team member at least 4 persons and according to the real need of assignment

| No. | Positions (national) | No. of Persons | Inputs per person (p-m)* | Total (p-m)* |
|-----|---|-------------------|--------------------------------|-----------------|
| 1 | International Team leader | 1 | 6 | 6 |
| 2 | National Deputy Team Leader | 1 | 20 | 20 |
| 3 | Computer database management specialist | 1 | 6 | 6 |
| 4 | Local Team Members | 4 | 20 | 80 |

^{*} Person-Month

• The international team leader should be an international expert with a background in quality of decentralization/governance and public administration, ideally with experience in supervision of assessment and training and an understanding of health/nutrition issues in Cambodia. He/she should have a broader understanding of Sub-national Administration systems, health systems and strong coordination and networking. He/she should have at least 10 years of professional experience in the field and be familiar with the South-East Asian region, ideally Cambodia. Experiences with verification and performance assessment, and project and financial management, team leading, international donor relations would be an asset.

- The <u>national deputy team</u> leader should be a local expert with a background in quality of decentralization/governance and public administration, ideally with experience in supervision of assessment and training and an understanding of health/nutrition issues in Cambodia. He/she should have a broader understanding of Sub-national Administration systems, health systems and strong coordination and networking with at least 5 years of professional experience in the field. Experiences with verification and performance assessment, and project and financial management, team leading, international donor relations would be an asset.
- <u>Computer database management specialist</u> should have a bachelor degree in ICT or equivalent and have experience in database management, generating report and other related works.
- The <u>local team members</u> should have a background in health and experience with D&D in Cambodia. They should have an excellent understanding of the Cambodian subnational administration and health systems and the ongoing reform processes. They should have at least 2 years experiences with assessment, M&E, supervision and training. Experience with other health systems is an asset.

The composition of the team and the background of the local staff depends on the background and experience of the international team leader. Therefore, different mixes of backgrounds and experiences are possible. It is, however, important that the team leader beyond his technical expertise shows knowledge and experience in management and team leading as well as communication.

4.4 The flexible expert pool

The IVA is required to provide additional short-term consultants if there is an additional need for specific expertise. The short-term consultants should have backgrounds in the D&D and health field, monitoring and evaluation, and IT. The number of short-term consultants should be recruited by the IVA as needed subject to prior approval from NCDDS' CNP management. The cost to cover this type of assignment may be charged from the contingency category of this package.