

TERMS OF REFERENCE

Midwifery Technical Assistance: Modules on respectful maternity care and clinical skills, training of trainers and quality improvement plan

SMART-RMC (Respectful Maternity Care) Project

TECHNICAL ACTIVITY: The Canadian Association of Midwives (CAM) wishes to recruit **one (1) Canadian midwife** as a consultant to provide technical assistance to the South Sudan Nurses and Midwives Association (SSNAMA) through:

1. Reviewing, adapting and validating training tools and modules on RMC and clinical skills for midwife trainers and health care providers in the project's targeted health facilities;
2. Training 10 midwife trainers on the modules developed;
3. Designing a quality improvement plan and related evaluation tools to address existing gaps for the uptake of RMC and evaluate implementation of RMC practices in targeted health facilities.

Length of the consultancy: 18 working days

Timeframe: October 2022 – November 2022

Location: Juba, South Sudan (15 working days from November 7-25) and remote work (3 working days)

Remuneration: Up to \$14,400 CAD

A. INTRODUCTION: SMART-RMC PROJECT SUMMARY

The DRC and South Sudan experience high maternal mortality as a result of a number of factors including inadequate skilled attendance at birth. Through the provision of gender-responsive, quality health care by a well-trained midwifery workforce, the SMART-RMC project aims to contribute to the reduction of maternal deaths in both the DRC and South Sudan. Key activities focus on improving clinical care through: 1) training of health care providers in evidence-based innovations using a gender-responsive rights-based approach, coupled with quality improvement campaigns to promote the uptake of RMC in health facilities; 2) increasing communities' awareness of their SRHR to access health services; and 3) strengthening the capacity of midwifery associations to deliver gender responsive programming and SRHR advocacy. In South Sudan, activities are implemented in three regions and 10 health facilities located in the counties of Mvolo, Aweil East and Rubkona.

This 3-year project, supported by the Government of Canada through Global Affairs Canada, is implemented by CAM in close collaboration with its project partners, the Société Congolaise de la Pratique Sage-Femme (SCOSAF: the midwifery association of DRC) and the South Sudan Nurses and Midwives Association (SSNAMA). CAM oversees the overall management of the project and contributes its technical expertise, while SCOSAF and SSNAMA provide their own technical expertise and utilize their contextual knowledge to implement quality improvement and advocacy campaigns.

B. GOAL AND OBJECTIVES OF THE ASSIGNMENT

Goal: The overall goal of the consultancy is to provide technical assistance to SSNAMA in the domains of midwifery and RMC. Specific objectives consist of:

1. Reviewing, adapting and validating training tools and modules on RMC and clinical skills for midwife trainers and health care providers in the project's targeted health facilities
 - Tools and training modules will be updated and adapted to context from existing materials, as based on specific needs and recommendations identified by the project team through a previous activity (RMC and SRHR Public Consultation)
 - Modules on RMC and clinical skills will be developed for both the centralized training of trainers as well as subsequent facility-based trainings for in-service providers; in addition, the consultant will establish a list of materials required to assemble complete RMC kits

- The adaptation and validation of the training material will be done in collaboration with SSNAMA, the Canadian midwife volunteer, the Directorate of Training and Professional Development at the Ministry of Health and midwife-tutors from the Juba College of Nursing and Midwifery
- The consultant will leverage training content available through the Safe Delivery application, after cross-checking with national guidelines, the clinical procedures manual and BEmONC/emergency skills training materials to ensure consistency
- 2. Training 10 midwife trainers on the modules developed
 - The consultant will be responsible for coordinating and facilitating a 5-day training of trainers (TOT) session in Juba for 10 midwives, in collaboration with SSNAMA, the Canadian midwife volunteer and midwife-tutors who participated in the adaptation of the training material
- 3. Designing a quality improvement plan and related evaluation tools to address existing gaps for the uptake of RMC and evaluate implementation of RMC practices in targeted health facilities
 - According to the needs and gaps identified in the RMC and SRHR Public Consultation, the consultant will design a quality improvement plan and corresponding evaluation tools to promote best practices in RMC within the project's targeted health facilities. The plan will integrate a gender lens and strategies to promote inter-professional collaboration.
 - The development of quality improvement materials will be done in collaboration with SSNAMA, the Canadian midwife volunteer and staff from targeted health facilities (specifically, TOT participants from the three facilities designated as Centers of Innovation)
 - The consultant will facilitate a participatory process with staff from targeted health facilities (dedicating ½ day from the TOT) to engage participants in the design of a context-adapted plan and ensure their inputs are reflected in the final product
 - All quality improvement measures will adhere to Ministry of Health standards and guidelines. In addition, the plan and tools will be validated with midwife-tutors, the Directorate of Training and Professional Development and the Directorate of Reproductive Health.

C. METHODOLOGY AND APPROACH TO ASSIGNMENT

Parties involved: During the assignment, work and collaboration will occur between the following actors:

1. Canadian midwife consultant
2. Canadian midwife volunteer
3. Directorate of Training and Professional Development at the Ministry of Health
4. Directorate of Reproductive Health at the Ministry of Health
5. Midwife-tutors from the Juba College of Nursing and Midwifery
6. Stakeholders and participants:
 - CAM project team
 - SSNAMA project team
 - Staff and administrative teams from targeted health facilities

Methods:

- Document review and analysis (including existing training material from South Sudan and other countries, results of the RMC and SRHR Public Consultation, relevant WHO documentation, national guidelines/protocols, and content of the Safe Delivery app)
- Consultations and working sessions (virtual and/or in-person) with stakeholders for the development and validation of training and quality improvement materials
- Adaptation of existing materials
- Production of written documents
- Training workshop (with theoretical and practical components)
- Regular meetings with SSNAMA and CAM SMART-RMC project teams
- Direct and/or indirect exchanges

Resources available: During the assignment on location in South Sudan, the consultant will have access to the following resources:

- SSNAMA Programme Manager and RMC Project Coordinator to provide accompaniment and support throughout the placement;
- Canadian midwife volunteer to provide direct support and collaboration before, during and after the placement;
- CAM Midwifery Technical Expert who will be available to answer technical questions related to content production, and to review and provide feedback on deliverables;
- Workspace at the SSNAMA office with access to Wi-Fi (please note that reliable Internet connection cannot be guaranteed at all times);
- Accommodation and transport provided.

The consultant will be required to use their own laptop computer to carry out the assignment. No computer will be provided by the project.

CAM will support the consultant with respect to preparing the work contract, facilitating contact and subsequent communications with SSNAMA, providing pre-departure training, procuring airfare, arranging local accommodation and transportation, providing instructions for obtaining visas and letters of invitation, and providing document templates for the mission report, invoicing, and expense reimbursement.

The consultant will be responsible for leading on all assignment logistics, in line with CAM and donor policies, procedures and requirements and as outlined in the consultant contract. This includes acquiring visas, verifying airfare and accommodations, invoicing and preparing expense reports after the placement.

D. DELIVERABLES

1. Training material on RMC and clinical skills for midwife trainers and health care providers in targeted facilities, integrating findings from the RMC and SRHR Public Consultation (including facilitator's guide, participant manual, short learning modules for in-service trainings, list of materials for RMC kits, pre/post tests and all tools necessary for teaching the modules, e.g., agenda, PPT presentation, relevant handouts, etc.)
2. 10 midwife trainers trained on the material developed
3. Context-specific RMC quality improvement plan for targeted health facilities, covering administrative, technical and operational aspects of quality and adopting a gender-responsive lens (including all tools necessary to evaluate the implementation of the plan, e.g., QI dashboard/scorecard)
4. Mission report (a reporting template will be provided by CAM)

E. REMUNERATION

As full compensation for the services rendered according to this Agreement, CAM shall pay the Consultant a maximum amount of **\$14,400 CAD**. This amount should include all relevant taxes (GST/PST/HST) and expenses incurred in the preparation of milestones and deliverables (with the exception of travel expenses covered by CAM, as listed below).

The following expenses are covered by CAM: roundtrip airfare from Canada to Juba, South Sudan, in-country transportation costs, visa and processing fees, accommodation, and communication costs (maximum of \$20.00 CAD per assignment).

Meals, immunizations and anti-malarials, health/travel insurance and any other expenses related to the placement and preparation of deliverables are covered by the consultant.

F. QUALIFICATIONS

- Be a registered Canadian midwife with at least five (5) years of experience
- Good knowledge of adult training techniques and experience in facilitating TOT and continuing professional development courses
- Demonstrated experience and knowledge in respectful maternity care and clinical emergency skills trainings
- Demonstrated experience and knowledge in designing and implementing quality improvement campaigns in health care settings
- Strong familiarity with concepts of gender equality, gender-responsive interventions and applying a gender lens to the midwifery model of care
- Interest in mutually beneficial capacity building
- Excellent command of oral and written English
- Excellent cross-cultural communication and collaboration skills
- Flexible approach to work and ability to adapt
- Previous work experience in South Sudan a strong asset
- Ability to read and synthesize materials written in French a strong asset

G. APPLICATION INSTRUCTIONS

- Send your CV and a cover letter outlining how you meet the qualifications above in one PDF document, ensuring that your name and the title “SMART-RMC SS Midwife Consultant” are included in the file name.
- Send your PDF by email with the subject line “SMART-RMC SS Midwife Consultant” to admin@canadianmidwives.org.
- Deadline for applications is **July 8 2022**.