
3 - METHODOLOGICAL APPROACH

3.1 - Introduction and approach

Introduction

According to the World Health Organisation Report on Country Cooperation Strategy 2016 – 2020, the health of the population in Cambodia has improved. However, challenges are still present particularly in maternal, child and neonatal mortality. The Health Sector in Cambodia has been targeted over the past year by the International Development and Cooperation Community, and the donor funding amounted to approximately US\$ 189 million (WHO report).¹

The Czech Republic has been supporting Cambodia in several projects run by non-governmental organisations. The Czech Development Agency participates in the development of bilateral cooperation with Cambodia for the period 2018 -2023 whose focus will be among others support to inclusive social development. Within this framework, the health sector is one of the areas, and the particular focus should be on maternal health and child care.

The focus on the health sector falls within the framework of the Sustainable Development Goals and SDG 3 (Good Health). Cambodia has this goal represented in its strategy for the coming years. According to the UN Rapid Integrated Assessment, the Goal 3 is described in the National Plan with the focus on reducing maternal, new-born and child mortality.²

The study requested by the Czech Development Agency concentrates on the SDG 3 and is intended to further analyse and assess the situation and needs of the country regarding its commitments as well as actors involved in the particular area of maternal health and childcare.

Purpose of the study

The subject of this call for services is to provide analysis of the current status of the health system in Cambodia with the focus on maternal health and childcare and analysis of the needs of the local community in this specific area of the health services provided to them.

Approach

The research study will consist of a desk review of **relevant Governmental and donor documents and qualitative field study visits**. The majority of the assignment will be related to the analysis of such documents as statistics, government programs and strategies of the Ministry of Health, Ministry of Planning and the Ministry of Interior and other relevant actors, reports of foreign donors and international organisations. **The desk review of the documents will be supported by incorporating data from field visits during which data will be collected to establish a baseline on the situation and needs of the various communities.**

The study will be divided into 3 phases, each having a respective deliverable that will be available to Czech Development Agency for commenting and for further discussion if deemed necessary.

The expected outputs are:

1. Desk report available for a review before the final field visit to identify possible gaps or fine-tune the focus of the study.
2. Draft Report after the final field work, responding to all requirements set out for this study by the Czech Development
3. Final report with feedback considered.

¹WHO - Cambodia WHO country strategy 2016 -2020 -
http://apps.who.int/iris/bitstream/10665/246102/1/WPRO_2016_DPM_004_eng.pdf?ua=1

²http://kh.one.un.org/content/dam/unct/cambodia/docs/RIA_Template2%20-%20Country%20SDG%20Profile_07Oct2016.pdf

The presented the team has previous experience in the country and a sound understanding of its health system, which will enable them to have a solid start point with the study.

The team will divide the tasks according to their expertise and strength in research and country contextual knowledge. **We foresee close cooperation among the team members who also have previous working experience together on assignments for other international development and cooperation actors.** Therefore, the harmonic cooperation of the team is guaranteed.

3.2 - Methodology

Methodology

The team will engage various research methods to fulfil the assignment while building on the knowledge and expertise in the health sector and the geographical region. One the team members **is a national health expert and is living in Cambodia.** The team will benefit from his **ongoing presence in the country during the project implementation** as well as his knowledge of the health sector systems at all the required levels requested under this study (national, provincial and community level of health systems). Also, the **national health expert will be able to provide analysis of the various national policies and laws provided in Khmer language only.**

The project implementation will be divided in three phases, namely:

1. Phase I – Desk study/Field mission I
2. Phase II – Analysis and preliminary findings
3. Phase III – Consensus (Field mission II) and draft report

A range of methods will be used for the collection of quantitative and qualitative data, which will facilitate triangulation of findings to verify the data collected.

Methods for data collection will include, *inter alia*:

- Review of existing documents from government and other actors in the health sector in Cambodia;
- Focus group discussions, interview with key informants (on central, provincial and OD level) and other possible modes of data collection if deemed suitable and necessary will be mainly applied to service users and service providers to reach a larger group of respondents.

The study must be able to base its findings on a comprehensive set of recent and reliable data, which are verifiable (traceable), to engender a high level of confidence among stakeholders in the validity of the data and the conclusions presented. The team intends to apply this in their study. The way the team plans to cooperate with various actors and the local community is further elaborated on in the following sections.

Distribution of the research areas per phase

Taking into account the fact that the key areas of the research study to be addressed are into various degree linked to each other we do not foresee a clear division of them in terms of sequence of activities or between the individual phases. The project team is likely to revisit some undertaken activities at a later stage for example to triangulate and verify the previous gathered information. As mentioned above, a part of the study will be done home based (max. 23 working days) and the remaining working days (46 working days) will be spent in Cambodia to complete the collection of information in the field, analysis and verification and to establish a consensus among the key actors on the research findings and conclusions.

However, we tentatively we foresee the following research areas conducted mainly during the corresponding phases:

	Research area	Phase
1	Programs and legislative regulations focusing on maternal and childcare matters, including malnutrition and mortality	Phase I/Phase II
2	Baseline study	Phase I/Phase II
3	The current government non-governmental and international programmes focusing on social/health insurance, including the linkages to the Cambodian health equity fund, ID poor, NSSF, SHPP, the multi donor funded Health EQIP and others	Phase I/Phase II/Phase III
4	Access to health care for various groups of the population with the focus on the vulnerable population (poverty, ethnic minorities, unregistered population (no birth certificates)	Phase I/Phase II/Phase III
5	The scope of the services provided and the role of the health facility categories in the area of care of maternal and child care, including any focus on malnutrition	Phase I/Phase II
6	Needs assessment of the local communities in the area of maternal health and child care	Phase I/Phase II
7	Stakeholder's analysis and possibly mapping of actors providing maternal and child care in Cambodia.	Phase I/Phase II/Phase III

Methods for data collection

Geographically, the team will collect available information on the country level and scale it down to data collected on the level of communities. The various levels will demand different means and methods of engagement of the team and the actors involved. The team has **identified the need to collect data on the following levels:** (i) **International level** (International players active in health sector), (ii) **National level** (various ministries directly involved in the health sector and maternal health and childcare), (iii) **Sub-national** (Provincial level), and (iv) **Operational District (OD) and Community level**. The team will get in contact directly with the various actors on each level³.

Targeted Stakeholders in the health sector

On the international level, the team will identify during the desk research the different actors involved in the health sector and the maternal health and child care area in particular in Cambodia. Those actors will be for example the various INGOs active in the area of health, the UN organisations (UNFPA, UNICEF, WHO), GIZ, GFA. The team will seek any information deemed necessary from those actors. In particular their geographical reach, type of services, target communities etc. The team will also try to analyse into the possible extent their activities and planned interventions and programmes for the years to come to identify possible overlapping.

On the national level, the team will inform directly any concerned authorities especially the Ministry of Health and their sub-national levels to request their support in providing the team

³ It is assumed that the Czech Development Agency will provide the team with an introduction letter with teams' mandate to facilitate interest from the governmental bodies in particular.

with relevant data including their statistics on health and maternal and child health in particular, levels of malnutrition and any other information the team considers appropriate for the purpose of this study. The possible actors on this level will be: Ministry of Health, National Centre for Maternal and Child Health, Ministry of Planning, H-Equip donors, USAID etc.

On the OD level, the provincial hospitals and district hospitals are providing Maternal and Child Health services including emergency maternal and neonate services. The data obtained from those will be gathered directly from pre-identified hospitals, by means of going into the ODs and directly visiting those hospitals/health centres. The selection of those will be based on the data from the desk research and analysis and will be based on various indicators (type of services provided, geographic location related to population representation etc)

On the community level, health care is supported by community volunteers focusing on maternal and child care education, screening for child malnutrition, preventing severe child and maternal illnesses and complicated related obstetric cases. The selection of the communities will again be based on the same methods as of the district level. It will take into account the possibility of making a comparison study and for this purpose the team will identify communities in different geographical areas. The data collected will be done by visits to communities and by engaging research various methods to identify the needs. These will be in the form of small questionnaires, FGDs semi-structured interviews with the health volunteers etc. The actual use of the research methods will be defined at the start of the project and will vary according to the type of informant.

Relationships with the stakeholders

Both experts have well established contacts at various levels of the government institutions and can navigate themselves quickly with regard who to contact for what. Also the national health expert has extensive experience and knowledge of the various players in the health sector (both government, local NGO and INGOs as well as international organisation) and is therefore able to provide quick and smooth connection to those in terms of requesting their cooperation and providing information on the Maternal and child health.

Ways of collecting information

The division of actors and the mode for data collection will be distributed among the team based on their merits. Beneficial is the fact of one of the team members, Key National health expert, is living in Cambodia and therefore will be available to spend all his days to gather the data on the OD and community level.

Concerning the geographical scope, based on our current knowledge, the most vulnerable population based on their poverty level and the highest level of presence of ethnic minorities is in the north-eastern provinces: Rattanakiri, Stung Treng, Mondulhiri, Kratie and Thbong Khmum as well as Siem Reap and Utdormeanchey which are bordering Thailand.

Those are the preliminary identified provinces with highest number of vulnerable population. If those preliminary findings are confirmed in our analyses, a focus will be on those and their needs.

With regard to the various research areas, actors involved and possible methods for data collection, we have summarised this in the table below:

	Research area	Actors preliminary identified	Means of data collection
1	Programs and legislative regulations focusing on maternal	Ministry of Planning	Desk research (data covering among others: Programs and

	and childcare matters, including malnutrition and mortality	documents, Ministry of Health, UNFPA, UNICEF, WHO	legislative regulations focusing on maternal and childcare matters, including malnutrition and mortality)
2	Baseline study	Community members, community health volunteers,	Fieldz work, FGDs, semi-structured interviews, (data from the fieldwork in Phase I and Phase II)
3	The current government and non-governmental, or international programmes focusing on health insurance, including the linkages to the Cambodian health equity fund, ID poor, NSSF, SHPP, the multi donor funded Health EQIP and others	NGOs implementing HEF and Community Insurance, MoH and H-Equip donors	Desk research on the Cambodian health equity fund, ID poor, NSSF, SHPP, the multi donor funded Health EQIP and if possible field work covering semi-structured interviews with actors involved including mapping awareness in communities about those options.
4	Access to health care for various groups of the population with the focus on the vulnerable population (poverty, ethnic minorities, unregistered population (no birth certificates)	Provincial health department and hospitals, District health office and hospitals, Health centers and villages, local and international NGOs active in health sector	Desk research, and field work covering semi-structured interviews/FGDs with communities and community health volunteers
5	The scope of the services provided and the role of the health facility categories in the area of care of maternal and child care, including any focus on malnutrition	Provincial health department and hospitals, District health office and hospitals, Health centers and villages, local and international NGOs active in health sector	Desk research, semi-structured interviews with the representatives of health facilities and semi-structured interviews/FGDs with communities and community health volunteers
6	Needs assessment of the local communities in the area of maternal health and child care	Health centers and villages, community members, community health volunteers	Field work, FGDs, semi-structured interviews,
7	Stakeholder's analysis and possibly mapping of actors providing maternal and child care in Cambodia	Ministry of Planning, Ministry of Health, UNFPA, UNICEF, WHO, National	Desk research,

Tools

The team will gather available data from various sources to cover all aspects of the study from national policies and regulations to overview of the stakeholders and their activities in the health sector within Cambodia.

All the documents collected will be properly administrated and labelled according to the information they contain. This will be done by one person to ensure consistency. Also, a research area matrix will be created as an orientation tool for the team to harmonise their focus on the various matters to be studied.

In addition to this, the team will, despite the geographical distances (each expert is based in a different country), be in touch via means as for example skype to keep each other updated on the progress of the study.

Information Management

Information management is an important aspect contributing to translating information into knowledge. It is anticipated that the data collection effort will lead to the availability of a large amount of information, which subsequently needs to be handled in a way to facilitate systematic and efficient analyses.

A set of protocols for data management will be established from the beginning of the study, the coordinator will monitor for consistency of the approach within the expert team (through constant oversight and support). A proper information management matrix will be created in order to organise the data for easy analyses.

For that purpose we will provide a solution based on one platform for all data to be gathered (for example, Microsoft SharePoint platform, drobox or OneDrive) which will provide the team members with the computed information management. The information will be:

- Made accessible in a web-enabled and secure database
- Stored in an effective and cost-effective way
- Stored in one place, in contrast to being scattered in emails, hard drives or off-line folders
- Providing all members of the team equal access to one source of information and creating a shared start point for discussions and analyses
- Enabling effective mapping and labelling of the information based on auto and manual tagging

Data Analyses

Data analysis will use a mix of qualitative and quantitative methods. These guiding questions will be clustered and analysed against the collected documents and field data. In general, the data analysis will be applied throughout the study and various indicators will be used to identify the most relevant information concerning the various groups of the population in Cambodia. For example, when possible data on gender, age groups, number of population, number and type of available health services etc. will be used to draw descriptive statistics findings.

The areas of focus of this study were clearly determined in the call for services, including the specific questions guiding this study. The team will take those as the very minimum and where will see an opportunity for elaboration or further investigation, it will include it in their reporting as well.

The interpretation of data will be augmented and validated through interviews with key stakeholders in the Phase III, drawing mostly on the content analysis of the collected evidence.

Reporting

For each specific study question, the team will ensure that all the relevant information is gathered to prepare a comprehensive report. The main deliverables will be the desk report (preliminary draft report) and a final report which will be presented to the Czech Development after the field phase taking place in November 2017.

3.3 - Phases of the research study

Phase I Desk Study

The Desk phase will be mainly home based and will start with creating a matrix on the requested study questions and the indicators/tags by which data need to be organised (geographical, national, district, community level etc.). Also, potential sources for data gathering will be identified per specific study question.

The study will, among others, gather data covering the following:

1. Programs and legislative regulations focusing on maternal and childcare matters, including malnutrition and mortality;
2. The current government and non-governmental, or international programmes focusing on health insurance, including the linkages to the Cambodian health equity fund, ID poor, NSSF, SHPP, the multi donor funded Health EQIP and others;
3. Geographical coverage of healthcare facilities for children and orphans, including those for ethnic minorities and the service providing entity (Government, private for and non-for profit private sectors);
4. The scope of the services provided and the role of the health facility categories (Health Centre, Referral Hospital CPA 1-3) in the area of care of maternal and child care, including any focus on malnutrition;
5. Stakeholder's analysis and possibly mapping of actors providing maternal and child care in Cambodia.

Phase I Field work

Research and data collection in MOH and in the provinces will be done in October during the Desk Study by the national health expert for the purpose of assessing and analysing the needs of local communities in the area of the maternal and childcare. The data collected during this phase will be also used as a baseline data and incorporated in the desk report study in the Phase I. The study will also taking into account options to strategise and identify priority criteria for additional donor funding – a geographic focus on vulnerable areas might be one of the possible alternatives to elaborate further).

Phase II Analyses and Preliminary Findings

During this phase, all the collected data will be analysed and preliminary results will be drawn.

The guiding questions will be used as the main points for the analyses, those will be clustered around particular study area and based on the list received from the Czech Development Agency.

An example of the study area, questions and possible information resources are illustrated in the table below:

Area of Study	Specific Question	Sources & Methods	Findings summary
Policy and programmes existing in the health sector with the focus on maternal and childcare			

Laws and programmes relevant for the health sector and maternal health and childcare specifically	<ul style="list-style-type: none"> ▪ What are the responsibilities on the different levels of the Ministry of Health? Who is responsible for what? ▪ What official government documents (regulations, standards, etc.) are available at each Ministry in Cambodia concerning the maternal and childcare? ▪ What are the current priorities of the Cambodian government in the area of maternal health and childcare? ▪ What are the relevant strategies of the Cambodian Ministries for reducing child and maternal mortality? 	<ul style="list-style-type: none"> ▪ documents review of the various ministries ▪ analysis 	
Actors involved	<ul style="list-style-type: none"> ▪ What kind of foreign donors are active in the health sector? ▪ Which of them are active in the area of maternal and childcare, child malnutrition and related areas? ▪ What specific activities do they implement? ▪ What local and foreign NGOs are active in this field? ▪ In what geographical areas? ▪ Is there cooperation / coordination among them and if so in what form? 	<ul style="list-style-type: none"> ▪ Overview of actors involved in health sector (governmental, non-governmental, international organisations and INGOs) ▪ Stakeholder analyses of the ones active in maternal health and childcare ▪ Geographical analyses 	
Baseline study for the area of maternal health and childcare			
Collecting data on specific topics within the maternal health and childcare	<ul style="list-style-type: none"> ▪ What are the programmes of social and health insurance in Cambodia? ▪ Which of them are supported by the government, which by foreign donors and/or international organisations? 	<ul style="list-style-type: none"> ▪ Documents review ▪ Fieldwork for a sample data from beneficiaries 	
Access to health care for various groups of the population with the focus on the vulnerable population			
Analysis of the various rights population in Cambodia enjoys regarding provision of health care	<ul style="list-style-type: none"> ▪ How the child receives a birth certificate? ▪ What are the documents needed for obtaining a birth certificate? ▪ Is there a system within the health sector that takes care of 	<ul style="list-style-type: none"> ▪ Documents review ▪ Donors programmes targeting this issue 	

(specific focus on establishment of such a right based on existence of a birth certificate as well as the vulnerable groups in Cambodia – including the minorities)	<p>residents who do not have a birth certificate?</p> <ul style="list-style-type: none"> ▪ How is the health guaranteed/paid for those? ▪ In the case of pregnant women not having a birth certificate is she allowed to give birth in a health facility, and if so, under which conditions? ▪ Is there any support/ assistance available for the population to apply for birth certificate? ▪ Activities of other donors / international organizations / NGOs in this area? 	<ul style="list-style-type: none"> ▪ National Experts knowledge of the situation (verified by field visits)
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NB: please note that this table is not exhaustive in its illustration of questions. The areas and specific questions will be further developed at the start of the study.

This phase will be concluded by a desk study report which will be shared with the Czech Development Agency for their review before the Phase III commencement.

Phase III –

Consensus and draft report

The second field work mission will be planned for November for the purpose of consensus among the key partners (MoH and the MCH programme, donors especially around H Equip.

During this phase, the report with preliminary findings will be finalised, taken into account feedback received from the Czech Development Agency and from the key partners during field mission.

We aim to submit a very first draft final report before the second field mission. This field mission will not only allow us to verify and complete the data already collected but also use the time in the country to react to possible comments received from the Czech Development Agency that may require further study, field trips or meetings to be organised.

4 - COMPOSITION OF EXPERT EVALUATION TEAM

Our team experts were selected to cover all the areas of the project. The expert team has excellent long-term experience in international development and cooperation projects funded by different donor institutions notably in the area of health and social inclusion. The expert team has full knowledge of project cycle management and solid experience with carrying out similar studies for different organisations and international donors. Furthermore, most of the team has direct experience working in Cambodia and was engaged in projects addressing issues similar to the one of this evaluation.

4.1 - Key Qualifications of the presented team:

Key International Health Expert - Mr. Bernhard Eder.

- Medical Doctor with a Master's Degree in Public Health
- More than 15 years of professional experience in development, planning, implementation and monitoring of health programmes/policies at national, provincial and district level

- SWAP, sector reform, health policy, strategy and reform; systems development
- Policy and strategy design on national level
- Health management systems and implementation on national, provincial and district level
- Health / HIV programme / project appraisal, review and evaluation, planning management and institution building
- Primary health care, maternal health and childcare, HIV/AIDS, gender, cross cutting issues, capacity building assignments
- (EC) Logical Framework and Project Cycle Management
- Governmental, inter-governmental, profit and non-for profit -making private sectors
- Bilateral and multilateral donors; EDF regulations and procedures
- Inter-sectoral cooperation, including IEC and communication, and good governance
- Management, team-leader and programme /project management in structural development and relief settings
- Participatory and engaging approaches

Key National Expert - Mr. Sovannarith Em

- More than 13 years of experience as a Lecturer at the International University in Cambodia.
- More than 12 years experienced in the project/programme evaluation in the health sector, education sector and other social and development sectors.
- Extensive experience as a researcher carrying out Quantitative and Qualitative Surveys and studies especially in the health sector.
- Fluent in Khmer and English.

Coordinator and Research Support — Ms. Petra Nováková

- 10 years of experience in Project and Programme Management in International Development Cooperation
- Hands on experience with Czech Development Agency service tender procedure, familiar with grant procedures
- Fully acquainted with Project Cycle Management (PCM) and Result Based Management (RBM)
- In-depth knowledge of evaluation methodology (Theory of Change, Log frame design, design of indicators (SMART/OVI), Results-based M&E, Results-based reporting and learning principles, approaches and tools)
- Hands on experience with PESTEL analysis, SWOT analysis, stakeholders' analysis, quantitative and qualitative data collection, participatory practice and approach to data collection
- Designing manuals and creating new tools for enhancing efficiency and effectiveness of project and data management

4.2 - Contact details of the presented team

Name	Role and Contact Details	Reference persons
Bernhard Eder	International Health Expert Contact details: Email: bernh.eder@gmail.com Tel: +43 664 2430848	1/ Ian Ralph – International Consultant, Email: ian.ralph@righttocare.org 2/ Cristiano Matsinhe – lead consultant at KULA,

		Email: cmatsinhe@kula.co.mz ;
Dr. Em Sovannarith	National Health Expert Email: emsovannarith@gmail.com Tel: +855 12 873 294 Tel: +855 70 777 909	1/ Dr. Bernhard Eder - International Consultant Email: bernh.eder@gmail.com 2/ Dr. Sok Sokun - UNFPA Cambodia Programme Manager Email: sok@unfpa.org
Petra Novakova	Coordinator and research support Email: p.novakova@hotmail.com Tel: +31 611 717 843	1/ Gilbert Germain – Director Lot 12 FWC Email: germain@geotest.cz 2/ Elenor Richter Lyonette – International Consultant Email: cwa@prolink.ch

4.3 - Qualification Requirements for the research team

Key Qualification Requested	Bernhard Eder	Sovannarith EM	Petra Novakova
Implementation of similar studies in the health sector as the team leader/project manager	XXX	XXX	X
Working experience in South East Asia	XXX	XXX	XX
Working experience in health sector in South East Asia	XXX	XXX	X
Knowledge of international development and cooperation in Cambodia	XXX	X	XXX
Experience in perinatology/neonatology and malnutrition	XX	XXX	
Knowledge on English on minimum B2 level	XXX	XXX	XXX
Knowledge of Khmer language on native speaker level		XXX	

Legend: strong compliance XXX, medium compliance XX, knowledge of X

NB: the full CVs supporting the level of fulfilment of each of the requested qualification are provided in section 5 of this proposal.

4.4 - Responsibilities within the team

Position	Name	Responsibilities	No. of working days
Key International Health Expert and Quality Assurance Expert	Bernhard Eder	<ul style="list-style-type: none"> ▪ Providing guidance to the national health expert in terms of which data to be collected, which areas needs to be covered etc. ▪ Coordinating various inputs of all members of the evaluation team ▪ Quality Controlling all the reports (with inputs from all the experts) 	27 (10 days in Cambodia)
Key National Health expert	Sovannarith Em	<ul style="list-style-type: none"> ▪ Responsible for the field work for baseline study in Cambodia ▪ Analysing and processing information gathered during the field mission ▪ Assisting in drafting evaluation reports covering information from Cambodia ▪ Overall responsibility for the review of the health system in Cambodia based on national laws and policies. 	30 (30 days in Cambodia)
Coordinator and research support	Petra Nováková	<ul style="list-style-type: none"> ▪ Desk review of the available documents. ▪ Verification of gathered data and additional data collection during the expert team mission in Cambodia ▪ Elaboration of executive summary ▪ Coordinating the team activities ▪ Supporting the team in research ▪ Supporting the team in logistical arrangements ▪ Liaison person to the Czech Development Agency 	12 (6 days in Cambodia)

It should be noted that the national health expert is based in Cambodia, therefore all is working days are in Cambodia. This will enable the project team a continuous and direct access to all the considered actors and stakeholders in the sector at all levels. In addition, the international members of the team will travel for the second field mission to Cambodia to finalise the analyses, to verify the information collected and to establish a consensus on the final report.

Out of the total 69 working days included in the offer to be delivered, 46 are foreseen to be used in Cambodia. The remaining days will be used for the desk research, data analysis and report drafting which will be home based for the international members of the team and in Cambodia for the national member of the team.

4.5 - Time schedule - Planning and working days division (

Tasks	Deliverables	Bernhard Eder	Sovannarith Em	Petra Novakova	Total	Indicative Location	Indicative Start Dates
PHASE I Desk Phase Study		Working days					
I.0	Inception Part - finalisation of data collection methodology, division of tasks, planning etc	1	0	1	2	Home based	September/October 2017
Inception Report		0+3 days					
I.1	Collection of various policy documents and program reports	2	2	1	5	Home based	October 2017
I.3	Baseline data collection/Fieldwork Phase I	2	10	0	12	Cambodia KE2	October 2017
I.4	Review of the current health insurance systems available in Cambodia	2	2	0	4	Home based	October 2017
I.5	Collecting data on the access to health care for various groups of the population	1	1	0	2	Cambodia/Home based	October 2017
I.6	Collecting data on the services provided and the role of the health facility	1	1	0	2	Cambodia/Home based	
I.6	Needs assessment of the local communities	1	2	0	3	Home based	October 2017
I.7	Stakeholders analysis	1	1	1	3	Home based	October 2017
I.8	Consolidation of the material	1	1	1	3	Home based	October 2017
Total amount of days Phase I		12	20	4	36		
PHASE II Analyses							
II.1	Analyses	5	3	1	9	Cambodia	October/November 2017
II.2	Fieldwork Phase II	5	5	5	15	Cambodia	20 - 25 November 2017
Desk report (Draft final report) with preliminary findings		9 November 2017					
Total amount of days Phase II		10	8	6	24		
PHASE III Analysis and preparation of Draft report							
III.1	Analysis of the final data collected	3	1	1	5	Home based	16 November 2017
III.2	Preparation of Draft report	2	1	1	4	Home based	
Draft Final report		29 November 2017					
Total amount of days Phase III		5	2	2	9		
TOTAL amount of working days		27	30	12	69		

Legend: fields highlighted in green are days spent in the field/doing field research. Those days are not considered home-based for any of the team members. Additionally, all the days of Sovannarith Em will be delivered in Cambodia.

5 - CVs OF THE EXPERT EVALUATION TEAM

5.1 - Key International Health Expert

1. Family name: Eder
2. First name: Bernhard
3. Nationality: Austrian
4. Education:

Institutions	Degree(s) or Diploma(s) obtained:
University of Vienna, 1984	MD (Doctor of Medicine)
Johns Hopkins School of Public Health, 1991/92	MPH (Masters in Public Health)
Palliative Care Akademie, Salzburg, Austria – Oct 15 intermittent - Sept 16	Certificate - Interdisciplinary (inter-professional) basic course in Palliative Care

5. **Language skills:** indicate competence on a scale of 1 to 5 (1 – excellent; 5 – basic)

Language	Reading	Speaking	Writing
German	1	1	1
English	1	1	1
Portuguese	2	2	3
French	4	4	4
Turkish	5	5	5
Vietnamese in learning process			

6. Membership of professional bodies:
Austrian Medical Association; Ethiopian Public Health Association; Austrian Society of Tropical Medicine; German Society of Tropical Medicine & International Health; German Society of Tropical Paediatrics.
7. **Other skills:** MS Office (Word, Excel, Access, Power Point, Project)
8. Present position: Consultant
9. Years with the present employer: -NA
10. Key qualifications:
 - Medical Doctor with a Master's Degree in Public Health
 - More than 15 years of professional experience in development, planning, implementation and monitoring of health programmes/policies at national, provincial and district level
 - SWAP, sector reform, health policy, strategy and reform; systems development
 - Policy and strategy design on national level
 - Health management systems and implementation on national, provincial and district level
 - Health / HIV programme / project appraisal, review and evaluation, planning management and institution building

- Primary health care, HIV/AIDS, gender, cross cutting issues, capacity building assignments
- (EC) Logical Framework and Project Cycle Management
- Governmental, inter-governmental, profit and non-for profit -making private sectors
- Bilateral and multilateral donors; EDF regulations and procedures
- Inter-sectoral cooperation, including IEC and communication, and good governance
- Management, team-leader and programme /project management in structural development and relief settings
- Participatory and engaging approaches

11. Specific country experience:

Country	Dates	Project / programme name and description
Bangladesh	10	Evaluation of the 7 th Country Programme of UNFPA (2006-2010)
	09	Public Health Specialist for detailed design of Padma Multipurpose Bridge
Cambodia	15	Post – HSSP2 design - KFW umbrella consultant
	15	Evaluation of Global Fund malaria project
	14, 15	Technical Audit
	07	MTR Provision of basic health services
Myanmar	06	ADB - Health Sector Support – feasibility study
	16	Regional Capacity Development TA for Malaria and Communicable Diseases Control; malaria surveillance
Vietnam	12	Technical coordination/cooperation for health sector capacity support project in Vietnam
	11	Interim review of EU funded Health Systems Capacity Building Project
	11	Mid-term review EU funded HEMA project
	07	Joint Annual Health Review, EC PIF, SWAP
	05	Mid Term Review - Child Health Development Project

12. Professional experience:

Date	Location	Company	Position	Description
07-08/16	Malawi, South Africa	Right to Care	Lead consultant	Integrated, USAID funded, HIV work-plan Malawi 2016/17 of EQUIP, incl. Dignitas, Partners in Hope, Baylor
05-11/16 intermittent	Myanmar	URC/ADB	Short term consultant	Regional Capacity Development Technical Assistance for Malaria and Communicable Diseases Control; work-stream malaria surveillance
12/15 - 1/16	Sudan	GFA/Aedes/EU	Mid-term Evaluation team- member	MTE of the EU funded Strengthening Sudan Health Services Programme with expected results in 1) improved access and quality of h. services (quality monitoring, training of providers; access and extension of coverage; emergency (RH) care); 2) integrated h. services and management (organisational structure; supervision / integrated district-type model; HIS); 3) extended health insurance
09-10/15	Pakistan	Nippon Koei, funded by WB. GoP;	Public health specialist	Follow up/update of the operationalisation of the Public Health Action Plan as part of the Social and Environmental Safeguarding plan / DASU Hydropower Detailed Design / Kohistan District): see below
08/15 –03/16 ongoing (intermittent)	Cambodia	GFA	„umbrella“ consultant	KFW umbrella consultant in the context of the post-HSSP 2 design
06,07/15	Cambodia	Global Fund/UNOPS/FHI SCCD:	Team leader	Final evaluation of community malaria project, focussed on BCC, community malaria workers, early diagnose and treatment and referral system to health system (qualitative research with FGD, KI an triangulation with secondary quantitative data)
12/14 – 09/16 quarterly/ongoing	Cambodia	GFA	Team leader	HSSP 2 technical audit, incl. health equity fund operators and performance based payment schemes
08-10/14	Vietnam/ home based	Euro Health Group	Proposal development	Proposal development for the EU funded DCI-ASIE/2013-243730 in Viet Nam – “Health Facility” for provision of TA and ad hoc mobilisation of short term experts, accompanying budget support by the EU with reform oriented policy development in sector wide management, policy formulation, health financing , insurance HIS, quality of service for poor and ethnic minorities, esp. in reproductive health
08- 09/13	Mozambique	KULA/Global Fund	Short term consultant	Definition and mapping of (HIV) key populations (MARPSs and PR2 Target Populations) and service providers; package of services and implementation guidelines; update indicators and performance framework
05/13	Home based	Eco 3	PH consultant	Contribution to Eco 3 Framework contract proposal

05/13	Mozambique	Flanders International Cooperation Agency	Short term consultant	Concept Note - Focussed contribution to health systems strengthening in Mozambique by the Flanders International Cooperation Agency (FICA)
10/12 – 03/13 intermittent	Vietnam	EC	Technical Assistance Coordinator	Technical cooperation for the EU funded Health Sector Capacity Support Project in Vietnam: <ul style="list-style-type: none"> ▪ Mobilisation, management and follow up/quality assurance of health sector reform (short term) experts (approx. 1000 international and national consultant days) and deliverables
08/12	Pakistan	Nippon Koei, funded by WB. GoP;	Public health specialist	Design of the Public Health Action Plan as part of the Social and Environmental Safeguarding plan / DASU Hydropower Detailed Design / Kohistan District): <ul style="list-style-type: none"> ▪ Resident communities ▪ Communities to be relocated ▪ Construction workers and consultants communities ▪ Followers (traders, entertainers etc.) ▪ Public and private health service providers
05/12 – 03/13 intermittent	Nigeria	EC	Technical Assistance	Technical assistance to the National Primary Health Care Agency– intermittent support leading through the inception of the EU funded Support to Immunisation in Nigeria, with emphasis on <ul style="list-style-type: none"> ▪ Management systems and stewardship ▪ Delivery of routine immunisation services ▪ Information and knowledge generation
03 – 04/12	South Sudan	WHO/MoH South Sudan	Public Health / Health Systems Expert	Follow up of the Operational plan to the 5 year Sector Strategy (Health Sector Development Plan), focussing on the central level of MoH, with focus on primary and community health in rural areas, integrating communicable diseases, HIV/AIDS, non- communicable diseases incl. mental and cross cutting issues health (environment, gender)
02 – 03/12	Afghanistan	Swedish Committee of Afghanistan	Evaluation consultant	Mid Term Review of Country Strategic Plan 2010 – 2013 with emphasis on <ul style="list-style-type: none"> ▪ Education ▪ Basic Package of Health Services and Essential Hospital Based Services ▪ Community based Rehabilitation of Afghans with disabilities

				<ul style="list-style-type: none"> ▪ Rural Development ▪ Rights based approach, gender and civil society as cross cutting strategies
10 – 11/11	South Sudan	WHO/MoH South Sudan; contacts see above	Public Health /H. Syst. Exp.	Initiation of the 5 year Operational plan to the 5 year Sector Strategy (Health Sector Development Plan) – see above
09 – 10/11	Mozambique	Belgian Technical Coop.	Public Health / Health Systems Expert	Situation analysis of current practices in the Human Resource Management system in the public health sector
08 - 09/11	Vietnam	EC	Team leader	<p>Interim review of EC funded Health Systems Capacity Building Project in view of the preparation of conditions to allow budget support by the EU:</p> <ul style="list-style-type: none"> ▪ Reforms towards sector-wide management, to prepare a programme-based approach ▪ Consolidated reforms towards health service delivery in the 3 pilot provinces ▪ Consolidated exchange and replication of best practices between provinces towards the nationwide coverage of health system reform
06 – 07/11	South Sudan	WHO/MoH South Sudan	Public Health /H. Syst. Exp.	Revision of the BPHS for Primary Care and Proposal for the Secondary/Tertiary Healthcare
05 - 06/11	Kenya	EC	Team leader and Public Health expert	<p>EC funded MDG initiative for MDG 4, 5, 1c, 7c; Concept Note with emphasis on</p> <ul style="list-style-type: none"> ▪ demand creation in correlation with ▪ upscale and supply side quality improvement ▪ with output based financing (vouchers)
02 - 04/11	Vietnam	EC	Team leader	<p>Mid-Term Review of the EC funded Health Care Support to the Poor of the Northern Uplands & Central Highlands (HEMA) with focus on</p> <ul style="list-style-type: none"> ▪ Increased coverage of poor with essential health services, especially at commune level, through district block grants. ▪ Capacity building in districts and provinces on project management, planning and implementation ▪ Community information and mobilisation, health promotion and feedback from consumers. ▪ Quality assurance system

12/10 – 01/11	Bangladesh	UNFPA Bangladesh	Team leader	Evaluation of the 7 th Country Programme of UNFPA Bangladesh (2006 – 2010) with the components <ul style="list-style-type: none"> ▪ Gender ▪ Reproductive Health ▪ Population & Development; plus a 3 joint UNDAF programmes and SWAP contribution
08 – 09/10	Mozambique	FICA	Team leader	Final Evaluation of the health projects (6) financed by the Flemish Government in the Tete province, implemented by NGOs and the public sector supported by TA; with focus on <ul style="list-style-type: none"> ▪ HIV/AIDS ▪ Human Resources in Health
06 – 08/10	Angola	Instituto Nacional de Luta Contra Sida/UNAIDS	Lead Consultant	Assistance in the development of Global Fund Proposal for HIV and Health System Strengthening with focus on <ul style="list-style-type: none"> ▪ Scaling up of HIV - PMTCT and integrating PMTCT into Sexual and Reproductive Health and MCH programmes and services.
01 – 04/10	Malawi	EC	Team leader	10th EDF Gender and HIV/AIDS Project Formulation in Malawi: <ul style="list-style-type: none"> ▪ Capacity building of the Ministry of Gender, Children and Community Development (in view of the SWAp) and Non-State Actors ▪ Gender Mainstreaming including integration in Social Development ▪ Empowerment (incl. Gender Based Violence) ▪ Linkages between Gender and HIV/AIDS
09 – 10/09 11 – 12/09	Bangladesh	SMEC	Public health specialist	Design of the Public Health Action plan as part of the social- and environmental safeguarding of the Padma Multipurpose Bridge: <ul style="list-style-type: none"> ▪ The construction work force ▪ The relocated communities ▪ The local and regional impacts of the project on HIV/AIDS ▪ Government public health capacity and infrastructure
05-06/09	Sudan	SMEC	Public Health Expert	Design of the Public Health component of the Environmental Impact Study of the Dams in Mograt, Dagash, Sabaloka; focus on: <ul style="list-style-type: none"> ▪ Communicable and Sexually Transmitted Infections and water borne diseases

				<ul style="list-style-type: none"> ▪ HIV/ AIDS and policies to be adopted to control its spread within the project area; ▪ Project work force and local population - health and safety issues and mitigation measures ▪ Health services in the area
02-03, 04/09; 07-08/09	Somaliland	DFID/THET	Advisor for the Nat. Health Prof. Council of Somaliland	<p>Support the (re)- establishment of the National Health Professions Council of Somaliland including</p> <ul style="list-style-type: none"> ▪ Situation analyses and conceptualisation ▪ Strategy design ▪ Operational plan 09
11/ 08 - 01/09	Sudan	EC	Acting Team Leader	<p>Re-vitalisation of the project management for the EC funded Development of an Education Management Information System (EMIS) in close cooperation with UNICEF, focussing on</p> <ul style="list-style-type: none"> • Education Management Information System • Capacity building, institutional development of the Federal and State Min. of General Education
06-07/08	South Africa	Belgian Technical Coop.	Team leader	<p>Mid-Term Review of BTC funded Capacity Building in the Dep. of Health with focus on:</p> <ul style="list-style-type: none"> • Establishment of a Human Resource Information Systems; • HR related capacity building in health facilities; • Leadership programme.
03-05/08	Kyrgyzstan	KfW/ MoH	Advisor in Health Sector Reform	<ul style="list-style-type: none"> • Contribution to the Mid-Term Review of National Health Strategy; • SWAp development and • Reform processes.
2/08	Home based	Conseil Sante	Consultant	Afghanistan - Report review and revision
09-12/07	Vietnam	EC	Team Leader, H. System/ Management Expert	<p>EC funded multitask assignment for</p> <ul style="list-style-type: none"> • Facilitation of the Joint Annual Health Review 2007 • Identification of a system and centre/province focussed progr. for larger funding • Contribution to SWAP workshop and progress

07-08/07	Angola	EC	Team Leader	MTR of the EC funded National Programme of Rehabilitation for people with sensorial and motor deficiencies with focus on: Organisational development and system establishment, human resources and public health
02/07 and 05-06/07	Afghanistan	EC	Health Sector Expert	Country Level Evaluation of the EC' s support to Afghanistan, embracing co-operation areas in: <ul style="list-style-type: none"> • Public sector reform, including institutional development and capacity building within key Government institutions, and continued financial support for the recurrent budget deficit • Rural development incl. water and food security; rebuilding infrastructure • Provision of basic healthcare • Cross-cutting issues: gender, environment, opium poppy production, human rights
03-04/07	Cambodia	Belgian Technical Cooperation	Team Leader	MTR - "Provision of Basic H. Services" in districts of Siem Reap, Oddar Mancheay, Kampong Cham: <ul style="list-style-type: none"> • Management and delivery systems within and contributing to a national SWIM/SWAP • Health finance and health equity funds • Performance related incentives and contracting • Quality improvement
12/6 - 1/7	Mozambique	UNDP; see next	Consultant	<ul style="list-style-type: none"> • Support to formulate a Joint Progr. on HIV/AIDS capacity building, mainstreaming and partnership
11-12/06	Mozambique	UNDP Av Kenneth Kaunda	Team Leader	Final Evaluation of UNDP Mozambique HIV/AIDS Programme: <ul style="list-style-type: none"> • Mainstreaming HIV/AIDS in line Ministries and other governmental institutions; • Institutional capacity building of the National Aids Council at central, provincial level and Civil Society Organisations • Capacity building for Ministry of Health in care and treatment • Support to National leadership and advocacy • Reducing vulnerability
10-11/06	Tanzania	Belgian Technical Cooperation	Team Leader	Mid-term Review - "PHC financing support to Karagwe District" within a national SWAP: <ul style="list-style-type: none"> • Health finance • Quality of Care (incl. Human Resources and Drug Revolving Fund) • District health management system
09-10/06	Cambodia	AFDÉ	Team Leader	Feasibility study for the Health Sector Support, focused on:

				<ul style="list-style-type: none"> Improving financial access to quality services through a micro-health insurance scheme Establishing a quality improving h. management systems of district h. services and district/ prov. health management through outsourced NGOs and TA support imbedded in the h. sector strategic plan joint government / donor planning and review mechanism (AOPs, JARs) within a SWAP
05-06/06	South Africa	EC	Team Leader	<p>Mid-term review of the EC funded Partnerships for the Delivery of Primary Health Care including HIV & AIDS Programme (PDPHCP) with emphasis on:</p> <ul style="list-style-type: none"> Government / NGO partnerships PHC delivery Capacity building and organisational development HIV/AIDS M&E
01-03/06	Sudan	Danish Red Cross	Team Leader in project formulation	<p>Community Based Primary Health Care based on PRA; Wau, South Sudan focussing on</p> <ul style="list-style-type: none"> Primary health care, Water and sanitation Community participation, involvement and engagement
11/05	Serbia	Helsinki Co. Group	Consultant	Proposal development for Support to Tertiary Care Facilities
09-11/05	Vietnam	Min. of Foreign Affairs Finland / HCG	Team Leader	<p>Mid Term Review of Child Health Development Project in Nghê An Province:</p> <ul style="list-style-type: none"> Review of project and Planning for the next project period.
08/05	Egypt	HCG; see previous	Consultant	Contribution to proposal for ADB Health Sector Reform Programme.
07-08/05	Mozambique	Ministry for Foreign Affairs Finland	Team Leader	Design and propose framework for the transition period of Finnish support to the health sector, i.e. from project funds to channel funds through common funds in the context of SWAP:

				<ul style="list-style-type: none"> Context analysis and draft framework for the phase out plan for the Health sector support programme; Framework plan for phase out activities for the end of the funding period, including budgeting and fund channelling mechanisms and completion of health facility infrastructure and procurement / upgrade of equipment; Analysis of capacity building needs including continuation of current HIV/AIDS TA at central level and the specific support to the maintenance department; Based on participatory methods, plan of the Finnish support to Manica province.
04-05/05	Mozambique	Ministry of Health (MISAU) / LATH	Co-Team Leader	<p>Joint Evaluation of health sector performance in the context of SWAP with specific focus on:</p> <ul style="list-style-type: none"> Assessment of the National Health Service (NHS) performance on the basis of the national list of indicators with emphasis on 2004 hospitals' service delivery, HIV/AIDS and gender equality; Assessment of aid partners performance in- and outside the health sector; Assessment of the degree of implemented recommendations of the 2004 Joint Evaluation; Analysis, recommendations on strengths and weaknesses of the NHS, the implementation of the 2004 Annual Operational Plan, through performance indicators on the improvement of the relationships with donors, International Agencies, Credit Agencies and MISAU.
04/04 – 04/05	Kenya	EC/MoH	Team Leader	<p>EC funded District Health Services and Systems Development Programme within a SWAP, in the context of health sector reform and decentralisation, with the framework of specific objectives:</p> <ul style="list-style-type: none"> Health Services: integrated systems of govern't and non-govern'tal preventive and curative health service delivery; capacity of primary and secondary health service providers; communities enabled to initiate and implement h. activities; Support Systems: cost-effective district hospital support functions; effective manag't information systems; infrastructure, equipment and transport; planning and operational managem't at all levels; donor-, NGO- and MOH collaboration; Financing and management systems: good governance; financial sustainability for all service providers; transparent and effective financing mechanisms.
01-04/04	Serbia	MoH / World-bank / Helsinki Cons. Group	Team Leader	<p>Strategy formulation of Restructuring of Oncology Care System of the Ministry of Health and the Institute of Oncology and Radiology Serbia in the process of the reform:</p>

				<ul style="list-style-type: none"> • Analysis of the present situation in oncology health care system (including prevention, treatment and palliation, covering all levels of the health system), and comparative analysis with regional and EU countries; • Recommendations for adjustments in the oncology health care system for the development of an efficient, functional and quality based system, appropriate to the economic means of Serbia; • Recommendations for the implementation of restructuring with measurable monitoring indicators
10-11/03	Zambia	ADA – Area Development Association	Management Consultant	Advice and direct hands-on support on organisational and managerial aspects to an indigenous NGO, engaged in community development activities.
05/02 –09/03	Nigeria	DFID / PATHS - consortium (GRID, HLSP, HPI, LATH, JHCC)	National Programme Manager / Team Leader	<p>Health sector reform programme on Federal level and in 4 states; formulated in 4 components involving public, for-profit and non-for-profit private sectors, focussing on the establishment of</p> <ul style="list-style-type: none"> ▪ management systems for governance, government stewardship in policy, planning, financing; ▪ health management systems in the public health sector; ▪ quality preventive and curative services for common health problems, incl. HIV/AIDS; ▪ communication, right to health, consumer awareness of their entitlement to good quality and affordable health care; ▪ 2 cross cutting components: Financial manag't, social develop't, in particular related to gender equality and empowerment.
02-04/02	Mozambique	Executive Secretariat for the National AIDS Council / UNICEF	M&E Consultant	<p>Intensive participatory design of a M&E manual for the national council in the intersectoral / -ministerial approach against HIV/AIDS, including private and public sectors, considering especially:</p> <ul style="list-style-type: none"> • Cross-sectoral / cutting programme performance; • Decentralised governance and • Gender aspects.
10-12/01	Angola	Save the Children UK	H. Programme Consultant	Review and assessment of the health programme and development of next phase in light of the government health sector policy, HIV and intersectoral vision to re-position the child in the focus.

09/01	South Africa	IOM	HIV Programme Consultant	Advice IOM SADC regional office on regional and cross-border project / programme development in HIV/AIDS prevention among migrating and mobile population.
03/00 – 08/01	Egypt	EC / British Council/UNICEF	Public Health / PHC / BBP TA	Advice on the integrated delivery of public, preventative and curative services in the family health oriented sector reform centred on a basic benefit package within the support framework for the health sector reform, including public and private health care providers: <ul style="list-style-type: none"> ▪ Health Sector Reform Programme planning and management capacity; ▪ Restructuring of health sector institutions, general management and financial management, effective and efficient decentralised service delivery; ▪ Sustainable health service financing system based on universal health insurance; ▪ Basic Benefit Package of primary and public health care services centred on Family Health Practice model; ▪ Reformed primary and public health care services; ▪ Human resource policies, planning, training and personnel management practice in support of new technical and managerial requirements of the reformed health system.
05/98 – 12/99	Ethiopia	Austrian Development Co-operation; Austrian Ministry of Foreign Affairs	Health Advisor	Bilateral Co-operation (in cooperation with implementing partners –Regional Government, UNICEF, NGOS) within the Health Sector Development Programme with focus on Somali Region and Joint Governmental/donor reviews involving the public and private sectors, focussing: <ul style="list-style-type: none"> • Management systems, good governance and gender equality; • Primary and hospital care; • Human resources.
03-07/99	Malawi	Dutch Embassy/ETC	HMIS Consultant	Inception phase of a bilateral programme in the health policy reform with focus on health management information system and district development.
12/98	Mozambique	Project Hope	Health Progr. Cons.	Advice on strategy, priorities, planning, M&E, managerial tools for a district h. system supp. project
11/98	Armenia	EC / EPOS;	MIS Consultant	Consultancy for TACIS project of support to the health policy reform.
10/98	Burundi	Children's Aid Direct	Health programme. Consultant	Advice on strategy, priorities, planning, implementation, monitoring and management tools.

03-04/98	Vienna, Austria	MSF/A (NGO)	Manag't Cons't	Advice on foundation of a research institute and public relations.
01-02/98	Burundi	EC – ECHO	Technical Assistant	Advise on funding strategy and allocation; proposal screening and evaluation on relevance, appropriateness, structural improvements, budgeting and managerial tools, emphasising primary health care, water and sanitation
11/97	Uganda	AMREF	Health Progr. Cons't	Advice on proposal for district management support for submission to Austrian government
06-12/97	Yugoslavia	IOM	Medical Officer	Development of public health programmes for local and displaced population and accompanying medical screening.
12/96 - 05/97	Austria	Clinic Sports Med.	General Practitioner	Family and preventive, rehabilitative and curative sport medicine
08/94 – 10/96	Afghanistan, Tanzania, Burundi	MSF/H	Country manager; med. coordinator	Project implementation: basic h. care, mental health, disease & nutrition surveillance, water & sanitation Policy, strategy development, planning and monitoring. Hand-over of activities and integration in government services.
07/92 – 07/94	Malawi, Mozambique	MSF/F; MSF/H	Project/Medical Co-ordinator	Basic health care, disease & nutrition surveillance, water & sanitation; staff supervision; r(e)-opening h. facilities in resettlement areas of repatriated refugees; support to referral/remote facilities; integration of programmes in public services.
04/87 – 06/91	Austria	Univ. Hospitals Innsbruck; Vienna	Residency for GP, Paediatrics	Out- & inpatients' care in various departments; member of research unit at Univ. Vienna.
07/85 – 01/86	Ethiopia	Austrian medical team	Medical Officer	Basic care for out- and inpatients of local & displaced population.

13. Other relevant information:

Member of a research unit at the University of Vienna, concentrating on infant nutrition and preventive health. Contributions to several publications in the field of paediatric medicine.

5.2 - Key National Health Expert


Name of the Firm Submitted to
NAME Dr. EmSovannarith
DATE OF BIRTH 03 December 1969 **Citizenship:** Cambodian

EDUCATION	2003	Master of Public Health (MPH), MAHIDOL University / Thailand		
	1995	Medical Doctor (MD), University of Medical Science / Cambodia		
Professional Certification in University	More than 13 years experienced as Lecturer at International University, Cambodia			
Other Relevant Training	<ul style="list-style-type: none"> • 2005-2106-Training Course on Health Economics (Social Health Insurance- Health Financing) sponsored by In-Went Agency - Government of Germany • 2005- Organizational Development and Management in Manila / Philippines 			
Countries of Work Experience	Cambodia, Laos, Nepal			
LANGUAGES	Languages	Speaking	Reading	Writing
	Khmer	Excellent	Excellent	Excellent
	English	Fluent	Fluent	Fluent
	French	Fluent	Very Good	Very Good
<u>KEY QUALIFICATIONS:</u>				
<ul style="list-style-type: none"> • Project/programme monitoring and evaluation • Quantitative and Qualitative Survey/Researches Formulation and Design of health projects • Social programme experiences: More than 12 years experienced in the project/programme evaluation in particular in the health sector, education sector and other social and development sectors. 				
<u>EMPLOYMENT RECORD</u>				
From:	2003 –up to present			
Employer:	Worked for many evaluation of projects and programmes :WVI, WB, ADB, GFATM, UNICEF, USAID, UNOPS, UNFPA, Save the Children International, World Vision, Denmark Red Cross, LWS, CARE International, Ministry of Health and other NGOs			
Year	11/2011 – 06/2016			
Location	Cambodia			
Client	WB programme			
Project Description:	To support the monitoring and auditing the WB funded programme to the ministry of health. The programme aimed at strengthening the overall health system of Cambodia at provincial, district and community.			
Position Held	Evaluation consultant (periodic assessment per quarter)			

Year	01/2015 -02/2015
Location	Cambodia
Client	UNFPA Cambodia
Project Description:	The objective was to conduct an end-line evaluation of the UN Country Program 2011-2015 funded to the ministry of Education, Health, Planning, the National Decentralisation and Deconcentration.
Position Held	Evaluation Consultant
Activities Performed	To assess the country Program related to Reproductive Health of UNFPA support to Cambodia
Project name	Community System Strengthening
Year:	08/2014 – 09/2014
Location:	Cambodia
Client:	Cambodia Red Cross
Project Description:	The objective was to conduct a Mid-Term evaluation in regard to the community system strengthening.
Position Held:	Evaluation Consultant
Project name	Maternal and Child Health and Nutrition Programme
Year:	Feb 2014
Location:	Cambodia
Client:	CARE
Project Description:	The objective was to conduct an End-line Country Program evaluation pertaining to Maternal and Child Health, Nutrition Program funded by GFATM
Position Held:	Evaluation Consultant
Project name	Maternal and Child Care and Nutrition Project
Year:	Oct 2013
Location:	Cambodia
Client:	Save Children Australia
Project Description:	The objective was to conduct an end-line project evaluation focussing on maternal and child care and nutrition intervention in Kampong Cham provinces
Position Held:	Evaluation Consultant
Project name	Maternal and Child Care and Nutrition project
Year:	05/2013 -06/2013
Location:	Cambodia
Client:	World Vision
Project Description:	The objective is to evaluate the community support programme including education and health intervention.
Position Held:	Consultant
Project Name	Maternal Child Health and Nutrition Health Project
Year	07/2013 – 08/2013
Location	Kampong Cham
Client	Save Children International
Project Description:	The objective was to conduct an end-term project evaluation of Maternal, Child Health and Nutrition Program implemented by SCI in Kampong Cham province
Position Held	Consultant
Activities Performed	To evaluate the 5 years program
Project Name	Community Health System Programme
Year	11/2011 –02/2012
Location	Cambodia
Client	Macro-International

Project Description:	The objective was to assess the overall community health system in Cambodia that was funded by GFATM in the purpose to support for the improvement of health system at the community level.
Position Held	Consultant
Project Name	Country Programme Evaluation of UNFPA
Year	10/2011 – 11/2011
Location	Cambodia
Client	UNFPA
Project Description:	The objective was to conduct an evaluation of The Country's 5-Years Programmes of UNFPA that was funded to MoH, MoWA, MoEYs, MoP, and NGOs pertaining to Reproductive Maternal and Child Health and Nutrition Programme.
Position Held	Evaluation Consultant
Activities Performed	to support Team leader for the 5 year country program evaluation
Project Name	Health System Strengthening supported to MoH
Year	01/2011 – 02/2011
Location	Cambodia
Client	USAID
Project Description:	The objective was to assist the mid-term programme evaluation that has been supported to the ministry of education and health.
Position Held	Evaluation Consultant
Project Name	Health Promotion Strategic Plan
Year	09/2010 – 10/2010
Location	Cambodia
Client	UNICEF
Project Description:	The assignment was to provide technical assistance for developing the National Health Promotion and Education Strategic Plan including resource mobilisation plan
Position Held	Consultant
Project Name	Health Equity Fund support the health system
Year	11/2009 -01/2010
Location	Cambodia
Client	UNFPA
Project Description:	The objectives was to evaluate the project of Health Equity Fund Social Support Scheme funded by UNFPA and implemented by the ministry of health; to the poor families and communities for accessing to health services.
Position Held	Evaluation Consultant
Project Name	Project Formulation for a Control of Communicable Disease Control for Vietnam, Loa and Cambodia
Year	08/2009 – 10/2009
Location	Cambodia, Vietnam, Lao
Client	Cardno-Acil Australia/ADB
Project Description:	The objective was to evaluate the health programme supported by ADB and this was implemented by the ministry of health.
Position Held	Evaluation Consultant
Project Name	Design Health Sector Reform Policy
Year	01/2009 -03/2009
Location	Cambodia
Client	Oxford Policy Management, DfID

Project Description:	The objective was to assist the ministry of health to develop health system reform policies and management guidelines.
Position Held	Consultant
Project Name	GFATM Health and Education Programme Support
Year	11/2008 -12/2008
Location	Cambodia
Client	The ministry of Education and the ministry of Health.
Project Description:	The objectives were to evaluate the GFATM programme support to the Ministry of Education and the Ministry of Health.
Position Held	Evaluation Consultant
Project Name	Rehabilitation Project
Year	10/2008
Location	Cambodia – Takoe and Kampot provinces
Client	Handicap Belgium International
Project Description:	The objective was to evaluate the project of rehabilitation intervention/activities which were implemented by the Handicap International with regard to social support programme, health education programme, rehabilitation and reconstructive surgery programmes.
Position Held	Evaluation Consultant
Project Name	Costing Study of hospital services in Cambodia
Year	08/2008
Location	Cambodia
Client	USAID
Project Description:	To assist the costing study of hospital service in Cambodia.
Position Held	Consultant
Project Name	Health Sector Support Project
Year	01/2008 – 06/2008
Location	Cambodia
Client	DfID and WB
Project Description:	The purpose was to provide the technical assistance to the ministry of health for developing health policies.
Position Held	National Health Consultant
Project Name	Reproductive Health Voucher Scheme
Year	03/2008
Location	Cambodia
Client	KfW
Project Description:	The objective was to evaluate the health financing and social support for the poor families.
Position Held	Evaluation Consultant
Project Name	Community Support for the poor family
Year	07/2007
Location	Cambodia
Client	LWF
Project Description:	The objective was to conduct the Mid-Term Evaluation of the community support project for the poor families.
Position Held	Evaluation Consultant
Project Name	Community Primary Health Care Project
Year	09/2007
Location	Siem Reap
Client	Ankor Children Hospital –Siem Reap

Project Description:	The objective was to conduct the Mid-Term Evaluation Project of Primary Health Care project.
Position Held	Evaluation Consultant
Project Name	GFATM programme
Year	11/2006 – 12/2006
Location	Cambodia
Client	Ministry of Health and Ministry of Education
Project Description:	The objectives were to assess the overall outcomes of the GFATM programmes funded to the ministry of education and health in term of strengthening education system and health sector.
Position Held	Evaluation Consultant
<p>Certification</p> <p>I certify that (1) to the best of my knowledge and belief, this CV correctly describes me, my qualifications, and my experience; (2) that I am available for the assignment for which I am proposed; and (3) that I am proposed only by one Offer or and under one proposal.</p> <p>I understand that any wilful misstatement or misrepresentation herein may lead to my disqualification or removal from the selected team undertaking the assignment.</p> <p style="text-align: center;"> _____</p> <p style="text-align: right;">Date: <u>12 June 2017</u></p> <p><i>[Signature of staff member or authorized representative of the staff] Day/Month/Year</i></p>	

5.3 - Coordinator

1. Family name: Nováková
2. First Name: Petra
3. Date of Birth: 15 November 1982
4. Nationality: Czech
5. Education

Institution (Date from - Date to)	Degree(s) or Diploma(s) obtained:
Nijmegen School of Management, Radboud University, the Netherlands (09/2008 - 01/2011)	MSc. in Human Geography (with distinction)
Centre for Human Rights and Conflict studies, Utrecht, The Netherlands (01-06/2008)	Minor in Human Rights and Conflict Studies
Faculty of Arts and Social Sciences, Maastricht University, Netherlands (09/2004 - 06/2008)	BA in European Studies

6. Language skills

Language	Reading	Speaking	Writing
Czech	Mother tongue		
English	1	1	1
Dutch	2	2	3
French, Russian	4	5	5
Spanish	4	4	4

7. Membership of professional bodies:

- Active Learning Network for Accountability and Performance (ALNAP), European Evaluation Society (EES)

8. Key experience

- 10 years of experience in Project and Programme Management in International Development Cooperation
- Hands on experience with Czech Development Agency service tender procedure, familiar with grant procedures
- Fully acquainted with Project Cycle Management (PCM) and Result Based Management (RBM)
- In-depth knowledge of evaluation methodology (Theory of Change, Logframes design, design of indicators (SMART/OVI), Results-based M&E, Results-based reporting and learning principles, approaches and tools)
- Hands on experience with PESTEL analysis, SWOT analysis, stakeholders' analysis, quantitative and qualitative data collection, participatory practice and approach to data collection
- Designing manuals and creating new tools for enhancing efficiency and effectiveness of project and data management

9. Specific country experience (in non-EU countries):

Country	Date from - Date to
Bangladesh	06-08/2009,
Vietnam	04-05/2010, 09/2011, 10/2013

10. Professional experience

Date	Location	Company	Position	Description
2011-2017	The Netherlands/ Czech Republic/ Vietnam/ Cambodia/ Ethiopia/ Lebanon	GEOtest, a.s Gilbert Germain germain@geotest.cz	Head of the FWC Department	<p>Head of the branch office of GEOtest, a.s. in the Netherlands.</p> <p>In-depth knowledge of EU Framework contract conditionality and procedures</p> <ul style="list-style-type: none"> ▪ Coordinator (consortium leader) of the FWC BENEFL0T 12 consortium – Humanitarian Aid, Conflict and Post-Conflict assistance. Overseeing preparation of proposals, including selection of the qualified consultants for the requested assignments, developing methodologies and approaches for project implementation, activities planning and resources allocation, financial proposals. ▪ Technical and financial management of the Framework Contracts Department and branch office ▪ Project design, grant/tender writing, budgeting and reporting skills for major actors in international development cooperation, including Czech Development Agency ▪ Technical, Financial and Contractual support for the implementation of projects. Tasks include: supervision of proposal preparation, budgeting, quality and compliance control of deliverables - overall approx. 55 projects under the framework contracts BENEFL 2013, COM 2011, below a selection of several assignments: <ul style="list-style-type: none"> ▪ Final Evaluation of Rural Infrastructure Development Programme, Malawi (contract ref. number: 2015/364814) - EU funded ▪ Mid-term evaluation of 6 projects EU Support to Socio-Economic Measures (SEM) in N/NE Sri Lanka (contract ref. number 2011/279-227/1) - EU funded <ul style="list-style-type: none"> • Mid term and Final Evaluation of the Programme ENI/2014/037715 "Access to basic services for the vulnerable population in Lebanon - Economic recovery and basic infrastructures" - EU funded ▪ Sector analysis of human rights and other areas in Armenia (contract ref. number: 2014/353412/1) - EU funded ▪ Evaluation of 11th EDF (2016/375599/1) - EU funded ▪ Final Evaluation of Community Development Programme Phase 4, Kenya (contract ref. number: 2015/369802/1) – EU funded

				<ul style="list-style-type: none"> ▪ Identification and Formulation of Civil Society Support Programme in Bangladesh (contract ref. number: 2014/352702/1) - EU Funded ▪ Study on Gender profiles of the Eastern Partnership countries (contract ref. number: 2012/304538/1) - EU funded ▪ External evaluation of the “Sustainable Rural Development in the Refugee-Affected and Hosting Areas of Pakistan Programme (RAHA) (contract ref. number 2015/357005) - EU funded ▪ Study on the best option of disaster management training network for DG ECHO– EU funded ▪ ROM Results Oriented Monitoring system of the Implementation of Projects and Programmes of External Co-operation for the Instrument for Stability – EU funded ▪ Internal capacity building in the areas of Project Management, Monitoring, M&E, Theory of Change (ToC), Proposal design for various international donors, EU PRAG and EU FWC rules and procedures
01/09 – 18/11/ 2016	Zambia	VSO International/VSO Zambia	Evaluation and Research Specialist	<p>ICS2 Evaluation and Revision of Monitoring Approach Terms of Reference.</p> <ul style="list-style-type: none"> ▪ In the team of 2 researchers, carried out an evaluation of the ICS2 Programme in Zambia in four case study areas (sexual and reproductive health targeted at raising awareness, increasing service use and changing behaviour of adolescent and young people, including orphans and disabled). The main objectives were (i) to generate additional evidence on the contribution to development outcomes of the ICS interventions through impact evaluations and (ii) to review the approach to monitoring and data collection for the rest of the life of the ICS programme to enable ongoing analysis and evaluation in line with the theory of change. ▪ The methodological framework for this fieldwork was informed by the realist approach to evaluation – with focus on “what works, for whom, in what respects, to what extent, in what contexts, and how?” based on identifying the underlying generative mechanisms that explain ‘how’ the outcomes were caused and the influence of context. ▪ Methods used included: Stakeholder mapping, Stakeholder focus group discussions, one to one interviews, participatory workshops, observations, Surveys, Quantitative data collection using a scalar tool. In total four case study reports were delivered.
09/2015 – 09/2016	The Netherlands/ Brussels	GEOtest, a.s/European Commission	Project Manager/ TL support	<p>Review of Policy Forum for Development (contract ref. number 2015/365431) – EU funded. The specific objective of the review was to assess the progress achieved so far, identify strengths, weaknesses and constraints encountered, and draw key lessons and recommendations that will inform decisions to improve the ways of working and efficiency</p>

				of the PFD in the future in order to reach its objectives, within its defined scope, and confirm the extension of the PFD. The review was based on an analysis of all documents and reports produced by the PFD, on the original charter and the way it has been implemented, and on the feedback received from the Task Team and all other stakeholders involved. Tasks include: Coordinated the team of consultants, coordination of the data collection and information management, communication with stakeholders and the task manager for the evaluation. Provided support with data analyses and drafting of the final report.
05/2015 – 11/2015	The Netherlands	GEOtest, a.s/ EUD to Azerbaijan	Project Manager	Identification of entry points into justice sector reform in Azerbaijan (contract ref. number: 2015/359393) – EU funded. The global objective of the assignment was to increase the overall understanding of the justice sector in Azerbaijan to better support future EU interventions in the sector (programming, policy dialogue, risk management).
09/2014 - 12/2015	The Netherlands/ Bangladesh	GEOtest, a.s/ EUD to Bangladesh	Project Manager	Evaluation of the Access to Land Programme in Bangladesh (contract ref. number: 2014/344417/1). The mid-term review evaluated the progress of the implementation of the projects under the overall Access to Land Programme. Particular focus was on Government-Civil society partnership, and the quality of intersection and cooperation between all main stakeholders of the project: Government (national and local), CSOs, beneficiaries and target groups, TA, NGO consortium and EU.
03 – 05/ 2015	The Netherlands	UNRWA	Project Manager	Evaluation of the Resource Mobilization Strategy (RMS) 2012 -2015 for UNRWA (CPS/WB/ERCD/0043/0/14). Project was implemented in Palestine, Jordan and Lebanon. Prepared technical and financial proposal for the bid. After the contract award was responsible for the administrative, contractual and financial implementation of the project, quality control of deliverables and coordination with the UNRWA appointed evaluation project manager.
03/2014 - 05/2014	Home-based	War Child UK/UN Online Volunteers	Researcher	Strategy Research on UK Charity Sector and Humanitarian Funding. The research had two main objectives, firstly to evaluate the current position of War Child within UK and secondly to analyse trends in funding priorities of large institutional donors. The outcome of the research has then contributed to the development of War Child new 5-year strategy plan. The strategy research focused on the UK charity sector and humanitarian funding in general.
12/2009 – 03/2010	The Netherlands/ Malawi	Edburgh Consultants/ European Union Delegation to Malawi	Project Manager	Gender and HIV/AIDS project formulation (10th EDF) in Malawi. The projects focused on assistance to the Government of Malawi and the EC in the formulation of the "Promotion of Gender Equality and Women Empowerment programme in Malawi" through capacity building of the gender machinery and implementation of the National Gender

				Policy (NGP) to be funded under the 10th EDF. Responsible for development of technical and financial proposal, including identification of a suitable team of consultants. After the contract award, responsible for coordination of a team of 3 consultants, backstopping, monitoring of the progress of the mission, quality assurance of the deliverables foreseen under the project and final editing of the report.
11/2007-05/2011	The Netherlands	Edburgh Consultants	Project Manager	<p>Responsible for administrative, financial and contractual management of projects falling under the EC framework contracts BENEf Lot 9 & 8 and Com 2007 Lot 2, covering the following sectors: education, health, migration and asylum, good governance, democratisation, peace and stability, civil society, culture, education and training, sustainable development. A few assignments presented below:</p> <ul style="list-style-type: none"> ▪ Backstopping of an evaluation of grant requests received within the framework of the Call for Proposals “Supporting non-state actors in their efforts to fight adult women’s illiteracy and promoting women’s property ownership” (FWC COM 2007- lot 2 - 2009 -2010) ▪ Backstopping of project titled “The Strategic Project Facility 2 (SPF2) in Philippines”. The SPF2 programme has been designed to support the local governance and its capacity building to reach the MDGs. (FWC COM 2007- lot 2 – 03 -12/2009) ▪ Backstopping of the “Evaluation finale du programme de formation en appui de la gestion des interventions de développement” (FORMGED) in Madagascar (FWC BENEf lot 9 – 2007-2008) ▪ Backstopping and internal monitoring of “Evaluation of Sector Policy Support Programme in Education in Vietnam”, (FWC BENEf lot 9 - 2009) ▪ Backstopping the “Formulation and Evaluation mission of Support to primary education in Chittagong Hill Tracts”, Bangladesh (FWC BENEf lot 9 – 2008) ▪ Backstopping of “Evaluation of the EDULINK Programme and preparation of a new proposal under the Intra-ACP 10th EDF strategy paper EDULINK ACP” (FWC BENEf lot 9 -2009/2010) ▪ Backstopping of “Identification and Feasibility Mission for EU-China Social Protection project (EUCSP)” (FWC BENEf lot 9 2007 -2008)
07 – 09/ 2009	Bangladesh	University of Nijmegen	Researcher financed by SNUP (university fund)	Conducted a field work in the post conflict area of Bangladesh, in Chittagong Hill tracts . Collection of data through qualitative means such as semi-structured interviews and focus groups discussion with the key stakeholders such as UNDP, UNICEF, ECD and local NGOs representatives who are involved in the provision of education programmes in the Chittagong Hill Tracts.

				<p>The research aim was to map the situation of the geography of education with focus on the theme “education and peace-building”. In close cooperation with the UNDP in Rangamati and Bandarban (CHT), the researcher conducted collection of raw data which were then evaluated against the education Impact assessment grid for establishing the role of education in the peace building process of CHT. Cross cutting issues such as: governance, gender, the human rights, security of the inhabitants in the post-conflict setting of the CHT, environmental issues and livelihoods were part of the evaluation.</p>
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11. Other relevant information:

- Publications: Novakova, P. (2012), The Discourse of Unity: **Constructing Peace through Education in the Chittagong Hill Tracts**, chapter in edited volume by Uddin, N. *Politics of Peace: A Case of the Chittagong Hill Tracts in Bangladesh* Institute of Culture & Development Research (ICDR), Bangladesh

12. Trainings:

- 2017 – PM4DEV – Result Based Project Management (PMI)
- 2016 – Courses from UN Women: I know gender: An introduction to gender Equality for UN Staff (online: UN Women Training Centre)
- 2016 – Course from UN Women: Women Economic Empowerment (online: UN Women Training Centre)
- 2015 – on-going - Methods and Statistics in Social Sciences (Coursera – University of Amsterdam)
- 2015 – Advance Skills in Excel (Opatel, The Netherlands)
- 2014 – Certificate in Results based Evaluation organised by ILLD
- 2014 - Certificate in DRM e-course organised by the World Bank
- 2013 – Certificate of Accomplishments of a course “Grow to Greatness: Smart Grow for Private Businesses, Part I Darden Graduate School of Business MBA Course (Coursera)
- 2011 – Certificate in Evaluation of development programmes organised by European Program for Development Evaluation Training (EPDET)

6 - FINANCIAL OFFER

Financial offer	Costs			Total costs of the project in CZK
Type of costs	Units	Number of units	Unit price in CZK	
1. Personnel costs				
1.1 Management				
1.1.1 Coordinator				
1.2 Experts / consultants				0.00
International Health Expert - Team Leader - Bernhard Eder	day	27.00	16,900.00	456,300.00
National Health Expert	day	30.00	9,100.00	273,000.00
Coordinator and Research Expert	day	12.00	7,800.00	93,600.00
Personnel costs - subtotal				822,900.00
2. Travel costs				
2.1 International travel	air tickets	2.00	33,800.00	67,600.00
2.2 Local travel	car rental	1.00	15,600.00	15,600.00
2.3 Accommodation	night	20.00	2,340.00	46,800.00
2.4 Allowance	den	20.00	988.00	19,760.00
Travel costs - subtotal				149,760.00
Direct costs of the project - total (1-2)				972,660.00

The price of the offer is final. As a Slovak entity, EuroPlus will not invoice VAT for services provided abroad.

7 - DETAILED DESCRIPTION OF SELECTED REFERENCES

1. Assignment title: Health Field Workers – Better access of the Roma community to the health care in the SR by means of trained health field workers - LOT 1 – Provision of health field workers for selected micro-regions		Country: Slovakia
Location within Country: Central and Eastern Slovakia		Professional Staff Provided by Your Firm: 1 Project Director, 2 project coordinators, 40 Health Field Workers, 1 Administrative assistant
Name of Client: Ministry of Health of the Slovak Republic		N ^o of Staff: 44
Address: Stromova, Bratislava, Slovak Republic		N ^o of Staff-Months; Duration of Assignment: 660
Start Date (Month/Year): 09/2005	Completion Date (Month/Year): 01/2007	Approx. Value of Services (in Current US\$): 797,000.00
Name of Associated Consultants: KARI		N ^o of Months of Professional Staff Provided by Associated Consultants: 0
<p>Narrative Description of Project:</p> <p>The overall objective of the project was to improve the access of the marginalised population to the health care. A total of 40 health field workers were selected and consequently trained to work in the villages and municipalities identified by the Ministry of Health of the Slovak Republic.</p> <p>The main target group of the project is the marginalised Roma population in the selected regions. It focuses on Roma youth and children.</p> <p>The selected health field workers work under the supervision of the team leader and project coordinators and work on daily basis throughout the whole duration of the project. Having been thoroughly trained, the health field workers will communicate to and assist the local doctors and nurses offering health care and provide health care awareness in the selected communities both in schools and community centres. This will focus on support to healthy lifestyle, hygiene, prevention of drug abuse, maternity, parenthood, childcare, and importance of vaccination. Apart from the above, they are responsible for the performance of the following tasks:</p> <ul style="list-style-type: none"> ▪ assessment of the technical needs of the primary schools and community centres, ▪ entrance assessment (human capital, cooperation with local authority, school, doctors, health conditions of the local Roma community, cooperation with NGOs), ▪ regular basic statistics and monitoring of the Roma health conditions in the selected regions, ▪ provision of awareness and information about the project activities and achievements to the wide public on local, regional and national level. With the assistance of the health field workers provision of regular health education in schools or community centres. 		
<p>Description of Actual Services Provided by Your Staff:</p> <ul style="list-style-type: none"> ▪ Selection of Health field workers, ▪ Provision of training to target groups ▪ Statistical research, ▪ Vaccination of HFW against hepatitis, flu and TBC ▪ Awareness campaign in the field of health care, drug abuse, prevention, hygiene, ▪ Production of promotion materials including leaflets, billboards ▪ Design and delivery of practical training in the school on how to wash hands, brush teeth, use of toilet, healthy lifestyle, sexual education, keep the living environment clean 		

2. Assignment title: Study on the nature and the volume of legal litigation related to placement of the children to the CARSEC of Nouakchott		Country: Mauritania
Location within Country: Nouakchott		Professional Staff Provided by Your Firm: 1 Senior Expert in justice of minors, 1 Social expert for children in conflict
Name of Client: Delegation of the European Commission in Mauritania		Nº of Staff: 2
Address: Leandro Medeot, Délégation de l'Union Européenne en Mauritanie. BP 213 NOUAKCHOTT, Tel. : +222 45 25 27 24 (extension 113) - Fax : +222 45 25 35 24		Nº of Staff-Months; Duration of Assignment: 3
Start Date (Month/Year): 01/2017	Completion Date (Month/Year): 03/2017	Approx. Value of Services (in Current US\$): 62 441
Name of Associated Consultants: Particip		Nº of Months of Professional Staff Provided by Associated Consultants: 0
<p>Narrative Description of Project:</p> <p>Mauritania ratified the Convention on the Rights of the Child (CRC) of 1991. It adopted a coherent regulatory and legislative framework: Ordinance 2005 015 of 5 December 2005 on the criminal law of the child (OPPE) The Mauritanian law with the CRC. The order was supplemented by Decree 2009-069 of 2 March 2009. In addition to this legal framework, the Ministry of Social Affairs, supported by UNICEF, has adopted a national strategy for the protection of children in Mauritania in 2009, the first action plan of which Centre for Placement and Rehabilitation of Children who have been prosecuted (CARSEC). CARSEC is a public institution under the auspices of the Ministry of Justice.</p> <p>General objectives</p> <ul style="list-style-type: none"> ▪ Improve the efficiency of the functioning of justice for minors in Mauritania <p>Specific objective</p> <ul style="list-style-type: none"> ▪ Identify judicial and sociological avenues of work to ensure that the Child Protection Ordinance is applied more effectively 		
<p>Description of Actual Services Provided by Your Staff:</p> <ul style="list-style-type: none"> ▪ Comprehensive identification of court cases that have resulted in CARSEC placement over the past 4 years; ▪ Classification of these files according to relevant legal or social criteria; ▪ Comprehensive list of juvenile indictments and convictions over the last 4 years for the courts of Wilaya of Nouakchott and Nouadhibou. ▪ For the year 2016, on the basis of the prosecutor's and the arrival register of the juvenile brigade in Nouakchott, propose a numerical analysis of the judicial documents (from custody to conviction) for Miners who are transferred to a brigade; ▪ Elaboration of proposal for judicial work to ensure better application of the penal protection of children; ▪ Assess the impact of CARSEC in reintegration of juveniles in conflict with the law into the social fabric. ▪ To propose ways of working for the reinsertion of minors in conflict with the law in the social fabric, if necessary. 		

3. Assignment title: Mid-term review of the National Programme for Sub-National Democratic Development (SNDD)		Country: Cambodia
Location within Country:		Professional Staff Provided by Your Firm/Entity(profiles): <ul style="list-style-type: none"> ▪ Public Administration/local government Reform Expert ▪ Planning and performance management Expert
Name of Client: Delegation of the European Union		Nº of Staff: 2
Address: No. 100 A, Preah Norodom Boulevard Khan Daun Penh, 12207 Phnom Penh		Nº of Staff-Months; Duration of Assignment: 4
Start Date (Month/Year): 05/2016	Completion Date (Month/Year): 10/2016	Approx. Value of Services (in Current US\$): 194,000
Name of Associated Consultants: Particip		Nº of Months of Professional Staff Provided by Associated Consultants: 5.5
<p>Narrative Description of Project:</p> <p>The overall purpose of this MTR was to identify and justify a set of clear recommendations to improve and adjust the National Programme and its implementation. To achieve this a review of relevance, implementation progress, effectiveness, efficiency, constraints and key issues were carried out. Compelling evidence was collected and a clear reasoning required to design actions that would be adopted to improve performance was provided. Emphasis was placed on relevance, efficiency and effectiveness as well as recommendations for the coming period.</p>		
<p>Description of Actual Services Provided by Your Staff:</p> <p>The work was carried out in four phases broken down to the following key activities:</p> <p>1/ Inception phase (Output : Inception Report)</p> <ul style="list-style-type: none"> ▪ Assessment of the feasibility of answering the evaluative questions ▪ Elaboration of full methodology, describing how the evaluative questions will be assessed and the review undertaken including the list of stakeholders; ▪ A list of the outputs to be evaluated, developed by joining and combining the NP and implementation plans to be evaluated (i.e. mapping of IP3 outputs into the NP) <p>2/ Analytical and Evaluative Phase (Output: Analytical report, Presentation of results to stakeholders)</p> <ul style="list-style-type: none"> ▪ Assessment of program implementation and results by reviewing progress towards outputs and outcomes, and by assessing program relevance, efficiency and effectiveness. ▪ Identification of strengths and weaknesses in program design and implementation. <p>3/ Recommendation Phase (Output: Recommendations report)</p> <ul style="list-style-type: none"> ▪ Draft recommendations to improve the design of the NP including improvements to the NP and IP3-II results frameworks, specifying indicators, targets, means of verification, and data collection methodologies; ▪ Draft recommendations to improve management and institutional arrangements; <p>4/ Finalization Phase (Output: Final Report)</p> <ul style="list-style-type: none"> ▪ Summarizing the existing outputs in the final report 		

4. Assignment title: Evaluation of the Youth Empowerment through Culture and Sport Programme (YEP)		Country: South Africa
Location within Country:		Professional Staff Provided by Your Firm/Entity(profiles): <ul style="list-style-type: none"> ▪ Team Leader
Name of Client: Delegation of the European Union		Nº of Staff: 1
Address: Genevieve-Anne Dehoux, Attaché, Governance, Delegation of the European Union to the Republic of South Africa Postal address: P.O. Box 945, Groenkloof, 0027 Pretoria Physical address: 1, Greenpark Estates, 27 George Storrar Drive, Groenkloof, Pretoria		Nº of Staff-Months; Duration of Assignment: 2
Start Date (Month/Year): 11/2015	Completion Date (Month/Year): 04/2016	Approx. Value of Services (in Current US\$): 84,533
Name of Associated Consultants: Particip, EPRD		Nº of Months of Professional Staff Provided by Associated Consultants: 1
Narrative Description of Project:		
Global objective		
The global objective of the contract was to produce an independent evaluation of the Youth Empowerment through Culture and Sport Programme (Financing Agreement DCI-AFS/2009/020-372).		
Specific objectives		
<ul style="list-style-type: none"> ▪ Analyse the implementation of the project against the standard 5 DAC evaluation criteria, namely: relevance, effectiveness, efficiency, sustainability and impact. ▪ Trace a sample of direct beneficiaries of the projects and assess the impact the project they were involved in has had on them. ▪ Draw key lessons learnt from the YEP programme's operational implementation, in particular comparing the various methodologies followed by the 7 projects, and make recommendations for future initiatives aiming at addressing youth development through culture and sport. 		
The evaluation in particular provided the EU Delegation to South Africa, the South African Department for Arts and Culture, and National Treasury with:		
<ul style="list-style-type: none"> ▪ Sufficient information to appreciate globally the results and impact of the YEP programme as a whole, in particular by identifying the impact at an individual level on a sample of direct beneficiaries (youth). ▪ Conclusions and recommendations on elements of good practice identified during the operational implementation phase of YEP that could be replicated in future actions targeting youth development through sport and culture 		
Description of Actual Services Provided by Your Staff:		
<ul style="list-style-type: none"> ▪ Work plan mentioning the evaluation methodology, all activities to be implemented by the evaluation team for this assignment with corresponding timelines, and responsibilities ▪ Power point presentation of preliminary findings of phase 2. ▪ Draft final report ▪ Final report ▪ Power point presentation of conclusions and recommendations. 		

5. Assignment title: Final Evaluation of the Aid to uprooted People in Nepal-UNHCR project ‘International Protection and Assistance to Refugees from Bhutan in Nepal’		Country: Nepal
Location within Country: Kathmandu		Professional Staff Provided by Your Firm/Entity(profiles): Displaced People and Local integration Expert
Name of Client: Delegation of the European Union		Nº of Staff: 1
Address: Maria Kontro, Programme Officer - Operations Section, Delegation of the European Union to Nepal, Tel: +977 1 449445/6, ext. 103		Nº of Staff-Months; Duration of Assignment: 1.5
Start Date (Month/Year): 01/2015	Completion Date (Month/Year): 02/2015	Approx. Value of Services (in Current US\$): 44 565
Name of Associated Consultants: Geotest		Nº of Months of Professional Staff Provided by Associated Consultants: 0
<p>Narrative Description of Project:</p> <p>Since 1994, the EU Development Cooperation section has been providing a significant financial contribution to the refugees from Bhutan through the UNHCR led Programme. Meanwhile, the European Commission Humanitarian Office (ECHO) has been supporting World Food Programme (WFP) in food assistance delivery to the refugee camps. The European Union support to UNHCR is to be seen in the light of an exit strategy for the assistance programme, considering the goal of resettlement and the decrease of the number of refugees in the two remaining camps.</p> <p>The project provided a final evaluation of the EU financed four-year UNHCR programme from 2011 to 2014, with a total implementing amount of € 2.95 million, as well as recommendations for the continuity of EU support for the Programme.</p> <p>The purpose of the final evaluation was to provide the European Union with a review of the project which has been implemented by UNHCR as well as elaborating related recommendations for future actions.</p> <p>Specific objectives</p> <p>The evaluation assessed two main issues with UNHCR:</p> <ul style="list-style-type: none"> ▪ Evaluation of the ongoing project that is about to finish. The Project Cycle Management criteria (relevance, efficiency, effectiveness, impact and sustainability) will apply for the evaluation, and; ▪ Identify best practices and lessons learned from the perspective of elaborating recommendations for the future UNHCR-EU cooperation in relation to the Programme. 		
<p>Description of Actual Services Provided by Your Staff:</p> <p>1. Review of the relevant documentation</p> <ul style="list-style-type: none"> ▪ EU decisions ▪ Previous evaluations (External + ROM) ▪ Mission reports ▪ Project Reports from implementing partner(s) <p>2. Meetings</p> <p>In order to achieve the objectives of the mission, meetings were held (among others) with all relevant stakeholders involved in the sector:</p> <ul style="list-style-type: none"> ▪ The EU Delegation, ECHO ▪ The relevant implementing partners (UNHCR and its partners like WFP etc.) ▪ The Nepalese government authorities ▪ Donors involved in the sector (US, and the donor’s core group) ▪ Foreign Embassies (especially India given the influential role it plays in this issue) ▪ The beneficiaries of the project 		

6. Assignment title: Mid Term Evaluation of the Democratic Governance Programme in Malawi		Country: Malawi
Location within Country: Various towns in Malawi		Professional Staff Provided by Your Firm/Entity(profiles): International Democratic Governance Expert, Access to Justice Expert
Name of Client: Delegation of the European Union		Nº of Staff: 2
Address: Julius K. MUNTHALI, Programme Manager - Good Governance, P.O. Box 30102, Lilongwe 3, Malawi, Area 18 Roundabout, Presidential Way/ Corner M1		Nº of Staff-Months; Duration of Assignment: 3
Start Date (Month/Year): 06/2014	Completion Date (Month/Year): 09/2014	Approx. Value of Services (in Current US\$): 97 373
Name of Associated Consultants: Particip		Nº of Months of Professional Staff Provided by Associated Consultants: 1
Narrative Description of Project:		
<p>The overall objective of this assignment was to conduct a Mid-Term Review (MTR) in order to assess the overall progress of the Democratic Governance Programme to date against the anticipated results in the Financing Agreement and its Logical Framework</p> <p>The primary purpose of the requested MTR was to assess how far the expected results of the project were been achieved to date and draw lessons for the remaining period of implementation as well as inform the design of potential new programmes in support of the governance sector under the 11th EDF. The specific criteria used by the MTR was analysing the overall project performance against the results anticipated in the Logical Framework in line with standard EC evaluation methodology.</p> <p>The MTR critically assessed and paid particular attention to the following key issues:</p> <ul style="list-style-type: none"> ▪ How does the relationship between the various beneficiary institutions as part of the larger sector contribute to project implementation and how can lessons be used going forward? Does the current selection of beneficiary institutions make sense, should it be broadened or narrowed in future interventions? ▪ Preparations for the implementation of the Malawi National Indicative Programme (NIP) for the 11th EDF are in their early stages. A brief overview of the possible broad options going beyond the current project is required, taking into account progress made so far and progress expected in the medium term 		
Description of Actual Services Provided by Your Staff:		
Provision of a comprehensive mid-term evaluation report on the "Democratic Governance Programme" in Malawi. Elaboration of a methodology for carrying out the assignment in line with requirements of the European Union Delegation to Malawi and EuropeAid's Guide on "Evaluation in the European Commission".		

8 - ANNEX 1- LIST OF SELECTED PROJECTS IMPLEMENTED BY EUROPLUS

Country	Project title
Cambodia	Evaluation of the Czech Republic development cooperation project in the sector of other social infrastructure and services in Cambodia
Romania	Developing a guideline for management of utilities in infrastructure investments
Honduras	Proyecto contra la corrupción y por la transparencia en Honduras
Tunisia	Assistance technique pour la rédaction de termes de référence et la coordination de 4 revues fonctionnelles
Jordan	Evaluation of decisions ENPI 2012/023-533 and IcSP 2015/038-522
Brussels	Final evaluation of the IfS/IcSP support under Article 3 to Migration in beneficiary countries (2007-2016)
Nigeria	Mid-Term Evaluation of the "Promoting Women's Engagement in Peace and Security in Northern Nigeria" Project
Mauritania	Etude sur la nature et le volume du contentieux du placement des enfants au CARSEC de Nouakchott
Pakistan	MTR KP DGCD Programme
Tunisia	Identification et formulation de la troisième phase du Programme d'appui à la réforme de la justice (PARJ 3)
Solomon Islands	Electoral Law Reform and Political Parties Systems Reform - legislative drafting of all related laws and regulations
Central Asia	Gender Study for Central Asia
Albania	Technical Assistance to support Integrated Sector Approach Mechanism in Albania (Bridge support)
Jordan	Evaluation, Re-formulation and Monitoring of a Decentralisation Project in Jordan
Cambodia	Mid-term review of the national Programme for Sub-National Democratic Development (SNDD)
China	Final Evaluation of the Policy Dialogues Support Facility II
Zimbabwe	Strengthening the Capacity of National Authorising Office in the Ministry of Finance Planning and Economic Development
Benin	AT en appui a la réalisation du DP2 PAJ
West Africa	Identification and Formulation of Support to West Africa Peace, Security and Stability: Complementary action combatting other main threats
Turkey	Technical Assistance for a comprehensive needs assessment of short and medium term actions as basis for an enhanced EU support to Turkey on the refugee crisis
Moldova	Preparation of Technical Assistance projects for developing Annual Action Programme 2015 to the Republic of Moldova in the field of Public Administration Reform and preparation of AAP 2016 for PAR and TCF
Gabon	Exploratory Mission (ExM) to Gabon
South Africa	Evaluation of the Youth Empowerment through Culture and Sport Programme (YEP)
Cameroun	Civil Society Facility and Communities - European Union Cameroon
Niger	Mid-term evaluation of the project Support to the reduced risk of insecurity and instability in parts of the northwest and southeast Niger
Haiti	Analyse et Plan d'Action Genre 2016-2020 UE/EM en Haïti

Tunisia	Identification and formulation of a project to support the implementation of the Five Year Plan, modernization of the administration and public enterprises
Morocco	Support for budgeting Migration Policy of the Kingdom of Morocco and identification-formulation of the EU's support program for migration policies in Morocco
Nigeria	Final Evaluation of Support to the Office of the National Security Adviser
Democratic Republic of Congo	Formulation of the 11th EDF program Justice
Lesotho	Mid-term evaluation of the program to support decentralization and non-state actors
Comoros	Support for the definition of modernization of the justice sector strategy to Comoros
South Africa	Development of a training budget analysis for the National Treasury and provincial specialists
South Africa	Development of a forward management system of human resources
Ivory Coast	Evaluation of the "Project to Support Reform and Modernization of the Judicial System and Prison in Ivory Coast" and the support of the European Union to justice over the period 2011-2015
Comoros	Evaluation mission needs for the revision of the electoral register and the inclusion of citizens in the diaspora for the 2016 elections
Eritrea	Mid-term Review of two EDF 10 funded programmes "SUPPORT TO THE COMMUNITY COURTS OF ERITREA" - Global Financial Commitment No FED/2009/21604, and "CAPACITY BUILDING FOR THE PUBLIC ADMINISTRATION OF ERITREA" – Global Financial Commitment No FED/2009/021603
Myanmar	Exploratory Mission (ExM) to Republic of the Union of Myanmar in view of a potential EU Election Observation Mission to observe the upcoming General Elections
Nigeria	Mid-term Evaluation of 3 UNODC Implementation projects – Justice, Anti-Corruption and Drugs
Chad	External and Final evaluation of the program Support for the reintegration of demobilized soldiers of the national armed forces of Chad
Pakistan	External evaluations of the "Sustainable Rural Development in the Refugee-Affected and Hosting Areas of Pakistan" programme (RAHA) (Contract n°260022)
Nepal	Final Evaluation of the Aid to uprooted People in Nepal-UNHCR project 'International Protection and Assistance to Refugees from Bhutan in Nepal'
Lebanon	Technical expertise to identify areas of intervention to improve the management of Lebanon's foreign affairs
Malawi	Mid Term Evaluation of the Democratic Governance Programme in Malawi
Guinea	Technical assistance to support the launching of the reform of the Justice sector in Guinea
Georgia	Compliance Review for Budget Support to the IDP Sector
Tanzania	Support to the design of Programme Estimates I and project strategy for the Programme to Promote Maritime Security (MASE)
Macedonia	Preparation of feasibility study and technical specification for supply of equipment – National Programme for Transition Assistance and Institution Building, Component for 2009 under the Instrument for Pre-accession Assistance

Ivory Coast	Support of the 11 th EDF programming in the area of governance in Ivory Coast
Vanuatu	Delivery of data processing, weighting applications and training for Vanuatu Rural Smallholder Agriculture Survey 2013
Bhutan	Preparation of Public Finance Management Annual Monitoring Report 2012
Azerbaijan	Support to the Implementation of the CIB Institutional Reform Plan 3 – Strengthening civil service training in Azerbaijan with a focus on EU affairs
Ghana	Study into potential of non-tax revenue in Ghana
Gambia	Governance Programme in the Gambia – Access to Justice and Legal Education Component – Start up activities
Chad	Reform of the penal code - Development of a new penal code
Chad	Recruitment of an experts team in the reform of the penal code - Development of the Criminal Code
Senegal	Role of NSA in sector governance: supplements to the mapping of non-state actors in Senegal
Serbia	TA to review the tender documents for the IPA 2011 projects for the Tax Administration of the Republic of Serbia
Moldova	Support to the preparation of 2 twinning project fiches – Court of Accounts and Service for Standardisation and Metrology
Lesotho	Training on Social Accounting Matrix (SAM) / Computable General Equilibrium (CGE) Modelling
Mayotte	Technical assistance for institutional support to the communes of Mayotte
Tunisia	Mission for the implementation of a training program, awareness and communication passage Budget Management by objectives - GBO
Chad	Recruitment of a senior expert for the final evaluation of PARSET
Caribbean	10 th EDF Caribbean Social Sector Programme
Mozambique	Formulation mission to Support to Non-state Actors in Mozambique : Strengthening the Mutual Accountability
Moldova	Assessment of the Public Finance Management System
Kosovo	Technical Assistance for preparation of Technical specifications for the IPA 2010 Support to the Implementation of Intelligence Led Policing project
The Philippines	LOT11 Beneficiaries - Identification mission for a Public Finance Management Support Programme
Burkina Faso	Définition d'un système de suivi-évaluation du processus de décentralisation au Burkina Faso
Burkina Faso	Etude de faisabilité du dispositif d'appui technique à l'exercice de la maîtrise d'ouvrage des collectivités
Chad	Recruitment of an expert for electoral operations and logistics in Chad
Azerbaijan, Armenia, Belarus, Georgia, Ukraine, Moldova	Study for an EaP IBM Flagship Initiative project