



**Subject: Program Evaluation Consultancy**

### **Background**

The Infectious Diseases Institute (IDI) was awarded two cooperative agreements to support the provision of HIV comprehensive services in West-West Nile Region (Adjumani, Arua, Koboko, Maracha, Moyo, Nebbi, Pakwach, Yumbe, Zombo, Buliisa, Hoima, Kibaale, Kagadi, Kakumiro, Kiboga, Kiryandongo, Kyankwanzi, and Masindi districts) – in 2015 and Kampala region (Kampala and Wakiso districts) 2017-2022. The Regional cooperative agreements are implemented by IDI as funded by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) with support from the U.S Centers for Diseases Control and Prevention (CDC).

The overall goal of the regional mechanisms is to accelerate epidemic control through the implementation and scale up of evidence based high impact interventions, strengthening of national, regional, and district health systems, health facilities and community structures in Kampala and West-West Nile regions of Uganda.

The regional mechanisms are expected to achieve UNAIDS 95-95-95 targets of testing, treating and achieving viral load suppression in 95% of persons living with HIV (PLWH) by 2020 and 2022 for West-West Nile and Kampala Regions respectively.

The regional mechanisms pivot on the following thematic areas: prevention through behavioral and biomedical interventions; PMTCT-EID services; HIV Case Identification services (HCI); Health Systems Strengthening (HSS) that includes Human Resources for Health (HRH), laboratory capacity building, logistics and supplies; and care and treatment for both adults and children including Positive Health, Dignity and Prevention (PHDP). The regional mechanisms have been implemented with partners at PEPFAR-IDI supported facilities and communities in Kampala and West-West Nile Regions since FY17 and FY15 respectively.

### **Objective**

The main objective of the evaluation is to identify best practices, track trends in performance of activities, outputs and outcomes against PEPFAR goals and UNAIDS targets, with an aim of informing policy and practice in HIV prevention, care and treatment.

### **Specific objectives**

**I:** To evaluate targeted HIV testing service (HTS) models that aim to improve earlier identification of HIV positive and negative individuals, and Linkage of PLHIV in community to facility sites in scale up districts and linkage and promotion of HIV prevention among HIV negative individuals

#### **Main locations:**



- 2:** To evaluate innovative approaches that increase adherence, ART retention and viral load suppression among adult and pediatric HIV clients.
- 3:** To determine if there is improved identification of TB infected individuals, effective scale up of comprehensive TB/HIV services at individual sites, and progress towards reduction of TB burden among HIV/TB co-infected clients within the CDC supported regions and districts
- 4.** To evaluate innovative PMTCT & HIV exposed infants (HEI) approaches that increase identification of HIV positive and syphilis infected pregnant & breastfeeding women (PBFV), enhance immediate ART uptake, adherence and retention, viral load suppression and syphilis treatment among PBFV, reduce MTCT rates of HIV & Syphilis and ensure documentation of 18-month final outcome status for all HIV Exposed infants (HEI)
- 5.** To evaluate innovative interventions that are designed to improve data quality and data utilization for program evidence-based decision making at facility and district level
- 6.** To determine if there was increased access to comprehensive orphan vulnerable children (OVC) services
- 7.** To determine if the strengthening of the existing laboratory network and quality management of its systems increased ART initiation and ART monitoring at facility and district level
- 8:** To determine if the relationship between district level performance reviews and HR performance had an effect on district performance regarding access to ART, coverage, retention in care (loss to follow up).
- 9:** To determine if the region mechanism approaches resulted in increased coverage with voluntary medical male circumcision

### **Scope of Work**

1. Draft an inception report outlining the evaluation study objectives, study design, and tools to be used (15-20 pages without annexes) for the baseline, and midterm (3 years since program inception) evaluations of the Kampala and West-West Nile mechanism.
2. Develop tools that will guide data collection (standard operating procedures and data extraction tools)
3. Collect, clean, securely store and analyze data
4. Present preliminary findings and write evaluation reports in accordance with stipulated guidelines laid out in the PEPFAR Evaluation Standards of Practice (ESoP)  
<https://www.pepfar.gov/reports/guidance/c61317.htm> Appendix C
5. Disseminate study findings to wider stakeholder audiences

#### **Main locations:**



### **Evaluation Methodology**

The consultant will develop a detailed evaluation methodology approach that will be adapted in consultation with stakeholders after contract award.

### **Deliverables**

1. Inception report
2. Data collection tools, including the data extraction tool
3. Standard operating procedures to guide data collection
4. Evaluation schedule indicating when they would be able to complete the assignment
5. Draft evaluation report with the quantitative and qualitative components of study (03 key informant interviews, 15-30 in-depth interviews, and 5-10 focus group discussions per regional mechanism)
6. Final evaluation report as per PEPFAR ESoP guidelines.
7. Recommendations and adjustments to proposed program strategies
8. Power point presentations in evaluation results dissemination to

Stakeholders.

### **General Summary of the position**

The program evaluation consultant firm will conduct the evaluation of the Outreach HIV/TB service delivery mechanisms in Kampala Region and West-West Nile Region to determine if the HIV/TB prevention and care program is on track to achieve prior set targets in the communities served.

### **Consultancy firm with the following skills mix, qualifications and experience**

The lead consultant should have at a minimum a master's degree in epidemiology, or public health, with postgraduate training in Monitoring and Evaluation with demonstrated experience in applying a mixed methods approach to collecting, analyzing and reporting public health program data. The consultant firm must have the expertise of designing HIV/AIDS logic models, monitoring and evaluation frameworks, conducting data quality assessments, and should be conversant with best practices in data analysis and dissemination. Specialist knowledge of USG HIV/AIDS public health programs, strategies, methods, processes and techniques used to plan, develop, implement and evaluate results of HIV/AIDS programs is required. Good working knowledge of overall administrative requirements, budgeting and fiscal management in support of contracts or cooperative agreements, grants or purchase requisitions is required. The lead consultant firm should have a minimum of five years of mid- to senior-level public health research and monitoring and evaluation experience of HIV/AIDS prevention, treatment, or care programs.

#### **Main locations:**



Additionally, the applicant should:

1. Have Skills in research, analytical and report writing skills including computer literacy
2. Have excellent written and oral communication skills
3. Be able to work with stakeholders (team work)
4. Be able to work under minimum supervision and maintain honesty and confidentiality.

### **Key Responsibilities:**

- Conduct a program evaluation of the regional mechanisms to determine impact on regional and national HIV-TB control.
- Lead and coordinate the evaluation teams to ensure that the program evaluation is conducted in accordance with the Evaluation Standards of Practice – (ESoP) recommended by PEPFAR and institutional ethical standards governing data access and reporting.
- Plan and execute the evaluation of regional mechanisms within agreed upon timelines
- Develop evaluation tools, data extraction tools and SoPs, needed to guide efficient data collection
- Ensure that program evaluation activities are aligned to answer preset evaluation questions.
- Engage stakeholders in the identification of program implementation bottlenecks and make recommendations.
- Maintain participants' confidentiality, privacy and observe all research ethics.
- Conduct qualitative research interviews, tentatively: 03 Key informant interviews, 15-30 in-depth interviews, and 5-10 focus group discussions per regional mechanism in Kampala and West-West Nile Regions. Please note that the number of interviews may change depending on quantitative evaluation findings.
- Transcribe, code, analyze, and present qualitative research findings
- Document or write qualitative evaluation reports as per ESoP guidelines.
- Any other duties as may reasonably be assigned from time to time.

### **Reporting and coordination**

The consultant firm will be supervised by the Monitoring and Evaluation Technical Support (METS) team of School of Public Health, Makerere University and will work with the monitoring and evaluation team at IDI.

### **Instructions for submission of financial proposal**

Interested consultant firms are requested to submit electronic copies to [swamimbi@idi.co.ug](mailto:swamimbi@idi.co.ug) or [nkalema@idi.co.ug](mailto:nkalema@idi.co.ug) and hard copies of both the technical and financial proposals in separate envelopes to the Procurement Manager; Infectious Diseases Institute, McKinnel Knowledge Center, Makerere University Main campus, P. O. Box 22418, Kampala NOT later than **5:00pm 7<sup>th</sup> October 2019**.

#### **Main locations:**



In your response, please provide the following documents along with the technical proposal:

1. A certificate of incorporation or registration
2. Memorandum and articles of association
3. Valid, current trading license
4. Tax registration and clearance certificates where applicable
5. Company profile with reference to past work relevant to this call
6. Verifiable documentary evidence of similar assignments executed successfully in the past five years
7. Verifiable signed curriculum vitae of qualified personnel

**Main locations:**