

TERMS OF REFERENCE

Project Title: Development of the 2024 Annual Report on the Implementation of the Responsible Parenthood and Reproductive Health (RPRH) Law
Type of Service: Technical Consultancy

RATIONALE

Section 21 of the Responsible Parenthood and Reproductive Health (RPRH) Act of 2012 mandates the submission “to the President of the Philippines and Congress an annual consolidated report on the law.” The Annual Report must contain:

- o Comprehensive assessment of the implementation of the programs under the law;
- o Comprehensive report from government agencies and instrumentalities; and
- o Contain recommendations for executive and legislative actions.

In compliance with this mandate, the Department of Health (DOH) annually gathers and consolidates the country’s accomplishments in the areas of family planning, maternal and neonatal health, adolescent reproductive health, gender-based violence and HIV and AIDS from all levels of program implementation including municipalities, provinces, regional agencies and national offices.

An annual writeshop is conducted to transform these data on accomplishments to a comprehensive report to be submitted to the President and to Congress. In this respect, the United Nations Population Fund (UNFPA) has been requested to provide technical assistance to support the 11th year report preparation writeshop, and shall engage a lead writer/editor who has the expertise on technical writing and past experience in RPRH report preparation.

OBJECTIVES

This consultancy aims to generate technical inputs and guidance from available experts on the:

- a) Review and analysis of data on performance reports by each key result area of RPRH
- b) Drafting, editing and finalizing the 11th Annual Report of Accomplishments on RPRH Law Implementation
- c) Copy-editing and Design of ready-to-print report

SCOPE OF WORK AND EXPECTED OUTPUTS/DELIVERABLES

The **LEAD WRITER/ CUM EDITOR** will be hired to provide technical writing, content-editing, and packaging support in the preparation and development of the RPRH

Law Annual Report for submission to the Office of the President (OP) and the two houses of Congress. He/She will perform the following tasks:

1. Review the performance data submitted to DOH and provide advice on how best to ensure completeness and validity of reports submitted;
2. Serve as the main facilitator for the writeshop/s and provide technical input and guidance to the Core Team in the drafting of the Report;
3. Document the outputs in the writeshops and ensure translation into a technical source of inputs for the Technical Report;
4. Coordinate with DOH, CPD, other government agencies, NGOs/CSOs and other key organizations to ensure that critical RPRH M&E data and information are available and are used as basis for the Report;
5. Write, edit and proofread the reports, ensuring adherence to acceptable style guides without altering the substance and format of the document;
6. Consolidate, review and edit the submission of each KRA writers;
7. Coordinate with DOH to ensure logic, coherence and consistency throughout the report and smooth transition in each of the KRAs and crosscutting sections;
8. Copy-edit and finalize the report;
9. Lay-out and design the report, based on DOH/CPD recommendation;
10. Review the technical content of the camera-ready version of the report prior to final printing;
11. Provide recommendations on how to improve the preparation of succeeding Annual RPRH Accomplishment Report.

TASKS TO BE PERFORMED, DELIVERABLES, WORK SCHEDULES AND PAYMENT TERMS

Activities	Deliverable	Estimated Level of Effort
<ul style="list-style-type: none"> Provide guidelines to ensure adherence to thematic focus of this year's Annual Report 	2024 RPRH Annual Report Guidelines	2 days
<ul style="list-style-type: none"> Coordination meetings with RPRH Secretariat focal point (technical assistant), KRA teams, contributors from CSOs and Development Agencies and setting of deadlines 	Workplan with clear roles and responsibilities including deadlines	3 cumulative across several days

<ul style="list-style-type: none"> Review/consolidate/copy-editing the individual KRA write-ups/sections from technical/creative writers Submit 1st draft of the Report to DOH, CPD and UNFPA for comments 	1 st draft submitted to DOH, CPD and UNFPA (for review)	15 days
<ul style="list-style-type: none"> Facilitate and coordinate the review process with DOH Program Focals and Management Committee of the CPD Edit/revise the Report and secure DOH approval 	Final report submitted and approved by DOH	10 days
<ul style="list-style-type: none"> Lay-outing and packaging of the report up to print-ready format 	Final packaged/layout version of the report ready for printing	15 days

IMPLEMENTATION ARRANGEMENT

A. Contact Persons / Project Management / Contract Administration

Dr. Ron Allan Quimado

Medical Officer III

Child, Adolescent and Maternal Health Division

Dr. Marijuzca Nicolas

Medical Officer IV

Child, Adolescent and Maternal Health Division

Project Management/ Contract Administration Arrangement

The Technical Assistance Provider is not required to report daily throughout the duration of the engagement. They should be present during meetings and the conduct of the writeshop that are initiated by DOH-DPCB. They are required to brief the technical staff from time to time of the progress of their work.

Proprietary Rights / Ownership

1. All outputs of the project such as electronic files, modules, work plans, training assessment and designs, reports, documentations and materials, produced by the Technical Assistance Provider for the DOH-DPCB shall become and remain the

property of the DOH-DPCB, and the Consultant shall deliver all outputs to the DPCB not later than upon termination or expiration of the contract. The Consultant may retain a copy of outputs but future use of these outputs is subject to the restrictions and approval of DOH-DPCB. The disclosure of personal and sensitive information / data gathered under the project is covered by the Republic Act 10173-Data Privacy Act of 2012.

2. Copyright. The Property Rights in all proprietary documentations or methodologies shall remain vested in the owner of such rights.

Confidentiality

All data and information received from DOH are to be treated confidentially and are only to be used in connection with the execution of the Terms of Reference. The contents of written materials obtained and used in this assignment may not be disclosed to any third parties without the expressed advance written authorization of DOH. For avoidance of doubt, this obligation of non-disclosure of confidential information shall survive the termination of the Contract.

Review and Approval of Documents and Other Outputs:

1. The Technical Assistance Provider/ Consultant shall prepare and submit materials or documents to the DOH-DPCB for acceptance
2. The DOH-DPCB shall review the submitted materials or documents. If accepted, the document shall be used to support requests for payment; if not accepted, the consultant will be notified of the reasons for disapproval and the required modifications to be made on the document and/or material.

The Technical Assistance Provider / Consultant shall modify the document/output if needed and resubmit to DOH-DPCB for acceptance.

ROLES AND RESPONSIBILITIES

DOH-DPCB

1. Provide a technical working group who will be in charge of providing technical inputs during consultations, workshops, writeshops and other activities.
2. Provide technical inputs in relation to RPRH including interventions, initiative, program management and other relevant information on program implementation.
3. Assist to coordinate availability of resource persons from the national to local levels.
4. Ensure the accuracy of the deliverables submitted as stipulated in this agreement and review.
5. Approve the Action Plan and Budgetary Requirements for the conduct of activities in the development of the training module.
6. Monitor and evaluate the implementation of all activities under this Agreement.

TA Provider / Consultant

1. Perform the services and carry out the obligations with all assiduousness, efficiency, and economy, in accordance with generally accepted professional techniques and practices, and shall observe sound management practices.
2. Conduct all activities with due care and diligence, in accordance with the Contract and with the skills and care expected of a competent provider of the services required. Regularly update and coordinate with the technical working group and DOH-DPCB.
3. Acknowledge that any failure to acquaint itself with all such data and information shall not relieve its responsibility for properly estimating the difficulty or cost of successfully performing the Contract.
4. Be responsible for timely provision of all resources, information, and decision making under its control within the time schedule specified in the TOR. Failure to provide such resources, information, and decision making may constitute grounds for termination.
5. Abide by all the terms and conditions stipulated in the project contract.
6. Submit to the DOH-DPCB the final materials, work plans, reports, documentations, materials specified in the TOR or agreed upon during negotiation.
7. Do progress reporting as agreed by both parties.

QUALIFICATIONS OF THE CONSULTANT***Experience***

- 3 years of experience in conducting and facilitating workshops, focus group discussions, planning and policy development, health systems strengthening, and experience in family health, men, women and adolescent reproductive health, and family planning.
- At least 3 years of experience in monitoring, supportive supervision, health systems strengthening.

Qualification

- Master's Degree relevant to the project
- Extensive knowledge and practice in conceptualizing, design, development in public health or capacity building

SHORTLISTING CRITERIA

Criteria	Percentage
A. Experience 1. Work similar to the project – 30% ≥4 projects (30%) 3-4 projects (25%) 2 projects (21%) <2 projects (15%) 1 projects (0%) 2. Work experience related to the Project – 30% ≥4 projects (30%) 3-4 projects (25%) 2 projects (21%) <2 projects (15%) 0 projects (0%)	60%
B. Qualification 1. Education – 15% Masters Degree (Related to the Preferred Degree) (15%) Masters Degree (Non Related to the Preferred Degree) (12%) Bachelors Degree (Related to the Preferred Degree) (10%) Bachelors Degree (Non-Related to the Preferred Degree) (9%) Undergraduate (3%) 2. Experience -10% ≥4 years (10%) 2-3 years (8%) <2 years (6%) 1 (0%) 3. Relevant Training – 5% >24 hours of required training (5%) <8 hours or required experience (1%)	30%
C. Current Workload (No. of workload with equivalent rate) < 2 projects (10%) 2 projects (8%) 3-4projects (6%) ≥5 projects (0%)	10%
Total	100%
The minimum score required to pass the shortlisting criteria is 70 points.	

TECHNICAL EVALUATION CRITERIA

Criteria and Rating for the Technical Evaluation are as follows:

1. Qualification of Key Personnel to be Assigned to the Job – 25%

a.	Education Graduate degree (10%) Bachelor's degree (8%)	10%
b.	Experience ≥5 years (10%) 3-4 years (8%) 2 years (6%)	10%
c.	Training >24 hours of required training (5%) <8 hours or required experience (1%)	5%
	Total Grade	25%

2. Experience and Capability of Consultant – 25%

a.	Experience Similar to the Project ≥5 projects (20%) 3-4 projects (18%) 2 projects (15%)	20
b.	Experience related to the Project ≥5 projects (5%) 3-4 projects (4%) 2 projects (3%)	5
	Total Grade	25%

3. Plan of Approach and Methodology – 50%

a.	Clarity and Simplicity	5
b.	Feasibility	5
c.	Innovativeness	5
d.	Comprehensiveness and completeness, thoroughness or adequacy	10
e.	Quality and interpretation of project requirements, problems and risks	10

f.	Sustainability	5
g.	Work plan adequacy, completeness, viability, workability	10
	Total Grade	50%
The minimum score required to pass the technical evaluation is 70 points.		

Prepared by:



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DR. MARIUZCA NICOLAS

Medical Officer IV

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Noted by:



JOSE GERARD B. BELIMAC, MD, MPH

Director III

Disease Prevention and Control Bureau

Approved by:



FARWA M. HOMBRE, RN, MBA

Assistant Secretary of Health, Public Health Services Cluster
and concurrent Director IV, Disease Prevention and Control Bureau