

**Terms of Reference**

**EXTERNAL EVALUATION OF BPRM PROJECT - 2022**

**1.General Information**

**1.1 About Humanity & Inclusion**

Humanity & Inclusion (formerly Handicap International) is an international non-governmental Organization founded in 1982 and currently located in more than 60 countries worldwide. Humanity & Inclusion is an independent and impartial aid organisation working in situations of poverty and exclusion, conflict and disaster. The organisation works alongside people with disabilities and vulnerable populations, taking action and bearing witness in order to respond to their essential needs, improve their living conditions and promote respect for their dignity and fundamental rights.

**1.2 About Humanity & Inclusion in Bangladesh**

Humanity & Inclusion (HI) has been operational in Bangladesh since 1997 and has been working at supporting universal and inclusive access to services for all, particularly in the sectors of health, education and socio-economic empowerment. With a country team comprising over 276 staff (270 national and 6 international staff) HI is operating in 2 districts (namely Kurigram and Cox’s Bazar). In Dhaka, a Senior Management Team comprising of a Country Director, Country MEAL Manager, Technical Unit Manager, Finance Manager, HR manager, Logistics Manager and Compliance Manager provides an oversight on all country operations. An Area Manager based in Cox’s Bazar office is guiding the district’s intervention through its two field offices located in Ukhiya and Teknaf, managed by two Deputy Area Manager. In addition, HI has a team of technical unit comprising of Technical Specialist of MHPSS, Protection, Inclusion Humanitarian Action, Rehabilitation and Accessibility, guaranteeing that international quality standards and best practices are implemented across all HI operations, strengthening technical capacity of the fields’ operations team and coordinating with clusters and technical working groups. As an organization, HI is well recognized for promoting the rights of vulnerable individuals throughout the emergency response while providing quality specialized services.

HI has been present in Cox’s Bazar for more than 12 years and comprises of an experienced and qualified team of professionals having a vast understanding of the local context and strong relationships with local authorities and influential partners.

**2. Context of the Evaluation**

**2.1 Presentation of the BPRM funded Project**

The BPRM funded project titled as “Inclusive specialized services for vulnerable persons including persons with disabilities in Cox's Bazar Rohingya camps and host communities” has six objectives which: (i) To improve and increase access to comprehensive rehabilitation services and health care in Cox's Bazar, Ukhiya and Teknaf upazilas hospitals and surrounding host community (Objective 1); (ii) To improve and increase access to comprehensive rehabilitation services and health care in the refugee camps through mobile and static services (Objective 2); (iii) To increase the resilience of persons exposed to prolonged adversities by accessing comprehensive mental health and psychosocial activities (Objective 3); (iv) To improve the protection environment in the Rohingya community by facilitating access to life saving protection services and strengthening community-based protection mechanisms (Objective 4); (v) To improve access to basic nursing care and sexual reproductive health to vulnerable persons in the Rohingya community (Objective 5); and (vi) To improve access of vulnerable persons and persons with disabilities to essential services in the Rohingya community (Objective 6). The duration of the project for Year 2 is from September 2021 to August 2022.

The Following the refugee’s influx in August 2017, HI has set up emergency mobile teams composed of one Team Manager ensuring coordination within the team and with external actors in the camps, one Project-Officer- Service Linkage conducting beneficiary identification through household visits and in charge of internal/external referral pathway, three Rehabilitation staffs providing physical and functional rehabilitation services, one Nurse providing basic health care, Sexual and Reproductive Health, and referral support, one Protection Officer to facilitate protection case identification and external referrals to service providers and awareness-raising and two MHPSS Officers to provide MH/PSS individualized services and refer to specialized mental health services if needed. Finally, one Inclusive Sports & Recreational Officer facilitate inclusive sport and recreational sessions with children and adults. There are eight teams, 5 in Ukhiya Upazilla and 3 in Teknaf Upazilla, covering 12 camps (8 camps in Ukhiya and 4 camps in Teknaf) in total and these teams aim at providing timely, adapted and comprehensive assistance to the most at-risk individuals (especially persons with disabilities) through Static Points and door-to-door home-based services in camps. In addition, HI provides rehabilitation services in 5 hospitals and clinics such as Cox’s Bazar Sadar Hospital, Ukhiya Upazilla Health Complex, Teknaf Upazilla Health Complex, IOM clinic at camp 24 and MSF clinic at KTP RC. Further, HI provides door-to-door home-based rehabilitation services at Jaliapalong union under Ukhiya Upazilla. HI also provides door-to-door home-based services through Mobile Van Approach in three unions such as Whykong, Baharchharha and Sabrang unions under Teknaf Upazilla through its Partner named CDD.

**2.2 Justification of the Evaluation**

HI decided an evaluation of the mobile unit of BPRM funded project so as to assess how the project implementation and interventions adhere to the HI quality framework. Moreover, regarding the change in context, identify the areas of improvement/modification/adjustment to make the program implementations for high quality and hence better attainment of the program results.

This is an appropriate time since the 2nd year of the programme implementation is going on and it would be good to step back and reflect on the implementation. Then check what can be improved to achieve better results, assess progress/results versus KPIs and consider adaptations to programme to increase effectiveness during the rest time of the project and in next phase of programming.

**3. Objectives of the Evaluation**

The overall objectives and expectations of the evaluation is given as below:

**3.1 General Objective**

To assess independently the project’s implementation and intervention, identify the areas for improvement to ensure high quality and, hence better attainment of the results.

**3.2 Specific Objectives**

The specific objective of this evaluation is to evaluate the above-mentioned project, looking at evaluation criteria: **Relevance, Efficiency, Effectiveness, Cooperation** and **Participation**

The objective is to assess the following:

1. To evaluate if the project meet demonstrated priorities and adapted to the intervention setting? (Relevance)
2. To understand if the project implemented efficiently meeting the urgency of the targeted groups? (Efficiency)
3. To understand if the project implemented with the optimal effectiveness for the targeted group or community? (Effectiveness)
4. To evaluate if the project has established specific mechanisms to involve beneficiaries? (Participation)
5. To understand if the project partners are actively involved? (Cooperation)

**3.3 Evaluation Criteria and Evaluative Questions**

The evaluation is based on the following set of evaluative questions;

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| **Criteria** | **Evaluative Questions** |
| **Relevance** | * Does the project meet the demands and needs of beneficiaries and contributes to achieving priorities of other stakeholders (authorities, partners, donors etc.)? [Needs] * Does the project adjust its action according to the context of intervention (socio-cultural and historical determinants, security, logistical constraints, regulatory ...) and its evolution? [Context] |
| **Efficient** | * Is the project flexible and adapts to the evolving needs and risks? [Flexibility] * Does proposed type of intervention achieves the expected results at the lowest cost?[ Strategy] |
| **Effectiveness** | * The extent to which results contribute to achieving project objective? [Coherence] * Do project outputs reach the minimum quality following HI/international technical standards? [Product/Service] |
| **Cooperation** | * Are partners kept regularly informed and involved in decision-making processes concerning the project's steering and implementation? [Involvement] * The extent to which partners are meeting their objectives? [Results] |
| **Participation** | * Are beneficiaries consulted during all project cycle management steps [Consultation] * The extent to which Beneficiaries agree with the selected priorities and the type of intervention, and understand the expected benefits. [Understanding] |

**4. Evaluation Methodology and Organization of the Mission/Assignment**

**4.1 Collection Methodology**

**4.1.1 Location of Work**

The evaluation will cover BRPM funded project implementing areas in Cox’s Bazar district covering both Ukhiya and Teknaf Upazilas including camps/ Refugees and host communities. The camps include 1E, 1W, 2E, 3, 4, 9, KTPRC and 17 under Ukhiya Upazila and 22, 26, 27 and NRC under Teknaf Upazila. Host community should cover from surrounding camps and government health facilities.

**4.1.2 Target Population**

The evaluation will target project stakeholders and beneficiaries. These will include: beneficiaries from both Camps and host communities, and hospitals/clinics, partners, service providers, duty bearers like government officials, etc.

**4.1.3 Evaluation Design**

This evaluation is designed in such a way that each of the selected quality criteria is assessed through a comparison of the project implementation quality against the Humanity & Inclusion’s quality standard. The evaluation will use a mixed approach involving both qualitative and quantitative approaches.

**4.1.4 Selection and Sampling Procedure**

The study will employ a mix of several sampling techniques but by nature of the evaluation methodology, the systematic sampling technique will be the most dominant one. Purposive sampling will also be used to select key stakeholders and partners that will be deemed as the best fit to solicit from information in this evaluation. Purposive sampling will be used to collect qualitative data. However, the Consultant/ Consulting firm will suggest best fitted sampling methods for this evaluation.

**4.1.5 Data Collection Methods and Tools**

The Consultant/consulting firm will develop the survey tools, techniques and guidelines. The evaluation will build on the tools proposed and agreed with HI following standard protocol. Review of documents including the project, organizational and relevant sectors will also be used to answer some of the evaluative questions.

**4.1.6 Data Processing and Analysis**

Quantitative data should be collected through using appropriate Mobile Data collection tools and should be analysed using the appropriate Statistical Package (e.g SPSS). The Qualitative data may be analysed by Content analysis using appropriate tools.

**4.1.7 Quality Monitoring**

Several measures will be constituted to ensure that the quality of data is good mainly: through triangulation, pretesting of tools and having a clear data collection plan.

**4.2 Parties Involved in the Evaluation and Responsibilities**

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| **Party** | **Roles & Responsibilities** |
| **Steering Committee (Yoann Duprat, Smritee R. Dhamai, Eva Saadallah)** | * Review proposed tools and methodology and validate the tools as final. * Participate in meetings (kick off meeting, interview of the consultants, inception meeting, etc.). * Support in recruitment of the consultants (constitute the review committee). * Review the draft report and provide inputs. * Validate the final report based on the HI quality checklist attached in annexes. |
| **Operations Team (Senior Project Manager)** | * Ensure that implementation complies with administrative, temporal and financial conditions. * Plan budgetary needs and process supply requirements. * Communicate and mobilize the stakeholders about the study. * Plan the agenda with stakeholders and beneficiaries as soon as the plan will be elaborate. |
| **Finance Manager** | * Guide on financial aspects of the project. * Share the budget available for this evaluation * Made the payment to the consultant as per the agreed instalments as well the terms and condition. |
| **Technical Team**  **(Technical Unit Manager)** | * Participate in the conception of the data collection tools. * Participate in the conception of the tools analysis (what are the needs, the relevant infographics etc.). * Participate in the review and feedback of the data collection tools. * Review and provide feedback on the evaluation report. * Participate in implementation the recommendations of the evaluation |
| **MEAL / Information Management Team**  **(Country MEAL Manager)** | * Conduct meeting with consultant and mobilize plan and execution. * Support in designing and defining the evaluation methodology. * Support in develop/adapt data collection tools. * Recruit the consultant/firms and supervise their activities. * Monitor the data collection and quality of data collection. * Review the analysis and feedback on the report. * Oversee the entire evaluation. |
| **Consultant/Firms** | * Develop an inception report. * Design and define the evaluation methodology. * Develop/adapt the data collection tools, techniques and appropriate guideline. * Ensure data collectors are well trained; * Collect quantitative and qualitative data * Organise and monitor data collection. * Conduct data compilation and analysis. * Present findings of the survey and respond as appropriate * Write the evaluation report and finalize the report by meeting HI feedback. |
| **Logistics Team/HR** | * Support on the hiring of a consultant(s) which include but not limits to the publication of the offer, receiving the application etc. |

**5. Principles and values**

**5.1. Protection and Anti-Corruption Policy**

The Evaluation will adhere to the Humanity and Inclusion code of conduct, Protection of beneficiaries from sexual exploitation, abuse and harassment policy, Child Protection Policy, Anti-fraud, anti-corruption policy (see the table below).

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| [*Code of Conduct*](https://hi.org/sn_uploads/document/ID_CodeOfConduct.pdf) | [*Protection of beneficiaries from sexual exploitation, abuse and harassment*](https://hi.org/sn_uploads/document/PI03_HI_Protection-Beneficiaries_EN.pdf) | [*Child Protection Policy*](https://hi.org/sn_uploads/document/PI02_HI-Child-Protection_EN_1.pdf) | [*Anti-fraud and anti-corruption policy*](https://hi.org/sn_uploads/document/PI04_IP_antiFraud-bribery-corruption-policy_1.pdf) |

**5.2. Ethical Measures\***

As part of each evaluation, HI is committed to upholding certain ethical measures. It is imperative that these measures are considered in the technical offer:

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| **Ethical Risks** | **Mitigation Measures** |
| Security of subjects, partners and teams | * Inform local authorities of the evaluation so that they can provide and guarantee security. |
| Obtain the subjects’ free and informed consent | * Information is shared with all participants before beginning the data collection in an adapted language to empower them to make informed consent on the participation (purpose & use of the data collection, potential associated risks, and their rights during the interview). A contact name is also shared if they have any question or complaints. * Only persons who have signed the consent forms will participate. For clients or beneficiaries who are unable to sign a consent form, a verbal consent will be recorded using a recorder. |
| Ensure the security of personal and sensitive data at all stages of the activity | * All data collected from respondents are collected in such a way that the respondent will not be harmed. * HI can share findings to the public and stakeholders but sharing raw data and personal information outside the organization is strictly prohibited. * A Data Sharing Agreement (DSA) will be signed between HI and the consultants. |

\**These measures may be adapted during the completion of the inception report.*

**5.3. Participation of Stakeholders and Beneficiaries**

In order to assess evaluation criteria; **Relevance, Efficient, Effectiveness, Cooperation** and **Participation** several stakeholders namely, partner organization, government, organisations of Persons with Disabilities, etc. will be interviewed.

**5.4. Others**

The evaluation will follow all ethical considerations and will respect all human rights.

**6. Expected Deliverables and Proposed Schedule**

**6.1. Deliverables**

An inception report refining / specifying the proposed methodology for answering the evaluation questions, an action plan (Maximum 20 pages), and data collection tools and techniques. This inception report will have to be validated by the Steering Committee.

A presentation document presenting the first results, conclusions and recommendations, to be presented to the Steering Committee. Data collected must also be shared with HI.

A final report of approximately 20-30 pages, including a summary and a presentation of findings.

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| *The final report should be integrated into the following template:* | *The quality of the final report will be reviewed by the Steering Committee of the evaluation using this checklist:* |
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**6.2. End-of-Evaluation Questionnaire**

The end-of-evaluation questionnaire will be completed by a member of the Steering Committee, the person in charge of the evaluation and the evaluator together.

**6.3.** **Evaluation Plan and Schedule**

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| **Phase** | **Activities** | **Duration** | **Start Date** | **End Date** |
| Hiring Consultant | Advertise the TOR to hire a consultant | 3 weeks | 28/04/2022 | 25/05/2022 |
| Recruitment of Consultant (interview, etc.) | 3 weeks | 30/05/2022 | 12/06/2022 |
| Phase-1  Desk Review – Inception Report | Consultant develops Inception Report, data collection tools and presents to the Steering committee | 1 week | 15/06/2022 | 22/06/2022 |
| Approval of tools and methodology | 1 week | 22/06/2022 | 29/06/2022 |
| Phase-II  Field data Collection | Training of Enumerators | 2 weeks | 29/06/2022 | 15/07/2022 |
| Make appointments with respondents |
| Field Data collection |
| Phase-III  Data Analysis, Report writing | Data Cleaning, Data Analysis | 2 weeks | 15/07/2022 | 31/07/2022 |
| Draft preliminary report with recommendations. |
| Review and Validation meetings with HI (HQ & Country) | 1 week | 31/07/2022 | 06/08/2022 |
| Finalize on the feedback and share the finale report after within 5 days. Share final report. | 1 week | 06/08/2022 | 13/08/2022 |
| Dissemination | Disseminate findings with Stakeholders through a dissemination meeting. | 1 week | 13/08/2022 | 20/08/2022 |

**7. Means**

**7.1 Expertise Sought from the Consultant(s)**

**Qualifications and experience required**

The composition of the team or individual is expected to be as follows:

* The lead research must have at least Master’s degree in Public Health, Statistics, International Development Studies, Social sciences or any related qualification.
* Track record of conducting evaluation with at least 5 years’ experience in conducting evaluations, preferably in rehabilitation, MHPSS, Disability, SRH etc.
* Experience and knowledge of Disability programming will be an advantage.
* Experienced to work in refugees’ camps context will be an added advantage.
* Excellent interview, teamwork, communication and coordination and dissemination skills.
* Ability to write clear, concise reports in English.
* Experience in mobile data collection would be an asset

**7.2 Recruitment Process**

The recruitment of the consultant(s) / Consulting firm will follow a competitive and transparent process. A call for consultant(s) / Consulting firm will be advertised within the national/international newspapers/websites. From the pool of applicants, a number of applicants will be shortlisted and interviewed by a committee comprising of;

**Assessing the Consultants/ Firms**

**Stage 1: Screening of Applications**

* All applications will undergo through a preliminary screening to ensure the application has all the necessary documents/ requirements.
* If all the necessary documents & information are not found for any bidder, they will not be compliant for further analysis based on the selection criteria mentioned here
* Financial Proposal – 30%
* Technical Proposal- 70%

-Experience with rehabilitation and MHPSS-15%

-Experience with Disability and SRH -15%

-Technical offer Relevancy of the proposed tools/ Methodology -20%

-Experience on project evaluation of different INGO, UN – 20%

Valid documents will be considered for scoring based on these criteria

**Stage 2: Shortlisting of Applications and Interview**

* Shortlisted applications will be made to move to the next step from the applications that meet the minimum requirements in the screening.
* The shortlisting will be based on the selection criteria mentioned above and they will be interviewed based on the: Experience with HI sectors of intervention (Disability inclusion, SRH, rehabilitation and MHPSS), proposed tools/ Methodology, Soft skills (communication / English / writing / consortia) and Means and Planification

**Stage 3: Selection**

A final report will be generated from the aggregation of results from the assessed components. The best candidate that the Team agrees on will be contracted.

**7.3 Budget Allocated to the Evaluation**

The Consultant should submit a detailed Financial Proposal clearly outlining technical fees of the Consultant(s) and team per day, number of days spent at each stage of the evaluation, cost of translation (if any), enumerators fees, Logistics (transport costs, stationery costs) etc.

**7.4 Payment Condition**

The payment will be made in 03 instalment. 30% of the agreed upon amount will be paid after submission and validation of the inception report, 30% after submission and validation of the Draft Evaluation Report and the Remaining balance of 40% will be paid after the final report is validated after the consultant/ firm addressing comments and feedback from the HI Team and dissemination of the findings through a meeting of stakeholders organised by HI.

***Caution:***please note that the last payment is conditional on the validation of the final report and not on the sending of the final report. By validation, we mean validation of the quality and under no circumstances of the appreciation of the project evaluated (based on the quality checklist attached, chapter 6).

**7.5 Available Resources Made to the Evaluation Team**

Humanity & Inclusion will provide all the information needed by the Consultant(s) like the Project Proposal, Progress reports, Post Implementation Report, supporting in making appointment with Partners organization, government stakeholder etc. for interview.

**8. Submission of Applications**

**Application process**

* Interested applicant(s) should email Cover letter and CV (maximum 4 pages; with references), VAT & TIN Registration Copy, NID copy.
* If it is company then need to share the profile(s) and documentation of legal status, and registration as a Company (Trade License)
* Bank Solvency Certificate (For both either company or individual) – Optional
* Insurance certificate (For both either company or individual)- Optional
* Applicants must have to share technical & financial offer Technical proposal (maximum 15 pages) including the proposed methodologies and proposed schedule
* Applicants will have to share documents showing their experience on working on rehabilitation, inclusion, SRH, person with disability & MHPSS.
* Applicants have to share documents of project evaluation of different NGO or INGO.
* The financial proposal should cover all the costs of the evaluation from consultant’s end (consultants fee, field operations cost, accommodation, per diem, air tickets, and transportation to the field to collect data, food and other related costs).
* Quoted price must be including VAT & TAX following the govt rule. If there is any amount which will be excluding vat & tax it should be shown with necessary breakdown.
* Payment Condition should be clearly mentioned on the financial offer
* Bank details: name of the account, Bank name, branch, swift code etc.
* Proposal must be submitted in BDT
* Consultants that meet the requirements should submit an expression of interest by **25/05/2022 (11.59 PM)**

Physical Bid Submission addresses:

* + Proposals to be submitted to Handicap International Country Office House-3/A, Road-36, Gulshan, Dhaka-1212, Bangladesh. Bids should be submitted in a single sealed envelope.
  + The envelope should clearly indicate the Invitation to tender reference as per below:

“EXTERNAL EVALUATION OF BPRM PROJECT - 2022”

* + All documentation submitted should be done in their own clearly labelled envelopes (e.g., technical proposal, financial proposal, Legal Documents etc.), which are submitted in one single envelope as detailed above.

OR

Online Bid Submission addresses:

Send a digital file in the form of an email\* sent to the dedicated email address: [**logistics@bangladesh.hi.org**](mailto:logistics@bangladesh.hi.org) ; with the tender reference (“EXTERNAL EVALUATION OF BPRM PROJECT - 2022” in the subject).

\*If the file is too big to fit into 1 email (limit 15MB per email), bidder should split the submission into multiple emails. Please include numbering also in the subject.

**Appendices**

[*HI's Quality Framework*](https://hi.org/sn_uploads/document/QualityFramework_EN.pdf)*, on which all evaluators must base their evaluation.*

[*The Disability - Gender - Age Policy*](https://hi.org/sn_uploads/document/IP_DisabilityGenreAge_1.pdf)*, which must guide the approach and the construction of evaluation tools in the technical offer.*