**Terms of Reference (TORs) for Technical Assistance for Development of National Infection Control Standard Operating Procedure (SOPs) for use of Health Care Providers (HCPs) at ART Clinics and CHBC Sites.**

**INTRODUCTION.**

Pakistan like most of the Asian Countries, is facing a concentrated HIV epidemic. Country remained among few regional countries, where the epidemic is still on rise, in term of number of new infections. The HIV epidemic in Pakistan, is characterized by a fast-growing HIV infection among people who inject drugs and to a lesser extent, among the Transgender sex workers. However, among the general population, the prevalence still remains low at 0.1 percent, as per latest Spectrum estimates for 2017.

Recently an HIV epidemic was reported among the Chronic Renal Failure (CRF) patients, availing hemodialysis clients, at Chandka Medical Hospital, Larkana. Approximately 62 HIV-Positive and 87 patients, were screened as HCV positive, among the CRF clients. Epidemiological investigation, indicated, inefficient infection control practices, as one of the contributing factors, for the transmission of infection, among the CRF patients.

National AIDS Control Program (NACP) through financial assistance of Global Fund, under the New Funding Model (NFM) has established 21 Community and Home based Care Centres and providing ARVs and diagnostics support to 21 ART Clinic, in the country, in addition to providing support, in various technical aspects of HIV positive case management.

After the enactment of 18th Constitutional Amendments, the National AIDS Control Program, assumed the role of coordinator of the national response to HIV/AIDS, in the country. NACP, is also mandated for development and dissemination of national guidelines, standard of services, SOPs, policies, etc., in collaboration with the donors and UN agencies.

**BACKGROUND.**

Healthcare-associated infections (HAIs) (formerly called nosocomial or hospital-acquired infections are a major global threat to the safety of patients who receive medical care, thereby undermining the efforts of health systems of the world to improve the quality of the provision of diagnostic and treatment services.

Provision of quality healthcare is one of the main goals of the reform of the healthcare system of Pakistan. Patient safety is the first priority of healthcare. The ‘prevention and control of infections (in healthcare facilities) is the standard of quality required for the well-being and safety of patients, health care providers and visitors of healthcare settings’.

National developed the first national guidelines, on Infection Control, in 2006, WHO undertook the similar initiative in Hepatitis, in 2008. Through the national guidelines on Infection Control, are available, yet are not backed with Standard Operating Procedures (SOPs) / Standards of services, to ensure implementation of the subject guidelines. Neither there is any tool available to ensure quality of the infection control measures, against the desirable workable standards.

NACP, through funding support of Global Fund, intends to hire a suitable short term consultant, who will review & revise the available National Infection Control Guidelines, and develop SOPs / Standards of services, for operationalization of the guidelines and propose a quality assurance tool for its periodic monitoring, at ART and CHBC sites.

**PURPOSE OF THE CONSULTANCY.**

The purpose of the Consultancy is as follows;

* Review and update existing / available national Infection control guidelines and update considering regional, global or WHO guidelines;
* Contextualize, / adopt proposed guidelines in terms of its application at ART clinics & CHBC sites;
* Develop, through a consultative process, SOPs / standards of services, for the subject guidelines;
* Introduce Quality Assurance Tool for the National Infection Control Guidelines / SOPs.

**PROPOSED METHODOLOGY**

* An initial meeting with the NACP will be held to discuss the technical and logistic aspects of the assignment. The Consultant during the meeting will share an inception document clearly defining the methodology to be adopted.
* The development of National guidelines will include an extensive literature review of culturally relevant and acceptable global, regional, and national guidelines with proven effectiveness. Relevant National and programmatic documents will also be reviewed.
* Review of existing infection control guidelines and its practical implications in operationalization at ART and CHBC Sites.
* The Consultant will be required to review the latest WHO guidelines / recommendations regarding Infection Control, in health care settings;
* The consultant will visit ART Clinics and CHBC sites to conduct Focus Group Discussions (FGDs) and structured interview, with the professional staff, to introduce workable context specific SOPs for the said facilities.

A draft document will be shared with NACP for review and feedback and after incorporation of comments a final document will be required to be submitted to the client

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| **DELIVERABLES:*** Revision of National Infection Control Guidelines, in context of ART & CHBC sites;
* Development of SOPs for the National Infection Control Guidelines, including Standards of services and quality assurance tool for periodic monitoring at ART & CHBC sites.
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| **TIME FRAME**:Total period for completion of consultation:**30 Working days** |

 **ESTIMATED COST OF THE CONSULTANCY**

The total budget allocated for the local consultant is 300,000/- PKRs. (Inclusive of any travelling involved, during the course of the consultancy)

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| **QUALIFICATIONS OR SPECIALIZED KNOWLEDGE/EXPERIENCE OF THE CONSULTANT:**1. Basic medical degree with post graduate qualification in public health
2. Minimum of 05 years of experience preferably in HIV/AIDS with workable knowledge of ART and CHBC services delivery
3. Working experience of existing health systems of Pakistan
4. Strong writing skills including past experience in producing reports, developing guidelines / SOPs etc.
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|  **Payment schedule:**25% on signing of contract 25% on submission of Initial Draft 50% on submission & approval of final draft  |