**Terms of Reference: AMR/IPC Technical Support**

This technical support is requested by NPO-IHR/AMR.

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| Unit: | WHE |
| Country Office: | Pakistan |

1. **Purpose**

To provide technical support for implementing priority antimicrobial resistance (AMR) and infection prevention and control (IPC) interventions at the provincial level.

1. **Background**

Antimicrobial resistance (AMR) is one of the top ten global public health threats, contributing to almost five million deaths from resistant bacterial infections each year. WHO strategic partnership with ministries of health at the federal and provincial levels focuses on improving health systems capacities for tackling antimicrobial resistance with multi-sectoral, one health approach.

Implementation of IPC measures and strengthening WASH systems directly contribute to tackling AMR by reducing the risk of disease transmission and communicable disease outbreaks in healthcare facilities. The prevention of healthcare associated infections, timely and quality diagnosis with appropriate use of antibiotics for treatment of infections is crucial for the provision of safe and quality health services delivery.

Pakistan is in the process of finalizing the national action plan on health security (NAPHS) based on the second JEE conducted in 2023. Several key priorities for AMR and IPC have been included in the NAPHS including the development of AMR NAP 2.0 and consolidating the ongoing AMR work and IPC activities’ implementation particularly at the health facility level in Pakistan. In this regard, there is need for additional WHO dedicated technical support and guidance to strengthen the WHO presence and role at the provincial level.

1. **Planned timelines (subject to confirmation)**

Start date: 8 March 2024

End date: 31 August 2024

1. **Work to be performed:**

The AMR/IPC expert will work with the WCO AMR/IPC focal point to:

* Provide technical advice and coordination support for revision, implementation, and monitoring of AMR operational plans of action.
* Facilitate and provide technical support for strengthening AMR and AMC surveillance capacities and data management at the provincial level. Support to establish AMS programmatic interventions including strengthening microbiology labs and AMR and IPC surveillance at the facility level.
* Collaborate with national and provincial authorities and partners to strengthen implementation of IPC measures including monitoring support, review IPC policies and guidelines, build HCWs competencies on IPC, enhance antibiotics stewardship, IPC, and WASH practices at facility level.

**Output 1:** Development, implementation, and monitoring of AMR operational plans

**Deliverable 1:** Provide technical support and contribute to AMR situation analysis for evidence-based drafting of AMR operational plans.

**Deliverable 2:** Coordinate multisectoral engagement and one health approach for organizing consultative workshop to develop AMR provincial operational plan.

**Deliverable 3:** Facilitate and provide technical oversight for implementation and periodic progress review/monitoring of AMR operational plan in relevant sectors.

**Output 2:** Strengthening AMR and AMC surveillance for piloting/implementing healthcare facility AMS program at provincial level (selected) in line with WHO guidance and policies.

**Deliverable 1:** Support collection, analysis, and reporting of data on antimicrobial resistance surveillance in health sector.

**Deliverable 2:** Support the development and implementation of antimicrobial stewardship programs/interventions at provincial and local hospital levels.

**Deliverable 3**: Support monitoring antibiotic consumption at provincial and health facility level with use of data to monitor trends for policy and action guidance.

**Deliverable 4:** Strengthen microbiology labs and build staff capacities to support AMR and IPC surveillance and monitoring.

**Output 3**: Strengthen health systems for infection prevention and control including monitoring to enhance IPC practices at facility level.

**Deliverable 1**: Provide technical support for IPC leadership, IPC teams and HCWs in-service training on IPC and WASH courses on standardized and customized modules.

**Deliverable 2:** Advocate and provide technical oversight for conducting IPC and WASH assessment with development and monitoring of improvement plan (selected facilities).

**Deliverable 3:** Conduct monitoring and monthly reporting on standard precautions, transmission-based precautions, environmental cleaning, and isolation practices to enhance facility preparedness on IPC and WASH.

**Deliverable 4:** Implementation of IPC protocols and HAI surveillance in priority units (isolation wards, ICUs, dialysis and dental units and other critical care units) including surveillance and management of HCWs exposure to occupational infections (HCAI) and needle stick injuries.

**Output 4:** Support for regular monitoring and progress review on AMR and IPC interventions

**Deliverable 1:** Facilitate antibiotics stewardship, IPC and waste management teams/committee functionality and set targets for promoting antibiotics stewardship and implementing prioritized IPC and WASH practices in HCFs.

**Deliverable 2:** Conduct supportive supervision and follow up mentoring and monitoring visits for AMR and IPC implementation progress review (based on indicators) with regular reporting and feedback to WCO.

1. The selected Consultant will work on the supervision of:

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| Responsible Officer: | Dr Farah Sabih | Email: | sabihf@who.int |
| Manager: | Dr Denpang Luo | Email: | luod@who.int |

1. **Specific requirements**

**Qualification**

**Essential:**

University degree in Medicine/Nursing and advanced university degree in Public Health. Preference will be given to candidates with working experience in implementing IPC capacities, environmental health, and employment experience with WHO.

**Experience**

Essential: At least 5 years of relevant experience in implementing AMR related work, hospital IPC, waste management, environmental programs and WASH.

**Skills/technical skills and knowledge**

Expertise in development and implementation of strategies, plans, assessments, training and implementing IPC in healthcare facilities. Technical skills in surveillance and training of healthcare workers on disease outbreak in healthcare settings. Ability to work both independently and in a team setting with the government and relevant stakeholders. Computer literacy (Word, Excel, Power point, etc.)

Language requirements:English & Urdu expert proficiency (Read - Write – Speak)

1. **Remuneration:** (HRS classification/proposed grade)

NOC

1. **Place of assignment**

Lahore, Punjab

1. **Medical**

The selected Consultant will be expected to provide a medical certificate of fitness for work.

1. **Travel**

The incumbent may be required to travel according to the itinerary and estimated schedule below for training, implementation, and monitoring of AMR and IPC interventions in HCF/s across Pakistan as per need.

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| **Travel dates** | | | | | **Location:** |
| From | March 2024 | | To | September 2024 | ICT, Punjab, KP, Sindh, Balochistan, AJK and GB. |
| **Purpose:** | | Implementation of Infection Prevention and Control for Hospital Preparedness | | | |

*All* ***travel arrangements*** *will be made by WHO – WHO will not be responsible for tickets purchased by the Consultant without the express, prior authorization of WHO.*