

Terms of Reference

This consultancy is requested by:

Unit:	WCO_Pakistan
Department:	Communicable Diseases (ATM)

1. Purpose of the Consultancy

WHO Pakistan aims to build the capacity of Health Care Commission to ensure safe injection practices in Pakistan and plans to hire a consultant to support the Health Care Commission. This consultancy will support Health care commission in policy formulation, facilitate dialogue with the key stake holders and to develop and conduct capacity building initiatives to improve and standardize the injection safety across all the healthcare facilities in Pakistan.

2. Background

As part of infection prevention and control (IPC) measures, WHO recommends standard or transmission-based precautions guided by risk assessment. WHO IPC guidelines suggest that it is critical to ensure that at least minimum IPC standards should be in place at health-care facility level to provide minimum protection to patients, health workers and visitors. These are known as the minimum requirements for IPC that have been developed by WHO in 2019¹ based on a broad consensus among international experts and institutions.

Achieving the IPC minimum requirements as well as more robust and comprehensive IPC programmes according to the WHO core components across the whole health system in all countries is essential to sustain efforts to control the COVID-19 pandemic, other emerging infectious diseases health care-associated infections and antimicrobial resistance.

Injection safety and appropriate sharps and health care waste management is one of the key components of IPC. Injection safety with reference to therapeutic injections is of key importance in Pakistan as there is ample evidence in the form of sound published research studies which has established unsafe therapeutic injections as an attributable risk for transmission of bloodborne infections including HIV, hepatitis B and hepatitis C virus infections. The 2019 pediatric HIV outbreak in rural Sindh was also linked with unsafe injection practices of private health care providers.²

Unsafe injections in the therapeutic sector, especially among the private health care providers have been a serious problem in Pakistan. A strong body of evidence suggest that reuse of injection equipment including syringes and needles used on multiple patients has been attributed to transmission of hepatitis B virus (HBV) and hepatitis C virus (HCV) infections. National prevalence of HBV is 2.5% and 4.9% for HCV. Collectively these two infections account of more than 10 million persons infected with these life-threatening illnesses.

¹ WHO Minimum Requirements for Infection Prevention and Control (2019). Available at: <https://apps.who.int/iris/bitstream/handle/10665/330080/9789241516945-eng.pdf> (accessed 10th July 2020)

² Mir et al. HIV infection predominantly affecting children in Sindh, Pakistan, 2019: a cross-sectional study of an outbreak. The Lancet December 2019.

It is estimated that 95% therapeutic injections in Pakistan are unnecessary. Majority of them are unsafe. Patients in Pakistan prefer injections thinking that they provide quick relief. Private health care providers (both trained and untrained) prescribe injections in conditions that can be easily treated with oral medications. Private providers make extra money by prescribing injections and IV drip sets. Reuse of injection equipment also take place at these private practitioners' settings, primarily to save money. A good majority of patients are unaware of the risks of reuse of injection equipment.

HIV outbreaks attributed to unsafe injections

Since 2008 at least three HIV outbreaks, mostly in rural communities have been linked with unsafe injection practices. In 2008 in Jalalpur Jattan (Gujrat, Punjab) 47 persons were confirmed HIV positive. Investigation revealed unsafe injections as one of the risk factors. In 2018, in Kot Imrana (Sargodha, Punjab) 27 persons were found HIV positive and unsafe injections were once again identified as one of the key risk factors.

The most recent outbreak of HIV among children and adults occurred in April 2019. More than 1,228 children and adults were found HIV positive in Ratodero, Larkana district in rural Sindh province. WHO Rapid Response team conducted a thorough investigation and identified reuse of syringes and IV drip sets as the key risk factor for infection transmission.

The WHO Country Office Pakistan will support the Ministry of National Health Services, Regulations & Coordination in operationalizing the framework for Safe Injection Practices in Pakistan through the development of evidence-based policies and strategic planning.

3. Planned timelines (subject to confirmation) – 3 months

Start date: 25th November, 2024

End date: 25th February 2024

4. Work to be performed

The selected consultant will be responsible for developing a policy on safe injection practices aligned with WHO standards, facilitating stakeholder dialogues for policy endorsement, and implementing a capacity-building program to enhance the Health Care Commission's ability to monitor and enforce these practices.

The consultant will work, under supervision of National Professional Officer for HIV and Viral Hepatitis and is expected to provide support to conduct the following activities;

Output 1: Policy Framework for Strengthening Safe Injection Practices

Deliverable 1.1:

- Draft a policy framework detailing safe injection protocols aligned with WHO's standards.
- Define policy goals, core components, implementation strategies, monitoring mechanisms, and compliance enforcement measures.
- Outline roles and responsibilities for the Health Care Commission, Ministry of Health, and other key stakeholders.
- Submit the finalized document for review and approval.

Output 2: Stakeholder Engagement and Dialogue Facilitation

Deliverable 2.1:

- Initiate and commission meetings with the Health Care Commission and relevant health departments to acknowledge and appreciate stakeholders' contributions.
- Conduct sensitization sessions to inform stakeholders (including Ministry of National Health Services, Department of Health, Healthcare Commissions and others) about the framework's objectives and their roles in the process.
- Facilitate consultations to gather and refine stakeholder input for the policy framework.
- Finalize the framework based on consultations, ensuring alignment with stakeholder perspectives.
- Develop an operational plan outlining steps and timelines for the framework's implementation.
- Produce a post-dialogue report capturing feedback, stakeholder commitments, and any necessary adjustments to the policy framework.

Output 3: Capacity Building of Health Care Commission on Safe Injection Practices

Deliverable 3.1:

- Develop training materials, including presentations, handouts, and assessment tools, focused on safe injection practices.
- Organize and conduct training sessions for Health Care Commission officials, focusing on policy enforcement, monitoring techniques, and community engagement.
- Develop a monitoring and evaluation framework to measure the effectiveness of the training and track implementation of safe injection practices.
- Compile a final report on capacity-building efforts, including lessons learned and recommendations for ongoing training needs.

5. Technical Supervision

The selected Consultant will work on the supervision of:

Responsible Officer:	Dr Safdar Kamal Pasha	Email:	mpasha@who.int ;
Manager:	Dr Unaiza Hadi	Email:	hadiu@who.int ;

6. Specific requirements

- Qualifications required:

University degree in health related field is required. Master's in public health is desirable.

- Experience required:

At least 5 years of experience in health strategic planning and programme management, including in Viral Hepatitis;

- Skills / Technical skills and knowledge:

- Demonstrated knowledge and ability to manage infection prevention and control (IPC) / injection safety program's implementation;

- Strong knowledge on applied evidence based for injection safety;
- High level communication skills to support advocacy and capacity building on national action plan for injection safety;
- Ability to manage targeted communication campaign for IPC / injection safety;
- Ability to write technical reports.

- Language requirements:

Excellent command of English and local language.

7. Place of assignment

Islamabad, Pakistan.

8. Medical clearance

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

9. Travel

The Consultant is expected to travel within Pakistan and to other countries depending on need. Travel requests will be raised in due course in coordination with NPO – HIV/Hepatitis in WHO Pakistan

Travel dates		Location:	
From	To	Within the country, as may be required.	
Purpose:			

*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. While on mission under the terms of this consultancy, the Consultant will receive **subsistence allowance**.*

*Visas requirements: it is the consultant's responsibility to fulfil **visa requirements** and ask for visa support letter(s) if needed.*