

Terms of Reference

This APW is requested by:

Unit:	HSE
Division:	CO/ VNM

1. Purpose of the Consultancy

**The Technical Unit defines, in a few lines, the expected outcome(s) of the consultancy work. The objective of this paragraph is to help bidders to immediately understand what is expected, and to see if they have the required skills and competencies to apply.*

The APW holder (a local agency/ organization/ institution) is expected to implement capacity building activities to strengthen infectious disease surveillance and laboratory system and response to disease outbreaks and public health emergencies in the Central-coastal region of Viet Nam. The APW holder will be working in a close collaboration with the Health Security and Emergency Team of the WHO Viet Nam Country Office.

2. Background

**The Technical Unit gives a quick overview of the overall project, defines its overall objectives, main steps and actions, timelines, funding, donor's expectations, etc... The objective of this paragraph is to help potential candidates to understand how the consultancy contract will contribute to the overall project.*

Infectious diseases including emerging, re-emerging infectious diseases and vaccine preventable diseases (VPD) remain major public health threats to many countries around the world including Viet Nam. To enable early detection, readiness and response to disease outbreaks and emergencies, WHO has been advocating for and supporting Member States to strengthen multisource surveillance, risk assessment and rapid response capacities. Of the six domains included in the WHO's Asia-Pacific Health Security Action Framework (APHSAF)¹ that was officially released in early 2024, "Assess and Response" component with the aim to strengthen surveillance systems to enable early warning and response to potential public health emergencies. In this domain, i) multisource surveillance and risk assessment, ii) detect, report and monitor new and unusual events; and iii) rapid response to limit impact and spread are the three sub-domains which WHO would prioritize its technical support to Government partners. For the multisource surveillance strengthening, among ongoing efforts to support further strengthening indicator-based surveillance, sentinel surveillance, laboratory-based surveillance, etc., focus will be given to enhancing capacity to conduct event-based surveillance (EBS) following the existing national guideline on EBS and with a pilot application of the Epidemic Intelligence from Open Sources (EIOS) tool, an initiative led by WHO. Besides, capacity of rapid response teams (RRT) at subnational level should be refreshed and updated. To this extent, continued application of Go.Data tool by RRTs in outbreak investigation and contact tracing for ongoing VPD outbreaks including mpox should cases be detected. All these capacity building would contribute toward solidifying the function of public health emergency operation center (PHEOC) from regional level.

As an important pillar of overall public health architecture, National public health laboratory systems play a crucial role in detecting, confirming, and monitoring infectious disease and is essential for timely and effective outbreak response. Information from laboratories provide valuable data that inform health system and policymakers, aiding in the development of health policies and strategies.

WHO's project document with MoH Viet Nam has prioritized strengthening National laboratory system under strategic priority 3 which covers also all the above-mentioned aspects for Disease surveillance

¹ <https://www.who.int/publications/i/item/9789290620396>

system strengthening. Biosafety & biosecurity, quality management system, networking, referral testing, policy/guidance development, technological advancements, capacity enhancements and emergency response/surge capacity are the major pillars of a public health laboratory system. Identifying major gaps and strategizing targeted interventions can improve each of the pillars to strengthen overall national laboratory system.

In Viet Nam, the Central-coastal region continues to be a hotspot for re-emerging infectious diseases such as avian influenza, rabies, dengue; vaccine preventable diseases including diphtheria, measles, etc. and foodborne outbreaks over the past years. It is important for the region to be up-to-date with the capacity for preparedness, readiness and response to disease outbreaks and public health emergencies to protect lives and health security.

The WHO Country Office in Viet Nam is calling for applications from a local institution/ agency/ organization to implement a series of activities to strength the overall capacity of surveillance, early detection, laboratory system performance and rapid response in the Central-coastal region of Viet Nam.

3. Planned timelines (subject to confirmation)

Start date: 15 November 2024

End date: 31 March 2025

4. Work to be performed - Description of the tasks

Under the overall guidance of the WHO Viet Nam Country Office's (WCO) responsible officers and the Coordinator of the Health Security and Emergencies Team at WCO, the APW holder (including the team lead and his/her team) is expected to undertake the following tasks:

- To pilot the application of EIOS in conducting EBS in the Region and to inform feasibility and potential deployment of EIOS in EBS implementation in Viet Nam.
- To review and update the Go.Data training materials including the Vietnamese version and further strengthen the Go.Data application for provincial RRT members in the Region.
- To conduct JRA, IAR/AAR for an outbreak and/or a public health emergency response event as required.
- To pilot the simulation exercise (tabletop and/or drills) to test the functionality of existing laboratory policies, procedures, and emergency measures in response to an outbreak of a new respiratory virus and meet increased demand for safe, quality, and timely testing, using tools developed by WHO and partners
- To conduct an assessment on the current status of bio-risk management principles and practices at selected provincial and district level laboratories, to identify gaps and challenges towards achieving evidence and risk-based approach towards laboratory biosafety and biosecurity.
- Based on the assessment findings, if required, offer a tailored and targeted training programme, to improve biosafety and biosecurity practices in line with latest WHO guidance and tools, leading towards a bio-risk management framework development.
- To develop a final report at the end of the APW contract.

Method(s) to carry out the activity

- The APW holder will be working closely with the WCO team, Viet Nam Government, and relevant stakeholders at national, regional, and local levels to implement the above-mentioned activities and writing the report.

- Proposed methods include review, revision, adaptation of guiding, training materials; conduct training/ refresher training; conduct technical consultations; implement pilot activities; conduct simulation exercise, assessment, in coordination with WCO team.

- The APW holder including the team lead and his/her team members will report to the WHO country office responsible officers as a prime WHO's focal point verbally and in writing the progress of the activities on a regular basis.

Output/s

Output 1: A detailed technical report on the pilot application of EIOS including strengths, challenges and recommendations for possible use in the Region and at national level, if applicable.

Deliverable 1.1: Daily reports on signals/ events identified via EIOS

Deliverable 1.2: A logbook documenting RRA results using relevant sets of triage questions

- Deliverable 1.3: Regular EBS reports with inclusion of signals/ events captured by EIOS and documented response actions

Output 2: A detailed technical report on Go.Data training, updated status of Go.Data server and capacity of Go.Data application by RRTs in the region

- Deliverable 2.1: Updated Go.Data training materials including the Vietnamese version.

- Deliverable 2.2: Go.Data server up and running, ready for data storage, sharing and management.

- Deliverable 2.3: Key members of RRTs from 11 provinces in the Central-coastal region are trained/ refreshed and ready to deploy Go.Data in investigation and contact tracing.

Output 3: A JRA, IAR/AAR for a disease outbreak/ public health emergency response event is conducted

Deliverable 3.1: A report on the outcomes of JRA; and/or

Deliverable 3.2: A report on the results of IAR/AAR and documented follow-up actions

Output 4: Successful piloting of the simulation exercise to test the existing laboratory policies, procedures, and emergency measures in response to an outbreak of a new respiratory virus international partners

- Deliverable 4.1: A detailed technical report describing the strengths, weakness, gaps and challenges in the existing laboratory policies and practices for emergency response.

Output 5: Completion of assessment of the current implementation of bio-risk management practices at selected provincial and district level

- Deliverable 5.1: Detailed technical report with the findings on the assessment, including gaps and challenges and plans to implement towards achieving sustainability of biosafety and biosecurity in laboratories.

- Deliverable 5.2: A training report, with the tailored training materials, including feedback on the utility of WHO training tools and materials.

Output 6: Final APW report at the end of contract

- Deliverable 6: A final APW report summarizing all activities carried out covering all tasks listed above and proposed follow-up activities, as needed.

5. Technical Supervision

The selected APW holder will work on the supervision of:

Responsible Officers:	Dr Do Thi Hong Hien, Epidemiologist, HSE team Mr Francis Inbanathan, Technical Officer, Laboratory, HSE team	Email:	
Manager:	Dr Sangjun Moon, Team Coordinator, HSE team	Email:	

6. Specific requirements

The local agency/organization/institution must have

- Intrinsic capabilities and demonstrated expertise to execute the required terms of reference.

- Experience and existing network within the Central-coastal region of Viet Nam

- Experience in implementing and/or contributing to national policies and response to disease outbreaks and public health emergencies.

- Prior experience in working with WHO and other international developmental partners towards improving public health capacities in Central-coastal region of Viet Nam

- The following human resource requirements:

Requirement	Team lead/ Institution	Team members
Qualification	<p>Essential:</p> <ul style="list-style-type: none"> o Academic background in public health and related fields o Holding a Master's or higher qualification in public health, applied epidemiology, laboratory or other public health aspects. o Demonstrated a basic knowledge in epidemiology, infectious disease surveillance systems, and national laboratory systems, biosafety and biosecurity. <p>Desirable:</p> <ul style="list-style-type: none"> o Proven record of publications in disease surveillance, epidemiology and laboratory including bio-risk management. 	<p>Essential:</p> <ul style="list-style-type: none"> o Academic background in public health and related fields, including BPH, laboratory and other preventive medicine aspects. o Demonstrated a basic knowledge in public health surveillance systems including laboratory system in Viet Nam. <p>Desirable:</p> <ul style="list-style-type: none"> o Holding master's qualification in public health, epidemiology, laboratory, microbiology, molecular epidemiology or other relevant fields.
Experience	<p>Essential:</p> <ul style="list-style-type: none"> o Extensive (10 years or more) experience in public health/ epidemiology/ infectious disease surveillance and response activities and research. <p>Desirable:</p> <ul style="list-style-type: none"> o Experience managing/ implementing surveillance activities including laboratory testing on infectious disease and during emergencies. o Prior experience working with WHO and/or other international development partners in infectious disease surveillance (including EBS, HEBS, Go.Data application), rapid response (including RRT capacity building), conducting JRA, AAR/IAR, simulation exercises and laboratory strategy developments 	<p>Essential:</p> <ul style="list-style-type: none"> o Good (5 years or more) experiences in public health, infectious disease surveillance/ laboratory or epidemiology work. <p>Desirable:</p> <ul style="list-style-type: none"> o Experiences implementing infectious disease surveillance, especially EBS/HEBS, Go.Data in outbreak investigation and response including during COVID-19 pandemic. Prior experience working with WHO and/or other development partners in infectious disease EBS, Go.Data, RRTs, JRA, AAR/IAR.
Skills/ Technical skills and knowledge	<p>Essential:</p> <ul style="list-style-type: none"> o Extensive (10 years or more) experience in public health practice and/or infectious disease surveillance and response. o Ability to work independently and in a team. <p>Desirable:</p> <ul style="list-style-type: none"> o Experiences participating in and/or implementing EBS/HEBS; conducting Go.Data training; JRA, AAR/IAR. o Have a strong knowledge and network with the Government network on infectious disease surveillance and laboratory systems; and emergency response. 	<p>Essential:</p> <ul style="list-style-type: none"> o Good (5 years or more) experience in public health practice and/or infectious disease surveillance and response. o Ability to work in a team. <p>Desirable:</p> <ul style="list-style-type: none"> o Experiences participating in and/or implementing EBS/HEBS; using Go.Data in outbreak investigation and response; participating/ designing JRA, AAR/IAR
Language	<p>Essential:</p> <ul style="list-style-type: none"> o Excellent communication and written skills in English. 	<p>Essential:</p> <ul style="list-style-type: none"> o Good communication and written skills in English.

	Desirable: o Excellent comprehension in infectious disease surveillance and response.	Desirable: o Basic comprehension in infectious disease surveillance and response.
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Other skills and competencies

- o Excellent interpersonal and communication skills
- o Ability to plan and prioritise challenging workloads
- o Demonstrated ability to work as part of a team

7. Place of assignment

Either in Nha Trang City or in a major city/province of the Central-costal region, Viet Nam where all the proposed activities will be taking place and based on the technical proposal.

8. Cost

The submitted proposal with detailed budget breakdown will be reviewed and decided based on the technical requirements, timeliness and value for money.

9. Medical clearance

NA

10. Travel

The APW holder including the team lead and his/her team members will be working at base. If the APW holder is based in Nha Trang or somewhere in the Central-costal region, traveling to Ha Noi or other provinces in the region might be required for meeting(s), training, based on the technical proposal.

11. Advertisement period

The advertisement period is proposed to be from 14 to 21 October 2024 (7 days including weekends) to facilitate the soon start of the activities.

12. Reviewed and cleared by:

	Responsible Technical Officers	Acting Team Coordinator	WR
Signature			
Name	Dr Do Thi Hong Hien Dr Francis Inbanathan	Dr Francis Inbanathan	Dr Angela Pratt
Date			
PTAEO	Surveillance activities: WPVNM2423323-1.5-76201 Lab activities: WPVNM2422978-2.1-61722		