

**TA-6658 IND: Strengthening Comprehensive Primary Health Care in Urban Areas Program under the Pradhan Mantri Ayushman Bharat Health Infrastructure Mission - Monitoring and Evaluation Specialist (53121-001)**

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**Terms of Reference (Individual Consultant)**

Expertise **Monitoring and Evaluation Specialist**

Consultant Source  
TOR Keywords

**National Monitoring and Evaluation, public health**

Expertise Group **Health & Medicine**

**Objective and Purpose of the Assignment**

The Government of India launched the Ayushman Bharat Health and Wellness Centre (AB-HWC) in 2018 to improve access to comprehensive primary health care (CPHC) as an important strategy to achieve universal health coverage. The coronavirus disease 2019 (COVID19) pandemic has revealed gaps in health systems, especially in urban areas, and the government subsequently announced the Pradhan Mantri Atmanirbhar Swasth Bharat Yojana (PM-ASBY) in May 2020 to strengthen public health systems for preparedness in future pandemics and other emergencies. The PM-ASBY scheme has been renamed as Pradhan Mantri–Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) as per the Cabinet approval on 15 September 2021. The Strengthening Comprehensive Primary Health Care in Urban Areas under Pradhan Mantri Ayushman Bharat Health Infrastructure Mission Program (RBL Program) will assist the government in implementing the AB-HWC and the PM-ABHIM to strengthen primary health care in urban areas in 13 selected states with the aim of improving the urban population’s access to quality and CPHC services.

The TA supports the results-based loan (RBL), Strengthening Comprehensive Primary Health Care in Urban Areas Program under Pradhan Mantri Ayushman Bharat Health Infrastructure Mission (PM-ABHIM), which is categorized as complex. The TA aims to strengthen the capacity of the Ministry of Health and Family Welfare (MOHFW), states, and urban local bodies (ULBs) to deliver accessible and quality urban comprehensive primary health care (CPHC) services under the National Urban Health Mission (NUHM) framework. The TA’s impact will be universal access to good quality health care services achieved (National Health Policy 2017). The TA’s outcome will be equitable access to quality CPHC services in urban areas improved in 13 states.

The TA will support the following outputs: (i) core technical support for program implementation and coordination provided; (ii) strategic capacity building supported in key comprehensive primary health care areas; and (iii) innovation and knowledge-into-practice supported. The TA will primarily support output 3 of the RBL program on strengthening health systems.

**Scope of Work**

The specialist will work closely with state/city health officials, staff, other consultants, MOHFW, National Health Systems Resource Centre (NHSRC) and the ADB project team (including consultants engaged by ADB) to support to develop the capacity of selected states to strengthen the CPHC M&E system and mechanism and assist in management and implementation of actions and processes to ensure achievement of key Disbursement Linked Indicators and Program results.

**Detailed Tasks and/or Expected Output**

- (i) Monitor and track CPHC program results indicators, data disaggregation by sex, quality and completeness of CPHC reporting in HWC Portal, HMIS, Quality Improvement (QI) Microsite, other information systems, and quarterly progress reports of the selected states;
- (ii) Help develop system and report prototypes for DLI validation and reporting; sampling techniques for health facility, and periodic monitoring surveys as needed for third-party validation;
- (iii) Develop state level road maps for CPHC in urban areas and facilitate the development of detailed road maps for implementing CPHC in urban areas with a section on gender responsive service provision, for selected states ;
- (iv) Develop key performance indicators to monitor public–private partnership engagement in service delivery functions
- (v) Support the selected States for implementation and documentation of innovations or good practices at the state level;
- (vi) Contribute to M&E and Technical area actions in Program Action Plan and Design and Monitoring Framework
- (vii) Undertake any other task assigned by MOHFW or ADB.

### Minimum Qualification Requirements

The specialist(s) should preferably have a Master's degree in public health, public policy, or any related field and around 8 years of consultancy and operational experience related to monitoring and evaluation. Experience in National level health programmes, Primary Health Care, and Urban development settings, along with knowledge of urban health and related issues preferred.

Minimum General Experience **10 Years**  
Minimum Specific Experience (relevant to assignment) **10 Years**  
Regional/Country Experience  **Required**  **Desired**  **Not Required**

### Deliverables

Details	Name	Type	Estimated Submission Date
<a href="#">+ Show</a>	Monthly progress reports	Report	29-Dec-2023

### Schedule and Places of Assignment (chronological and inclusive of travel)

Schedule Type  **Continuous**  **Intermittent**  
Max. Working Days/Week Home Office **5** Field **6**

City and Country	Working Days	Estimated Start Date	Estimated End Date	Other Details (use if place selected is Others)
Delhi, India	124	01-Feb-2023	31-Jul-2023	Home office is Delhi
Other City, India	40	01-Aug-2023	15-Sep-2023	To be determined (selected states)
Delhi, India	76	16-Sep-2023	01-Feb-2024	Home office is Delhi
<b>Total</b>	<b>240</b>			

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