



**Elizabeth Glaser  
Pediatric AIDS Foundation**  
Fighting for an AIDS-free generation

**REQUEST FOR PROPOSALS #S037175**

**Mapping of Community Structures**

in support of

ELIZABETH GLASER PEDIATRIC AIDS FOUNDATION (EGPAF)

Maseru

**(EGPAF Lesotho | LCA Office Complex, 30 Princess Margaret Road | Ground Floor | Maseru,  
Maseru, Lesotho)**

**Firm Deadline: Friday, December 15, 2023**

The Elizabeth Glaser Pediatric AIDS Foundation, a non-profit organization, is the world leader in the fight to eliminate pediatric AIDS. Our mission is to prevent pediatric HIV infection and to eliminate pediatric AIDS through research, advocacy, and prevention and treatment programs. For more information, please visit <http://www.pedaids.org>.

**BACKGROUND**

Please refer to attached ToR for detailed information

**SCOPE OF WORK AND CONTRACTOR DELIVERABLES**

**The Scope of Work and Contractor Deliverables for this Request for Proposals are found in Attachment A.**

**FOUNDATION RESPONSIBILITIES:**

Please refer to attached ToR for detailed information

**LOGISTICS:**

Please refer to attached ToR for detailed information

**KEY CONTRACT TERMS:**

The anticipated contract type is Firm Fixed Price Contract. Unless stated otherwise in the statement of the work, the Contractor is responsible for providing equipment and/or supplies required to perform the services.

**OPTIONAL WORK:**

The Foundation also anticipates a need to potentially extend this scope of work for an additional 3 option periods. The anticipated duration of each option period is 12 months. Please indicate any pricing changes for the option periods in response to this RFP.



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The Foundation also anticipates a need to potentially extend this scope of work for an additional 3 option periods. The anticipated duration of each option period is 12 months. Please indicate any pricing changes for the option periods in response to this RFP.

**EVALUATION CRITERIA AND SUBMISSION REQUIREMENTS:**

The Foundation will accept the proposal that presents the best value. All proposals will be evaluated against the following Evaluation Criteria. Each proposal must contain the items listed in the Submission Requirements column in the following chart. Please submit your Submission Requirements in the order that they appear below.

<b>Evaluation Criteria</b>	<b>Submission Requirements</b>	<b>Weight</b>
Past performance of similar work	3 professional reference letters from similar past projects with phone and email contact information and one or more examples of prior similar work( Detailed scope of work performed)	30.00 %
Qualifications of proposed individuals	CV/Resume of proposed individuals to work on this project.	20.00 %
Contractor’s proposed process and approach to meet our needs efficiently	A maximum 5-page written proposal explaining the process and timeline for implementation	30.00 %
Total fixed price	Total fixed price to complete all of the deliverables, including a breakdown by deliverable. This fixed price should be inclusive of all travel, staff/consultant time and any necessary supplies and materials.	20.00 %
Total		100.00%

All applicants are required to be registered and authorized to perform the scope of work in the place of performance. A copy of valid registration must be submitted with each proposal.

**Penalty:**

Should the agreed delivery or completion dates not be met in the case of fault of the Contractor, the Foundation shall be entitled to demand payment of late delivery penalties amounting to 1 % of the value of the late deliveries/services per started week of delay up to a maximum amount of 5% of the entire value of the contract.

**Additional Instructions:**

Should the agreed delivery or completion dates not be met in the case of fault of the Contractor, the Foundation shall be entitled to demand payment of late delivery penalties amounting to 1 % of the



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value of the late deliveries/services per started week of delay up to a maximum amount of 5% of the entire value of the contract.

**PROPOSED TIMELINE:**

<b>DATE</b>	<b>ACTIVITY</b>
<b>12/7/2023</b>	Release of RFP
<b>12/11/2023</b>	Submission of Inquiries directed to: Boithatelo Ratsoane, Procurement Manager, procurement-ls@pedaids.org Any form of canvassing will lead to automatic disqualification of the firm  No phone calls please.
<b>12/12/2023</b>	Question and Answer Response Document posted on EGPAF website at <a href="http://www.pedaids.org/pages/contracting-opportunities">http://www.pedaids.org/pages/contracting-opportunities</a>
<b>12/15/2023</b>	Completed proposals must be delivered electronically by the deadline mentioned on page one to: Boithatelo Ratsoane, Procurement Manager, procurement- ls@pedaids.org
<b>12/20/2023</b>	Final decision announced and Offerors notified
<b>1/8/2024</b>	Contract executed and Services begin.

**Please note it is our best intent to comply with the above timeline but unavoidable delays may occur.**

**KEY SOLICITATION TERMS AND CONDITIONS**

The following terms and conditions apply to this solicitation. Preference will be given to bidders who can meet EGPAF terms. Any exceptions to the requirements or terms of the solicitation must be noted in your submission.

1. All submissions and/or communications should be identified by the unique RFQ or RFP Reference Number reflected on the first page of the solicitation document. Failure to



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- comply with this requirement may result in non-consideration of your submission. Late quotes/proposals may be rejected without being considered.
2. Participation in this solicitation is open to all legal vendors that are registered and comply with the laws of doing business in the applicable country where services will be rendered. To be eligible for participation in the bidding procedure, bidders must prove to the satisfaction of EGPAF that they comply with necessary legal, commercial, technical, and financial requirements and are able to carry out the resulting work effectively. EGPAF may, at its discretion, require the presumed winner of the procurement to provide a copy of a valid registration certification and/or tax compliance (i.e. VAT) prior to awarding of the final procurement. Failure to provide this information at that time may automatically disqualify a bidder from selection.
  3. EGPAF shall use its best endeavors to ensure that funds provided under this solicitation do not provide direct or indirect support or resources to organizations and individuals that are associated with terrorism, promote or advocate the legalization or practice of prostitution or sex trafficking, or provide assistance to drug traffickers. If, during the course of this solicitation, EGPAF discovers any link whatsoever with any organization or individual associated with any or all of these, they shall be excluded or disqualified from the bidding process.
  4. EGPAF reserves the right to terminate the final contract should the selected bidder be unable to fulfill its expected obligations.
  5. By submitting a bid, you certify that the person(s) involved in the preparation and collation of quotes/proposals were or are in no way associated or have any Conflict of Interests with the initial preparation of the solicitation, the tender documentation, or the subsequent evaluation, assessment, analysis, management, and decision-making process of this solicitation.
  6. The solicitation is not an offer to enter into agreement with any party, but rather a request to receive proposals or quotations from person(s) interested in providing the goods/services outlined in the released solicitation document. Such submissions shall be considered and treated by EGPAF as offers to enter into an agreement.
  7. Any quotations or proposals not addressing each of the submission requirements listed in the solicitation may be considered non-responsive and disqualify the applicant from final selection. Any exceptions to the requirements or terms of the solicitation must be noted in the final submission. EGPAF reserves the right to consider any exceptions to be non-responsive. EGPAF reserves the right to reject all submissions, in whole or in part, enter into negotiations with any party, and/or award multiple contracts.
  8. EGPAF shall not be obligated for the payment of any sums whatsoever to any recipient of the solicitation until and unless a written contract between the parties is executed.
  9. Equal Opportunity Notice. The Elizabeth Glaser Pediatric AIDS EGPAF is an Equal Employment Opportunity employer and represents that all qualified bidders will receive consideration without regard to race, color, religion, sex, or national origin.
  10. All items or deliverables provided to EGPAF must be furnished for the use of EGPAF without royalties or any additional fees. All Materials will be owned exclusively by EGPAF. Bidder will not use or allow the use of the Materials for any purpose other than bidder's performance of the Contract without the prior written consent of EGPAF.
  11. **ETHICAL BEHAVIOR:** As a core value to help achieve our mission, EGPAF embraces a culture of honesty, integrity, and ethical business practices and expects its business partners to do the same. Specifically, our procurement processes are fair and open and



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allow all vendors/consultants equal opportunity to win our business. We will not tolerate fraud or corruption, including kickbacks, bribes, undisclosed familial or close personal relationships between vendors and EGPAF employees, or other unethical practices. If you experience or suspect unethical behavior by an EGPAF employee, please contact our Fraud Investigations team at [fraud@pedaids.org](mailto:fraud@pedaids.org) or EGPAF's Ethics Hotline at [www.reportlineweb.com/PedAids](http://www.reportlineweb.com/PedAids). Any vendor or consultant who attempts to engage, or engages, in corrupt practices with EGPAF will have their bid disqualified and will not be solicited for future work.

12. **Prohibition on Contracting for Certain Telecommunications and Video Surveillance Services or Equipment:** In accordance with Section 889 of the National Defense Authorization Act for Fiscal Year 2019, supplier understands and agrees that if awarded a contract as result of this solicitation, it will not procure or use any equipment, system, or service that uses "covered telecommunications equipment or services" as a substantial or essential component of any system, or as critical technology as part of any system under the resulting contract. "Covered telecommunications equipment or services" includes telecommunications or video surveillance equipment or services (including, but not limited to, cell phones, security cameras, network switches, and routers) manufactured by or with components from these Chinese companies or their subsidiaries or affiliates: (1) Huawei Technologies Company; (2) ZTE Corporation; (3) Hytera Communications Corporation; (4) Hangzhou Hikvision Digital Technology Company; or (5) Dahua Technology Company. In the event the supplier identifies covered telecommunications equipment or services used as a substantial or essential component of any system, or as critical technology as part of any system, for performance of this agreement for EGPAF, the supplier will notify EGPAF immediately and will be guided to provide the information required by FAR 52.204-25. The supplier agrees to insert the substance of this clause in all of its subcontracts or purchase orders funded by EGPAF.
13. **Prohibition on the use of Kaspersky Lab.** In accordance with Section 1634 of the National Defense Authorization Act for Fiscal Year 2018, supplier understands and agrees that if awarded a contract as result of this solicitation, it will not provide any "covered article" to EGPAF or use any "covered article" in the development of data or deliverables first produced in the performance of a resulting contract or order. "Covered article" means any hardware, software, or service that: (1) Is developed or provided by a "covered entity"; (2) Includes any hardware, software, or service developed or provided in whole or in part by a "covered entity"; or (3) Contains components using any hardware or software developed in whole or in part by a "covered entity". "Covered entity" means (1) Kaspersky Lab; (2) Any successor entity to Kaspersky Lab; (3) Any entity that controls, is controlled by, or is under common control with Kaspersky Lab; or (4) Any entity of which Kaspersky Lab has a majority ownership.

## ATTACHMENT A



### **Mapping of Community Structures to improve their participation in Sustaining HIV Epidemic Control and control of other health priorities inclusive of COVID 19 in Lesotho**

#### **Terms of Reference**

##### **1. Background**

The Lesotho Population based HIV Impact Assessment (LePHIA June 2020) shows that Lesotho has achieved the 90-90-90 targets with 90-97-92, and is on the right track to achieving the 95-95-95 targets by 2030. Notwithstanding this, the same report outlines significant gaps that must be closed to maintain the gains achieved thus far. Some of the key interventions to attain the UNAIDS 95-95-95 targets would include community engagement and involvement for active participation.

Hence the National AIDS Commission's (NAC) desire to map the community structures, confirm their existence and understand their roles and responsibilities. Understanding these community structures will enable NAC to establish how they can be strengthened for effective sustenance of HIV Epidemic Control and addressing other health priorities such as COVID-19 which have been noted to have a negative impact on HIV and TB control in Lesotho The NSP Programme Result 6 advocates for at least 40% of the HIV/TB response to be community-led and sustainable by 2023. It further strives for over 30% of the budget to be implemented through the community system. This being the case, the NSP recognizes the importance of engagement and strengthening of the Local/Basotho-

led Civil Society Organisations (CSOs) and communities in order to attain the set Global and National Targets (95-95-95). One of the challenges stipulated under the said result area, regarding the CSOs sector, is difficulty in accessing funds to implement HIV activities, with most of the finances originating from Development Partners through, International NGOs. Thus, as the means of intervention, the NSP advocates for strengthening CSOs Sector capacities in programme management; financial management systems and fund them to lead prevention, Advocacy, Communication and Social Mobilisation (ACSM) and social protection among others.

Lesotho has made good progress on the prevention roadmap ten-point plan of action as highlighted by the country prevention scorecard. The country, however, still lacks behind on social contracting, where CSOs should have specific community- focused intensified prevention interventions. This helps to strengthen prevention measures in identified communities with different target groups within the population with high-impact prevention programming for better results. It is in this light that the country needs to strengthen community structures for them to take lead in community-led response and community-led monitoring.

## **2. The Coordination of the HIV and AIDS Response**

The National AIDS Commission (NAC) is a statutory body established by an Act of Parliament (National AIDS Commission Act No.8 of 2005). Its core mandate is coordination of the National Multi-Sectoral Decentralized HIV and AIDS response. NAC leads the development of national policies, strategies and programmes for management of and combating HIV and AIDS whilst working towards ending AIDS by 2030. It facilitates implementation, monitoring and evaluation of programmes, strategic leadership and policy guidance to organizations involved in the national response.

NAC leads the process of setting national priorities and the strategic response framework for HIV and AIDS response. This is based on available empirical evidence such as that generated through the Comprehensive HIV Epidemic Analysis Study for Lesotho (CHEAL). The Country HIV and AIDS priorities are set out in the NHASP which was developed under the leadership of NAC and outlines that by 2023: 90% of people aged 15 and over at risk of HIV will have accessed combination HIV Prevention. Ending Mother to Child Transmission Eliminated and enrolling children living with HIV on treatment remains a priority in the HIV response. To attain the

Global Targets, 95-95-95, Test and Treat was introduced. NAC aims to eradicate the drivers of new HIV infections such as GBV through creating social enablers, improving legal and policy frameworks, strengthening National Social Protection Systems Strengthened and ensuring that HIV/TB response is community-led and sustainable; Health Systems are people-centered and sustainable; and increased financial investments for HIV prevention, especially the non-bio-medical prevention.

NAC is the custodian of evidence-based strategic documents and systems that guide the multi-sectoral response, inter alia; National HIV Policy 2019, NHASP 2018/19 – 2022/23, National HIV and AIDS Monitoring and Evaluation Plan 2018/19 – 2022/23, National Operational Plan 2020/21 – 2022/23, LOMSHA, HIV Prevention Road Map 2020, Lesotho Faith Sector Implementation Framework on HIV and AIDS, National AIDS Spending Assessment 2015/16 – 2016/17 -2017/18 (NASA), Civil Society Organisations Mapping, HIV and AIDS Mainstreaming Guidelines and Coordination Framework. These are the pillars that enhance effective coordination and implementation of the HIV and AIDS response at all levels. Lesotho like the rest of the World has and continues to experience the negative effects of COVID 19. Under the leadership of the Ministry of Health, the Risk Communication and Community Engagement Technical Working Group was established which is made up of different stakeholders to manage all issues related to COVID 19.

The Government of Lesotho is implementing many strategies to educate the communities about prevention of COVID 19 and rolling out the nationwide COVID 19 vaccination campaigns with support from the development partners and donors. The mapping exercise would also look into how the community structures are being utilized for dissemination of education and information related to COVID 19, and sensitisation on the benefits of vaccination against COVID 19.

It is with this background that NAC intends to conduct a survey to understand available community structures, their placements, responsibilities, capacities as well as gaps to be addressed. The findings of the survey will inform NAC on the capacity needs for the existing community structures as well as highlight areas of improvement and coordination for the community-led HIV and COVID-19 Response. Furthermore, the survey will highlight some of the social and structural barriers within the operating community structures.



## **2.1 Technical Support on Mapping Community Structures relevant for HIV Epidemic Control and other health priorities**

NAC collaborates with the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) for the exercise on *Mapping Community Structures relevant for HIV Epidemic Control and management of other health priorities*. EGPAF is one of the Capacity Development Technical Assistance partners supported by USAID to “*provide clinical services/technical assistance to USAID/Lesotho’s local implementing partners to sustain quality of services and to contribute to the agency journey to self-reliance strategic goals.*”

EGPAF is a non-profit organization and a world leader in the fight to eliminate pediatric AIDS. Seeking to end pediatric HIV/AIDS through implementation of HIV prevention, care and treatment programs, advocacy, and research, EGPAF began collaborating with Lesotho’s Ministry of Health in 2004. Through leadership from the Government of Lesotho and support from the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR) and other partners, Lesotho significantly scaled-up access to comprehensive HIV and TB services across the country. In June 2016, Lesotho adopted World Health Organization guidelines recommending Treatment for All, allowing anyone diagnosed with HIV an opportunity to be immediately initiated on treatment for life. EGPAF has used a national-, district-, and site-level approach to deliver HIV services and provide technical assistance to the Ministry of Health. EGPAF-Lesotho currently supports 174 sites in 8 districts to implement a comprehensive package of HIV and TB services, advocates at the national level to inform health policies, and conducts research to inform improved programming. EGPAF Lesotho has continued to partner with the MOH in supporting COVID 19 vaccination program through the CDC ARPA fund.

EGPAF supports NAC’s initiatives of realizing the contributions of the community stakeholders in the HIV response and other health priorities. Through their different roles in sensitizing communities about available health services, awareness raising on prevention and management of health outbreaks, these community stakeholders maintain healthy communities. They are ideal for bridging the gap between the health facilities and the communities.

## **2.3. Rationale for Mapping Community Structures relevant for HIV Epidemic Control and other health priorities.**

In Lesotho, as in many other countries in sub-Saharan Africa, community-based organisations and leadership structures play a crucial role in transferring information to target groups and direct service delivery within their scope and mandate, as well as translating the needs of target populations for policy makers and creating opportunities and an environment for improved implementation of policies.

Since 2016, EGPAF has been systematically engaging with various CSOs in Lesotho to capacitate them with the necessary skills to mobilize community to adopt health seeking behaviour and advocacy capacity strengthening to contribute to achieving 95 95 95 targets thus working towards Ending AIDS by 2030. The support has been aimed at strengthening high impact HIV interventions programming and ultimately increasing uptake of health services among all sectors of the population including children, adolescents, youth and their families.

In 2018, NAC and EGPAF signed a Memorandum of Understanding (MOU) to improve CSOs Coordination in the response to HIV on the recognition that the two organisations are working with the CSOs in many aspects. Based on this MOU, NAC collaborates with EGPAF to strengthen its coordination role, with a focus on the existing community-based organisations and/or structures/systems as they are vital in supporting the District AIDS Committees (DAC) in their district level coordination role in the HIV response. Therefore, NAC in a collaborated effort with EGPAF is seeking a Consultant to map out community structures/systems to understand their role in the HIV Response.

### **3. Purpose & Scope of Work**

NAC is seeking to catalyse the coordination framework for CSOs in Lesotho to identify existing community structures and their contribution to HIV Response. To achieve this, NAC as the national coordinating authority for the national HIV response, will contract a local Consultant to execute meaningful engagement with the relevant district and community structures to identify and map out existing community structures, understand their mandate, their capacities and capacity gaps as well as their collaboration with various stakeholders at community and district levels. The survey will further assess their strengths and weaknesses based on the findings and recommendations of the survey for capacity building plan in order to strengthen community systems. The Consultant shall:

- I. Lead the proposal of methodology and approaches that will effectively facilitate the mapping of existing community actors highlighting:
  - Their mandate in supporting national health priorities, particularly in the HIV and COVID 19 response
  - How well activities are implemented
  - Type of a community structure e.g. support groups, faith-based organisations, village health workers, community ART groups and health centre committees.
  - Other structures available for hard to reach groups like herd boys and workers who are mostly away during the day when the usual structures interact with the communities.
- II. Propose representative geographical coverage that will give a picture of national representation.
  - The Consultant will be guided through the achievement of certain indicators by districts which may include HIV incidence, COVID 19 vaccination rate and programs implemented in various districts.
  - The assignment will also cover rural, urban and peri-urban areas
- III. Engagement with the Community Structures
  - Identify existing Community Structures through various methods as proposed by the Consultant.
  - Learn about their various roles in supporting the HIV continuum of care including HIV Prevention, Care and Support and Treatment including, awareness raising on COVID 19 prevention, management and vaccination program and their wider responsibilities
  - Identify their roles and responsibilities in supporting other health-related community-based interventions such as SRHR, TB and GBV and programs targeting Adolescents, girls and Young Women (AGYW), males and hard to reach groups including the referrals to services
  - Assess the level of collaboration between these structures with other stakeholders in facilitating referrals and linkages for the different services, availability of referral systems or any referral methods used by the community structures
  - Assess the level of understanding of the reporting mechanisms and systems in place, and identify current reporting gaps, barriers and challenges
- IV. Engagement with the Structures at Community Council and/or District Level

- a. Engage with the main leadership structures at community council and district levels to understand collaboration with the community structures.
  - b. Engage with other implementing partners providing technical and financial support to community structures to identify complementarity and minimize duplication of efforts
  - c. Identify opportunities to engage the implementing community structures and the leadership structures in advocating for national policies within their jurisdiction at the community level.
- V. Consult with national level CSOs, NGOS, INGOS, Parastatals and/or Ministries to understand:
  - Community structures they work with
  - Roles and responsibilities the respective community structures in place
  - Capacity building offered to such community structures
  - Capacity needs and areas of support for community structures
  - Reporting tools, the community structures use
  - Mentoring and support systems for community structures
- VI. Develop a Community Systems Strengthening Plan
  - a. Propose a comprehensive action plan to build the capacities of identified structures to improve their contributions in implementing the Risk Communication and Community Engagement Plan and in the national HIV response.
  - b. Facilitate geographical area specific stakeholder’s validation meetings by grouping together the different geographical locations that would have participated in the mapping exercise to present a comprehensive report to the stakeholders.
- VII. Literature Review
  - a. The Consultant shall review national documents in the form of policies, laws, study reports and others which may include but are not limited to the recently reviewed National HIV and AIDS Strategic Plan(NHASP), the Medium Term Review report of NHASP, Decentralization Policy, National HIV Policy, NAC Coordination Framework and the LePHIA report including MOH documents like the Risk Communication and Community Engagement

Plan/Strategy, Essential Health Services Package and Village Health Program Policy which guide provision of health services at Community Level.

The Consultant will be supervised by NAC and will report to NAC for all parts of the assignment. The Consultant will work as the main facilitator and lead the entire assignment including all steps and processes towards the completion of the assignment.

#### **4. Deliverables**

4.1. An inception report detailing how the mapping exercise will be conducted including workplan describing specific tasks and how these will be implemented, the deliverables and timelines for conducting the mapping exercise, including tools that will be used to collect data e.g. Questionnaires, interview guides, etc.

4.2. Progress update reports submitted and presented in slide decks to NAC

4.3. A final detailed report that provides an insight into the available and existing community structures, their strengths and weaknesses. The report should detail processes, findings, recommendations and proposed action plan to provide capacity to the Community Structures where necessary to enable their effective contribution in national HIV and other health priorities response.

#### **5. Duration of the Assignment**

The duration of this assignment shall be limited to 25-person days over a 4-6 weeks period ideally to end before mid-March 2024.

#### **6. Minimum Requirements**

- Master's Degree in public health, Health Management, Social Sciences, or related field
- Ten or more years of experience in project management and/or implementing HIV and TB and other health related projects in Lesotho
- Experience on facilitating engagement or feedback meetings with various stakeholders inclusive of the Policy makers to gather stakeholder inputs.
- Prior work supporting the Lesotho HIV and other health related progress on issues of community strengthening systems and coordination.
- Understanding the relationship between the Community, District structures (especially the District AIDS Committees and the District Health Management Teams) and national level

- Prior experience working in resource constrained settings and strengthening of the Civil Society Organisations and Community Based Organisations in Sub Saharan Africa.
- Understanding of concepts like Community Led responses and monitoring will be an added advantage.
- Excellent report writing skills.
- Fluent in English and Sesotho
- Prior work for the PEPFAR related programs will be an added advantage.

## **7. Responsibilities of Parties**

### **7.1 EGPAF Responsibilities**

The following shall be the responsibilities of EGPAF Lesotho to ensure an effective and efficient implementation of this assignment;

- EGPAF TA Unit shall coordinate with the NAC to provide office space to the Consultant for specific assignments.
- EGPAF TA Unit shall facilitate the assignment kick off meeting and introduction of the Consultant to the NAC team and MOH Disease Control Unit after contractual engagement of the Consultant.
- EGPAF TA Unit shall collaborate with NAC to ensure the Consultant has access to all technical documents/materials necessary for furtherance of this assignment in a timely manner.
- EGPAF shall ensure timely payments of the Consultant work for the duration of the contract.
- EGPAF shall support preparations for logistics related to stakeholder meetings (e.g. workshops & validation meetings) and subsequent payments for such meetings.
- EGPAF shall coordinate with NAC to ensure all key deliverables under this assignment are received in accordance with the agreed Deliverable Schedule, reviewed by NAC and the task team made up of relevant stakeholders supporting this exercise as key stakeholders within a reasonable time period of receipt of the deliverable.
- EGPAF TA Unit shall serve as a complimentary support where need arises during the assignment.

### **7.2 National AIDS Commission Responsibilities**

- NAC shall convene and organize relevant stakeholders' meetings to ensure that all the relevant parties are available for consultation during the mapping exercise.
- NAC shall facilitate linking the Consultant with key technical experts within DACs, District Administrators (DA) and District Health Management Teams (DHMTs) and any other key Partners/Stakeholders in order to support the strategic guidance of the assignment.
- NAC shall be responsible for review all key deliverables under this assignment and coordinate the task team technical inputs to contribute to the quality of the final deliverables.
- NAC shall facilitate periodic meetings between EGPAF and the Consultant to get updates on progress on deliverables.
- NAC will liaise with MOH to facilitate engagement with MOH lay cadres; e.g. village health workers, health center committees.

### **7.3 Consultant's Responsibilities**

In fulfilling the objectives of providing effective, efficient technical assistance during the mapping assignment, the responsibilities of the Consultant are as follows:

- Setting-up briefing meetings with the relevant community and district structures, through support of NAC, to ensure close communication, coordination and collaboration with the stakeholders during the implementation of the Scope of Work (SOW)
- Work closely with the NAC Strategic Information Manager as the responsible office for research, learning and evidence creation for evidence-based decisions.
- Submission of key deliverables in line with the approved deliverable schedule to NAC.
- Submission of periodic progress reports to NAC as per the agreed roadmap.
- Provide own communication costs; voice and data communication
- Provide own transport services in the execution of the assignment

- Prepare presentations (and in some times facilitate presentations in meetings) and other sharing material on behalf of NAC and EGPAF for stakeholders' meetings.

## **8.0 Reporting Requirements**

- The Consultant shall submit directly to NAC Programs Manager all the deliverables in pursuance of the SOW under this assignment.
- The NAC Strategic Information Manager shall approve all the deliverables of the Consultant and recommend processing of payment upon satisfactory and acceptable deliverables.
- All deliverables shall then be submitted to the EGPAF Director for Technical Assistance to the Local Implementing Partners in line with the approved deliverable schedule.
- To ensure effective administration of the respective contract pursuant to the consulting services, the EGPAF Director for Technical Assistance to the Local Implementing Partners shall serve as the Project Manager and point of contact for all matters pertaining to the respective contract.