NOTICE OF VACANCY





1. Summary

The World Health Organization (WHO) Philippines is looking for an individual contractual partner, a Technical Coordinator for Cardiovascular Disease Prevention and Control for RESOLVE to Save Lives Project, under Special Services Agreement (SSA) contract.

Proposals are due by 03 November 2021.

2. Background

Cardiovascular diseases (CVD) are the Philippines' top killer and responsible for 35% of all deaths in the country. In 2014, there were 187,751 deaths from CVD. About 51% of all CVD deaths are premature, affecting Filipinos aged 30 to 70 years. Most of these deaths can be prevented by addressing CVD risk factors (including smoking, unhealthy diet, obesity, and hypertension) and provision of timely clinical management.

Currently, there are about 12 million adult hypertensives in Philippines. However, only about 8% have been diagnosed and are being managed in public health facilities for their condition. It is estimated that only 13 percent of hypertensive Filipinos had controlled BP. High salt intake is strongly linked to hypertension. In Philippines, average discretionary salt intake alone is 4g/day. If salt from processed food sources are added, salt intake will likely exceed the WHO salt threshold of 5g/day. In addition, artificial trans-fat increases the risk of heart attack and death. There is currently no regulatory measure against trans-fat in Philippines.

The overall goal of Phase II of the project is to reduce premature mortality and morbidity due to CVDs in the Philippines based on a three-pronged approach: a) Improve blood pressure control rates; b) Reduce population salt intake; and, c) Eliminate artificial TFAs in the diet. The current proposal will sustain the gains in Phase I and ensure transition of program financing and oversight to the Department of Health (DOH) and local government units (LGUs) as an integral component of primary healthcare services under the new UHC law.

Phase II will ensure the transition towards ownership and sustainability of the project at national and local levels. The project will seek to demonstrate in District 1 of Western Visayas and, if successful, in two additional scalable units in two other regions, the implementation of a hypertension service delivery model that ensures safe and efficient delivery of essential services in times of COVID-19 and beyond and is integrated within the UHC roll-out at sub-national level. The model will include a) setting up a functional health care provider network (HCPN); b) developing a provincial model for the pooled procurement and management of hypertension medications in collaboration with LGUs and the DOH. Hypertension services will serve as a pathfinder for the delivery of other non-communicable disease (NCD) services and will be used to demonstrate technical, managerial, and financial integration at the provincial/city level under UHC.

3. Timeline

The implementation timeline for the project is from 15 November 2021 to 15 May 2022.

4. Place of Assignment

Western Visayas, Philippines

5. Scope of Work

The Consultant will be based at the Department of Health (DOH) Western Visayas Center for Health Development (CHD)in Iloilo City to facilitate, coordinate, and ensure effective implementation of project interventions under the supervision and strategic guidance of the WHO Philippines NCD Technical Unit and in technical collaboration with the Department of Health Western Visayas CHD and local government units (LGUs) in District 1 of Iloilo Province

Primary tasks and responsibilities:

- Coordinate, assist, and participate in technical discussions related to the Phase II Project including organizing Regional Technical Advisory Group meetings, costing of the hypertension intervention package, piloting the provincial model for the pooled procurement of antihypertensive medications, and establishing a Health Care Provide Network for the delivery of hypertension services within the PhilHealth Konsulta package;
- Liaise with relevant regional DOH and LGU counterparts and secure their buyin, participation, and collaboration for implementation of project interventions.
- Orient relevant regional counterparts (DOH representatives, NCD coordinators, PHO and MHO) to the Phase II Project including protocols and monitoring & reporting systems.
- Provide supportive supervision, mentoring and monitoring support to health center staff in collaboration with DOH regional counterparts including deployment of the E-Registry, forecasting and inventory management tools for antihypertensive medications.
- Support local advocacy efforts including the identification and orientation of local champions; and
- Assist in the extraction of lessons learned for the delivery of other NCDs and scale up to other districts/local health systems including the organization of dissemination forum.

6. Qualifications

Specific requirements

Education:

- A degree in Medicine, Nursing, or other Allied Health Profession.
- A degree in Public Health highly desirable.

Experience required:

 Minimum two-years of relevant field experience in public health, project coordination and management, advocacy, and partnership building,

- organizing, and facilitating trainings, meetings, and workshops, and writing technical reports and documentation.
- Minimum of two-years of experience collaborating with relevant government agencies at the local, regional and/or national levels.
- Relevant experience working with international and multilateral agencies an advantage.
- Knowledgeable in NCD prevention and control an advantage

Skills / technical skills and knowledge:

- Adaptability to working remotely and conducting online meetings
- Capacity to meet tight deadlines
- · Critical thinking and problem-solving skills
- Technical writing skills
- Organizational skills
- Interpersonal and facilitation skills
- Proficiency in Word, Power Point, Excel

Language requirements:

- Fluency in written and spoken English
- Fluency in Filipino
- Fluency in llonggo an advantage

Competency

Consensus building cultural backgrounds and maintain a high standard of personal conduct.

7. Other Requirements

The individual contractual partner must not have direct or indirect interest in the tobacco industry, alcohol or breastmilk substitute manufacturing industry, arms dealing or human trafficking.

8. Management of Conflict of Interest

Any interest by an entity (individual/organization/company), expert or member of the project team that may affect or reasonably be perceived to (1) affect the expert's objectivity and independence in providing advice to WHO related to the conduct of a project, and/or (2) create an unfair competitive advantage for the expert or persons or institutions with whom the expert has financial or interests (such as adult children or siblings, close professional colleagues, administrative unit or department).

WHO's conflict of interest Rules are designed to identify and avoid potentially compromising situations from arising thereby protecting the credibility of the Organization and of its normative work. If not identified and appropriately managed such situations could undermine or discount the value of the expert's contribution, and as consequence, the work in which the expert is involved. Robust management of conflicts of interest not only protects the integrity of WHO and its technical/normative standard setting processes but also protects the concerned expert and the public interest in general.

Confidentiality Statement

All input and all related documents about the project are confidential and must <u>NOT</u> be handed over to third parties. The DOH and WHO have the exclusive ownership of all documents, and only DOH and WHO have the right to disseminate any information outside the agreed project's scope.

9. Submission Requirements

Interested individual should submit electronic copies of the following:

- Cover letter
- Curriculum Vitae

Address cover letter and proposals to:

Dr Rabindra Abeyasinghe

WHO Representative to the Philippines Ground Floor, Building 3, Department of Health San Lazaro Compound Rizal Avenue, Sta Cruz, Manila

Please submit the electronic copy of the proposals with the title "Technical Coordinator for Cardiovascular Disease Prevention and Control for RESOLVE to Save Lives Project" to Mrs Ying Chen (cheny@who.int) with a copy to wpphlwr@who.int. Only shortlisted applicants will be contacted by WHO Philippines.

Deadline of submission of proposals is on 03 November 2021.