



TERMS OF REFERENCE

Project Officer

Project Location	Jamaica
Title:	Project Officer
Place of Work	Project Management Unit within the Office of the Chief
	Medical Officer, MOHW
Project Name	Project Code Care
Funding Source	Government of Jamaica/Ministry of Health and Wellness
Project Duration	15 Months
Proposed Start date	March 2023

1.0. BACKGROUND:

Since 2020 the Public Health system in Jamaica has utilised a myriad of interventions to manage and curtail the impact of COVID-19. A key element of the Pandemic Response Plan is the review and enhancement of the Infection Prevention and Control Measures for health facilities. These enhanced measures included the suspension of elective surgeries which resulted in the reduction of surgeries by 70%.

The onset of the COVID-19 pandemic in March 2020, increased the backlog of elective surgeries. In 2019, there were 77,846 surgical procedures conducted in Jamaica, of this, 11,896 were day-surgeries and 25,871 were considered minor surgical procedures. Since the pandemic, it is estimated that in Jamaica surgeries were being cancelled at a rate approaching 1000 per day (COVIDSurg Collaborative, 2020). Delays in elective surgeries may cause increased infections and adverse patient outcomes

A preliminary survey of hospital waiting times and the number of patients waiting for surgeries in Jamaica was conducted in March 2022. This, although not comprehensive, found that in excess of 7,000 Jamaicans are currently waiting for operative care. The most common surgeries are for hernia repair and cataracts.

Although a variety of reasons for the backlog have been identified through survey in addition to the complications from COVID19; it is the limitation of staff (general/specialist/registered nurses) that have posed the greatest risk. This is largely due to migration of healthcare workers (HCWs).

2.0. RATIONALE OF PROJECT:

The impact of surgical backlog and prolonged waiting times on patient health outcomes include:

- Adverse health outcomes;
- Prolonged pain and discomfort for patients;
- Impact on patients' mental wellbeing;
- Loss of productivity;
- Overcrowding in preoperative outpatient clinics;
- Reduction in staff morale;
- Increase in number of emergency cases as conditions deteriorate;
- Increase cost for healthcare as emergency cases cost more than elective surgeries.

Although some researchers have found no difference in the waiting time for surgeries among different socio-economic groups in public health systems, persons in the higher income bracket have more options to access healthcare which include treatment through the private sector and medical tourism. (Sutherland JM, 2019). These options are not available to a significant portion of the Jamaican population who falls within the lower income bracket and are reliant on the public health system for health care

To reduce the waiting list for elective surgeries, the Ministry of Health and Wellness has developed a suite of initiatives aimed at reducing the backlog and waiting time for surgical procedures. Project CODE CARE is one of several projects that intends to reduce the backlog of surgeries through the engagement of specialist nurses and support staff from the diaspora in the form of nursing missions to support the nursing cadre on short-term periods of 7 to 14 days.

Nursing missions will be engaged utilizing contacts within the diaspora and other international organizations. This expansion of the number of surgical teams through the Project CODE CARE programme will allow at least 2000 additional surgeries in hospital facilities.

Medical professionals per week will be targeted under project Code Care up to a maximum of **400 nurses or other surgical support specialists** for the **15 months** of the intervention. These health care workers will be targeted from countries where there is a level of diaspora presence such as:

- The United States of America
- Canada
- The United Kingdom

Key medical professionals to be targeted include:

- Operating theatre nurses, anaesthesiologists, and others surgical support staff
- Other international surgical missions

2.1. Project Surgical Targets:

The aim of the project is to complete a minimum of **2,000 surgeries** in **6 months**. Specifically:

600 hernia surgeries	200 Fibroids	Abbreviation Key
400 at KPH	200 at VJH	Kingston Public Hospital (KPH)
400 at STH	200 at STH	Spanish Town Hospital (STH)
200 at BCH		Bustamante Children's Hospital (BCH)
200 at SPGH		Savanna-La-Mar Public General Hospital (SPGH)
100 Plastic Surgeries	100 ENT Surgeries	Victoria Jubilee Hospital (VJH)
200 at KPH/BCH	 200 at KPH 	

2.2. Objective of the Project:

The overall objectives of the project is:

To reduce the backlog of surgical cases by 1000 surgeries during the project period

On achieving the project objectives, there will be:

- Reduced wait time for elective surgeries in hospitals through the increase of service staff
- Increased number of surgeries conducted over the project period

3.0. SCOPE OF WORK FOR PROJECT OFFICER:

The Project Officer will provide end-to-end coordination and support for the design, management, and monitoring of all administrative and logistical arrangements related to the engagement of health professionals from the diaspora for the conducting of nursing missions within Jamaica.

The Project Officer will be required to work with the Project Management Unit (PMU) based in the Office of the Chief Medical Officer, MOHW; consult with the Chief Nursing Officer, Regional Health Authorities (RHAs) and Hospitals on all matters related to this project's implementation. The Project Officer will also be responsible for supporting the execution of cooperation agreements with various international partners, diaspora groups and public and private groups for participation in the project. The specific services to be provided by the Project Officer include:

a) Establishing partnership agreements and maintaining lines of communication with medical/nursing schools, hospitals, diaspora groups, diplomatic missions, medical missions and nursing organizations in USA, Canada, and the UK to ensure a strong

partnership pipeline and a robust supply mechanism for the engagement of health professionals to participate in the project.

- b) Managing all administrative functions associated with the project to include:
 - Facilitating the registration of the visiting health professionals with the relevant Professional Bodies, i.e. Medical Council, Nursing Council etc.
 - Making all travel arrangements to and from Jamaica, inclusive of accommodations, secure transport in and around the island on behalf of surgical teams engaged for missions.
- c) Coordinate the development of an engagement agreement document which will govern the participation of nurses and other surgical professionals in the project.
- d) Developing and managing a database of surgical teams engaged in the project.
- e) Providing liaison, grievance and emergency response support to the surgical teams during their stay in Jamaica.
- f) Coordinating with RHAs, hospitals regarding surgical schedule and surgical teams to ensure synergy in project operation.
- g) Maintaining organizational standards of satisfaction, quality and performance.
- h) Providing oversight of multiple processes and ensure project goals are reached.
- i) Track and report on the progress of each mission, identifying potential risks and making recommendations.
- j) Perform any other duties connected directly with the implementation of the Project as may be required.

3.1. Key Accountabilities and Responsibilities:

A. Responsiveness

- Understand priorities of the project and ensure that urgent deliverables are actioned within a reasonable time.
- Work with stakeholders to ensure appropriate response times are maintained.
- Support Project Manager/Office of the Chief Medical Officer in engaging stakeholders and managing engagement agreements.
- Timely response to applicants of mission and preparation of relevant documentations
- Continued and timely updates to all relevant parties/stakeholders.

B. Quality

 Quickly identify project issues and establish methods to minimize or avoid negative impacts. Ensuring uniform quality is maintained.

C. Efficiency

- Maximise opportunities for value for money by combining trips:
- Maintain a schedule for nursing staff in accordance with surgical schedules, accommodations and transport to ensure that all synergies are exploited as far as possible without compromising on quality and timeliness

D. Documentation / Communication

- Establishing a quality database for data storage
- Maintain clear records of all project related information
- Support PMU/Office of the Chief Medical Officer in managing register and schedule
- Work closely with relevant stakeholders such as RTDs within the RHAs, Office of the Chief Medical Officer, Hospital SMOs, International Cooperation Unit, and other parties
- Report regularly to the Office of the Chief Medical Officer via Project Manager (PMU) and identify any problem issues early

E. General

The above tasks may entail occasional travel and frequent visits to the RHAs/Hospitals/Accommodations

4.0. DELIVERABLES AND SCHEDULE

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No.	Deliverables	Timeline

1.	Work plan – This is the operational document for the consultancy and is used to determine the required inputs for the development and delivery of the output of the consultancy. As such the Work plan document must detail: Methodology for providing the key outputs of the consultancy Resources required that are outside of the control of the consultant Time line for the achievement of tasks associated with the consultant deliverables	Within seven (7) days of signing the contract
2.	 Monthly progress reports. To include: the progress made during the period (planned vs. actual targets, etc.) the proposed activities for the ensuing month, risks, challenges, gaps, and recommendations for addressing them 	Due within the first 5 days at the start of each month
3.	Close-Out Report, to include: Background/Introduction Overall summary of the project Implementation plan and methodologies employed Full documented reports Constraints/Obstacles Summary conclusion of overall project Recommended action(s) (if any) Appendices	Due within 5 days after the close of the contract period.

5.0. QUALIFICATION AND EXPERIENCE

The Consultant must meet the minimum required qualifications as detailed below or based on equivalency. Equivalency decisions are made on the basis of a combination of education and experience that would provide the required knowledge and abilities.

Qualifications:

- A First Degree in Business Administration, Management Studies, or equivalent from a recognized university.
- Training in project management would be an asset.
- Ability to use software applications such as Word, Excel, PowerPoint

Work Experience:

- At least 5 years' experience in administration
- Proven track record of working effectively within multi-disciplinary teams

Required Skills and Knowledge:

- High competence in IT (Excel, Word, PowerPoint as a minimum)
- Strong problem-solving/critical-thinking skills
- Ability to work with minimal supervision, track multiple processes and work within a fast paced environment
- Knowledge of GOJ laws, policies or procedures
- Outstanding organizational/coordination abilities; ability to process and prioritize information and plan effectively

Desired Competencies:

- Excellent communication skills (verbal/written)
- Experience working in Public health, hospital or clinic management/administration, with proven management background would be advantageous
- Ability to use online information management systems
- Experience in customer service would be advantageous

6.0. EVALUATION METHODOLOGY

Qualifications:	Must satisfy all requirements		15%
Work Experience:	Must satisfy all requirements		
Required Skills and	High competence in IT (Excel, Word, PowerPoint as a		
Knowledge:	minimum)		
	Strong problem-solving/critical-thin	nking skills	10%
	Ability to work with minimal supervision, track multiple		10%
	processes and work within a fast paced environment		
	Knowledge of GOJ laws, policies, or procedures		10%
	Outstanding organizational/coordination abilities; ability to		10%
	process and prioritize information and plan effectively		
	Sub total		80%
Desired	Excellent communication skills (verbal/written)		5%
Competencies:	Experience working in Public health, hospital or clinic		5%
	management/administration would be advantageous		
	Ability to use online information management systems		5%
	Experience in customer service would be advantageous Sub total		5%
			20%
Candidate must sco	re above 70% to be eligible	Overall Total	100%

7.0. ADDITIONAL DETAILS

Selection Method	Selection process will be based on consultants' qualification
	(CQS)
Nature Of The Assignment:	The assignment is based on an individual services contract arrangement
Level Of Effort:	Full time level of effort, Mondays through Fridays. Some weekend or evening hours may be necessary.
Period Of Contract	15 months
Payment Method	Deliverable based contract. Payments will be made in equal monthly instalments based on the delivery of monthly reports.
Funding	Funding will be provided by the Government of Jamaica.
Reporting Arrangements	The consultant will report to the Project Manager, Project Management Unit (PMU) based in the Office of the Chief Medical Officer, MOHW
Support	The consultant will be required to provide all tools to facilitate the undertaking of the assignment.
Intellectual Property	All information obtained during the delivery of this Consultancy is the property of the Ministry of Health and Wellness and requests to use same must be made in writing to the Chief Medical Officer/Permanent Secretary
Travel	Travel as required under this assignment is authorized and should be included in the bid price.