A. **INTRODUCTION**

The office of the United Nations High Commissioner for Refugees in Jordan is inviting technical service providers in Jordan for the provision of Service Contract to conduct neonatal and stillbirth mortality audits taking place in refugee camps in Jordan (Zaatari and Azraq Camp).

The awarded supplier need to be specialized in the provision of care relating to pregnant women and newborn in order to remain objective in the process. It is also very important that the agency has access to the camps and is a respected member of the health sector coordination as well as having very good relations with the Ministry of Health and private affiliated hospitals to be able to access records for deaths, which occurs after referrals.

B. **BACKGROUND**

Neonatal and stillbirth audit is the process of systematically capturing information on the number and causes of all neonatal deaths and the potential avoidable factors linked to deaths, in order to affect change. These are conducted in a no-blame, interdisciplinary setting in order to improve the care provided to all mothers and babies. Death reviews provide opportunities to examine the circumstances surrounding, as well as the immediate and contributing causes leading to a neonatal death and stillbirth events, and inform the delivery of health services and quality of health care for women and babies during pregnancy and delivery, and ultimately to prevent future morbidity and mortality.

In 2013 UNHCR with technical support from CDC developed a neonatal mortality audit system in Zaatari camp. This was in response to elevated neonatal mortality rates observed during the unfolding humanitarian situation. Mortality audits were conducted by UNHCR staff in 2014 and then by partner agency staff. However the audits have proven to be time consuming and there has not been an established system of feedback. Ownership of the process amongst the providers and other agencies is also lacking largely related to misperceptions of the aim of the process, receptiveness to feedback and fear of repercussions. In 2015, the audits were extended to Azraq camp.

In 2016, UNHCR started a neonatal care project in four countries including Jordan. The project is funded by the Bill and Melinda Gates Foundation. The aim of the project is to strengthen newborn care in three refugee sites, including camp-based settings in Jordan, in line with UNHCR's operational guidance on newborn care. One of the components of the project is to either establish or strengthen the neonatal mortality audit system in each refugee site. For this reason UNHCR Jordan sought an independent actor to assist in conducting the audits in conjunction with our implementing and operating health partners (JHAS and Moroccan field hospital in Zaatari camp and IMC, IRC, and AMRin Azraq camp).

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C  **SCOPE OF WORK REQUIRED BY THE TECHNICAL SERVICE PROVIDER**

TECHNICAL SERVICE PROVIDER,

1. The contractor to make available technical consultant in public health, qualified to perform neonatal and stillbirth audits for neonatal mortalities and stillbirth events taking place in refugee camps (or in referral hospitals);
2. The contractor is expected to respond within 24 hours for NNM and stillbirth notifications from the camps health providers and those responsible of reporting mortalities, followed by initiation of the audit process;
3. The contractor is expected to deliver the completed audit report using the UNHCR standard template (See Annex 1), ensuring all sections filled, in addition to the recommendation field, and within the time frame of submitting individual audits (72 hours) unless extraordinary circumstances exists;
4. The contractor is expected to submit technical reports on neonatal mortality data taking place in camps, along with analysis and recommendations, on quarterly (4 reports/year) and annual basis;
5. The Contractor to guarantee that it has all the necessary expertise, qualified personnel (Public health investigator), facilities, equipment and tools, insurance and other means to provide the above mentioned professional service;
6. The contractor to provide all related documents and certificates showing their legal status in the country (national registration with line ministry);
7. The Contractor to provide, at its own expense, all personnel, tools, transportation and other facilities required for the performance and completion of the Services;
8. The Contractor to ensure that it shall perform the services with the necessary care and diligence, and in accordance with the highest professional standards;
9. The Contractor to be responsible for obtaining, at its own cost, all licenses, permits and authorizations from governmental or other authorities necessary for the performance of the service contract (Including permit approval to access the camp). However, UNHCR shall cooperate with the Contractor as necessary and appropriate including where appropriate by liaising with relevant authorities.

D  **RESPONSIBILITIES OF UNHCR**

1. UNHCR/ health unit personnel will analyze and provide feedback on individual audits performed, also the quarterly and annual reports;
2. The Contractor to acknowledge that UNHCR shall have no obligation to provide any assistance to the Contractor in performing the Services;
3. UNHCR reserves the right to review all Services performed by the Contractor under the service contract, to the extent practicable, at all reasonable places and times during the term of the contract. UNHCR shall perform such review in a manner that will not unduly hinder the performance of the Services by the Contractor. The Contractor to cooperate with all such reviews by UNHCR, at no cost or expense to UNHCR.
E. Expected output:
The contractor should deliver/submit to UNHCR the following deliverables:

1. Reports submitted electronically to UNHCR within 72 hours of the death;
2. Quarterly reports with analysis of the audits from each camp with summary findings, including potential contributing or avoidable factors, and programmatic recommendations;
3. Annual report with analysis of the database for each camp with summary of findings, trends and programmatic recommendations;