



LIMBE HEALTH CENTRE MIDWIFERY LED WARD EVALUATION

Terms of Reference:

FOR INDIVIDUAL CONSULTANCY SERVICES TO UNDERTAKE AN EVALUATION FOR THE LIMBE HEALTH CENTRE MIDWIFERY LED WARD

1. Organization context

Seed Global Health Malawi was established in 2013 through the PEPFAR funded Global Health Service Partnership (GHSP) program. In 2018, the organization launched “***Sharing Knowledge, Saving Lives***”, a five years’ strategic plan (2019 – 2024) to strengthen health systems. We partner with the government, health training institutions, professional regulatory bodies, and health facilities to train health workers, strengthen the quality of health services, and support policies that enable health workers to deliver high quality services. Over the past five years, we have supported the training of more than 14,679 health workers who are now working in health facilities serving over 19.4 million people. Since 2019, we have collaborated with the Ministry of Health to drive progress in three key areas: Reproductive, Maternal, Newborn and Child Health (RMNCH), Mental Health, and Primary Health Care. Our partnerships with Kamuzu University of Health Sciences, Saint John of God University of Health Sciences, and the Nurses and Midwives Council of Malawi have been instrumental in achieving this goal. Our vision is “a just equitable and healthy Malawi and a mission to expand access to quality care and improve health outcomes for all Malawians. To effectively achieve our vision and mission statements, we work across three central and interrelated pillars, namely education, practice and policy.

Seed Global Health began operations in Malawi in 2013 to support the development of a strong and skilled health workforce. We work in close partnership with the Ministry of Health, health training institutions, regulatory bodies, and health facilities to train health workers, strengthen the quality of care, and advance policies that enable high-quality service delivery.

In Malawi, our efforts focus on three key areas: Reproductive, Maternal, Newborn and Child Health (RMNCH), Mental Health, and Primary Health Care. In 2024, we launched our current strategic plan, *Health Workers Save Lives*, which outlines our approach to strengthening human resources for health.

Our partnerships with Kamuzu University of Health Sciences, Saint John of God University of Health Sciences, and the Nurses and Midwives Council of Malawi have been essential to driving this work forward. We approach all of our work through three interconnected pillars: education, practice, and policy.

2. Background

Despite significant progress in recent decades, maternal and neonatal mortality, morbidity, and stillbirth remain unacceptably high globally. Over the past decade, Malawi has made significant strides in improving health outcomes despite facing numerous challenges. Between 2017 and 2020, the maternal mortality ratio declined from 439 to 381 deaths per 100,000 live births. The neonatal mortality rate decreased from 44 to 19 per 1,000 live births between 2020 and 2024, surpassing targets set in the Health Sector Strategic Plan II. However, these improvements fall short of achieving the global Sustainable Development Goal 3 which aims at reducing the global maternal mortality ratio to less than 70 deaths per 100,000 live births and the neonatal mortality rate of 12 deaths per 1,000 live births by 2030.

As a foundational step on the pathway towards UHC, the World Health Organization (WHO) endorses the reorientation of health systems towards primary health care (PHC). In this context, shifting to midwifery-led models of care represents a cost-effective strategy to optimize outcomes for women and newborns, while reducing unnecessary interventions.

Midwifery-led models of care place educated, licensed, regulated midwives at the center of care for women and newborns – from pre-pregnancy through the postnatal period. These midwives autonomously provide and coordinate respectful, high-quality care across their full scope of practice while using a midwifery philosophy of care. This approach promotes a person-centered approach to care, values the woman–midwife relationship and partnership, optimizes physiological, biological, psychological, social and cultural processes, and uses interventions only when indicated.

Since 2019, the School of Maternal, Neonatal and Reproductive Health under the Kamuzu University of Health Sciences has partnered with Seed Global Health to implement the first ever Midwifery Led Ward at Limbe Health Centre in Blantyre, Malawi.

The goal of the partnership was to improve the quality of clinical education and women-centered practice to reduce the maternal and neonatal morbidity and mortality at Limbe Health Centre (LHC) by June 2025. Key objectives included:

- Completing a comprehensive renovation of the Maternity unit at Limbe Health Centre by the end of 2021
- Establish a midwifery-led environment where faculty and practicing midwives are able to practice Responsive, Respectful Maternity Care (RRMC) to their full scope/potential in antenatal, intrapartum and postpartum midwifery care at Limbe Health Centre by June 2025
- Create an improved clinical teaching and learning environment conducive for midwifery students that promotes holistic and Responsive Respectful Maternity Care (RRMC) by June 2025;
- Develop robust monitoring, evaluation, and learning (MEL) mechanisms to ensure the continuity and quality delivery of RRMC practices, with full adoption and ownership by the ward team by June 2025.

3. Purpose of Midwifery-Led Ward Evaluation

Seed Global Health is seeking to hire an individual consultant to conduct an evaluation at Limbe Health Centre and Kamuzu University of Health Sciences in Blantyre District. The evaluation seeks to assess the progress to the partnership's goals, objectives, and indicators, with reference to the baseline findings, in order to understand the achievements, changes and emerging impact from implementation. The findings will support Seed and partners in making evidence-informed decisions to guide design and scale up, while providing insights on effectiveness, relevance and sustainability of the partnership to date.

4. Specific objectives of the evaluation

- Assess the contribution of the project towards improving maternal and newborn health outcomes in Blantyre district.
- Assess how the project has strengthened Responsive, Respectful Maternity care at Limbe Health Centre
- Assess the contribution of the project to improving clinical learning and practice for both KUHeS faculty and students and non KUHeS students.
- Evaluate how the project has engaged the community and other key stakeholders and how this contributed to sustainability.

5. Project Scope of work

To meet the objectives of the evaluation, the consultant will be responsible for the following tasks, organized across five key phases. Included are the activities and key deliverables within each phase.

Phase 1: Planning and Inception

- Develop an **Inception Report** outlining the consultant's understanding of the assignment, refined evaluation questions, methodology, workplan, timelines, and budget
- Conduct a **desk review** of key project documents and relevant national strategies and policies (e.g., DHIS-2 datasets, SRHR Policy 2024–2030, HSSP III, Seed Strategic Plan), technical reports, annual reports, monitoring plans, annual plans, client registers, facility reports and any other relevant documents.
- Draft an **evaluation protocol** for submission to COMREC to secure ethical approval and support future publication if needed
- A budget in Malawian Kwacha indicating the costs of conducting this exercise.

Phase 2: Design and Preparation

- Develop **digital data collection tools**, to be reviewed and approved by Seed Global Health
- **Recruit and train research assistants** to support data collection
- Pre-test the data collection tools to ensure clarity, reliability, and validity
- Finalize an **implementation plan**, including a training schedule for research assistants and field logistics.

Phase 3: Data Collection and Analysis

- Oversee and **coordinate primary data collection**, including key informant interviews and focus group discussions
- Visits to selected stakeholders to carry out in depth interviews, inspection, and analysis of the project activities i.e., KUHeS, Blantyre DHO, Seed, Midwives, Community and Clients
- Ensure **quality assurance** of data through supervision, and manage data entry and cleaning

- Conduct **data analysis** aligned with the evaluation questions and framework

Phase 4: Reporting and Validation

- Prepare a **draft evaluation report** and share preliminary findings in a presentation with Seed Global Health and its partners for validation and feedback
- Organize a **validation meeting** to share key findings and recommendations with stakeholders

Phase 5: final Deliverables

- Submit a **final evaluation report** that incorporates feedback from stakeholders
- Provide Seed Global Health with all final tools, clean datasets, and supporting documentation

6. Project Deliverables

The consultant team will report to an individual with Seed's Malawi Team and work in collaboration with other teams and partners, as needed. The consultant team will submit the following deliverables (in English):

- Inception Report, with work plan for the project and final budget.
- Technical report from field report with all tools.
- A protocol for COMREC submission to publish the evaluation findings
- Submission of final report and document including:
 - Three bound hard copies and a soft copy.
 - Complete dataset, questionnaires, and codebook
 - Final report not exceeding 30 pages (excluding annexes)
 - Power point slides on key findings from the report

7. Outline of Consultant Qualifications

Seed is open to a single consultant or a consultant team to support this project. The individual or team should have the following qualifications:

- A minimum of a master's degree in public health, nursing, medicine, or any related field.
- A minimum of five years of previous consultancy experience, in Reproductive, Maternal, Newborn and Child Health or related fields with a good understanding of the health systems and RMNCH landscape in Malawi.
- Experience in quantitative and qualitative methods, including publications in peer-reviewed journals.
- Demonstrated ability to provide timely, evidence-based, quality assured technical reports.
- Proficiency in writing skills and communication skills.
- Experience with project management and RMNCH programming is an asset.
- Experience working with colleagues from various cultural and educational backgrounds.

8. Timeframe

- The evaluation is expected to start in early July 2025.
- The process to take about 2 months including report writing and the final report should be submitted within 5 days of activity completion.

9. Submitting a proposal

Seed Global Health invites proposals from individuals or consultant teams with the experience and skills described above. Proposals should include the following:

- **Technical proposal**
 - Proposed methodology
 - Quality assurance
 - Data analysis plan
 - Activity schedule with clear timelines
 - Curriculum vitae of key personnel
- **Financial proposal**
 - Detailed costs in Malawi Kwacha i.e., travel, training, taxes, stationery etc.
- **Two references and two report samples of related work**

The deadline for submitting a proposal is **July 15, 2025**. Please email your proposal to procurementmalawi@seedglobalhealth.org. If you have questions or inquiries, please email: rmalirakwenda@seedglobalhealth.org (for inquiries only, do not submit your proposals to this email)

10. Proposal Criteria and Selection

Please note that applications will be reviewed on a rolling basis. Seed Global Health Malawi will assess the proposals based on technical and financial feasibility using the criteria below. Seed Global Health Malawi will select the individual who demonstrates the best overall value.

Seed Global Health reserves the right to accept or decline any submission at its discretion, without providing justification. Successful applicants will be contacted and unsuccessful applicants will be notified.

Category	Evaluation Aspects	Score
Overall Response	Completeness of submission and demonstrated understanding of the TOR/Task.	10
Experience	Depth and breadth of experience in similar projects, number of organizations worked with, project sizes, staffing per project, and client references	15
Key Personnel	Relevant qualifications and experience of key personnel.	15
Proposed Methodology	Programme management, evaluation methodology, monitoring and quality assurance process, Innovation approaches	35
Financial Proposal	Comprehensive financial plan detailing costs.	25
Maximum Points	TOTAL Points for Technical Proposal	100%