

BACKUP Health

General orientation and guidelines for Consultancy Mode applications

Overview

This paper supplements the [‘Guidelines for Project Mode Applications’](#) (pdf, 250 KB) and sets out the principles of applying for technical support under the BACKUP Health (referred to herein as BACKUP) Consultancy Mode. It is targeted at organisations and institutions that are considering applying for Consultancy Modes on a range of Global Fund processes at the country level. It describes eligibility for BACKUP support and the application process for Consultancy Modes and provides information regarding implementation, monitoring & evaluation and reporting.

BACKUP’s aim is to enable government and civil society partners to apply for and use Global Fund money, and to implement measures for controlling HIV, tuberculosis and malaria more effectively and sustainably. In its support measures, BACKUP seeks to increase the integration into the wider health system of the country-level governance, management and implementation of programmes financed by the Global Fund.

Flexibility, transparency and a partner-oriented focus based on demand characterise BACKUP’s approach. The programme advises and trains a wide range of partners, such as national coordinating committees, Global Fund grant recipients and networks of people, in how to manage activities and how to administer funds and material resources with full transparency.

The programme’s work centres on developing capacities in three intervention areas: Country Coordinating Mechanisms, Health Systems Strengthening, and Grant Management. In all three intervention areas, community involvement (which includes civil society and particularly key populations), human rights and gender aspects are considered as cross-cutting issues for promoting the meaningful engagement of all actors in Global Fund processes.

This document examines all key aspects and requirements for Consultancy Mode applications and is therefore essential reading for all those considering applying to BACKUP under this modality of support.

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BACKUP Health's intervention areas

Country Coordinating Mechanisms

Detailed information: [BACKUP intervention area: Country Coordinating Mechanism](#) (pdf, 147 KB)

The steering and oversight of Global Fund grants is crucial to guarantee the effective and efficient use of funds. Country Coordinating Mechanisms (CCMs) fulfil this central function and additionally ensure national ownership and participatory decision-making in the development of proposals to the Global Fund. To be able to apply for Global Fund grants, CCMs must comply with six eligibility requirements concerning good governance. BACKUP's assistance to CCMs includes consultancy support to facilitating Eligibility and Performance Assessments, preparing and implementing improvement plans, and strengthening the overall performance of CCMs and their secretariats. BACKUP also promotes the active engagement of civil society in CCM processes.

The aim of all these interventions is to enable CCMs to better fulfil their role of steering the application for grants and providing adequate support to the principal recipients implementing grants. Furthermore, BACKUP is supporting CCMs in their efforts to enhance health sector coordination and to integrate their activities more consistently. Hence, Consultancy Mode support will also be available for measures aiming at greater integration of CCM functions with wider health sector governance and oversight.

Health Systems Strengthening/Building Resilient and Sustainable Systems for Health

Detailed information: [BACKUP intervention area: Health Systems Strengthening/ Building Resilient and Sustainable Systems for Health](#) (pdf, 148 KB)

More than one third of Global Fund investments go into helping countries build resilient and sustainable systems for health that strengthen their ability to protect citizens from all diseases and to better respond to outbreaks. To ensure that Global Fund investments in health systems have the biggest impact possible, BACKUP provides technical assistance in the area of health systems strengthening by developing capacities e.g. on integrated service delivery, health information systems and data management or services targeted at key populations.

Grant Management

Detailed information: [BACKUP intervention area: Grant Management](#) (pdf, 130 KB)

Global Fund grants, from their disbursement to the implementation and delivery of actual services, involve a multitude of stakeholders. As such, successful grant management is key for ensuring the most effective use of Global Fund money. If countries are to put the money they acquire from the Global Fund to effective use, they first need to develop a range of expertise, from good financial management to service organisation. BACKUP's contribution to better grant management comprises consultancy support for developing risk management capacities (such as implementing risk mitigation plans) as well as on monitoring and evaluation, financial management, reporting, oversight, good governance, and advocacy for the rights and needs of key populations. These interventions help to maximise the impact of Global Fund grants, to ensure projects are implemented in accordance with contractual terms and conditions, and to reduce risks such as the misappropriation of funds.

BACKUP Health's cross-cutting themes

Community Systems Strengthening

The stigma and discrimination associated with disease can create barriers that make it more difficult to prevent further infections and provide care and support. Civil society organisations (CSOs), such as those supporting people living with HIV and AIDS,¹ often represent those most vulnerable to discrimination. BACKUP therefore regards its support as being related to human rights and the creation of empowering environments, especially for marginalised and/or criminalised groups.

The Global Fund integrates civil society in its processes by: encouraging/ensuring the latter's participation in CCMs as principal recipients, sub-recipients or sub-sub-recipients (reinforced through dual-track financing); advocacy; and membership of the Global Fund board. BACKUP interventions aim at strengthening civil society participation in these Global Fund processes and related functions. In particular, BACKUP supports CSOs to analyse, formulate and communicate the health-related needs of the people they represent, to actively engage in CCMs, country dialogues or relevant national working groups, and to point out opportunities for improving Global Fund processes. Furthermore, BACKUP contributes to fostering demand for quality services by strengthening community systems and thus enables the community to play a greater role in service design, delivery, monitoring and evaluation. As communities form the basis of a health system, their improved capacity to engage in Global Fund processes will have benefits for the community and district health committees and services that go beyond the scope of the three target diseases.

¹ This was formally adopted as a principle at the 1994 Paris AIDS Summit, where 42 countries declared the greater involvement of people living with HIV/AIDS to be critical to ethical and effective responses to the epidemic.

The Global Fund's approach to Community Systems Strengthening (CSS) focuses on capacity building, partnership building and ensuring sustainability. The goal of CSS as defined in the [Global Fund's CSS Framework](#) is to achieve improved health outcomes by developing the role of communities, CBOs and key affected populations. BACKUP strongly supports this CSS Framework and employs the Global Fund's definition of "key affected populations" to refer to vulnerable/ key populations. It is expected that the situation of these populations will improve if their interests are adequately represented and considered within Global Fund processes.

Key affected populations (KAP), people or communities are those who are most vulnerable to and affected by conditions such as malaria, tuberculosis and HIV. They are the most often marginalised and have the greatest difficulty achieving their rights to health. KAP include children, youth and adults affected by specific diseases such as HIV, tuberculosis or malaria; women and girls; men who have sex with men; injecting and other drug users; sex workers; people living in poverty; street children and out-of-school youth; prisoners; migrants and migrant labourers; people in conflict and post-conflict situations; refugees and displaced persons.²

Human rights

A human-rights-based approach to health and to addressing HIV, tuberculosis and malaria means integrating human rights norms and principles into the design, implementation, monitoring, and evaluation of disease programmes. These principles include human dignity, non-discrimination, transparency and accountability. A human-rights-based approach also means empowering vulnerable groups and key populations, ensuring their participation in decision-making processes that concern them, as well as incorporating accountability mechanisms they can access.

The Global Fund's funding model strongly recommends applicants to incorporate human rights programming in their concept notes. GIZ's 2013 Practitioner's Tool for Health and Human Rights³ illustrates how programmes can strengthen their orientation towards human rights.

Gender

Programmes with a gender-oriented approach contribute to gender equality and support equity in health and health care. In so doing, they protect human rights and contribute to the attainment of universal access and the Sustainable Development Goals. BACKUP therefore requests all partner organisations to consider ways to integrate gender equality in their proposal narrative and to design consultancies in a gender-sensitive manner. Consultancy Mode proposals that seek to address gender inequalities in greater depth are especially welcome.

It is important to note that 'gender' does not only refer to the status of women. BACKUP considers gender to be a cross-cutting issue that includes not just men and women, but also gender and sexual minorities. This includes men who have sex with men (MSM), bisexuals, lesbian women and gay men, transgender and intersex persons, among others.⁴

The Global Fund has adopted a Gender Equality Strategy⁵ that outlines how it is taking gender into consideration and what it expects of its applicants. At the country level, the Global Fund expects CCMs to strive to achieve gender parity in their membership and leadership, to adequately address gender in programme development and concept note submissions by conducting extensive and mandatory gender analysis, and to ensure gender-sensitive monitoring and evaluation with sex-disaggregated data. BACKUP's involvement in the process seeks to ensure that programmes are, as a minimum, gender sensitive⁶ and, if possible, gender transformative.⁷

² The Global Fund, Community Systems Strengthening Framework, revised edition, February 2014:
http://www.theglobalfund.org/documents/core/framework/Core_CSS_Framework_en

³ Practitioners' Tool: Health and Human Rights, 2013:
http://health.bmz.de/what_we_do/Gender_and_human_rights/Good_practices_and_tools/Practitioners_Tool_Health_and_Human_Rights/Practitioners_Tool_Health_and_Human_Rights.pdf

⁴ 'Transgender' is an inclusive term to describe people who have gender identities, expressions or behaviours not traditionally associated with their birth sex. 'Intersex' refers to persons born with atypical genital or reproductive anatomy who usually identify as male or female, although some may change their gender identity in the course of their development. For more details, visit
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2377288>

⁵ The Global Fund's Gender Equality Strategy is available at
http://www.theglobalfund.org/documents/publications/other/Publication_GenderEqualityStrategy_ActionPlan_en

⁶ This includes activities that recognise and respond to the different needs and constraints of individuals based on their gender and sexuality. They do little to change the larger contextual issues that lie at the root of gender inequities.

⁷ This includes activities that actively seek to build equitable social norms and structures within a broader context.

What modalities of Consultancy Mode support does BACKUP Health provide?

1. Consultancy Mode – Intervention Areas

BACKUP offers Consultancy Modes as a supplement to ongoing Project Modes in the three intervention areas of Country Coordinating Mechanisms, Health Systems Strengthening and Grant Management. This option excludes the stepping up of funding of ongoing projects supported by BACKUP under the Project Mode.

The Consultancy Mode provides an opportunity to assign one or several consultants to support CCMs, principal recipients and member organisations (especially those from civil society) during the Global Fund country dialogue, proposal / concept note development, and grant negotiation and/or implementation. Terms of reference must be defined in the application form.

Eligible countries* for the intervention areas CCM, HSS and Grant Management for applications submitted until 31 December 2016:	Sub-Saharan Africa	EECA	LAC
	Burkina Faso Cameroon Ethiopia Guinea Liberia	Malawi Rwanda South Africa Togo	Kyrgyzstan Peru
Duration:	July 2016 to March 2018		
Budget:	Up to EUR 80,000 per Consultancy Mode application		

* Applications from regional organisations are only possible in the intervention areas CCM (Regional CMs) and Grant Management (Regional PRs), and can only be accepted if at least one target country covered is eligible for BACKUP support.

2. Consultancy Mode – Flexible Support

Flexible support Consultancy Modes offer short-term, targeted support (similar to that delivered under the intervention areas) to meet the diverse technical support needs of Global Fund stakeholders. However, eligibility is not limited to the BACKUP intervention area countries stated above, but extends to all Global Fund partner countries. The support is provided in order to overcome bottlenecks impeding the work of Global Fund recipients and partners or threatening to block Global Fund processes. Flexible support may, for instance, be offered for:

- measures linked to any of the stages of the Global Fund process – from applying for grants to implementation, evaluation, monitoring, and risk mitigation;
- preparing for the next Global Fund disbursement or funding phase – i.e. helping principal recipients to fulfil the preconditions for disbursement.

Eligible countries:	Countries worldwide* with Global Fund allocation for the periods 2014-2016 or 2016-2018
Duration:	July 2016 to March 2018
Budget:	Up to EUR 80,000 per Consultancy Mode application

* Applications from organisations and institutions from EU member states are not accepted.

Application process for the Consultancy Mode

Eligibility

Who can apply?

The following stakeholders in the Global Fund's funding processes are eligible for BACKUP support:

- national or regional coordinating mechanisms;
- governments (e.g. ministries of health or national HIV/AIDS, tuberculosis or malaria programmes);
- national civil society organisations and in-country branches of international civil society organisations;
- private sector organisations.

Applications for the intervention area CCM can only be submitted by national or regional coordinating mechanisms. Applicants for the intervention area Grant Management need to fulfil the function of a principal recipient under the Global Fund. Applications from regional organisations are only possible in the intervention areas CCM (Regional CMs) and Grant Management (Regional PRs), and can only be accepted if at least one target country covered is eligible for BACKUP support in this intervention area. Though applications from Global Fund sub-recipients are not admissible, the latter are encouraged to develop a proposal together with their respective principal recipient. Organisations and institutions from EU member states are not eligible to submit applications. Furthermore, the applicant cannot be the same entity as the service provider (e.g. consultancy firm).

Formal eligibility requirements

Consultancy Modes may be processed via different types of contracts. If the proposed consultancy requires a contract with the applicant, the contracting partner must be registered as a legal entity under national law and, if applicable, be registered as an NGO. In such cases, GIZ may also conduct a commercial suitability review involving either the responsible GIZ country office or external auditors. At the contracting stage, BACKUP may request applicants to complete the form '[Self-disclosure for the commercial suitability review](#)' (docx, 96 KB) and to submit copies of the required documents/certificates.

In cases where CCMs are not formally registered as a legal entity, they cannot usually be directly contracted by GIZ. However, these CCMs can put forward an alternative contracting partner that is registered as a legal entity under national law. In such cases, please ensure to provide the name and full address of the alternative contracting partner as well as scanned copies of the corresponding registration documents.

Before submitting their proposals, applicants must secure the endorsement of the CCM of the country in which the intervention is planned. This is important to ensure the coordination and alignment of technical support interventions.

How to apply

Eligible stakeholders can apply for support by submitting their completed Consultancy Mode application form for the intervention areas Country Coordinating Mechanisms ([Download](#), pdf, 147 KB), Health Systems Strengthening ([Download](#), pdf, 148 KB), Grant Management ([Download](#), pdf, 130 KB), or Flexible Support to backup@giz.de. The applicant can propose one or several consultants for each position foreseen for the assignment. In this case, the applicant submits the corresponding CV and the completed description of the selection process for each position ([Documentation of selection process for proposed consultants](#), docx, 34 KB) together with the application form. BACKUP will consider these proposals in the selection process, and will make the final selection of consultants in accordance with the relevant contracting rules when procuring services and work services.

If a country wishes to apply for more than one intervention area or modality of Consultancy Mode support, separate applications for each intervention area or modality of Consultancy Mode support should be completed, even if they are submitted by the same applicant. Should more than one applicant per country be interested in Consultancy Mode – Intervention Areas support on the Health Systems Strengthening and Grant Management, applications will be accepted from all interested organisations. For the Country Coordinating Mechanism intervention area, however, the application can only be submitted by CCM representatives.

Applications can be submitted until 31 December 2016. The review and contracting process is outlined in the next chapter and takes approximately one month from the submission of the application to contract development. If the planned number of applications is received before a quarter ends, the application procedure will be temporarily closed. A corresponding announcement will appear one week in advance on the BACKUP website. We therefore recommend that applicants regularly check the website – especially before submitting an application.

Budget ceiling

For Consultancy Modes – Intervention Areas and Consultancy Modes – Flexible Support the maximum amount is EUR 80,000.

Duration

Applications for Consultancy Mode support should focus on short to medium-term measures (overall timeframe usually up to 6, maximum 12 months). Depending on the actual date the contracts are signed, all planned activities must be implemented by 31 March 2018 at the very latest. If the contract expires on 31 March 2018, no-cost extensions will not be possible.

The technical support on offer

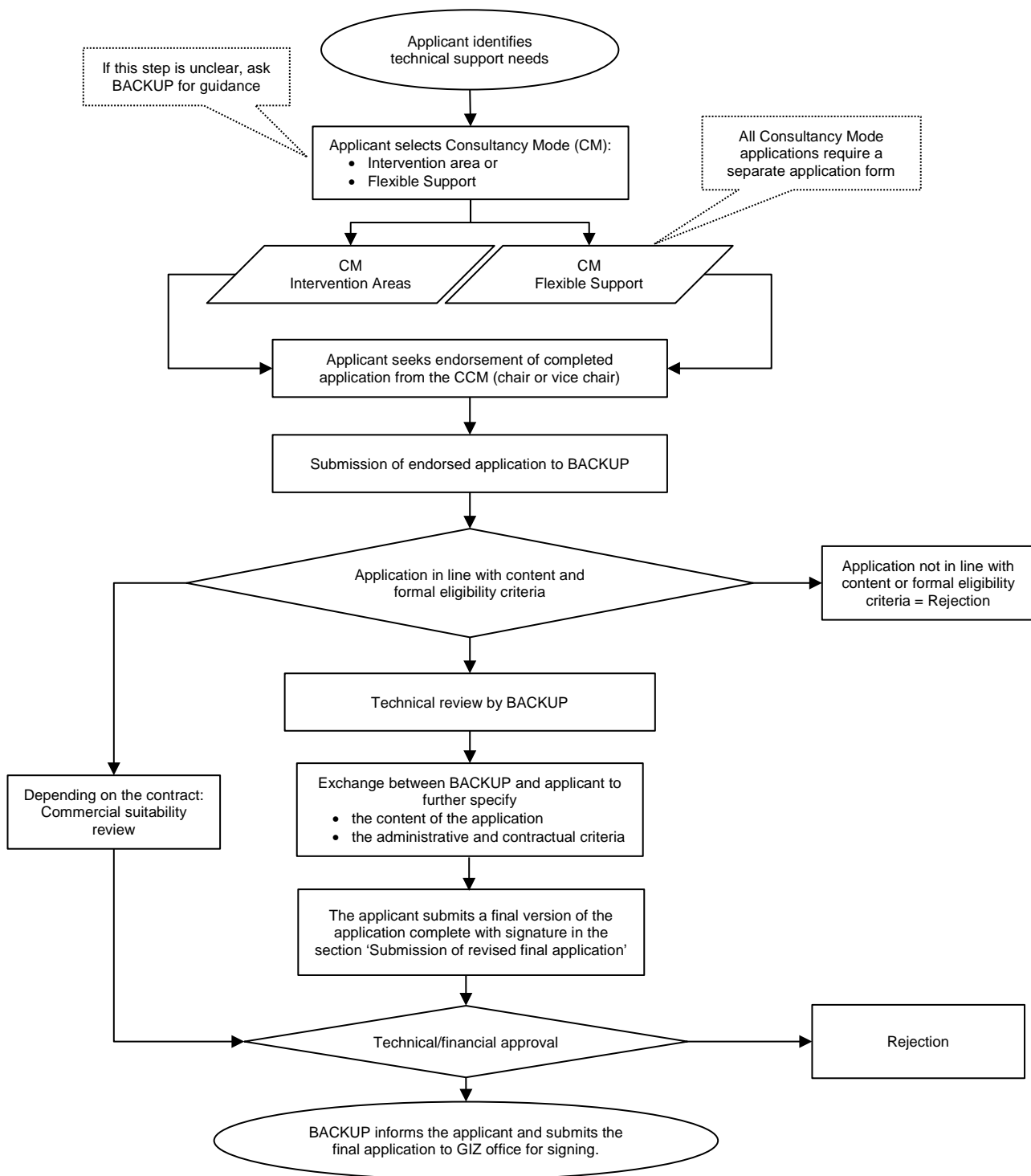
Consultancies should be designed according to beneficiaries' needs, should be structured with clear objectives and indicators, and may for example include training, mentoring, reviews, studies, etc.

Questions and answers during the application period

All questions concerning applications can be addressed to backup@giz.de at any time and will be answered individually.

Application and review process

Overview of the application and review process



Selection criteria

Formal selection criteria (see the section on eligibility on page 4).

Organisational and operational requirements

The applicant body's organisational and operational capacity to implement the proposed intervention must match the objectives and scope of the proposed intervention.

- Capacity for implementation:** The applicant is well positioned to lead and/or implement the proposed intervention. The organisation has the status required of applicants (key stakeholder; in a position of influence and/or authority), has technical and management capacity, and is prepared for collaboration and networking. The governance structures, past performance and capacity of the applicant organisation are favourable to the implementation of the proposed activities.

- **Sustainability:** This includes both the sustainability of the supported programme component (e.g. the development of an M&E system integrated into the national health and management information systems) and the sustainability of the support activity itself (e.g. support to civil society organisations and CCM secretariats, particularly when the proposed intervention also covers running costs). The latter requires the development of appropriate business plans or exit strategies.
- **Assumptions and risks:** The proposal outlines the assumptions and risks that could jeopardise the efficient and effective implementation of the intervention.

Selection criteria relating to content

- **Areas of support:** BACKUP will support projects in the three intervention areas Country Coordinating Mechanisms, Health Systems Strengthening, and Grant Management as well as under the Flexible Support modality, which aims to resolve bottleneck situations in Global Fund processes.
- **Cross-cutting issues:** BACKUP's cross-cutting issues (community systems strengthening, human rights, and gender) will be taken into consideration when evaluating Consultancy Mode applications. At least one of the three cross-cutting issues will have to form an explicit part of the project proposal. The inclusion of the cross-cutting issues will have to be evident not only in the narrative, but also in the monitoring and the budgeting of the proposal.

Contracting

Once an application has been approved, the GIZ department tasked with managing the contract will set out the next steps to be taken. This process can take several weeks.

At the contracting stage, BACKUP may require the applicant to send the original of the signed application form as well as certified copies of all required original documents (e.g. formal registration as a legal entity under national law).

To receive the funds allocated for the consulting assignment once the contract is signed, the payment modalities specified in the contract must be followed.

Monitoring and evaluation, and reporting

Monitoring and evaluation (M&E) serve different but complementary purposes:

- **Monitoring** refers to routine efforts to track and analyse the implementation of a project to assess whether the inputs, activities and outputs are unfolding as planned.
- **Evaluations**, by contrast, are systematic inquiries conducted episodically to determine the merit or worth of an intervention in terms of its relevance, effectiveness, efficiency, sustainability and impact (for further details, see the OECD DAC Criteria⁸). Evaluations assess the achievements of a project in relation to a set of defined objectives and provide strategic information that can be used to improve project implementation and to inform future decisions about resource allocation. M&E needs to be an integral part of the planning process.

Applicants are required to define the **standards** that will guide the performance of specific activities **and** need to define **indicators** to measure changes (outcomes) and achievements (outputs). With regard to **outcomes** applicants should ask themselves: 'At the end of this intervention, what would we like to have changed and how do we propose to measure these changes?' With regard to **outputs**, the guiding question is: 'In the framework of this intervention, what would we like to achieve and how do we want to measure these achievements?' Beyond this, applicants should also define the **impact** of their intervention: 'What are the effects, i.e. long-term changes that we expect to observe, and what might be unintended, indirect effects? How do we measure them?'

In order to combine all the information, BACKUP developed an M&E matrix that comprises the intervention's level (in terms of outcome, output and activity), the chosen indicators and respective milestones, the means of verification, and possible assumptions and risks ([Application form – Consultancy Mode](#), docx, 58 KB). This serves to illustrate the project's internal logic and process to both the applicant and BACKUP. Achieved milestones can also be published in BACKUP's newsletter, which is issued quarterly.

In the course of the consulting assignment, data must be collected and analysed. To do this, the applicant can draw on a range of approaches for verifying progress made against indicators (e.g. project statistics, the Global Fund's website and grant performance reports, annual reports), the choice of which wholly depends on the outcome(s) sought. Alongside identifying their own indicators and collecting and analysing relevant data, applicants should base their M&E activities for each intervention area around BACKUP's results framework.

⁸ OECD Development Assistance Committee's Criteria for Evaluating Development Assistance: <http://www.oecd.org/dac/evaluation/daccriteriaforevaluatingdevelopmentassistance.htm>

BACKUP's monitoring missions

BACKUP's M&E approach involves monitoring missions to countries that have received BACKUP support in order to:

- take a critical look at the performance of the BACKUP team during the application process and at its administrative and financial procedures;
- review the process, outputs and results of BACKUP-supported interventions at the country level;
- gather the 'stories' behind the data that have been collected through other BACKUP monitoring tools (e.g. reports, standardised surveys, etc.);
- enable the BACKUP technical team to become more conversant with the realities of Global Fund technical support on the ground.

The results of the monitoring visit will be used to help BACKUP improve its strategic decision-making regarding the provision of technical support to Global Fund processes at the country level.

Reporting system

Applicants and the consultant will report independently on the results achieved ([Applicant report – Consultancy Mode](#), docx, 52 KB; [Consultant report – Consultancy Mode](#), docx, 47 KB) and submit the documentation agreed in the application promptly after the end of the consulting assignment. Additional information such as unintended positive or negative results, obstacles, lessons learned, best practices and openings for publically disseminating the results achieved should also be reported. Reports and documents must be submitted to backup@giz.de without any further request being issued by BACKUP.

Contact

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backup@giz.de
www.giz.de/backup

As a federally owned enterprise, the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH supports the German Government in achieving its objectives in the field of international cooperation for sustainable development. Most of GIZ's activities are commissioned by the German Federal Ministry for Economic Cooperation and Development (BMZ). GIZ also operates on behalf of other German ministries as well as German federal states and municipalities, and public and private sector clients both in Germany and abroad. These include the governments of other countries, the European Commission, the United Nations, and the World Bank. GIZ's registered offices are in Bonn and Eschborn. BACKUP Health is funded by BMZ.

Published by Deutsche Gesellschaft für
Internationale Zusammenarbeit (GIZ) GmbH
Registered offices Bonn and Eschborn, Germany

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As at August 2016

GIZ is responsible for the content of this publication.

On behalf of Federal Ministry for Economic
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