

Terms of Reference

Job title:	ANTIMICROBIAL RESISTANCE (AMR) NEEDS ASSESSMENT IN UKRAINIAN HEALTHCARE FACILITIES
Position based at:	Ukraine
Statut & duration	Consultancy
Supervision	Head of Mission Ukraine
Desired starting date	June 2025

DESCRIPTION OF THE ASSOCIATION

La Chaîne de l'Espoir (CDE) is an international Non-Governmental Organization (NGO) founded in 1994. Its mission is to strengthen health systems to give everyone, especially children, the same chances of survival and development.

We work in 28 countries with a comprehensive approach, focusing on children, mothers and disadvantaged communities:

- Prevention and screening from an early age, particularly through school health programs.
- Care and surgery, to meet the most urgent needs of children and their mothers.
- Strengthening the medical and surgical workforce thanks to our international network of experts.
- Construction and equipment of hospital structures adapted to local needs.

Since March 2022, CDE has been implementing a project to support the Ukrainian health system to improve medical and surgical care for victims of the war and patients in general, in collaboration with the Ministry of Health (MoH), the Health Cluster co-led by the World Health Organization (WHO), and the health authorities at oblast levels. The initiative, co-funded by the Centre de Crise et de Soutien (CDCS) of the French Ministry of Europe and Foreign Affairs, is a response to assessments conducted by CDE's medical and biomedical team in coordination with relevant stakeholders.

Since 2024, CDE has developed a comprehensive strategy to enhance the quality of specialized medical care in orthopaedics, traumatology, and paediatric cardiology. This program aims to address the identified gaps in medical services, focusing on improving access to surgical materials and biomedical equipment, providing advanced training for medical professionals in orthopaedic advanced techniques and severe trauma cases management, and leveraging telemedicine for remote cardiology diagnostics and consultations.

The conflict in Ukraine has severely disrupted the nation's healthcare infrastructure, leading to a significant increase in antimicrobial-resistant (AMR) infections. This escalation has had profound effects on patient outcomes, notably contributing to higher rates of morbidity and mortality to civilians and war-wounded casualties, such as amputations among injured individuals. In response to this pressing issue, a comprehensive assessment of IPC needs across Ukrainian healthcare facilities is proposed. In 2025-2026, CDE plans to continue its existing activities, expanding its remit within hospitals and the impact of its specialist and surgical interventions.

POSITION AND OBJECTIVES

War-related conditions in Ukraine, such as mass casualties, damaged infrastructure, and overwhelmed hospitals, have accelerated the spread of infections and multidrug-resistant organisms. These infections complicate surgical recovery, drive the need for amputations, and reduce survival rates among the war-wounded. Infection prevention and control (IPC) is a key defense against AMR.

This consultancy will be conducted under the supervision of the Head of Mission Ukraine and in close collaboration with CDE's medical and technical teams, both in-country and at headquarters. It aims to assess current IPC practices and AMR challenges across Ukrainian healthcare facilities, with a focus on institutions providing trauma, surgical, and post-operative care.

The consultant will need to be present in Ukraine or have a network on in country to support their assessments. The consultant will identify gaps, risks, and opportunities for targeted interventions, and propose practical, scalable recommendations for CDE to incorporate into its strategic programming. Where possible, the consultant is encouraged to include quantifiable assessment metrics—such as the WHO Infection Prevention and Control Assessment Framework (IPCAF) scores or AWaRe antibiotic consumption per 100 patient-days—to establish baselines and support the future monitoring of intervention impact.

The consultancy has three core objectives:

- **Analysis of Infection Dynamics:** Investigate and understand infection patterns across the trauma and surgical pathway, including the sources and contributing factors behind AMR transmission in Ukrainian hospitals.
- **Intervention Identification:** Highlight high-impact, evidence-based IPC and antimicrobial stewardship (AMS) interventions that CDE can feasibly integrate into current or future operations. To support strategic decision-making, the consultant is encouraged to establish a prioritization framework, such as a Benefit vs. Feasibility matrix (2x2 grid), to categorize interventions. This can help identify quick wins (e.g., availability of alcohol-based hand-rub at incision areas) as well as longer-term, resource-intensive interventions (e.g., microbiology laboratory upgrades).
- **Partnership Development:** Identify and engage with national and international stakeholders committed to addressing AMR, fostering opportunities for coordination and shared action.

SCOPE OF WORK AND METHODOLOGY

The following elements should be taken into account in the consultant's methodological proposal. These are indicative activities and not an exhaustive list; applicants are encouraged to adapt, expand, or refine them based on their expertise, contextual understanding, and proposed approach to meeting the consultancy's objectives.

a. Document/Data review and benchmarking

- Conduct a comprehensive review of existing literature, surveillance data, national IPC/AMR strategies, and relevant reports from MoH, WHO, and other partners.
- Triangulate findings from multiple sources and compare practices with EU and international IPC standards.

b. Field Research and Stakeholder Engagement

- Carry out primary data collection in selected healthcare facilities along the trauma care pathway—from emergency/field hospitals to rehabilitation centres. The consultant should aim to include at least six facilities representing a diversity of care levels, such as tertiary trauma centres, regional hospitals, and rehabilitation units. A purposive (judgmental)

sampling strategy should be used, selecting sites based on criteria such as patient volume and documented prevalence of multidrug-resistant (MDR) infections.

- Conduct key informant interviews with:
 - Medical and IPC personnel in hospitals
 - Representatives of the Ministry of Health
 - WHO country office and relevant humanitarian actors
 - International AMR/IPC experts

c. Operational Assessment

- Evaluate IPC policy implementation on the ground, including compliance, availability of materials, human resource capacity, and existing training systems.
- Identify barriers and enablers to effective IPC and AMS implementation in the field.

DELIVERABLES

Applicants should consider the following deliverables as indicative. The final scope and format of deliverables may be adapted in the consultant's technical proposal, based on their methodological approach and operational feasibility. Proposals offering innovative or value-added outputs will be considered favorably.

1. A detailed IPC centralized database covering key and diverse Ukrainian hospitals
2. A comprehensive report would highlight key findings and recommendations of potential interventions to address the most critical aspects of the fight against infection and AMR including suggestions where CDE best invest their time and resources to maximize any potential response. The report should conclude with SMART recommendations (Specific, Measurable, Achievable, Relevant, and Time-bound), accompanied by indicative cost estimates for each intervention.
 - List of participating IPC professionals and facilities, including their roles and identified training needs to inform future capacity-building strategies
 - IPC and AMS Programme Structure
 - IPC Guidelines and SOPs
 - Education and Training
 - Healthcare Associated Infections
 - Environment, Materials and Equipment
 - War-related disruptions
 - Waste Management
 - Environmental Hygiene
 - Post-operative procedures, including wound-care
3. An analyse of key stakeholders, contact persons, interested external agencies and governments that are key to support this drive against infection.

PERSONAL REQUIREMENTS

Education:

- Advanced University degree (Master's degree) in health sector
- A Bachelor's degree preferably in the above fields with additional 5 years of relevant experience, and in particular in health sector, may be considered as equivalent.

Experiences and skills:

- Extensive knowledge and network within the Ukrainian healthcare system
- Minimum 5 years of experience in hospital management/ NGO healthcare project management
- Knowledge of technical and regulatory standards applied to hospitals.
- Experience in program and project design, feasibility studies, and technical assessments. Experience in an international NGO in different contexts will be an asset
- Analytical and organizational skills/ statistical data management
- Experience in collaborative negotiation with local health authorities and other health actors
- Knowledge of Microsoft package is mandatory
- Full working knowledge in written and oral English is required

APPLICATION GUIDELINES

Interested candidates are invited to submit a consultancy proposal that includes the following elements:

- Technical Proposal: outlining the proposed methodology, tools, and approach to achieving the objectives, including any adaptations to the suggested activities and deliverables.
- Work Plan: with key milestones, timeline, and availability.
- Financial Offer: including a detailed budget covering consultancy fees, travel, accommodation, and other relevant costs.

Proposals should be submitted by email to info.ua@chainedelespoir.org no later than 6th June 2025.