

EVALUATION TERMS OF REFERENCE (TOR)

Project title: Vietnam Child Eye Care Project and Better Eyes for Better Education Project

Country: Viet Nam

Date: 1st April 2019

Introduction

The Fred Hollows Foundation (The Foundation) is a secular non-profit public health organisation based in Australia, which was founded in 1992 by eminent eye surgeon Professor Fred Hollows. The Foundation focuses on strengthening eye health systems and the treatment and prevention of avoidable blindness caused by cataract, trachoma, diabetic retinopathy, and refractive error. The Foundation operates in more than 20 countries across Australia, the Pacific, South and South East Asia, and Africa. The Foundation was named The Australian Charity of the Year 2013 in the inaugural Australian Charity Awards.

The Foundation began working in Vietnam in 1992. Today it is one of the leading eye care international non-governmental organisations (INGO) in Vietnam. The Foundation works in partnership with the Government; Vietnam National Institute of Ophthalmology (VNIO); medical universities; more than 20 provincial eye care service providers and other INGOs who are working in Vietnam both in eye health or other fields; IAPB; WHO in Vietnam; the Australian government aid program; Seeing is Believing program (SiB) and Standard Chartered Bank (SCB).

The Vietnam program has developed a comprehensive eye care (CEC) model which is replicated in The Foundation's operations worldwide. This approach supports surgery and treatment for patients, training for medical staff across the health system, provision of infrastructure and medical equipment, community awareness campaigns and advocacy with policymakers. The Foundation in Vietnam is increasingly working with children, addressing the major cause of visual impairment, including refractive errors.

Background Information

Uncorrected refractive error, particularly myopia, among secondary school children in Vietnam is a major public health problem. Visual impairment, especially uncorrected refractive error, impacts a child's development and can result in delayed learning and low rates of educational attainment. However, school eye health is currently not a focus and less invested in the existing school health program.

Since 2016, The Fred Hollows Foundation Vietnam (FHFVN) and its partners have developed and implemented the Vietnam Child Eye Care and Better Eyes for Better Education projects which aim to improve eye health among Vietnamese school children. Although the two projects have different



project level objectives, they were both designed to promote eye health of the school children. Both projects were implemented in the same provinces through the same partners.

a. The Vietnam Child Eye Care (VNCEC) Project:

This project is designed to support the integration of health and education sectors in order to improve the eye health of children aged 6-15 through development and adoption of national school eye screening guidelines, supported by design of tools and delivery of training in target provinces. The project are being implemented in three provinces (Hai Duong, Tien Giang province and Da Nang city) representative of the three different regions in Vietnam, and findings from in-built research components will be used for improvement and for informing decision-making for national adoption of school eye health policies and guidelines.

As designed, the National School Eye Care Guideline was developed and approved by the General Department of Preventive Medicine (GDPM), Ministry of Health (MoH) in 2017. This guideline has sessions on: eye structure and vision; eye screening methods at school to detect refractive error and other eye diseases; treatment and referral provision; school IEC/BCC activities delivering; eye care questions and answers. This guideline was used as a key document for training to all school nurses, school teachers and school youth union members of the project schools in Hai Duong, Da Nang and Tien Giang.

By the end of 2018, 939,067 school students were provided IEC/BCC and 700,517 school students having visual acuity screened by the trained school teachers. 18,311 spectacles were also provided to school students with refractive error. The key findings of the VNCEC project baseline (March 2017) and end-line surveys (November 2018) showed that in spite of the project interventions after one and a half year, the prevalence of refractive error in projected areas is still increased from 44.27% to 49.02% in Da Nang, 6.42% to 7.86% in Tien Giang, while it was slightly reduced from 35.60% to 32.53% in Hai Duong province. It was also reported that the knowledge, attitude and practices on eye care of students, their parents at the end-line was increasing as compared with the baseline. The project also completed the mid-term project review, documentation of school child eye care model and shared in the national advocacy workshops and other program countries.

b. The Better Eyes for Better Education (BEBE) Project:

This project aims to encourage healthy eye care practices and behaviour among Vietnamese school children. The project, in partnership with the MoET, and with technical support from the MoH, will support the development of an eye care training curriculum, teaching modules and training materials for primary and secondary teachers; pilot the curriculum in 3 provinces (Hai Duong, Tien Giang provinces and Da Nang city); and advocate for national application of the curriculum in all primary and secondary schools (grades 1-9) in Vietnam. This school eye health curriculum-oriented project is linked to the VNCEC project that focuses on the development and adoption of a national school eye screening guideline, with piloting to take place in the same provinces.

In the last three years, in spite of delaying in project approval and implementation, the teaching curriculum and materials (students and teacher books for primary and secondary education) were officially approved by the Ministry of Education and Training (MoET) in June 2018 and are being tested in in three project locations. This great project achievement at ministry level demonstrated that FHFVN successfully advocated for the integration of eye care into primary and secondary schools in Viet Nam. Following to this decision, MOET specialists conducted training on the teaching



curriculum and material using for 227 primary and secondary teachers and education staff in three project location. These teachers then trained 8,011 primary and secondary school students on eye care. MoET specialists also conducted monitoring trips to 8 primary and secondary schools in project areas and provided coaching for teachers in schools where they visited. Monitoring forms were used to assess eye care knowledge of 185 students and 82 teachers after training. After that, 3 provincial workshops on training materials introduction were held in these project areas. Currently, the second revision of teaching curriculum completed, MOET specialists are conducting Train of Trainers (ToT) for core teachers in Hai Duong, Da Nang and Tien Giang. It is expected that these trained trainers will conduct follow up training for all school teachers in April 2019 and then school teacher conduct training for all school students in May 2019

	a. The Vietnam Child Eye Care Project (VNCEC)	b. The Better Eyes for Better Education Project (BEBE)
Project duration	1 January 2016 - 31 December 2019 (included one year extension)	1 September 2016 – 31 December 2019 (included 6 months extension)
Project donor	<ul style="list-style-type: none"> • Standard Chartered Bank via The Seeing is Believing Initiative (80% of the project budget) • FHF (20% of the project budget) 	<ul style="list-style-type: none"> • Australian Department of Foreign Affairs and Trade • FHF
Project partners	<ul style="list-style-type: none"> • General Department of Preventive Medicine (GDPM) of the Ministry of Health (MoH) • The Department of Student Affairs (DSA) – an Agency of Ministry of Education and Training (MoET) • Provincial Departments of Education Training of Hai Duong, Da Nang and Tien Giang 	<ul style="list-style-type: none"> • Projects Management Board – MOET. • Provincial Departments of Education Training of Hai Duong, Da Nang and Tien Giang. • Project technical groups: <ul style="list-style-type: none"> - General Department of Preventive Medicine (GDPM) of the Ministry of Health (MoH). - The Department of Student Affairs (DSA) – an Agency of Ministry of Education and Training (MoET) - Department of Physical Education – MOET. - Department of Primary Education – MOET. - Department of Secondary Education-MOET.
Project goal	National adoption of School Eye Health guidelines/policies endorsed by the MoH and MoET to achieve the sustainable	To promote healthy eye care practices and prevent visual impairment (VI) among primary and secondary school children through integration of eye health



	reduction of visual impairment in school children in Vietnam.	curriculum into the School Health Program in Vietnam.
Objectives	<p>Objective 1: To improve policy coordination between education and health sectors in support of a national school eye health program for children.</p> <p>Objective 2: To strengthen school staff and eye health personnel capacity to deliver eye care services for school children.</p> <p>Objective 3: To improve quality of and increase access to eye care services for children.</p> <p>Objective 4: To develop a children’s eye health monitoring system to inform increased government and global commitment to resourcing quality school eye health programs.</p> <p>Objective 5: To enhance eye care awareness for children, parents and teachers to support sustainable reduction of visual impairment in communities.</p>	<p>Project purpose: High quality eye health curricula and training materials for use in primary and secondary schools in three pilot provinces; and contributing to best practice models to inform national level child eye health policy and strategy.</p> <p>Outcome 1: Enhanced government capacity to effectively plan and design a high-quality child eye health education program in schools.</p> <p>Outcome 2: Strengthened knowledge and skills of education personnel to provide eye health education to students.</p> <p>Outcome 3: Integrated school eye health curriculum into the National School Health Program to prevent VI in primary and secondary school children.</p>

Purpose of the evaluation

This is a combined final (summative) evaluation of the Vietnam Child Eye Care Project and Better Eyes for Better Education Project. The projects’ design anticipated an independent evaluation at the close of the projects to produce evidence on effectiveness, relevance, efficiency, impact and sustainability of the projects to meet the information needs of donors (the Standard Chartered Bank and Australian Department of Foreign Affairs and Trade (DFAT)).

The purposes of this final evaluation (FE) are:

- 1) To consider what factors have most contributed to the effectiveness (i), relevance (ii) and efficiency (iii) of these projects, and what areas of weakness have impeded progress. Considerations of the management (iv) and partnership and community (v) aspects in support of project implementation.
- 2) To assess the sustainability (vi) of the work that has been done so far and provide recommendations to local stakeholders about what needs to be done to consolidate/continue any gains made through these projects.

The evaluation is intended to meet the needs of the above donors and the following users:



- FHF office in Vietnam: draw lessons that will inform the decisions on design and development of future projects in Vietnam.
- FHF Development Effectiveness team: to provide information about what has and what has not worked, and why in order to inform other child eye care projects supported by The Foundation.
- The Ministry of Education and Training and Ministry of Health: may use the outcomes of the evaluation for annual planning and resource allocation to support the nationwide school eye health program upon the completion of the projects.

Evaluation scope and key questions

The final evaluation will assess (i) the effectiveness, (ii) relevance, (iii) efficiency of the outputs and outcomes to the goal and objectives of the VNCEC and BEBE projects; (iv) management and (v) partnership and community aspects in support of project implementation; assess (vi) the long term impact and sustainability of the projects, the value of the projects' results for the local implementing partners and the project beneficiaries (school students, teachers). The evaluation will come up with practical and specific recommendations to the project stakeholders and FHF. The evaluation will be conducted within 27 days between July and November 2019 including site visits to the national project partners (GDPM, DSA) in Ha Noi and two of the three project provinces (which will be selected by the consultant).

The final evaluation should answer the following key evaluation questions with evidences provided:

	a. The Vietnam Child Eye Care Project (VNCEC)	b. The Better Eyes for Better Education Project (BEBE)
Relevance	1. To what extent have the project objectives remained consistent with the beneficiaries' requirements, local needs, national and provincial blindness prevention plans and capacity at all levels?	1. To what extent have the project objectives remained consistent with the beneficiaries' requirements, local needs, national and provincial blindness prevention plans and capacity at all levels?
	2. How appropriate was the project's design for meeting the eye health needs of marginalised communities and specific target groups – education managers and students, and were the identified barriers to access addressed?	2. How appropriate was the project's design for meeting the eye health needs of marginalised communities, and were the identified barriers to access addressed?
	3. To what extent were teachers, school nurses, students and their parents involved in the project?	
	4. How strong is the government's commitment towards implementing school eye health program?	3. How strong is the government commitment towards implementing school eye health program?



Effectiveness	5. What are the changes in eye care knowledge, attitude and practices among school children, parents and teachers in target provinces as a result of the project? Has there been attitudinal changes towards visual impairment? Have there been changes in eye health awareness? (Refer the baseline and end-line surveys which included the Knowledge – Attitude – Practice and visual impairment assessment)	4. What have been the changes in eye care knowledge, attitude and practices among school children, parents and teachers in target provinces as a result of the project?
	6. To what extent has the project improved the quality of and increased access to eye care services for children?	
	7. To what extent has the children eye health monitoring system increased government and global commitment to resourcing quality school eye health programs? (refer the Mid-term report).	
	8. Are the school eye care guidelines effectively used and do they make an impact on awareness raising and reduction of visual impairment in students?	
Efficiency	9. Have the objectives of the project been completed on time and to budget? If not, what have been the reasons?	5. Have the objectives of the project been completed on time and to budget? If not, what have been the reasons?
	10. Are there any alternative approaches that could have been employed to reach the desired projects outcomes/objectives? Does the current projects approach represent a more efficient use of resources, compared to alternatives?	6. Are there any alternative approaches that could have been employed to reach the desired projects' outcomes/objectives? Does the current projects approach represent a more efficient use of resources, compared to alternatives?
		7. How cost-effective is the school eye health education model in target provinces after the completion of the project?
Management	11. To what extent did the project management procedures support project implementation (including the effectiveness of project monitoring and	



	reporting systems, project planning and financial management)?	
Sustainability	12. To what extent have the key project partners (MoH and MOET) demonstrated ownership of each of the project outcomes and a commitment to sustaining project outcomes beyond the life of the project?	
	13. What factors contribute to sustainability of eye health services in schools, and how can eye health services be continued after the project ends?	8. What factors contribute to sustainability of eye health services in schools, and how can eye health services be continued after the project ends?
Partnership and community aspects	14. How well is the coordination between education and health sectors in support of managing the school eye health service and education, and how did this support the implementation of planned activities? (refer the Mid-term report)	9. How well is the coordination between education and health sectors in support of managing the school eye health service and education, and how did this support the implementation of planned activities?

Approach

The evaluation will be led by a contracted consultant or an external agency to the FHFVN program. It is suggested that the evaluation adopts a participatory approach to involve key stakeholders in the process. This will foster a culture of learning through seeking to produce information about the projects' achievements and lessons learnt that is of value to stakeholders.

The project team from FHFVN will provide with necessary support to provide context and documentation, and will coordinate the field visit schedule.

The evaluation should include the following:

- Desk review of all relevant project documentation and other materials such as the projects' implementation plans (PIP), annual work plans, monitoring and evaluation frameworks, project and program reports, VISION 2020 program guidelines, any commissioned research findings (e.g. baseline and end-line surveys of VNCEC project, the cluster randomised control trial (cRCT) research of BEBE project and Vietnam school health policy research), policy documents and national and provincial level strategy documents (to be compiled and provided by FHFVN).
- Interviews and discussions with relevant personnel from FHFVN, national project partners (GDPM, DSA) and other relevant stakeholders (technical group members).
- Site visits to selected partner DoETs, including discussions with education and health staff.
- Site visits to selected communities, including discussions with Commune Health Workers, school health personnel and students.



- Processing and analysis of data, preparation of key findings and recommendations for presentation to FHFVN.
- Brief verbal reporting after field trips to FHFVN Senior Program Manager to present lessons learnt, findings and recommendations.
- Submission of a final evaluation report, reflecting comments and feedback received from selected staff from FHFVN.

Deliverables

The evaluation team leader will produce the following documents:

- The evaluation plan (VNCEC and BEBE combined): The evaluation plan will elaborate on this ToR and will represent the agreement between the consultant and FHFVN on how the evaluation will be conducted based on the FHF evaluation plan template.
- Presentation of initial findings and recommendations (VNCEC and BEBE combined): to be presented to the FHFVN Senior Program Manager and project team for validation and discussion, prior to commencing the evaluation report.
- The evaluation report (VNCEC and BEBE combined, with the findings and discussions written based on each project objectives): The production of this report will include facilitating and incorporating comments, and feedback from the evaluation team members and project partners. The final report (both in English and Vietnamese versions), following initial feedback from FHFVN, the East Asia Regional team, the M&E team and the Grants Coordinator, will be submitted to FHFVN about six weeks after the field work ends at the latest.
- A PowerPoint summary report (VNCEC and BEBE combined) to support dissemination of findings to stakeholders.

FHFVN will be responsible for subsequent sharing of the report and its recommendations with relevant national stakeholders in Vietnam.

Schedule

FHFVN will enter into a contract for services with the Evaluation Team Leader. The Evaluation Team Leader will be required to undertake the following tasks within 27 working days between July and November 2019 as per the following tentative schedule:

Activities	Duration	Person in charge
Desk Review of Project Documentation	4 days (July 2019)	Evaluation Team Leader
Evaluation Plan Production, including phone/email consultation with FHFVN on design of evaluation plan	2 days (End of July 2019)	Evaluation Team Leader and core evaluation team members
Field work preparation. Discussion and agreement between FHFVN staff and consultant of data and information collecting methods.	1 day (August 2019)	Evaluation Team Leader and core evaluation team members



Activities	Duration	Person in charge
Field review and consultations, excluding travelling days (discussion, interview, meeting with stakeholders, project partners and projects' beneficiaries)	8 days, mid-September 2019	All evaluation team
Analysis of data collected from interviews and consultations, including documenting key findings and recommendations	4 days (Sep-Oct 2019)	Evaluation Team Leader and core FHFVN evaluation team members
Presentation of findings to FHFVN Senior Program Manager and project team for validation and discussion of findings	0.5 days (October 2019)	Evaluation Team Leader
Final report production	5 days (October)	Evaluation Team Leader
Sign off, including incorporation of feedback from key stakeholders	2.5 days (November 2019)	Evaluation Team Leader, FHFVN, East Asia Regional Team, Grants Coordinator
Total	27 days	

Evaluation team & qualifications

The evaluation team will comprise one external consultant, one project manager from FHFVN office with support from project coordinator and a member of the Provincial Management Board (PMB) in each province/city. The external consultant will act as the Team Leader and is responsible for the planning and delivery of the evaluation, and reports and recommendations. The project team of FHFVN will provide necessary support to provide context, documentation and will coordinate the field visit schedule.

External consultant

The external consultant should have the following skills:

- At least 7-10 years of team leader experience of project evaluation.
- Knowledge and experience of child eye health or programs focused on blindness prevention and health system in Vietnam.
- Knowledge and experience of health policy influencing and advocacy.
- Demonstrable experience in research, monitoring and evaluating public health programs and eye health programs, including the development and use of quantitative and qualitative data collection tools and participatory evaluation methods. It is recommended to have at least 7-10 years of this experience.



- Strong analytical skills.
- Excellent English report writing skills.

Management and logistics

The project team, including the project manager and two project coordinators will be the key people to prepare logistics and coordinate communications between the evaluator/s and The Foundation’s commissioning team and the project partners. The project team will support the evaluator/s with the following: provide access relevant documents and data; introductions to partners and other key participants; provision of translation support; logistical support to conduct field work; support with travel and accommodation; provision of per diem etc.

Partner	Key contacts	Role	Responsibilities
Fred Hollows Foundation - VN	1.Phan Ngoc Anh Tuan (PM) 2.Ha Nguyet Minh (PC) 3.Nguyen Dinh Kien (PC)	Evaluation decision maker	Oversight of project, review of data collection tools, study protocol, and final report.
Fred Hollows Foundation - VN	Phan Thi Trang	Contract management, monitoring progress, review of data collection tools, study protocol, and final report.	Liaise with the consultant team for the stipulation and management of contracts, including monitoring project deliverables and also assist in the coordination of data collection from partners and logistic arrangements.
Fred Hollows Foundation – M&E	Ayemya Rae	Internal advisor	Review of data collection tools, study protocol, and final report.
Fred Hollows Foundation – Regional Office	Jacinta Welch	Internal advisor	Review of data collection tools, study protocol, and final report.
Leading Evaluator and evaluation team	TBC	Leading evaluator to lead and coordinate the entire process of the documentation The team will be responsible for specific activities listed in the ToR	The leading evaluator will be responsible for the finalisation the activities plan, field trip schedule and timeframe of entire documentation. She/ he will be responsible for the implementation of the documentation plan, control the progress and monitor at milestones. She/ he will be responsible for effective team work and coordinate all the activities within the team. She/ he will be responsible to ensure producing of the final products. The team will responsible to complete all the activities in the ToR by working together closely.



Application procedures

This evaluation will be conducted within 27 days from July to November 2019. Consultants who are interested in this evaluation will provide to FHFVN the following application documents:

- Application for this evaluation
- The CV/s of proposed evaluation consultant or team
- Financial proposal for this evaluation
- Examples of relevant reports and a list of relevant research and evaluations that the consultant has done previously

FHFVN will cover domestic travel costs, accommodation, and food for evaluation team during the field work as FHFVN's cost norms.

Confidentiality

The evaluator/s agree to not divulge confidential information to any person for any reason during or after completion of this contract with The Foundation. Upon completion or termination of this contract, the evaluator/s undertake to return to The Foundation any materials, files or property in their possession that relate to the business affairs of The Foundation.

Intellectual Property

All intellectual property and/or copyright material produced by the evaluator/s whilst under contract to The Foundation remain the property of The Foundation and will not be shared with third parties without the express permission of The Foundation. The evaluator/s are required to surrender any copyright material created during the term of the contract to The Foundation upon completion or termination of the contract.

Insurance

Any consultants involved in this evaluation will be required to have in place insurance arrangements appropriate to provision of the requirements in this ToR including travel insurance.

Other

The Foundation is committed to ensuring a safe environment and culture for all children with whom we come in contact during the course of our work. All members of the evaluation team will be required to comply with The Foundation's Child Protection Policy and sign the Child Protection Code of Conduct.



Appendix 1: Proposal template (to be completed by consultant)

Project Summary				
Project Name				
Country				
Proposed Start date		End date:		Duration:
Lead researcher /consultant – name, affiliation, and contact details. Role within the evaluation / research study.				
Other members of the proposed research team (if relevant). Note role within the evaluation / research study				
	<i>Add sections here relating to key methodological details required from the consultants at this time, but that were unable to be specified in the ToR. Use appropriate headings to guide the responses of the consultant. This might include sample size calculations or data analysis plans, consultation approaches, or details of survey tools.</i>			
Detailed budget	<i>The summary budget can be provided in a table format if preferred. The budget should indicate the funding costs for i) direct labour or personnel costs (such as salary and labour on-costs) and ii) direct operational costs (such as consumables, equipment, travel and other), any other costs to be incurred.</i>			
Referees				
Insurance details				

End of document

