

Organizational Assessment of the Canadian Network for International Surgery - DRAFT Terms of Reference (as of October 1st, 2007)

1.0 Organizational Profile

1.1 The organization - Founded in 1995, the Canadian Network for International Surgery (CNIS) is a non-profit organization based in Vancouver. The CNIS is managed by a nine-member board of directors with representation from all over Canada. It has a nationwide membership of physicians, surgeons, and other concerned citizens who share a commitment to improving the health of people in low-income countries. It has formal links with the Canadian Association of General Surgeons and 8 Canadian University Departments of Surgery. The CNIS has managed health and safety interventions in several African countries for over a decade. It has a staff of three: a President and International Director, a Vice-President (Volunteer), a Canadian Coordinator, a Public Engagement Assistant and part time Surgical Associate. Office activities are supported by a part time book keeper and several volunteers. An organizational profile prepared by the CNIS is attached to the present terms of reference.

1.2 Funding from CIDA - The CNIS has been receiving support from the Voluntary Sector Projects & Education Directorate of the Canadian Partnership Branch Branch (CPB) of CIDA since 1997. The funding has consisted of individual one or two year projects. The last contribution agreement with that directorate ended December 31, 2006. The CNIS is presently implementing a 3 year program (January 1, 2007 to December 31, 2009), entitled *Maternal Health, Surgical Access and Safety Promotion*, with funding from the Voluntary Sector Programs Directorate (VSPD) of CPB (CNIS Contribution in cash: \$666,666; CIDA Contribution in cash: \$2,000,000). The CNIS has also had 4 contracts with the Peace, Security and Mine Action Group of the Multilateral Programs Branch of CIDA for work in Northern Uganda: 2 with landmines and 2 with peace building.

2.0 The CNIS *Maternal Health, Surgical Access and Safety Promotion* Program

2.1 Context - Because of lack of surgical care, death and disability are pandemic in Africa. 13 percent of Africans will die an injury-related death. One in 13 African women will die a maternal death. The issue of access to surgical and obstetrical care is a problem which affects women, children, the poor, and the rural populations most severely. Hundreds of thousands of people can benefit from the improvement of basic life-saving surgical procedures.

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2.2 Program - The primary goal of the CNIS Program is to reduce the casualties related to surgical deficiencies, whether in equipment, facilities, skills or trained personnel. The program focuses on (i) improving access to and quality of basic surgery, including obstetrics and maternal health, (ii) preventing injuries and traumas through public education campaigns, and (iii) building surgical skills and capacities among African medical professionals. The program works at different levels, community, institutional and national as well as regional to strengthen knowledge and practice of surgical skills and related health issues

2.3 Countries of intervention - The CNIS Program builds on the base established in five African countries and utilizes lessons from its innovation project in Ethiopia. The organization has been working with its African partner organizations in Ethiopia and Uganda for 11 years, Mozambique and Malawi for 8 years, and Tanzania for 3 years. Departments of surgery in these 5 countries collaborate together within the African Canadian Committee for Essential Surgical Skills (ACC-ESS). The CNIS has also established two injury control centers (Uganda, Tanzania) and a regional injury prevention network (IPIFA). Moreover, the organization has formal links with the College of Surgeons of East Central and Southern Africa (COSECSA). The CNIS is planning to expand regional injury prevention and safety promotion activity through IPIFA, establish an injury prevention & safety promotion center in West Africa, and expand obstetrical & surgical skills training to Rwanda and Mali.

3.0 Reasons for the Organizational Assessment

3.1 On the part of CIDA

The Program Review Committee (PRC) of CPB recommended, in December 2007, that a 3 year program funding, instead of the 5 year proposed by the CNIS, be approved for the organization in light of its good record of short-term project interventions in several African countries and the sustained strong links with a variety of reputable local institutional partners. However, the PRC concluded that (i) an organizational assessment be carried out in the first year of the program to determine CNIS capacity; and (ii) a full program evaluation be conducted in the final year of the program to validate progress towards alignment to CIDA priorities, results being attained, and CNIS ability to diversify funding beyond CIDA.

3.2 On the part of the CNIS

The CNIS has also requested this organizational assessment to determine if the organization has the capacity to implement the 5 year program it had originally proposed to CPB. The CNIS requested that this assessment be conducted after it had produced its 5 year strategic plan (a copy of the plan is attached to the present terms of reference), as the organization wishes the assessment to be

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conducted within the context of the strategic plan. The organization is expecting that the assessment will recommend that its funding be extended to 5 years, rather than the present 3 years, in order to facilitate proactive succession planning.

4.0 Scope

The organizational assessment will be founded on the premise that performance is a function of the CNIS enabling environment, functional capacity and organizational motivation.

Sub-components for each of these factors will include:

- External context: administrative & legal, political, socio/cultural, economic, technological, economic, stakeholder, geographic;
- Performance: effectiveness, efficiency, relevance, financial viability;
- Motivation: history, mission, culture, values, incentives/rewards, priorities;
- Capacity: strategic leadership, structure, human resource management, financial management, program/process management, infrastructure, technological capacities, inter-institutional linkages.

5.0 Focus

The organizational assessment will exploit every opportunity to optimize the learning potential offered by this exercise for the benefit of the CNIS and CIDA:

- **The CNIS** is particularly interested in recommendations around succession planning;
- **CIDA** is particularly interested in assessing the level of risk associated with providing continued funding to the CNIS. To this end, the consultant will examine a sampling of projects carried out within the last three years to identify key findings, results and lessons learned.

6.0 Gender Equality

The institutionalization of Gender Equality (GE) is a challenge faced by all organizations, irrespective of their size, working in the area of international co-operation. It is not possible to talk about accountability without linking it to the existence of institutional targets and objectives, capacities and commitments to gender equality. With regard to GE, the institutional assessment will:

- Document the institutionalization of gender equality within the CNIS and its partner organizations, along the elements laid out in the *CPB Framework for Integrating Gender Equality into Programs and Project*, namely, gender equality commitment, capacity, organizational structure and management, resources.
- Document notable gender equality results at the programming level, along gender equality result categories listed in *CIDA's Framework for Assessing Gender Equality Results*.

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- Provide evidence-based findings, observations and practical recommendations linking institutional accountability and gender equality results, to bring out lessons learned.
- Contribute to ongoing reflections on the part of the CNIS and CIDA on Policy/Strategy/Action Plan for Gender Equality.

7.0 Environment

The institutional assessment will document the steps taken by the CNIS to implement its own environment policy and how environmental considerations are integrated at the decision-making level and strategic/organizational level. The assessment will determine whether the CNIS has made linkages between developing the capacities of its African partners and advancing environmental sustainability.

8.0 The CNIS/Stakeholder Participation

CNIS representatives will be involved throughout the organizational assessment and consulted at important milestones during the process. It is intended that all decisions from the selection of the consultant through to finalization of the organizational assessment report will be made in full consultation with the CNIS. Early on, consultations will clarify the commitments, responsibilities and expectations of the CNIS, CIDA and the consultant. Both the CNIS and CIDA will approve the organizational assessment workplan. The final report will be provided to the CNIS as a draft for comments.

Stakeholder participation is fundamental to this assessment. The organizational assessment will provide for the active and meaningful involvement of key stakeholders as considered appropriate: beneficiaries, representatives of ministries of health at local, national, and regional levels, and other partner organizations, including Canadian partners such as the Office of International Surgery and the Children's and Women's Health Centre of British Columbia.

9.0 Accountabilities & Responsibilities

The CIDA-CPB International Development Project Advisor will oversee the organizational assessment and be responsible for accountability and guidance throughout all phases of execution, and approval of all deliverables. The Canadian consultant will have overall responsibility for: 1) the day-to-day management of operations, 2) regular progress reporting to CIDA, 3) collecting credible, valid information, 4) the development of findings, results and lessons, and, 5) the production of deliverables in accordance with contractual

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requirements. The consultant will report to the CIDA-CPB International Development Project Advisor.

10.0 Organizational Assessment Process

10.1 Preparation of Workplan

The consultant will prepare a workplan that, once approved by the CNIS and CIDA, will serve as the agreement between both parties on how the organizational assessment will be carried out. The workplan will refine and elaborate on the information presented in these terms of reference to bring greater precision to the planning and design of the assessment.

The workplan will address the following reporting elements:

- CNIS Profile
- Expectations of the Assessment
- Roles & Responsibilities
- Methodology
- Framework
- Information Collection & Analysis
- Organizational Assessment Reporting
- Work Scheduling (level of effort).

10.2 Field Mission

In addition to a visit to the CNIS in Vancouver, the consultant will conduct a field mission to some project sites in Africa. Consultations will be carried out with CIDA field personnel and project stakeholders. Information will be collected as stipulated in the workplan. The field mission is expected to be no longer than two weeks in duration. The CNIS is encouraging the consultant to visit Ethiopia, Uganda and Tanzania where the majority of the organization's work is located. CIDA field personnel are to be briefed by the consultant on arrival and before departure from the field.

10.3 Preparation of the Organizational Assessment Report

The consultant will prepare an organizational assessment report that describes the assessment and puts forward findings, results and lessons learned. The presentation of results is to be intrinsically linked to the key issues, establishing a flow of logic development derived from the information collected. Results are to be linked to *CIDA's Framework of Results and Key Success Factors*.

11.0 Deliverables

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The consultant will prepare: 1) a workplan, and 2) an organizational assessment report. These deliverables are to be prepared in English only, and submitted in both hard copy and electronic (pdf.doc) formats.

11.1 Workplan

The consultant is to submit a draft workplan to the CNIS and CIDA within three weeks of the signing of the contract. Within one week of receiving comments, the consultant will produce a final workplan.

11.2 Organizational Assessment Report

The consultant is to submit a draft organizational assessment report to the CIDA-CPB International Development Project Advisor and the CNIS representative for review within four weeks of returning from mission. Within two weeks of receiving comments, the consultant will submit a final organizational report (including an executive summary).

12.0 Consultant Qualifications

The Canadian consultant is expected to be:

- A reliable and effective project manager with extensive experience in conducting organizational assessment and a proven record in delivering professional results;
- Fluent in English;
- Fully acquainted with CIDA's Result Based Management orientation and practices;
- Experienced in the countries of intervention;
- Experienced and having a good knowledge in the areas of environment and gender equality, including gender/women's issues.

The consultant should have a good knowledge of health issues in developing countries and have experience with health programming. In addition, preference will be given to a consultant with health qualifications such as clinical and surgical background, public health or epidemiology, and health administration that can address succession planning.

13.0 Timetable

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| - Final version of the terms of reference: | October 5, 2007 |
| - Selection and hiring of a consultant (1 week): | October 12, 2007 |
| - Draft workplan (2 weeks): | October 19, 2007 |

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- CNIS & CIDA comments on draft workplan (1 week): October 26, 2007
- Final workplan (1 week): November 2, 2007
- Visit to CNIS in Vancouver: November 7 to 9, 2007
- Field mission in Africa: November 19 to 30, 2007
- Draft report (5 weeks, including Xmas week): January 4, 2008
- CNIS & CIDA comments on the draft report (3 weeks): January 25, 2008
- Final report (2 weeks): February 8, 2008

14.0 Level of Effort

The projected level of effort required for this organizational assessment are 40 days set out as follows:

Workplan preparation	5	
Data collection/field work/travel time	20	
Debriefing, analysis, report preparation	15	

Total	40	
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