

**TERMS OF REFERENCE FOR CONTRACT PACKAGE
PROJECT IMPLEMENTATION CONSULTANTS—BANDA ACEH**

Community Water Services and Health—Aceh/Nias-North Sumatra Project

A. Background

1. In 2003-2004 ADB prepared a Community Water Services and Health Project (CWSHP) for Indonesia, which was approved on 7 April 2005.¹ CWSHP is designed to enhance the health status of low-income communities² in rural areas based on better hygiene behavior and sustained access to safe water and improved sanitation by: (i) improving the capacity of local governments for facilitating, regulating, and delivering quality services in water and sanitation to target communities; (ii) strengthening the community capacity to design, cofinance, build, operate, and manage community-based water supply and sanitation (WSS) facilities; (iii) improving access to water and sanitation services through construction of adequate facilities based on community demand; and (iv) increasing hygiene awareness through information, education, and communication (IEC) campaigns. The total project cost is estimated at \$92.4 million equivalent, of which ADB will finance \$64.7 million through a \$34.1 million loan from its ordinary capital resources and another loan of \$30.6 million from its special funds resources. CWSHP will be implemented over a 6-year period, starting in 2005. The Executing Agency (EA) is the Directorate General of Communicable Disease Control and Environmental Health (DG CDC&EH) of the Ministry of Health (MOH).

2. In light of the 26 December 2004 earthquake and tsunami disaster, and based on a Memorandum of Understanding between the Government of Indonesia and ADB dated 5 January 2005, the Government has requested that the CWSHP includes a specific grant-financed component for the affected Aceh and Nias/North Sumatra provinces (hereinafter called “CWSHP Grant”). A total amount of \$16.5 million, financed by the Government of Canada (Can\$5 million), the Government of the Netherlands (\$5 million), and the Government of the United Kingdom (£4 million) has been made available. Grant negotiations took place on 28 March 2005 for a stand-alone Grant Agreement. The Grant has been inserted into the CWSHP Report and Recommendation to the President (RRP) and was approved together with the CWSHP loans on 7 April 2005.³ The Grant Agreement was signed by the Government and ADB on 29 April 2005.

3. In addition, on 7 April 2005, the ADB Board of Directors also approved a \$293.5 million Earthquake and Tsunami Emergency Support Project (ETESP), which is a multi-sector grant project covering about 11 sectors.⁴ About \$10.5 million of ETESP has been earmarked for rural water supply and sanitation along the same lines as CWSHP-Aceh/Nias-North Sumatra (hereinafter called the “ETESP Component”). Implementation of these two grant proposals will be integrated into one set of implementation arrangements under the title “**Community Water Services and Health—Aceh/Nias-North Sumatra Project**” (the Project), with two sources of

¹ Loans 2163/64(SF)-INO: Community Water Services and Health Project, for \$64.7 million, approved on 7 April 2005.

² The terms “village” and “community” are used synonymously throughout the document.

³ Grant 0003-INO: Community Water Services and Health—Aceh/Nias-North Sumatra Project, for \$16.5 million, approved on 7 April 2005.

⁴ Grant 0002-INO: Earthquake and Tsunami Emergency Support Project, for \$293.5 million, approved on 7 April 2005.

financing. The total budget of \$27.0 million will be split up along geographic lines, with CWSHP-Aceh/Nias-North Sumatra covering about 4 and ETESP covering about 3 districts.

4. The primary objective of the Project is to provide such immediate rehabilitation services as may still be necessary, but to concentrate on empowering villages and communities to plan and implement the reconstruction and new construction of WSS facilities themselves, to a standard higher than existed before the disasters, thereby enhancing the health status of the rural population of the affected provinces.

5. Complementary objectives of the Project include hygiene and sanitation training at village level, aimed at achieving measurable behavioral change; capacity building in local government agencies responsible for the delivery of support services to rural communities and the training and motivation of health service officials and technicians in the monitoring of WSS facilities (including routine water quality testing) and the detection and control of water-borne diseases.

6. The Project will operate in the districts of Pidie, Bireuen, Aceh Utara, Aceh Jaya and Nagan Raya in Aceh; and the districts of Nias and Nias Selatan in North Sumatra, commencing in July 2005 for a period of four years.⁵ The initial target is 400 villages.

B. Project Management and Operation

7. A Central Project Management Unit (CPMU) has been established at MOH and will be staffed by an MOH-appointed Project Manager and the Project Oversight Consultants (POC, package A, refer to App. 1). The CPMU will be tasked with ensuring the overall coordination of the Project vis-à-vis other Aceh rehabilitation and reconstruction activities and vis-à-vis the original CWSHP loan project. The newly-established Badan Rehabilitasi dan Rekonstruksi (BRR) has the overall responsibility for the reconstruction work in Aceh and Nias/North Sumatra and will facilitate project implementation by taking on an active role at the Steering Committee-level. The implementation of the Project will be with MOH, with the same Project Manager for CWSHP-and ETESP-financed components.

8. Project implementation will be carried out by the Provincial Health Office (PHO), the District Health Offices (DHOs) and the consultant staff identified in this package 'B' (Project Implementation Consultants-Banda Aceh, PIC-BA) as well as packages 'C' and 'D'. The PIC-BA will respond directly to the CPMU and PHO. The District Implementation Teams (DITs) under packages 'C' and 'D' will respond to PIC-BA and PHO.

C. Consulting Service Requirements

9. An overview of the consultant contract packages under this Project is in Appendix 1. Consultants will be recruited in accordance with ADB's *Guidelines on the Use of Consultants* dated January 2005, adopting flexible procedures as required for emergency projects. ADB will directly engage consultants on behalf of the EA in the following manner: (i) individual consultants through direct engagement as described in the Guidelines; (ii) consulting service packages of less than \$2,000,000 through bio data proposals using the quality and cost-based selection (QCBS) method, with a proposal submission period of 21 days; and (iii) consulting service packages of more than \$2,000,000 through simplified technical proposals using QCBS method, with a proposal submission period of 28 days.

⁵ The inclusion of Aceh Besar is to be further determined.

10. The PIC-BA package will be financed from the CWSHP Grant for an initial duration of two years. Under the PIC-BA package, the Consultant will provide the services of an international Project Manager on a full-time basis for two years starting in September 2005. He/she will reside with the PHO in Banda Aceh and will be required to make frequent visits to the field in Aceh and Nias-North Sumatra as well as to the CPMU in Jakarta. The Consultant will also provide the full-time services of a suitably experienced domestic Deputy Project Manager, Rural Water Supply and Sanitation Specialist, Community Development Specialist, Public Health and Hygiene Specialist, Financial Management Specialist, and a Procurement Specialist on a full-time basis for two years. The package also includes the provision of a small team of administrative and support staff to support PHO and the PIC-BA.

11. The staffing requirement for the PIC-BA package is as follows:

- Senior international Project Manager with extensive experience in project implementation of multi-discipline donor-funded projects (24 pm)
- Senior domestic Deputy Project Manager with previous experience in the implementation of donor-funded projects (24 pm)
- Senior domestic Rural Water Supply and Sanitation Specialist (24 pm)
- Senior domestic Community Development Specialist (24 pm)
- Senior domestic Public Health and Hygiene Specialist (24 pm)
- Senior domestic Financial Management Specialist (24 pm)
- Senior domestic Procurement Specialist (24 pm)

12. The cost estimate for the PIC-BA package is in Appendix 2.

D. Scope of Work and Responsibilities

13. The **PIC-BA Team** will work closely with the PHO-appointed Project Manager in Banda Aceh, the DITs in the districts, and the CPMU/POC in Jakarta. The responsibilities will include the following:

- (i) Coordinate and manage activities of PIC-BA and the DITs in cooperation with CPMU and PHO by developing detailed project work plans and budgets and schedules for project activities, establishing detailed performance targets for every six months, and coordinating consultant team activities accordingly;
- (ii) Prepare a detailed work plan for the rehabilitation phase of the Project, in particular with regard to possible complementary assistance provided by the Project to ongoing and planned activities by ADB and other donor agencies;
- (iii) Prepare a detailed work plan and budget revisions for joint village-level implementation of the Project with KDP in Aceh;
- (iv) Participate with the DITs in government meetings at district and subdistrict level to select and prioritize target villages, and assist the DITs in the preparation of subprojects for submission to CPMU and BRR;
- (v) Prepare the terms of reference, tendering and competitive selection process for additional consultant packages at the provincial and district level, in particular for

the baseline survey and health survey, in accordance with ADB procedures and in collaboration with CPMU/POC, and advise on and review bids received during tendering process;

- (vi) Organize and moderate workshops/seminars in Banda Aceh for provincial and district government staff of relevant ministries and other senior stakeholders in collaboration with CPMU/POC;
- (vii) Prepare a comprehensive capacity building program for provincial-level government staff from PHO and other relevant departments with regard to community-based development in the sector, including the preparation of training modules and field visits to WSS projects outside Aceh, and ensure this program is carried out in close cooperation with other capacity building activities planned under ETESP sector components and related activities by other funding agencies;
- (viii) Prepare comprehensive overall programs for sanitation and hygiene behavioral change, de-worming activities and ORT training, and sanitation subsidization, in conjunction with the DITs at district level, and supervise the implementation of these programs;
- (ix) Prepare a comprehensive program for community empowerment, based on participation of the communities and awareness and capacity building activities;
- (x) Develop and/or adapt and implement a media program, including TV, newspaper and other print materials, and radio spots to support and promote public health, hygiene and sanitation;
- (xi) Coordinate with BRR in Banda Aceh, concerned Government agencies, multilateral and bilateral donor agencies, universities, and foreign and local NGOs to ensure broad-based agreement on project activities and to avoid duplication;
- (xii) Coordinate on a regular and frequent basis with the CPMU/POC, the ADB Project Officer in the Indonesia Resident Mission, ADB's Extended Mission for Sumatra (EMS) in Medan and Banda Aceh, and other consultant teams deployed under the various ETESP components to ensure synergy and clustering of efforts at the provincial and district level;
- (xiii) In conjunction with the POC, develop a comprehensive financial reporting system and a management information system (MIS), ensuring that there is an adequate manual reporting system to provide the necessary information from the district level and below;
- (xiv) Develop a standardized system for the different technical options of civil works investment at the community level in terms of unit costs, commonality of materials, and levels and recovery systems of operation and maintenance costs;
- (xv) Supervise all procurement and disbursement activities at the provincial level, and assist the district and community levels at their request;

- (xvi) Make regular and frequent visits to the field to observe progress, provide technical and managerial advise to the DITs and all other concerned stakeholders, supervise and inspect activities, and monitor implementation progress;
- (xvii) Set-up and ensure effective project implementation procedures for progress review, cash-flow management, accountability, and transparency; and
- (xviii) Prepare and submit timely and high-quality reports to the CPMU for review and forwarding to ADB, BRRs, and the cofinanciers.

E. Qualifications

14. *The International Project Manager* should preferably hold a Master's degree in civil engineering or water and sanitation engineering and have at least 10 years practical experience in developing countries, 5 of which shall have been as project manager and/or team leader on rural donor-funded projects in the field. He/she must be accustomed to working with provincial and district government agencies on a cooperative basis. Significant experience in the design and implementation of rural WSS projects, supported by significant experience in rural development, community empowerment, public health, and local government capacity building is highly desirable, as is strong financial management or accounting experience. The ability to speak Bahasa Indonesia would be an additional asset.

15. *The Domestic Deputy Project Manager* should preferably hold a Master's degree (S2) in a project-related field such as public health, community development, or capacity building and have at least 5 years of experience in management of multi-discipline, donor-funded projects. Financial management or accounting experience is highly desirable. The ability to speak Acehnese would be an additional asset.

16. *The Domestic Rural Water Supply and Sanitation Specialist* should preferably be a degree-qualified WSS Specialist and have at least 5 years practical experience working in the planning and implementation of rural WSS facilities in the field, with demonstrated knowledge of community development processes and sanitation and hygiene behavioral change programs. Previous assignments in Aceh and/or Nias/North Sumatra as well as the ability to speak Acehnese would be an additional asset.

17. *The Domestic Community Development Specialist* should be a degree-qualified professional with at least 5 years experience in working with villages and small communities. His/her ability to support the activities of the DITs and community facilitators as well as to provide sustainable capacity building on community development for government staff will be important. Previous assignment in community-driven development in the water or other sectors as well as the ability to speak Acehnese would be an additional asset.

18. *The Domestic Public Health and Hygiene Specialist* should be a degree-qualified professional with at least 5 years experience in the promotion of public health and sanitation and hygiene behavioral change programs on donor-funded projects. His/her ability to support the activities of the DITs and community facilitators as well as to provide sustainable capacity building on public health and sanitation and hygiene behavioral change for government staff will be important. Previous assignment in community-driven development with an emphasis on sanitation and hygiene behavioral change as well as the ability to speak Acehnese would be an additional asset.

19. *The Domestic Financial Management Specialist* should hold a Master's degree (S2) or a Bachelor degree supported by a recognized accounting diploma, and have at least 5 years experience in the financial management of donor-funded projects in Indonesia. His/her ability to support the activities of DITs and community facilitators as well as to provide capacity building on financial management for government staff will be important. The ability to speak Acehese would be an additional asset.

20. *The Domestic Procurement Specialist* should be a degree-qualified accountant or business manager with 5 years experience in the purchasing of materials, equipment and civil works on donor-funded projects in Indonesia. The specialist should be conversant with local costs related to the construction of WSS facilities in rural areas. His/her ability to support the activities of DITS and community facilitators will be important. The ability to speak Acehese would be an additional asset.

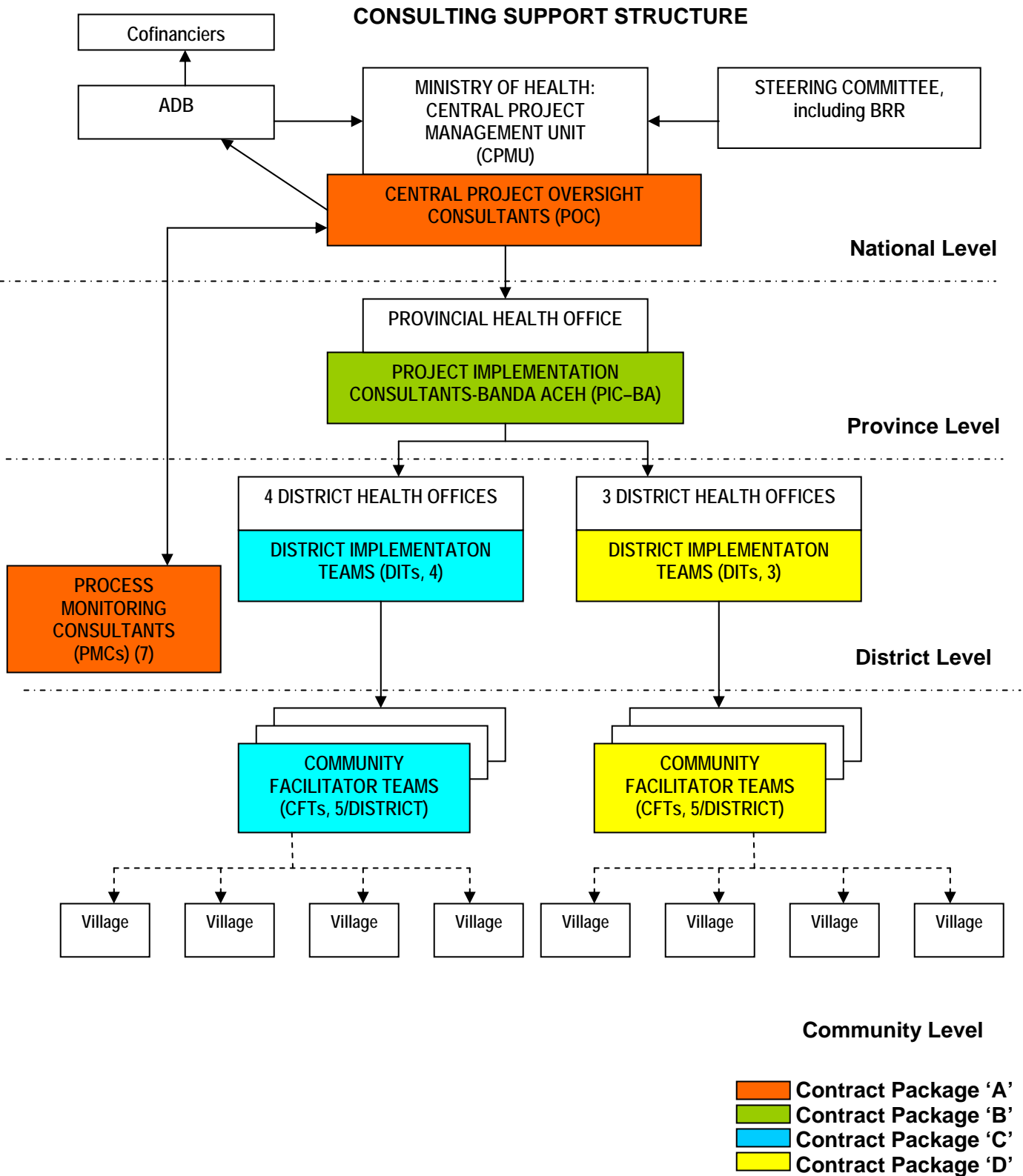
F. Reporting Requirements

21. The Consultants shall prepare and submit the following reports within time periods indicated below:

- (i) An Inception Report (2 CDs each to CPMU and ADB), within 6 weeks of commencement, setting out the recruitment and mobilization status of personnel, the establishment of facilities, work program and schedule, and relationships at all levels;
- (ii) At three month intervals thereafter, (a) comprehensive progress reports (2 CDs each to CPMU and ADB) summarizing financial expenditures, describing the work completed during the reporting period, outlining the work to be undertaken in the following period, and highlighting particular implementation issues which need CPMU attention;
- (iii) At six month intervals, detailed financial reports on disbursements and disbursement projections to CPMU for consolidation;
- (iv) A Final Implementation Report (2 CDs each to CPMU and ADB) upon completion of services, summing up progress and making recommendations for future implementation;
- (v) Special reports as and if required, including on progress of particular project components, capacity building activities, sanitation and hygiene behavioral change programs, and transparency and accountability issues, among others.

G. Implementation Arrangements

22. *Office accommodation* is available for the PIC-BA at the PHO in Banda Aceh but will need renovation at the project expense following tsunami damage; a provision has been included in this budget. All necessary office equipment must be purchased or leased at project expense. *Staff Housing* in all locations is the responsibility of the Consultant, with provisions made as part of this package considering the special circumstances in the affected areas.



COST ESTIMATES PACKAGE 'B'
PROJECT IMPLEMENTATION CONSULTANTS – BANDA ACEH

(\$ '000)

Item	Foreign Exchange	Local Currency	Total Cost
A Personnel Costs			
1 International Project Manager			
a. Remuneration and Per Diem	338.4		338.4
b. International Travel	3.0		3.0
2 Domestic Professional Staff			
a. Deputy Project Manager		40.8	40.8
b. Water and Sanitation Specialist		40.8	40.8
c. Community Development Specialist		40.8	40.8
d. Hygiene and Public Health Specialist		40.8	40.8
e. Financial Management Specialist		40.8	40.8
f. Procurement Specialist		40.8	40.8
g. Deployment and Per Diem		204.0	204.0
3 Administration and Support Staff		36.0	36.0
Subtotal Personnel Costs	341.4	484.8	826.2
B Operating Expenses			
1 Workshops & Training		154.4	154.4
2 Capacity Building		131.0	131.0
3 In-Country Travel and Per Diem		231.8	231.8
4 Incremental Office Costs		27.4	27.4
5 Office Equipment		21.0	21.0
6 Incremental Staff		44.7	44.7
Subtotal Operating Expenses		610.2	610.2
C Other Costs			
		34.0	34.0
TOTAL — PACKAGE 'B'	341.4	1,129.0	1,470.4