

## ANNEX II - TERMS OF REFERENCE

# SITUATION ANALYSIS ON CERVICAL CANCER SCREENING REGISTRY IN VIETNAM

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### 1. BACKGROUND

While cervical cancer is one of the most preventable diseases, it is estimated that 311,000 women died of cervical cancer globally in 2018<sup>1</sup>. Most occurred in low- and lower-middle income countries (LMICs), due largely to inadequate access to cervical cancer prevention. In November 2020, the World Health Organization launched a Global Strategy to accelerate the elimination of cervical cancer as a public health issue. The Strategy proposes an elimination threshold of 4 cases per 100,000 women, achieved by implementing the triple intervention targets by 2030<sup>2</sup>:

1. 90% of girls fully vaccinated with the HPV vaccine by age 15.
2. 70% of women screened with a high-performance test (such as the HPV test) by 35, and again by 45 years.
3. 90% of women identified with cervical pre-cancer or cervical cancer receive adequate treatment and care.

In Vietnam, cervical cancer is the sixth most common cancer in women, with 4,177 new cases (7.1 per 100,000 women) and 2,420 deaths (4.0 per 100,000 women) in 2018. The burden of cervical cancer varies among regions in Vietnam, with higher rates in southern regions, and there is limited data on the burden of disease in rural regions. Prevalence of HIV among females aged 15-49 years is 0.2% and an estimated 77% of women living with HIV are on treatment. It was predicted that without any intervention, a total of 218,907 women in Vietnam will die of cervical cancer by 2070 and 449,656 by 2120<sup>3</sup>.

In 2015, in order to respond to the cervical cancer situation, the Ministry of Health of Vietnam (MOH) with technical assistance from United Nations Population Fund (UNFPA), developed a National Action Plan on Prevention and Control of Cervical Cancer (NAPPCCC) for the period 2016-2025, which provided a direction to scale up access to early screening services<sup>4</sup>. However, due to policy and financial obstacles, the progress in the implementation of the NAPPCCC has been delayed. Particularly, a national cervical cancer screening programme including a cervical cancer screening registry has not yet been developed.

A cervical cancer screening registry plays a vital role in supporting the national cervical screening program and the national cancer screening program. It gives healthcare providers better access to quality health information, and it makes it easier for program participants to take control of their health. It collects, stores, manages, and analyzes data on people with

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1 Ferlay J, Ervik M, Lam F, et al. Global Cancer Observatory: Cancer Today [Internet]. Lyon, France: International Agency for Research on Cancer; 2018 [cited 2020 October 10]. Available from: <https://gco.iarc.fr/today>.

2 Global strategy to accelerate the elimination of cervical cancer as a public health problem. Geneva: World Health Organization; 2020. Licence: CC BY-NC-SA 3.0 IGO.

3 Canfell K, Kim J J, Brisson M, et al. Mortality impact of achieving WHO cervical cancer elimination targets: a comparative modelling analysis in 78 low-income and lower-middle-income countries. *Lancet* 2020;395:591-603.

4 Ministry of Health (2016) National Action Plan on Prevention and Control of Cervical Cancer in Vietnam for the period 2016-2025. Hanoi Vietnam

positive result tests. The system establishes and maintains a cervical cancer incidence reporting system, serves as an information resource for cervical cancer research, and provides information to assist public health officials and agencies.

Within the framework of the new 10<sup>th</sup> Country Programme to Vietnam, UNFPA supports a situation analysis of a cervical cancer screening registry in the country. It is expected that the study will provide a comprehensive picture of the cervical cancer screening registry and recommendations for strategic interventions, so that the national registry system for early cervical cancer screening can be soon designed and operated.

## **2. OBJECTIVES OF THE ASSIGNMENT**

The objective of this consultancy is to conduct a situation analysis of the cervical cancer screening registry in Vietnam.

## **3. SCOPE OF WORK**

The selected institution will collaborate with MOH and UNFPA to carry out the following tasks in order to achieve the above objective:

- 1) Develop an inception report using the format presented in Annex 2, subject to be reviewed and approved by UNFPA and MOH;
- 2) To review lessons learned and best practices from the cervical cancer registries from other countries;
  - At least four countries, namely South Korea, Australia, Thailand and Taiwan will have to be included.
  - Historical development of the registry will be reviewed.
  - Any lessons learned and best practices relevant to the Vietnam's situation.
  - Integrate lessons learned of the review into short- and long-term recommendations (mentioned in Point 3 of the scope of work)
- 3) Conduct a situation analysis on a registry of cervical cancer screening in Vietnam which analyzes the following aspects:
  - What cervical cancer related data is collected and how it is used, including retrieving/abstracting information about each woman from the time of diagnosis and continuing throughout her life.
  - Rules that govern the cancer registry.
  - Coding and its applications used in the registry. Opportunities to integrate cervical cancer screening into the available registry software package (for example, cancer, immunization and/or computerizing HMIS/hospital management).
  - Cancer staging systems.
  - Case finding and methods of case finding of cervical cancer.
  - Patient follow-up (screen and treat guidelines: any opportunities to apply/comply).
  - Data submission, data reporting and standard-setting organizations for data submission and reporting (in both maternal reproductive health and cancer systems).
  - Quality of cervical cancer screening registry data (whether it is established standards to ensure quality of cervical cancer screening, collect high-quality data, use data to measure screening quality and cancer treatment).

- (Cervical) Cancer Technical Committee membership and responsibilities (a multidisciplinary leadership body that is responsible and accountable for planning, implementing, and improving facility's cervical cancer screening program activities). Whether this Committee is existed. If yes, how is it established and functioned?
- Confidentiality arrangements.
- Other important technical requirements.

Additionally, to have a comprehensive picture of the current registry situation, a SWOT analysis should be used for the in-depth analysis of :

- Strengths of the current data information system for cervical cancer screening
- Weaknesses of the current system
- Any threats for the current and future practices
- Opportunities (for instance, government policies on computerized HMIS, digitalized sectoral programmes, opportunities to integrate screening into other initiatives and plans)

WHO's six building blocks on health system are recommended to be applied to analyze the registry of cervical cancer screening, in relation to the overall situation of cervical cancer management as well as current development and national investment on information communication technologies (ICT) the country.

- Governance: how the cervical cancer screening registry was governed in relation to cancer and reproductive health related programmes. How it should be governed and operated
- Human resources: personnel situation (current structure/capacity and policies) for functioning cervical cancer screening registry at all required levels. How it should be improved in the future?
- Financing: how a registry of cervical cancer screening is financed?
- Technology: current practice and opportunities for change/adapt in the context of the government digitalized policies in health sector for the period 2021-2030
- Information system: how the registry fit to the overall health management information system including digitalized individual medical record and V20 (i.e. nationally integrated health system for all PHC facilities)? How can it be linked with immunization information registry system?
- Service delivery: how a screening registry integrated and used for cervical cancer treatment?

Recommendations should cover following issues:

- Structure and function of an integrated registration for cervical cancer screening that is appropriate to the country situation.
- Needs for further development or investment on a registry system on cervical cancer screening (including governance, human resources, financing, technology, information and service delivery).
- Roles and responsibilities of concerned stakeholders
- Short-term and long-term visions for the development and function of a registry system for cervical cancer screening.

Research methods:

- Qualitative research method is recommended for this study. In addition, an additional rapid quantitative survey by telephone or online may be

considered (if required). The selected research institution is required to strictly comply with the UNFPA Ethical Code of Conduct for Study/Research (Annex 1)

- 4) Present the draft report to MOH and UNFPA for comments and feedback (a template of the report presented in Annex 4); and
- 5) Finalize the report based on the received comments from UNFPA, MOH and concerned stakeholders.

#### **4. EXPECTED FINAL OUTPUTS**

The research institution is required to submit technical and financial proposals subject to be reviewed and approved by UNFPA before a contract is signed (see a template for a technical and financial proposals in Annex 2).

After the signing the contract, the research institution will have to submit to UNFPA the following products:

1. An inception report presented and officially submitted for the MOH's and UNFPA's approval before actual data collection by 30 October 2022 (See instructions in Annex 3)
2. Data collection and field work plan approved by 30 November 2022
3. Data collection and field work completed by 15 January 2023
4. The first draft report and presentation: submitted by 15 March 2023 (See instruction in Annex 4)
5. The final report and presentation submitted by 31 May 2023
6. An abstract of a manuscript to be submitted to a peer-review journal by 31 May 2023

#### **5. TIMELINE**

The timeframe required for this consultancy is from 15 October 2022 to 31 May 2023.

#### **6. INTENDED USES AND USERS**

- Findings and recommendations from this study will be used by UNFPA, national partners, including MOH, NGOs, Provincial Departments of Health, and service providers for the development of appropriate policies and programs on cervical cancer screening
- Programmers, policy and decision makers, professionals, researchers, managers, lecturers and those who are involved with the development, implementation and monitoring of national and sub-national policies and programmes on cervical cancer screening and treatment would also find the report useful in their specific work.

#### **7. REQUIREMENTS FOR THE RESEARCH INSTITUTION AND RESEARCH TEAM**

##### **7.1 Requirements for the research institution**

The research institution must have:

- A status as a medical research and training institution accredited by relevant authorities with demonstrated experiences in research and training in cervical cancer prevention and treatment.
- Extensive experience in developing training programs on cervical cancer screening including computer-based/internet-based programmes.

- Experience in designing and implementing interventions which use digital technologies to provide cervical cancer screening information and services to communities.
- A strong established collaboration network with cancer/OBGYN related institutions in Vietnam and other countries;
- Demonstrated records of research publications in cervical cancer prevention and treatment.
- Clear governing bodies including organisation chart – staff size for undertaking the consultancy work.
- Appropriate staff skills and expertise in conducting high quality scientific research and disseminating findings to various audiences, especially policy or decision makers in developing countries, including Vietnam.
- Appropriate project management capacity including financial management system.
- Experience in working with UN agencies and/or other international development agencies. Prior work experience with UN agencies in Vietnam is an advantage, but not mandatory.

## **7.2 Requirements for the research team**

The research institution will appoint an experienced research team consisting of a team leader and at least two team members to undertake this consultancy.

**7.1 Team leader:** The team leader consultant should meet below requirements:

- PhD degree in medical, health allied or epidemiology with advanced training in cervical cancer and/or research methods (both quantitative and qualitative methods);
- At least 10 years of experience in cervical cancer screening and management, particularly developing data collection and assessment tools, survey's design and data analysis;
- Knowledge of a cervical cancer screening registry in other countries as well as current information and data system for cervical cancer screening in Vietnam;
- Excellent writing skills in both English and Vietnamese, evidenced in being the first author or senior author of peer-reviewed publications in international journals and technical reports on cervical cancer related issues; and
- Good presentation and communication skills and in English and Vietnamese.

## **7.2 Team member (health information expert)**

The health information expert should meet below requirements:

- Master's degree on public health, informatics or related disciplines;
- At least 7 years of experience in research and/or training in health management information system, preferably data and information on cervical cancer;
- Knowledge and experience in management of health information system and utilization of data in health care planning;
- Good understanding of the existing health information systems (including V20, digitalized individual medical record and other hospital management software packages); and
- Good presentation and communication skills, orally and in writing in English and Vietnamese.

## **7.3. Team member (SRH researcher)**

The SRH researcher should meet below requirements:

- Postgraduate degree in health related disciplines;

- At least 7 years of experience in research and training in sexual and reproductive health including cervical cancer in Vietnam (qualitative and/or quantitative research methods);
- Demonstrated knowledge and experiences in screening, treatment, recording and reporting of cervical cancer;
- A good network with MOH's departments and medical research and treatment institutions that are working on cervical cancer screening related issues;
- Ability to make technical meeting arrangements and facilitate discussions with policy makers, managers, providers and clients; and
- Have good presentation and communication skills, orally and in writing in English and Vietnamese.

## **8. ADMINISTRATION AND LOGISTICS SUPPORT**

### **8.1 Roles of MOH:**

#### **Maternal and Child Health Department**

- Coordinate with other concerned departments within the health sector to facilitate the preparation of the report;
- Provide necessary logistic and administrative arrangements for the research team:
  - ✓ Support the consultant to collect locally available reports and publications relating to cervical cancer workforce and practices in Viet Nam;
  - ✓ Provide administrative support for any validation/technical review meetings with concerned stakeholders.
- Provide comments for:
  - ✓ Inception report.
  - ✓ The draft report
  - ✓ The final report
- Provide existing data, reports and documents relating to cervical cancer screening/treatment and organization/network, health management information system in Vietnam;

### **8.2. UNFPA:**

- Discuss and share with MCHD and other departments TOR and detailed plan for development of the report;
- Recruit the research institution;
- Facilitate the report development process;
  - ✓ Provide administrative and financial resources for report development;
  - ✓ Recruit an international consultant to technically backstop the local research team (to be confirmed)
  - ✓ Facilitate the work of the research team together with MOH;
  - ✓ Monitor the progress and quality of consultancy services and timely provide comments for the research team's work.

## **9. CONTRACT MODALITIES AND PAYMENT TERMS**

A service contract will be signed between UNFPA Viet Nam and the selected research institution. Payment will be made based on the amount proposed by the selected institution and approved by UNFPA. Payment will be made in three installments as below:

- First payment (tentatively 30 October 2022): After the submission and approval of the inception report: 20%
- Second payment (tentatively 30 November 2022): After the submission and approval of the plan on data collection and field work: 30%
- Last payment (tentatively 31 May 2023): Approval of the final report and presentation: 50%

## **ANNEXES**

### **ANNEX 1: ETHICAL CODE OF CONDUCT FOR STUDY/RESEARCH**

Study/Research of UNFPA-supported activities need to be independent, impartial and rigorous. Each study/research should clearly contribute to learning and accountability. Hence researchers/evaluators must have personal and professional integrity and be guided by propriety in the conduct of their business.

Study/research team:

1. To avoid conflict of interest and undue pressure, researchers need to be independent, implying that members of a study/research team must not have been directly responsible for the policy-setting/programming, design, or overall management of the subject of study/research, nor expect to be in the near future. Researchers must have no vested interests and have the full freedom to conduct impartially their study/research work, without potential negative effects on their career development. They must be able to express their opinion in a free manner.
2. Should protect the anonymity and confidentiality of individual informants. They should provide maximum notice, minimize demands on time and respect people's right not to engage. Researchers must respect people's right to provide information in confidence, and must ensure that sensitive information cannot be traced to its source. Researchers are not expected to evaluate individuals, and must balance an evaluation of management functions with this general principle.
3. Studies/researches sometimes uncover evidence of wrong doing. Such cases must be reported discreetly to the appropriate investigative body.
4. Should be sensitive to beliefs, manners and customs and act with integrity and honesty in their relations with all stakeholders. In line with the UN Universal Declaration of Human Rights, researchers must be sensitive to and address issues of discrimination and gender equality. They should avoid offending the dignity and self-respect of those persons with whom they come in contact with in the course of the study/research. Knowing that study/research may negatively affect the interests of some stakeholders, researchers should conduct the study/research and communicate its purpose and results in a way that clearly respects the stakeholders' dignity and self-worth.
5. Are responsible for the clear, accurate and fair written and/or oral presentation of study limitations, evidence based findings, conclusions and recommendations.

**ANNEX 2: SUGGESTED OUTLINE OF THE TECHNICAL AND FINANCIAL PROPOSALS**  
**(to be submitted by research institution)**

**TECHNICAL PROPOSAL:**

**1. Overview/introduction**

An overview of what and how to conduct the study/research by the institution.  
Expertise and Capacity of institution submitting proposal

**2. Objectives and key questions of study/research**

Overall objective.  
Specific objectives.  
Key study questions/indicators.

**3. Design and methodology**

Scope and focus.  
Study/research design (explanation of methodological choice, including the constraints and limitations), study sites, and sampling design.  
Techniques and tools for data collection and data analysis.  
Participatory stakeholders' consultation process.  
Ethical issues.

**4. Organization and implementation of study/research**

Detailed workplan.  
How to organize/implement and manage this study/research.  
Quality control.  
Personnel competencies  
Accountabilities of study/research team/consultants.

**5. Study/research team**

Specify the composition of the study/research team (e.g., number of team members, team leader with key tasks in conducting this study/research). For the individual members' profile, the table format 2 can be used for the summary of each consultant/CV in each position in this study/research.

**6. Final Products**

List of final products/Results with the deadlines  
Report outline (in annexes)



**FINANCIAL PROPOSAL:**

The Bidder is required to submit a financial proposal including a detailed cost breakdown. Provide separate figures for each functional grouping or category.

Example Price Quotation below: *[The table columns should be modified as appropriate for specific services]*

Item	Description	Number & Description of Staff by Level	Daily Rate	Days to be Committed	Total Amount (VND)
<b>1. Professional Fees</b>					
<i>Total Professional Fees</i>					VND
<b>2. Out-of-Pocket expenses</b>					
<i>Total Out of Pocket Expenses</i>					VND
<b>Total</b> <i>(Professional Fees + Out of Pocket Expenses)</i>					VND
<b>VAT</b>					VND
<b>Total Contract Price (including VAT)</b>					VND

*\* All related taxes are included in the offered prices.*

### **ANNEX 3: SUGGESTED STRUCTURE OF INCEPTION REPORT**

1. Overview/introduction
  - An overview of the background, research context, what and how to conduct the study/research
2. Objectives and key questions of study/research
  - Overall objective.
  - Specific objectives.
  - Key study questions/indicators.
3. Design and methodology
  - Scope and focus.
  - Study/research design (explanation of methodological choice, including the constraints and limitations), study sites, and sampling design.
  - Techniques and tools for data collection and data analysis.
  - Participatory stakeholders' consultation process.
  - Ethical issues.
4. Organization and implementation of study/research
  - Implementation plan with detailed timeline for each activity
  - How to coordinate workload and manage the deliverables of the study.
  - Quality control: any measures to be taken given nature of the study and working conditions of each team members.
  - Risk management: any potential risks that can affect the study progress as well as its quality. Any measures to mitigate these risks
5. Study/research team
  - Agreed shared workload and task division amongst the three members
  - Clear responsibilities and accountabilities of each member of the team
6. Final Products
  - List of final products/results with the deadlines
  - Report outline (in Annex section)

## **ANNEX 4: OUTLINE OF A REPORT FOR STUDY/RESEARCH**

Title page

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Acknowledgements

List of acronyms

Executive summary: maximum 2 pages

Introduction

Methods

Findings

Discussions

Recommendations

Annexes (if any)

References (using Vancouver referencing system)