



## INDIVIDUAL CONSULTANT PROCUREMENT NOTICE

Date: **20 December 2012**

**Country:** Republic of Moldova

**Description of the assignment:** National Consultant in the psychiatric institution

**Project name:** Joint UNCT for Human Rights Promotion and Protection in the Republic of Moldova

**Period of assignment/services:** 18 months, January 2013-July 2014 (260 working days)

Proposals should be submitted online by pressing the "Apply Now" button or by email to [vacancies-moldova@undp.org](mailto:vacancies-moldova@undp.org), no later than [31 December 2012](#).

Requests for **clarification only** must be sent by standard electronic communication to the following e-mail: [violeta.fetescu@one.un.org](mailto:violeta.fetescu@one.un.org). UNDP will respond by standard electronic mail and will send written copies of the response, including an explanation of the query without identifying the source of inquiry, to all applicants.

### 1. BACKGROUND

The human rights issues in the psychiatric institutions in the Republic of Moldova were repeatedly addressed to international bodies and human rights organizations. The extensive recommendations of CPT during the visit in 2007 are still entirely pending for realization in practice.<sup>1</sup> The European Court of Human Rights is monitoring Moldova for violations of rights of persons in psychiatry institutions, including for violation of right to freedom.<sup>2</sup> Separate aspects of treatment of persons in psychiatric institutions are constantly present in international human rights reports.<sup>3,4</sup>

There are reports of human rights organizations on the treatment of persons in psychiatric institutions (MDAC5, IDOM).

Main issues (current situation): Cases of arbitrary involuntary confinement; lack of adequate/genuine review of detention criteria validity; cases of arbitrary legal capacity deprivation; cases of punitive work, medication, physical abuse against detainees and other persons in psychiatric institutions; increased number of beds and admissions with practically no complaints documented; lack of a complaint review system for psychiatry institutions, no legal or regulatory provisions of an independent complaint review mechanism; lack of data on the number of complaints at different levels; lack of implementation of the CPT recommendations on psychiatric institutions; Parliamentary Advocates office/Centre for Human Rights and NPM are primarily focused on penitentiaries and weak in monitoring psychiatry institutions; defective process of obtaining informed consent for treatment and hospitalization in psychiatric institutions; broad lack of understanding among medical and other staff of human rights requirements;

<sup>1</sup>CPT/Inf (2008) 39 <http://www.cpt.coe.int/documents/mda/2008-39-inf-fra.htm>

<sup>2</sup>CASE OF DAVID v. MOLDOVA (Application no. 41578/05), 27 November 2007

<sup>3</sup> Report of the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, Manfred Nowak; Mission to the Republic of Moldova; (A/HRC/10/44/Add.3)

<sup>4</sup>Committee on Economic, Social and Cultural Rights, Forty-sixth session, Geneva, 2-20 May; (E/C.12/MDA/CO/2)2011, para 24

<sup>5</sup>See summary report on visit of MDAC to Chisinau psychiatry hospital

ECtHR cases on Moldova on psychiatric issues; art 37 of the mental health act requires implementation by Ministry of Health of an independent patients' rights commission, which was not realized from 1997 until present.

Due to large number of residents in the Chisinau Psychiatry Hospital and the vulnerability of people with mental and intellectual disabilities to human rights violations, especially in a closed institution, there is a need for implementation of an independent complaint service – the ombudsperson in psychiatry institution. This will contribute to improvement of the quality of the mental health services provided.

## **2. SCOPE OF WORK, RESPONSIBILITIES AND DESCRIPTION OF THE PROPOSED ANALYTICAL WORK**

The scope of work of the Ombudsperson will be (1) to work with individuals and groups in the organization to explore and assist them in determining options to help resolve conflicts, problematic issues or concerns, and (2) to bring systemic concerns to the attention of the organization for resolution.

An organizational ombudsperson operates in a manner to preserve the confidentiality of those seeking services, maintains a neutral/impartial position with respect to the concerns raised, works at an informal level of the organizational system, and is independent of formal organizational structures. Successfully fulfilling that primary function in a manner consistent with the office's Standards of Practice requires a number of activities on the part of the ombudsperson while precluding others. The ombudsperson is also following the principle of subsidiarity and putting effort to ensure effective remedy in a timely manner at the lowest possible level, although having powers to bring issues to a higher level, bodies outside the institution and to court.

The core activity of the ombudsperson in the psychiatric institution will consist **in reviewing** of patients' complaints. This will require that the ombudsperson is physically located in the institution and access to his office is free; the working program is at least 4 hours in the office for a full working week; available and visible telephone numbers for after-hours emergencies.

The Ombudsperson has to ensure an effective complaint system that should be:

- respectful
- accessible
- responsive (and timely)
- accountable
- transparent
- non-discriminatory

This system needs to provide for genuine participation of consumers and careers (or institution staff) in the development, implementation and review of the system, incorporate sound governance and enable advocacy and recourse to independent complaints mechanisms.

### **The main responsibilities**

- Ensure (along with institution administration) that information about the ombuds service is visible and accessible in all wards and departments of the institution.
- Periodic check that all institution staff ensure full and unlimited access of users to filing complaints or addressing the ombudsperson.
- Check of complaint records resolved at the ward level, and/or overtaking appeals to these resolutions.
- Processing of users complaints. On an informal basis by such means as: listening, providing and receiving information, identifying and reframing issues, developing a range of responsible options, and – with permission and at Ombudsperson discretion – engaging in informal third-party intervention. When possible, the Ombudsperson helps people develop new ways to solve problems themselves.
- Pursues resolution of concerns and looks into procedural irregularities and/or broader systemic problems when appropriate.
- The Ombudsperson identifies trends, issues and concerns about policies and procedures, including potential future issues and concerns, without breaching confidentiality or anonymity, and provides recommendations for responsibly addressing them.
- Is entitled to bring significant cases to court or to other relevant institutions, if it is not resolved informally or the issue is systemic and ombuds' relevant recommendations are not considered and effectively implemented.

- Follow-up of complaint resolving.
- Follow up of systemic changes as corrective and preventive actions (CAPAs).
- Actively acts in wards, at admissions, especially at involuntary confinement, compulsory criteria for positively observe and ensure protection of the rights of residents and users of the psychiatry institutions, etc.
- Checks that ongoing clinical studies involving patients are approved by relevant ethics committees and follow legal and regulatory requirements in the field
- Periodic users satisfaction surveys.
- The Ombudsperson in the psychiatric institution has access to all departments of the institution, to procedures and records in these departments.
- The Ombudsperson observes and is entitled to independently identify human rights issues. These issues are included in the office's report but can be separately brought to the attention of the policy and lawmakers.

Since this is the first service of such a kind in a medical institution, accurate and transparent accountability may help to establish future effective patient rights services for other health fields and institutions. For this purpose there is a need of proper accountability and measurable indicators of activity and progress. These indicators need to be compliant to international standards in the field and should be reported to the advisory panel and/or founders biannually.

### **3. REQUIREMENTS FOR EXPERIENCE AND QUALIFICATIONS**

#### I. Academic Qualifications:

- University degree in law, social sciences or other relevant fields;

#### II. Experience and skills:

- Minimum 2 years of working experience in the area of the rights of persons with disabilities;
- Proven commitment to universal human rights and rights of persons with disabilities (excellent knowledge of UN Convention of the Rights of Persons with Disabilities);
- Advanced knowledge of practical human rights issues in the (mental) health field;
- Previous experience of work with/in international organizations with human rights activities – a strong advantage;
- Ability to work independently; auto-evaluation and report writing;
- Ability of effective inter-personal relationships with both patients and authorities;
- Adheres to the core values of the United Nations; in particular, is respectful of differences of culture, gender, religion, ethnicity, nationality, language, age, HIV status, disability, and sexual orientation, or other status.

#### III. Language requirements:

- Fluency in Romanian and Russian. Working knowledge of one or more additional languages relevant for Moldova, including Bulgarian, Gagauzian, Romani, Ukrainian or sign language is an asset;
- Knowledge of English would be an advantage.

### **4. DOCUMENTS TO BE INCLUDED WHEN SUBMITTING THE PROPOSALS**

Interested individual consultants must submit the following documents/information to demonstrate their qualifications:

#### 1. Proposal:

- (i) Explaining why they are the most suitable for the work;
- (ii) Provide a brief methodology on how they will approach and conduct the work (if applicable);

#### 2. Financial proposal;

3. Personal CV including past experience in similar projects and at least 3 references.

## 5. FINANCIAL PROPOSAL

The financial proposal shall specify a total lump sum amount, and payment terms around specific and measurable (qualitative and quantitative) deliverables. Payments are paid in equal installments and are based upon output, i.e. upon delivery of the services specified in the TOR. In order to assist the requesting unit in the comparison of financial proposals, the financial proposal will include a breakdown of this lump sum amount (including fees, mobile phone calls, etc.). The travel expenditures are to be approved in advance by the Project Manager and shall be covered from the Project budget.

## 6. EVALUATION

Initially, individual consultants will be short-listed based on the following minimum qualification criteria:

- University degree in law, social sciences or other relevant fields;
- Minimum 2 years of working experience in the area of the rights of persons with disabilities.

The short-listed individual consultants will be further evaluated based on the following methodology:

### Cumulative analysis

The award of the contract shall be made to the individual consultant whose offer has been evaluated and determined as:

- responsive/compliant/acceptable, and
- having received the highest score out of a pre-determined set of weighted technical and financial criteria specific to the solicitation.

\* Technical Criteria weight – 60% (300 pts.);

\* Financial Criteria weight – 40% (200 pts.).

Only candidates obtaining a minimum of 210 points would be considered for the Financial Evaluation.

Criteria	Scoring	Maximum Points Obtainable
<b>Technical</b>		
<ul style="list-style-type: none"> <li>• University degree in law, social sciences or other relevant fields;</li> </ul>	University degree – 40 pts.; MA degree – 50 pts.;	50
<ul style="list-style-type: none"> <li>• Minimum 2 years of proven professional experience in the area of the rights of persons with disabilities;</li> </ul>	2 years - 40 pts.; >2 years – up to 60 pts.;	60
<ul style="list-style-type: none"> <li>• Proven commitment to universal human rights and rights of persons with disabilities (excellent knowledge of UN CRPD);</li> </ul>	Yes - 60 pts.; to some extent - 30 pts.; No – 0 pts.	60
<ul style="list-style-type: none"> <li>• Advanced knowledge of practical human rights issues in the (mental) health field;</li> </ul>	Yes - 60 pts.; to some extent - 30 pts.; No – 0 pts.;	60
<ul style="list-style-type: none"> <li>• Previous experience of work with/in international organizations with human rights activities;</li> </ul>	Max -55 pts.;	55
<ul style="list-style-type: none"> <li>• Working knowledge of one or more additional languages relevant for</li> </ul>	Max - 15 pts.	15

Moldova, including Bulgarian, Gagauzian, Romani, Ukrainian or sign language is an asset. Knowledge of English would be an advantage.		
<b>Maximum Total Technical Scoring</b>		<b>300</b>
<b>Financial</b>		
Evaluation of submitted financial offers will be done based on the following formula: <b><math>S = F_{min} / F * 200</math></b> S – score received on financial evaluation; Fmin – the lowest financial offer out of all the submitted offers qualified over the technical evaluation round; F – financial offer under consideration.		<b>200</b>

Winning candidate

The winning candidate will be the candidate, who has accumulated the highest aggregated score (technical scoring + financial scoring).

**ANNEXES:**

**ANNEX 1 – TERMS OF REFERENCES (TOR)**

**ANNEX 2 – INDIVIDUAL CONSULTANT GENERAL TERMS AND CONDITIONS**