# Terms of Reference

Developing comprehensive tool for assessing climate resilience, environmental sustainability of all types of healthcare facilities (HCFs) in I. R. Iran

## 1. Background

WHO has introduced a global guidance for interventions in health care facilities regarding climate resilience and environmental sustainability in 2020 and Iran was one of the countries contributed to piloting this guidance and relevant assessment. The WHO guidance for climate resilience and environmental sustainability has already been piloted in 267 HCFs in 6 provinces of Iran (East Azerbaijan, Guilan, Khorasan Razavi, Sistan and Balouchestan, and Khuzestan), their level of climate resilience and environmental sustainability assessed, and based on the findings a set of recommendations provided. The global guidance includes checklists categorised under four domains as follows: 1) health workforce, 2) water, sanitation and health care waste, 3) energy, and 4) infrastructure, technology, and products. This guide includes 24 checklist tables around the four broad areas of the framework, based on which the requirements and status of certain health care facilities towards providing safe and quality care in the context of climate change and related to the fours abovementioned categories.

Moreover, the UNICEF-WHO JMP tool utilized to assess WASH components, which includes water, sanitation, hygiene, healthcare waster management, and environmental cleaning services, of 742 statistically representative HCFs of Iran in 2021, followed by developing a costed road map in consultation of all relevant stakeholders, and SWOT analysis of recommended and prioritized strategies in 2022.

The Sustainability Accelerator Tool (SAT) is an innovative new tool developed by Geneva sustainability center in partnership with global experts. It provides an assessment for the organization's maturity and understanding its performance across key indicators, in relation to climate and sustainability. This innovative digital platform empowers healthcare leaders to promote sustainable, low-carbon, equitable, and resilient healthcare practices. WHO/EMRO is collaborating with the Geneva Sustainability Center, part of the International Hospital Federation — a global, non-for-profit, non-governmental membership organization based in Geneva — to pilot a recently developed SAT in seven selected hospitals across seven countries in the region.

Two hospitals from I.R. Iran are nominated to be piloting SAT: 1) Dr. Masih Daneshvari Hospital at Shahid Beheshti University of Medical Sciences (SBMU), and 2) 17-Shahrivar Hospital at Gilan University of Medical Sciences (GUMS). Hospitals are provided with the following:

- **Sustainability Maturity Assessment:** Evaluate the current sustainability practices and readiness of the hospital. The tool assesses has fifty-six questions that were designed based on three domains (Environmental Impact, Health, Equity and Wellbeing, and Leadership and Governance) and seventeen subdomains.
- **Dashboard Overview:** Access an organizational maturity dashboard for a comprehensive view of sustainability status.
- **Domain-Specific Guidance:** Obtain strategic decision-making guidance tailored to specific sustainability domains.
- **Tracking on Core Indicators:** Monitor progress across twenty-three key sustainability indicators.
- **Performance Dashboard:** View detailed hospital performance on core indicators.
- **Global Benchmarking:** Compare performance with global benchmarks across various domains.
- **Knowledge Resources and Community Support:** Access a repository of resources and a community network for support.
- **Detailed Reports and Trends:** Generate comprehensive reports and identify performance trends.
- **Performance Comparison:** Benchmark hospital performance against global standards.

This shall be conducted by detailed review and assessment of all the relevant documents that introduce and study the indicators of climate vulnerability, resilience, and sustainability in the health system context (provided a list at the end of this document, as starting points and reference).

**Purpose**

Now, health system needs a **comprehensive assessment tool** including sets of indicators and benchmarks for indicative, consolidated, and coherent assessment for climate resilience, environmental sustainability, and WASH of hospitals and all types of HCFs.

Pilot project for implementing SAT in two hospitals in Iran in 2024-25 is taken as an opportunity to review SAT indicators on environmental sustainability provided by this toolkit, review both of global guidance and relevant checklists on climate resilience and environmental sustainability and JMP assessment tool on WASH in order to develop the above-mentioned comprehensive assessment tool, with indicators that address the following critical aspects of a climate resilient and environmentally sustainable healthcare facilities:

- Health system's vulnerability to climate change and environmental risks (health workforce, water, sanitation and health care waste, energy, and infrastructure, technology, and products)
- Health system's resilience to secure and retained efficient and functional building blocks and addressing health systems determinants, including
    - Leadership and governance
    - Financing
    - Workforce

        - Information systems
        - Medical supplies, technology and infrastructure
        - Service delivery
        - Community/people
- Health system's environmental sustainability with respect to its contribution to environmental risks and climate change (from SAT and other tools)

This shall be executed through coordination between different departments of the MOHME, including centre for environmental and occupational health, primary health care department, hospital care department, and the two pilot hospitals for SAT: 1) Dr. Masih Daneshvari Hospital at Shahid Beheshti University of Medical Sciences (SBMU), and 2) 17-Shahrivar Hospital at Guilan University of Medical Sciences (GUMS).

## 2. Objectives

The main goal of this project is two-fold:

1) To document and learn from the piloting of and assessment tool of SAT in the target hospital(s) in Iran
2) **To define sets of indicators and benchmarks for measuring the status of health system's vulnerability, resilience, and sustainability to climate change and environmental risks in all types of healthcare facilities, in complementarity to the available similar tools in Iran,** through an analytic review of the SAT, WHO's health system resilience framework, WHO's vulnerability assessment checklists for Health Care Facilities in the Context of Climate Change, WHO's guidance on climate resilience and environmental sustainability guidance and checklists, JMP WASH tool, Health systems resilience toolkit, primary health care measurement framework and indicators, and other relevant references, tools, and indicators.

## 3. Work to be performed

Output 1: Developing a detailed proposal and an execution team

**Deliverable 1.1:** The incumbent is expected to provide a detailed proposal to be reviewed and approved by MOHME and WHO. The proposal need to cover the following items:

- Problem statement
- Objectives and expected outcomes
- Methodology (particular methodology for activities 2.1, 3.1, and 3.2) for comprehensive implementation and uniform reporting
- Activities and KPIs
- Timeframe and budget breakdown
- Risks and mitigation measures

- Team composition by expertise and affiliation, roles, and responsibilities

Output 2: Report on the analytical review of the literature, documents, and tools for assessment of climate vulnerability, resilience, WASH, and environmental sustainability in healthcare facilities

**Deliverable 2.1:** In-depth literature review on all frameworks and toolkits developed, introduced and utilized for analysing health system resilience, sustainability and vulnerability to climate change and environmental risks. More specific attention to the following documents is recommended:

  - Sustainability Accelerator Tool
  - WHO's health system resilience framework,
  - WHO's vulnerability assessment checklists for Health Care Facilities in the Context of Climate Change,
  - WHO's guidance on climate resilience and environmental sustainability guidance and checklists,
  - WHO-UNICEF JMP WASH tool,
  - Primary health care measurement framework and indicators,
  - Core questions and indicators for monitoring WASH in Health Care Facilities in the Sustainable Development Goals
  - and other relevant references, tools, and indicators

**Deliverable 2.2:** Analysing all the literature and tools, e.g. the WHO guidance for climate resilience and environmental sustainability of healthcare facilities, and JMP-WASH assessment tool, and identifying the essential questions and a set of indicators for measuring the status of health system's vulnerability, resilience, and sustainability to climate change and environmental risk in all types of healthcare facilities in complementarity to environmental sustainability indicators.

Output 3: Piloting the SAT at the target hospitals in Iran

**Deliverable 3.1:** conducting the SAT at the introduced hospitals and documenting all the findings, lessons learned, and analysis of the indicators

Output 4: providing sets of indicators for measuring climate vulnerability, resilience, environmental sustainability, WASH and waste management in healthcare facilities

**Deliverable 4.1:** Once SAT piloted and the questionnaire analysed with respect to the sustainability indicators, in order to complement the conducted WHO guidance of climate resilience and environmental sustainability of healthcare facilities in Iran, we expect a thorough review on the questions of the tools towards identifying the most essential questions that would measure the status of healthcare facilities in terms of health system's vulnerability, resilience, and sustainability to climate change and environmental risks.

**Deliverable 4.2:** sets of essential indicators and questions for measuring the status of healthcare facilities in terms of health system's vulnerability, resilience, and sustainability to climate change and environmental risks

**Note: Deliverables should be full in English and Farsi.**

## 4. Planned timelines

This project should be completed by the end of the year 2025 (before 15 December)

| | **Output/Phase** | **Due date** | **% of total payment** |
|---|---|---|---|
| 1 | Counter signed contract | | 0% |
| 2 | Developing a detailed proposal and an execution team | | 20% |
| 3 | Report on the analytical review of the literature, documents, and tools for assessment of climate vulnerability, resilience, WASH, and environmental sustainability in healthcare facilities | | 30% |
| 4 | Piloting the SAT at the target hospitals in Iran | | 20% |
| 5 | providing sets of indicators for measuring climate vulnerability, resilience, environmental sustainability, WASH and waste management in healthcare facilities | | 30% |

## 5. Specific requirements

### Characteristics of the service provider:

**Mandatory experience:**

- **Status:** The provider shall be expert in the field of environmental health with proven expertise in affairs of hospitals and healthcare facilities for more than 5 years.
- **Previous experience:** Previous successful work with WHO, other international organizations. Include the resume of the provider.

**Desirable experience:** Past successful projects relevant to environmental and occupational health, and health system resilience

## 6. Place of assignment

I. R. Iran

## 7. Travel N/A

The Consultant is **not expected to travel**

Essential References:


- World Health Organization, 2022. Health systems resilience toolkit: a WHO global public health good to support building and strengthening of sustainable health systems resilience in countries with various contexts.
- World Health Organization, 2021. Checklists to assess vulnerabilities in health care facilities in the context of climate change. World Health Organization.
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- World Health Organization, 2022. Primary health care measurement framework and indicators: monitoring health systems through a primary health care lens. Web annex: technical specifications.
- Kutzin, J. and Sparkes, S.P., 2016. Health systems strengthening, universal health coverage, health security and resilience. Bulletin of the World Health Organization, 94(1), p.2.
- Nuzzo, J.B., Meyer, D., Snyder, M., Ravi, S.J., Lapascu, A., Souleles, J., Andrada, C.I. and Bishai, D., 2019. What makes health systems resilient against infectious disease outbreaks and natural hazards? Results from a scoping review. BMC public health, 19, pp.1-9.
- World Health Organization, 2021. 21st century health challenges: can the essential public health functions make a difference?: discussion paper.
- Center, A.D.R., 2015. Sendai framework for disaster risk reduction 2015–2030. United Nations Office for Disaster Risk Reduction: Geneva, Switzerland.
- World Health Organization, 2008. International health regulations (2005). World Health Organization.
- World Health Organization, 2018. Core questions and indicators for monitoring WASH in health care facilities in the Sustainable Development Goals.