

JOB DESCRIPTION

Preliminary Job Information			
Job Title	HEALTH PROGRAM MANAGER		
Country & Base of posting	NIGERIA, BASED IN MAIDUGURI		
Reports to	DEPUTY FIELD COORDINATOR		
Date of Arrival	SEPTEMBER 2019		
Duration of mission	6 MONTHS		

General Information on the Mission

Context

Première Urgence Internationale (*PUI*) is a non-governmental, non-profit, non-political and non-religious international aid organization. Our teams are committed to supporting civilians' victims of marginalization and exclusion, or hit by natural disasters, wars and economic collapses, by answering their fundamental needs. Our aim is to provide emergency relief to uprooted people in order to help them recover their dignity and regain self-sufficiency. The association leads on average 200 projects per year in the following sectors of intervention: food security, health, nutrition, construction and rehabilitation of infrastructures, water, sanitation, hygiene and economic recovery. PUI is providing assistance to around 6 million people in 22 countries – in Africa, Asia, Middle East, and Europe.

Following the intensification of the Chad Lake conflict in Nigeria (North East of the Country), PUI opened its Nigerian mission in 2016. PUI is also assisting the Nigerian refugees in Cameroon.

General Context:

With the biggest population in Africa, (between 178 and 200 million inhabitants), Nigeria is ranked as one of the first economy of the continent thanks to oil and petroleum products as well as mineral resources (gold, iron, diamonds, copper etc...). Despite a strong economy, Nigeria suffers from huge development disparities between North and South of the country, from inequalities between rich and poor, and from a high rate of corruption, at every level of the economic and administrative system. Moreover, Nigeria experiences a great ethnic and religious diversity. Within this volatile environment, the conflict in the North-East of the country (states of Borno, Adamawa and Yobe) and the linked widespread violence triggered a large scale humanitarian crisis.

The conflict in the North-East

The group now called Boko Haram was created in 2001, with activity related to social actions and schooling. Over the years, the group started an armed rebellion against the government of Nigeria. Several members of the group were arrested, sparking deadly clashes with Nigerian security forces. The group's founder and then leader Mohammed Yusuf was killed while still in police custody. This was the beginning of the radicalization of the movement and of the conflict still affecting the area in the present days. In 2015, the Nigerian army received military support of neighboring countries (Chad, Cameroon, Niger and Benin) and of an occidental military coalition (US, France, British). The same year, Boko Haram pledged allegiance to ISIS and ended up divided into two branches: ISWAP (linked to ISIS) and JAS (the historical branch).

This conflict as well as the previous lack of basic services have created acute humanitarian and protection needs for those impacted by the crisis, including refugees, internally displaced persons (IDPs) and local communities.

Humanitarian consequences:

The armed conflict affected more than 14 million people, with 2 million forcibly displaced in the Lake Chad Basin region, and new displacement continues. Following the new conflict and military developments, several Local Governmental Areas (LGAs) of Borno State were deemed accessible to humanitarian aid by the Nigerian government. But outside of the capital cities, in the countryside, the security is not granted to the populations and to the humanitarian workers. Assessments conducted in newly accessible areas in Borno State revealed severe humanitarian and protection conditions. Still, many people remain inaccessible to humanitarian actors due to insecurity, particularly in Nigeria's Borno State and border areas of Cameroon and Niger.

As of January 2019, close to 3.4 million displaced and returnees have been registered in Northern Nigeria, sometimes under conditions that have not been voluntary, safe and dignified. Projection for 2019 forecast new displacement and arrivals from the inaccessible areas (around 200,000). In total, at least 1.32 million of IDPs are located in Borno State. 50% of them are living in host communities. Around 55% of those displaced are children and the number of female and child-headed households is on the rise because male heads of households have either disappeared, been killed or fear to return to join their families. Sexual and gender-based violence (SGBV) is widespread, and many people have suffered the trauma of violent experiences.

The Humanitarian Needs Overview (HNO) 2019 estimated some 7.1 million people in need of humanitarian assistance in Nigeria across the three states of the north east (Borno, Yobe and Adamawa) with most needs concentrated in Borno State. In determining the scale of the response for 2019 (more than 1 billion USD consolidated appeal!), humanitarian partners agreed to focus on states assessed as the most affected by the violent conflict, infrastructure destruction, mass displacement, ongoing insecurity and ensuing factors. The most critical areas requiring humanitarian assistance are located in Borno, Adamawa and Yobe states where millions of people are in need of urgent life-saving assistance.

PUI's strategy/position in the country

The main programmatic objectives of the mission for 2019 can be synthetized as follows:

- Continue and further develop the response to urgent needs of IDPs and Host Communities living in Maiduguri City through Food Security, Health, Nutrition and Protection activities.
- Further develop the integrated multi-sector response in Maiduguri City with the widening of the sectoral scope of PUI intervention by adding Protection, WASH... to the response portfolio (either directly or through coordinated approach with external actors)
- Develop the support to vulnerable populations in Monguno, through the launch of 2 Health, Nutrition and Protection projects

History of the mission and current programs

The PUI Nigerian Mission has been officially opened in April 2016, with a focus on meeting urgent needs, including improving access to food commodities for Internally Displaced People (IDP) and host communities (HC), later adding Primary Health Care and Nutrition activities. This initial intervention was focused on populations living in Maiduguri. The progressive sectorial widening allowed to start implementing an integrated approach from 2017 in Bolori II Ward in food security, livelihoods, nutrition and health, with the support of ECHO, FFP, OFDA and CDCS, in line with PUI's global strategy. In 2019, PUI will further develop its comprehensive response in Maiduguri and Monguno, with the main objectives of reducing morbidity and mortality of the most vulnerable population and promoting protection amongst the whole affected community.

Configuration of the Mission			
BUDGET ESTIMATE 2019	17 MILLION EUROS		
BASES	ABUJA (ADMINISTRATIVE OFFICE) MAIDUGURI (COORDINATION OFFICE), MAIDUGURI AND MONGUNO (FIELD OPERATION OFFICE)		
NUMBER OF EXPATRIATES	30		
NUMBER OF NATIONAL STAFF	300		
NUMBER OF CURRENT GRANTS	3		
MAIN PARTNERS	ECHO, USAID/OFDA, CDCS, USAID/FFP		
ACTIVITY SECTORS	Food Security (Cash transfer) Early Recovery and Livelihood (inception phase) Health (Primary Health Care) Nutrition WASH Protection - Community Outreach		

Job Description

Overall objective

The Health Program Manager supervises the implementation of medical activities in the Primary Health Care Centers (PHCC) and in the Outreach sites (OS) providing primary health care supported by PUI.

Tasks and Responsibilities

- Programs: He/She ensures proper implementation and monitoring of medical program falling under his/her responsibility, while observing PUI's health policy.
- Human Resources: He/She supervises the Medical Team of the PHCCs and the outreach sites supported by PUI (PUI salaried employees and, as the case may be, daily paid workers).
- ▶ Logistics and Administration: He/She ensures compliance of activities falling under his/her responsibility with logistical and administrative procedures.
- ▶ **Representation**: He/She represents the association before partners, authorities and local actors involved in the implementation of medical programs.
- ▶ Safety: He/She contributes to efforts aimed at ensuring compliance with safety rules at the site, and transmits all information relating to safety concerns to his/her immediate supervisor.
- ▶ Strategy: He/She contributes to the development of new interventions on the basis of identified needs.

Specific objectives and linked activities

- 1. ENSURE IMPLEMENTATION AND MONITORING OF MEDICAL PROGRAM/S
 - ▶ He/She ensures that beneficiaries and local populations understand the project objectives and participate actively in their implementation.

- He/She plans activities and ensures that activity timelines are met. In the event of serious delays in project implementation, he/she immediately informs his/her supervisor and proposes solutions to remedy to the situation.
- ▶ He/She works in close collaboration with the Medical Coordinator and the Medical Department on the medical strategy for projects, the quality of activities, the technical choices to be made, and reporting obligations.
- ▶ He/She ensures the proper functioning of medical programs falling under his/her responsibility, and ensures compliance with goals defined in the project proposal/s. Notably, he/she tracks the performance indicators defined, reports on progress to his/her immediate supervisor, signals any difficulties encountered in project implementation, and proposes improvements or reorganization on an as needs basis.
- ▶ He/She ensures that proper medical protocols are implemented according to international and national recommendations and quidelines.
- ▶ He/She ensures follow-up and analysis of epidemiological data, in collaboration with the Medical Coordinator.
- He/She undertakes needs assessments of programs in relation to medical equipment, medications and medical consumables.
- He/She ensures the implementation of monitoring and/ or evaluations, according to the defined needs of the project/s. He/She undertakes analyses and transmits the data collected to his/her immediate supervisor, and to the Medical Coordinator. Depending on the needs of the projects and/or the data collected, he/she produces and disseminates reports of the monitoring and evaluation exercises to the relevant people.
- ▶ He/She ensures proper archiving of all the documents, tools and training materials produced in the context of project/s and ensures the availability of the verification sources mentioned in the proposals.
- He/She transmits the internal and external reports to his/her immediate supervisor and to the Medical Coordinator while making sure to meet the internal deadlines for endorsement (Situation Report) and the external contractual deadlines (project reports). He/she contributes to the monthly report of the mission and to the quarterly report of medical activities to be transmitted to the Medical Department.
- He/She must guarantee the appropriateness of programs and their respect for the health policy and framework of operations of PUI. He/she submits any requests for advancement into new medical activities to the Medical Coordinator or to the Medical Department at Headquarters.
- ▶ He/She, under the supervision of the Deputy Field Coordinator Program, fully collaborates with other technical departments and programs to ensure the proper implementation of PUI integrated approach.

2. SUPERVISE THE MEDICAL TEAM

- ▶ He/She familiarizes himself/herself with the Internal Rules of Procedure of PUI for the mission, and ensures that they are known and respected by the team.
- ▶ He/She prepares job profiles for members of the team, has them endorsed by the Field Coordinator/Deputy Field Coordinator Program, and participates actively in the hiring process (interviewing, testing, etc), as well as in any decisions related to the termination of employment contracts of team members.
- ▶ He/She ensures that each person is subject to a written evaluation at least once per contract period and per year, and at a minimum before leaving office.
- He/She creates coordination mechanisms specific to the team, and ensures proper supervision.
- ▶ He/She identifies the training needs of the team and addresses them (organizational and medical support, methodology, organization of training sessions...)
- ▶ He/She constructs the organizational chart of the team, and has it endorsed by the Base Manager.

3. ENSURE LOGISTICAL AND ADMINISTRATIVE SUPPORT FOR MEDICAL PROGRAMS

- ▶ He/She addresses his/her needs for medications, medical consumables and equipment to the Field Coordinator/Deputy Field Coordinator Program, and in line with available budgets. He/she takes into account the time and logistical constraints of the mission, as well as the purchasing rules specific to the programs, in order to ensure that his/her requests to Logistic Department are realistic in light of procurement timelines. He/She contributes to the analysis of supplier of bids for purchases with highly technical specifications.
- ▶ He/She participates actively in the preparation of calls for tender, as the case may be, in collaboration with the Logistic Department.
- In coordination with the Medical Coordinator and Mission Pharmacist, he/she ensures, appropriate storage of medications, medical consumables or equipment specific to his/her program(s).
- ▶ He/She communicates to the Field Coordinator/Deputy Field Coordinator Program on a weekly basis his/her needs related to vehicles and communication equipment for the implementation of program(s).
- In coordination with the Field Coordinator/Deputy Field Coordinator Program, he/she organizes the logistical components of his/her programs (delivery, distribution, on-site storage, etc).
- On a monthly basis he/she provides the Field Coordinator/Deputy Field Coordinator Program with all information necessary for the development of cash flow estimates specific to his/her program(s).
- ▶ He/She ensures that the monthly budget tracking of the program(s) falling under his/her responsibility is up-to-date, participates in analyses, detects possible anomalies, and proposes adjustments to the Field Coordinator/Deputy Field Coordinator Program.

4. ENSURE THE REPRESENTATION OF PUI BEFORE HEALTHCARE PROVIDERS

- ▶ He/She represents the association before local actors involved in the implementation of medical programs, and ensures that good relations are maintained with each of them, (consistent with the principles of neutrality and independence of PUI).
- In agreement with the Field Coordinator/Deputy Field Coordinator Program and Medical Coordinator, he/she attends coordination meetings on relevant medical matters when they take place, and participates actively.
- In the event of visits from Donors, he/she participates actively in the preparation and the smooth organization of the visit.

5. ENSURE THE SAFETY OF PROPERTY AND PEOPLE

- ▶ He/She ensures that the safety plan is known by the team falling under his/her responsibility, and that safety rules are respected.
- ▶ He/She contributes to data collection on safety issues in his/her field of operations and disseminates them to the Head of Base regularly or on an ad-hoc basis if urgent.
- ▶ He/She must ensure that project/s, methodologies, or selection criteria do not place beneficiaries, PUI staff or any other persons in harm's way. He/she alerts the Field Coordinator without delay, in case of impending danger to teams or beneficiaries.
- ▶ He/She ensures that members of his/her team and daily paid workers as the case may be, are provided with safety gear adapted to their activities (for example: PEP kits[post-exposure treatment kits], gloves...)

6. CONTRIBUTE TO THE DEVELOPOMENT OF NEW PROPOSALS

- ▶ He/She participates in identifying health-related needs in coordination with the Field Coordinator/Deputy Field Coordinator Program and the Medical Coordinator or the Medical Department at Headquarters.
- In the context of identifying new operations, and together with the Field Coordinator/Deputy Field Coordinator Program, he/she contributes to the preparation of project proposals for the Health sector.
- ▶ He/She participates in the strategy development of the mission.

Team Management

Number of people to manage and their position (expatriate/local staff)

- ▶ Direct management: Health staff at the PHCC or Outreach sites (local staff)
- ▶ Indirect management

Other Interfaces

- Internal: functional link with the Medical Coordinator, work in collaboration with Mobile Clinics Unit Program Manager and with the Reproductive Health Officer, and the Nutrition Officer
- ▶ External: other health stakeholders

Required Profile Required Skills and Know-How			
TRAINING	Registered Nurse Residency in Medicine	Medical Degree Bac + 5 Pharmacy Public Health Project Management	
PROFESSIONAL EXPERIENCE	X X	Х	
KNOWLEDGE AND SKILLS	▶ Good writing skills▶ Knowledge of Project Management	➤ Knowledge of procedures: institutional donors (OFDA, ECHO, AAP, UN agencies)	
LANGUAGES	X X		
SOFTWARE Pack Office Other (specify	X		

Required Personal Characteristics (fitting into the team, suitability for the job and assignment)

- ▶ Ability to work independently while taking initiatives and showing a sense of responsibility
- ▶ Ability to withstand pressure
- ▶ Sense of diplomacy and openness of spirit
- ▶ Analytical skills
- Organization and manage priorities

- ▶ Good brainstorming and trouble-shooting skills
- ▶ Ability to work and manage affairs professionally and with maturity
- ▶ Ability to integrate the local environment into operations, in its political, economic and historical dimensions

Other

Conditions

Status

EMPLOYED with a Fixed-Term Contract

Salary Package

 MONTHLY GROSS INCOME: from 1 815 up to 2 145 Euros depending on the experience in International Solidarity + 50 Euros per semester seniority with PUI

Costs Covered

- ▶ Cost covered: Round-trip transportation to and from home / mission, visas, vaccines...
- INSURANCE including medical coverage and complementary healthcare, 24/24 assistance and repatriation
- HOUSING in collective accommodation
- DAILY LIVING EXPENSES (« Per diem »)
- ▶ BREAK POLICY: 5 working days at 3 and 9 months + break allowance
- PAID LEAVES POLICY: 5 weeks of paid leaves per year + return ticket every 6 months