Term of Reference Recruitment of Technical Assistance to the Rehabilitation of Ruhengeri Referral Hospital Project management

1. **Background information**

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| Title of the mission | International technical assistance to project owner in the context of the rehabilitation of Ruhengeri Referral Hospital in Rwanda |
| Beneficiary(s)/project owner | Rwanda Biomedical Center (RBC); Rwanda Housing Authority (RHA); Rwanda Ministry of Health (MoH) |
| Country | Rwanda |
| Total duration of the days | 420 days starting in March 2025 |
| Attached documents | * Detailed Technical program (Annex 1) * Bioclimatic and environmental Program (Annex 2) * ToR of the Single Project Implementation Unit (SPIU) Annex 3 * ToR of the Design and Supervision company (Annex 4) * Project timeline (Annex 5) |

1. **Context and rationale for need**

As part of the implementation of the national strategy for transformation (National Strategy for Transformation 2017-2024 – NST1) the Rwandan government has requested a loan from the French Development Agency (AFD). The project aims to finance the first phase of the reconstruction of the hospital in Ruhengeri. This project is one of the major symbols of the revitalization of cooperation between France and Rwanda. This project has been the subject of a commitment by the Rwandan executive to the population and is therefore evolving in a context of very constrained calendar.

In support of the AFD loan, financing is being mobilized to improve access to quality care throughout the country. In this context, Expertise France is managing a 4 million euros grant for the implementation of a project to strengthen human resources in health in Rwanda and capacity building of the Rwanda Biomedical Center (RBC) and the Rwanda Housing Authority (RHA), in particular with regard to its missions related to the Project Management of the Ruhengeri Referral Hospital.

The Ruhengeri hospital, capital of the district of Musanze (population 398,986), is a referral hospital for a population of about 2.15 million to date, located in the Northern and Western provinces of the country. Due to its strong population growth (+3% per year), this basin will have 3 million inhabitants by 2040. It has also been identified as a second-level teaching hospital (level just below a university hospital). Sixteen health centres in the Musanze district refer patients to the Ruhengeri hospital, but the hospital also receives patients from eleven health centers in other districts. Musanze is located in the tourist region of the Volcanoes National Park. The catchment area of the Ruhengeri hospital is therefore large and the needs for health, especially specialized health services, are growing.

The current pavilion type hospital, built between 1930 and 1980, consists of 320 beds, and carries out annually about 7000 deliveries of which 50% by cesarean section, and over 2,500 surgical procedures per year. The hospital’s emergency unit receives many cases of trauma (road or farming accidents).

The hospital is therefore very active in internal medicine, surgery and maternity. The hospital also has a one stop center in charge of Sexual and Gender based violence cases management. Its medical team (the current hospital has about 350 permanent staff to date) performs about 16,000 admissions per year, 46% in obstetrics and gynecology, 15% in internal medicine, 13% in pediatrics, 12% in surgery, 9% in neonatology and 4% in intensive care and 60,000 outpatient visits.

The international subsidiary of Assistance Publique – Hôpitaux de Paris (AP-HPi) has been hired by AFD to carry out a feasibility study in 2023. This study highlighted that the hospital faces many obstacles:

* Extremely constrained spaces, which are often obsolete;
* 8 to 16 bed common rooms with almost contiguous beds posing major problems of hygiene and quality of hospital life;
* Difficult working conditions for caregivers, unsuitable for respecting patient privacy and hygiene rules;
* Lack of human, medical and paramedical resources and care, particularly in the areas of intensive care, neonatology, emergency, surgery and medicine;
* Very insufficient equipment, particularly in radiology;
* The buildings are not interconnected and therefore the patient flow is to be reviewed.”

The strengthening of the healthcare offer and the reconstruction of the hospital are therefore essential for the region.

Based on a prospective and territorial diagnosis of health needs, the study by AP-HPi has clarified the capacity requirements for the future hospital, developed a detailed technical program, and proposed a budget plan for this project. The total cost of the project is €96M, for a first tranche of financing, including €75M financed by the sovereign loan availed by AFD. This cost covers all the expenses – studies, works, equipment – and construction costs estimated at 52 million euros. Refer to the Detailed Technical Program (PTD) by the AH-HPi, volume I functional program – volume II technical program – volume III detailed sheets by type of premises.

The capacity sizing of the establishment was set at 550 beds and places for a theoretical surface area of 44 272 m² SDO. This new facility will notably have an enhanced capacity in gynecology and obstetrics with 180 beds, 40 incubators in neonatology and a dedicated 4 operating rooms. In addition, the facility will have 36 intensive care beds, 120 medical beds, 100 surgical beds with 8 operating rooms.

In addition to this support provided by AFD through APHPi, Expertise France has hired SFEH (Société Française d’Equipements Hospitaliers) a French company specialized in hospital infrastructure project engineering since April 2024 to support the project owner in the recruitment of the design and supervision company for the project. This support includes the participation advice to the Public Tender Committee for the evaluation of the Expression of Interest, the evaluation report, drafting the request for proposal, evaluation of the technical offer of the selected bidders for consultancy services and contracting

The project is managed by the Rwanda Biomedical Center (RBC) under the Ministry of Health. This agency is supported on the construction part (procurement, control of works, etc.) by the Rwanda Housing Authority (RHA) under the Ministry of Infrastructure. Due to the support provided by AFD through the loan, its Procurement Guidelines apply to contracts financed by AFD (design and construction of the new hospital, equipment).

The recruitment of a technical assistance is then necessary to support the RBC, RHA in charge of the rehabilitation of Ruhengeri hospital.

It is in this context that Expertise France recruits: **An international technical assistance to project owner.**

1. **Purpose and form of the consultation**

The purpose of this consultation is to assist RBC and RHA in the implementation of the rehabilitation work of the Ruhengeri Referral hospital. It consists of technical assistance (TA) and specific expertise (administrative, financial, planning and budgeting, climate resilience, and technical components) to achieve the successful rehabilitation works of the Ruhengeri Referral Hospital. The TA will also support RBC and RHA on the development of construction standards for green and climate-resilient hospitals.

This technical assistance will be through an international company with all related expertise needed for hospital construction. Experts will be deployed on short term mission to provide specific assistance to the project owner. These short-term support missions will be carried out either remotely or on-site, with appropriate coordination. The company should propose a clear and realistic methodology to assist the project owner at each phase of the project till the end.

The total duration for these missions is estimated at 420 days.

Apart from the TA, Expertise France will recruit a seasoned hospital construction engineer hospital who will be deployed as permanent resident expert during the 2 years of construction works. The TA will coordinate the deployment of all experts and to work closely with the resident expert.

1. **Content of the service**

International technical assistance to project management will be involved in particular:

* Methodological and operational assistance to the contracting authority (Government of Rwanda and implementing agencies (RBC and RHA) in project monitoring to:
  + Guarantee the quality and performance of services;
  + Monitor the successful implementation of gender and climate commitments associated with the project and infrastructures;
* Decision support: ensure methodological support for the preparation of decisions between the various project stakeholders (MOH, RBC, RHA), the consultant company (design and supervision) and the contractor;
* Advise the client on preparation of decision and recommendations to address any issue raised or to challenge in an objective way to the consultant company (design and supervision) and the contractor;
* Assist the client in the assessment and approval of design submitted by the design and supervision (Consultancy) company;
* Support the procurement processes throughout the project and ensure that the procurements comply with AFD procedures and goes smoothly:
* Support the choice of the allocation method (lots or single contract)
* Assist in drafting the tender documents to hire the contractor
* Support the evaluation of bids (technical and financial offers): assist in drafting the minutes of the bid opening and selection
* Support negotiations
* Assist in drafting and follow up of contracts for works
* Assist the project owner in periodic monitoring (inspections), control and reception of services provided by the contractor, contractors and suppliers/installers of equipment;
* In preparation for the opening of the hospital and ensuring operational readiness: support change management in training of healthcare professionals at the hospital in the use of the facilities and installed equipment and system;
* Training and skills transfer: Set up training/awareness of hospital construction/ biomedical engineering issues according to the needs of RBC and RHA;
* Technical expertise to ensure proper control of all matters related to structure, fluids, electricity, energy management, bioclimatic design, environmental and social impacts;
* Ensure at all phases the compliance of the project to bioclimatic guidelines as described in the document “Bioclimatic note Ruhengeri” produced by OASIIS (attached in Annex 2 );
* Technical assistance to RBC, RHA and MOH on development of building standards of hospital infrastructures including climate resilience and energy efficiency.
  1. **The different phases of assistance**

The mission outlined in these terms of reference is a general assistance mission for the project owner and covers the following stages (see attached project timeline/roadmap in annex 5):

* + - 1. **Design**
      2. **Post design (consultation)**
      3. **Construction works and equipment aspect**
* Actual construction works
* Handover/Acceptance and commissioning (infrastructure and equipment)
* Operational readiness (infrastructure and equipment)
  + - 1. **Relocation**

The mission includes, for all the mentioned phases, assistance to the project owner in managing the project, particularly with the following:

* The definition of the means and procedures to be implemented in order to ensure the project is completed within the set deadline;
* Support in the preparation of all documents required and necessary for consultation with designers and all service providers associated involved in the project;
* Time management: preparation, monitoring and possible review of the provisional schedule; project notes: progress points, validation/arbitration points;
* Assistance in coordinating and steering the operation throughout the life of the project;
* Assistance in the purchase of equipment, designing and implementation and training plan;
* The control and reception of the services provided by the design and supervision company and the contractor.
  1. **Content of the phases**

1. **The design**

It consists of:

* Support the project owner in monitoring, analysis and review of all studies and documents carried out by the Consultancy company (Preliminary Design Studies, Detailed Design, …) in light of initial technical documents validated by the project owner;
* Support the project owner in review and validation of the construction drawings.

The program (Detailed Technical Program) is an essential contractual part. It formalizes all the requirements, constraints and needs to which the future project will have to provide a solution within the framework of a financial envelope. See annex 1

1. **Post design**

* Assistance in consulting companies: support for the drafting of tendering documents for contractor;
* Advice to the project owner in the evaluation and selection of construction company (Contractor), support for the drafting evaluation reports, support in the drafting of award notices and contracts.

The design phase and post design phase shall be considered as completed when all works contracts have been notified by the project owner to the construction bidders.

1. **Construction work and equipment aspects**

A resident expert with hospital construction experience will be recruited by Expertise France. He will be embedded at RHA and based mainly on site at Ruhengeri for the daily supervision and monitoring of the construction works on behalf of the project owner.

The resident expert in coordination with the TA company will be in charge of the following phases (the TA will have to provide complementary expertise if needed on the field).

This work phase includes:

* + 1. **The actual construction**
* Facilitation of scoping meetings with project stakeholders;
* Support on revision and validation of all reports par the project owner
* Assistance in the management of the design and supervision company;
* Assistance in the management of contracts and approvals for subcontractors of works’ contracts;
* Facilitation of periodic meetings between the project owner and the design and supervision company (Consultant) and drafting of reports (and monitoring their validation);
* Verification of the consideration (by the companies) of the requirements of the environmental and social commitment plan;
* Participation in all site meetings;
* If necessary and in coordination with the project owner, provide the technical expertise needed to support the good completion control;
* Support and monitoring of the implementation, monitoring, analysis and receipt of tenders for the acquisition of biomedical equipment, general, and IT equipment;
* Participation alongside the project owner, in meetings with the design and supervision company on monitoring/ preparation for installation/ start-up of equipment acquisition.

The work phase and equipment component shall be considered completed when the operations prior to the acceptance of the works have been carried out and the contracts for the equipment notified.

* + 1. **Handover/Acceptance and commissioning (infrastructure and equipment)**
* Support the project owner in the verification of the organization proposed by the contractor for the receipt of infrastructure and equipment;
* Assist the project owner in monitoring the receipt of equipment and verifying the conformity of this equipment with the specification in the contracts;
* Assist the project owner in monitoring the reception phase and checking that site work has been carried out in accordance with the written documents of the contracts:
* Assistance to the project owner in removal of reservations site visits;
* Monitoring of the production of files/documents for works and for further work
* Advice and assistance to the project owner in the implementation of guarantees and insurance and any litigation procedures;
* Support for the preparation of documents enabling the presentation of the final account, release of guarantees on first demand, surety or retention of guarantee at the end of the defect liability period;
* Assistance in the implementation of closing procedures (security commissions, reports, etc.).
* Support for the establishment and transmission of the final general statement of the design and supervision company.
* Support in the development of the perfect completion book.
  + 1. **Operational use (infrastructure and equipment)**
* Support for the tendering process for the maintenance (ToR, evaluation of companies, contracting etc.);
* Ensures the proper integration of maintenance needs in equipment procurement document and tools to ensure suppliers build the capacity of project owner (RBC, Hospital biomedical technician and users);
* Support for the deployment of the hospital information system (user training, data migration/transfer etc.).

1. **The relocation**

* Assistance to the project owner in the planning and implementation of the services and equipment relocation plan;
* Support to the project owner who schedules, defines, plans, prepares and manages all the stakeholders in charge of the relocation, including moving operations, and controls the proper execution.
  1. **Deliverables expected**

This international technical assistance mission to support the project owner will take the form of a mixed public procurement contract with:

* A fixed part corresponding to continuous technical support throughout the project's duration;
* A part with purchase orders (or a contingent part) to address the evolving needs of the Project Owner.

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| **Deliverables in support of the project owner** |
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| **PHASE A. DESIGN** |
| 1. A detailed analysis of the design and supervision company (Consultant) inception report, preliminary design, detailed designs 2. A synthetic report with all the recommendations to the project owner |
| **PHASE B. POST DESIGN** |
| 1. The tender documents are produced and submitted to the project owner for validation 2. Writing of the evaluation report and submitted to the PTC for validation 3. Minutes on the supervision of the recruitment process of the construction company (Contractor) in connection with the AFD procedures is produced 4. The Bid Analysis Report is produced and submitted to the PTC for validation 5. A report with recommendations on the contract negotiation 6. A report with recommendations in claim management if any |
| **PHASE C. CONSTRUCTION** |
| **All the deliverables described below are under the responsibility of the resident expert with the contribution of the technical assistance short term expert.**  **Actual construction**   1. Weekly report and continued communication with the project owner 2. Monthly progress reports (review of the consultant and the contractor report and provide advice and guidance to the project owner) 3. Monthly progress reports on equipment procurement (technical, administrative and financial) 4. Minutes of meeting Project Owner / Supervision and Design company / Contractor 5. Reporting/Informing the client on the highlighted challenges that need the client intervention 6. Checking and pre approval of both contractor and consultant’s IPC/Invoices before transfer to the client   **Handover**   1. Minutes of operations prior to reception, draft documents approving the work and equipment, draft documents for the removal of reserves, etc. 2. Minutes of reservation removal, Site visits and close up meeting 3. Report on the management of assistance to reception operations and guarantee of perfect completion (buildings and equipment) by the contractor   **Commissioning**   1. Review of the End of construction and acquisition report 2. Equipment Bid analysis report, operation-maintenance contracts 3. Audit Document and Action, audit Tracking Plan 4. Audit reports, final evaluation report of the operation |
| **PHASE D. RELOCATION** |
| 1. Support review and validation of Moving Planning Project |
| 1. **Final report** |

1. **Expertise and profile requested**

In its high-quality obligation of result, the Technical Assistance company must be able to mobilize the required expertise according to the needs. The team is expected to be composed of the following expertise areas and any other expertise deemed necessary by the TA.

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| **#** | **Expertise** | **Background and Minimum requirement** | **Period** | **Key responsibilities (not limited to)** |
| 1 | Procurement expert | Proven experience in AFD procurement guidelines | In post design phase: During bid analysis for construction companies and bid analysis for Equipment | Assist the client in:  **Bidding and tendering Management**: Guide the project owner through the tendering process, from developing tender documents to evaluating bids and awarding contracts.  **Compliance with AFD guidelines**: Ensure that the procurement process adheres to **AFD’s** procurement rules,  **Contract Management**: Assist with contract negotiations, execution, and monitoring to ensure compliance with contract terms and timelines.  **Dispute Resolution**: Help resolve procurement-related disputes or issues between contractors and the project owner.  **Audit and Procurement Closeout**: Support the final acceptance process and ensure that all procurement-related documentation is finalized and compliant. |
| 2 | Hospital construction expert | Background of Civil Engineer with at least 10 years in hospital infrastructure complex project management,  Experience in project supervision, inspection and coordination ; Experience in patient flow, material specification , Infection Prevention Control | At all phases of the project.   * Short term mission during the design phase, the post design phase. | Assist the project owner in:   * **Daily site inspection and monitoring** of construction progress to ensure that it aligns with the design, schedule, and budget. * **Act as a liaison between** the project owner and the various stakeholders, including architects, engineers, contractors, and consultants. * Selecting qualified contractor * **Identifying potential risks** during the project and advise the owner on ways to mitigate them (e.g. Risk of delay, cost overruns, or failure to meet regulatory compliance). * Ensuring that the hospital construction meets infection control and patient flow, safety standards, |
|  | Architect | At least 10 Years of proven experience in hospital construction project | Design and post design phases | * Assist the client in Reviewing and validating architectural, structural, Mechanical, Electrical, and Plumbing, and other technical designs and ensure that they comply with related norms. * Ensure that all proposed construction materials, fixtures and openings comply with the recent construction technology and recent Health facilities construction standards. * Assist client in monitoring progress to ensure that the hospital is being built according to the plans and specifications |
|  | Plumbing expert | At least 10 years’ experience in hospital construction plumbing system. | Design phase and construction phase. | * Assist the client in control and validation of appropriate plumbing fixtures and equipment that meet hospital standards. * Reviewing and validation of detailed plumbing drawings, schematics, and specifications in the construction documents * Review and validation of plumbing infrastructure of the hospital (water supply system, waste water and drainage system, water treatment, flood control system etc) * Monitor progress, address issues, and ensure quality control during the construction and ensure that the plumbing systems are being installed according to the approved designs and specifications. |
| 3 | Legal advisor | 10 proven years of experience in construction project contract management. Experience in hospital project is an added value | Post design and construction and post construction phases  This is a remote support and field mission if required | Assist the client in   * **Drafting and reviewing contracts** * D**ispute Resolution and Claims Management**: through negotiation, mediation, or legal action if necessary. * Risk **Mitigation and Legal Advice**: Identifying legal risks, providing strategies for mitigation, * **Regulatory Compliance**: Ensuring that the project complies with local, national, and healthcare-specific regulations (e.g., building codes, environmental laws). * **Post-Construction Support**: contract closeout, warranty claims, regulatory certifications, etc |
| 4 | Infrastructure engineer | 10 years of experience in big size hospital construction ( minimum 500 beds, expertise in **site development**, **civil engineering**, and **utility systems** etc) | During the design, actual works and handover/commissioning | Assist the client in:   * Review and validation of the design of the civil and infrastructure elements of the hospital, including roads, utilities, sewage systems, and power supply, ensuring all systems meet regulatory, safety, and sustainability requirements. * Oversee the construction of infrastructure systems, ensuring that the work meets quality standards, timelines, and budget constraints. * Test and commission infrastructure systems, ensuring they function as designed and meet performance standards. |
| 5 | Electromechanical engineer | 10 years of experience in big size hospital construction | During the design, actual works and handover/commissioning | Assist the client in   * **Review** of electromechanical systems designs (HVAC, electrical, plumbing, fire safety, medical gases) in collaboration with other stakeholders. * **Coordination and oversight** of system installation to ensure quality, safety, and regulatory compliance. * **Testing, commissioning, and handover** of electromechanical systems, with full documentation and staff training. |
| 6 | IT system engineer | 10 years of experience in big size hospital construction | During the design, actual works and handover/commissioning | Assist the client in   * **Review and validation of** the hospital’s IT design infrastructure, including networking, data management, and software integration * **Supervising the installation of IT infrastructure,** including network cabling, data storage solutions, servers, and communication systems. * **Conduct extensive testing of IT systems**, ensuring they function correctly and securely, with a focus on compliance with healthcare data security standards * **Provide training** for hospital staff on IT system operation and maintenance, ensuring staff are equipped to use the systems effectively and securely. |
| 7 | Sanitation engineer | 10 years of experience in big size hospital construction | During the design, actual works and handover/commissioning | Assist the client in   * **Waste Management**: Manage the design and implementation of systems for handling medical waste, solid waste, and wastewater in compliance with hospital-specific needs and environmental standards. * **Oversee the installation of sanitation systems**, ensuring quality, compliance with designs, and coordination with other construction trades. * System **Testing and commissioning**: Test sanitation systems before the hospital opens, ensuring they function as designed. * **Training and Maintenance**: Provide training for hospital staff on operating and maintaining sanitation systems, and develop maintenance schedules for long-term operational efficiency. * **Quality Control**: Ensure that all materials used in the sanitation systems (e.g., pipes, valves, pumps, filtration units) are of the appropriate quality and comply with industry standards for safety and durability. |
| 8 | Electricity engineer | 10 years of experience in big size hospital construction | During the design, actual works and handover/commissioning | Assist the client in   * **Reviewing** of electrical systems design (power distribution, emergency systems, medical equipment circuits, etc.) in collaboration with other consultants. * **Coordination and oversight** of electrical system installation, ensuring compliance with hospital-specific requirements and codes. * **Testing, commissioning, and handover** of electrical systems, with proper documentation and staff training. |
| 9 | Biomedical engineering expert | At least 10 years’ experience in management of biomedical equipment project internationally | During the bid analysis for biomedical equipment  Design, actual works, commissioning and operational use | * Provide input into the building’s design to ensure it supports the safe and efficient operation of biomedical equipment (e.g., power supply, medical gas systems, data cabling, ventilation requirements for certain devices, and equipment accessibility) * Advise on the design of critical spaces, ensuring that areas such as operating rooms, ICU, and diagnostic imaging departments are appropriately designed to accommodate the necessary medical equipment and workflows. * Assist in the procurement of equipment (technical specifications and operational, cost effectiveness) * Ensure that contractors understand and implement the specific requirements for medical equipment installation, particularly for specialized rooms like operating theaters or diagnostic imaging suites * Development of construction standards for green and climate-resilient hospitals. |
| 10 | Construction Quantity surveyor | 7 years in Budget management, financial analysis, risk assessment, reporting, contract management, | During the design, the actual construction works and commissioning | Assist the client in   * **Bill of Quantities (BOQ)**: Prepare and manage detailed BOQs, ensuring that all quantities, materials, and work items are accurately estimated and aligned with project specifications. * **Tender evaluation**: Evaluate contractor bids to ensure cost estimates are competitive and align with project needs. * **Cost Monitoring and control**: Track actual costs, prepare cost reports, and monitor budget deviations, including assessing and advising on variations. * **Planning and approval of payment** for contractors and consultant based on project milestones, progress payments, and the scope of work completed, ensuring alignment with contractual agreements. * Advise on potential cost-saving opportunities, such as sustainable building materials, energy-efficient systems, or streamlined workflows in the design. |
| 11 | Expert in bioclimatic, climate resilience construction in tropical areas | At 7 years’ experience on major hospital project with the HQE approach  Experience in coordinating bioclimatic construction guideline | During the design and actual construction works | * Advise on energy-efficient solutions and sustainability measures, such as renewable energy integration (e.g., solar panels, energy-efficient lighting), and LEED (Leadership in Energy and Environmental Design) standards for green building practices. |

The technical assistance will provide a realistic and flexible methodology for deploying the necessary expertise according to the client's needs at each phase of the project.

1. **COORDINATION**

The project owner will share the updated project roadmap with the technical assistance company. An agreed deployment schedule for experts will be established. The project owner will prepare the ToR for each mission and notify ahead the company. The company will have advance preparation for a smooth rollout of experts.

Each mission and deliverables will also be subject to validation by the Ruhengeri project team (Expertise France, AFD, RHA, RBC).

A kick-off meeting will be held in order to clarify the working methodology to present the stakeholders and coordination mechanism between the different stakeholders to avoid overlaps of their roles and conflict

Close coordination with stakeholders will be essential from the preparation of missions to their completion. In addition, regular exchanges will be expected on the progress of missions to anticipate or address difficulties encountered.

1. **Relationship between the technical assistance company and Key implementing stakeholder and their roles**
2. **The Rwanda Housing Authority (RHA)** is the central government agency responsible for urbanization, the construction of public buildings, the management of public office spaces and government assets, and the regulation of the construction industry.

The responsibilities of the RHA include, but are not limited to:

* To act as the overall project manager on behalf of the State for all housing and construction-related projects;
* To advise the Government on the development of policies related to housing, urban planning, and construction;
* To manage public infrastructure, including hospitals.
* In the project RHA will therefore prepare the bidding documents, conduct the tenders, sign the contracts (design + supervision; construction; etc.) and supervise their implementation

1. **RBC**

The Rwanda Biomedical Center (RBC) is the government agency responsible for the operational implementation of the Ministry of Health's policies and projects.

It has multiple missions:

* Gathering and developing expertise in health infrastructures and biomedical equipment to serve health establishments.
* To steer sector-specific policies linked to specific pathologies.
* Carry out missions requiring a high level of technical expertise (reference laboratory / transfusion policy).
* RBC is on-granted by GoR to implement the project in its name. In this perspective, RBC will manage the project account.

Rwanda Biomedical Centre is responsible for tendering and installation of medical equipment and furniture for the health infrastructure.

**The RBC and the RHA are responsible for the project management of the Ruhengeri Referral hospital.**

1. **Single Project Implementation Unit (SPIU)**

It is a unit of 5 specialists: 1 Project Management Specialist, 1 Health Infrastructure Specialist, 1 Infrastructure Engineer 1 Biomedical Engineering Specialist and 1 Environmental Specialist.

* The project manager is the team leader of the project, ensuring effective coordination, teamwork and communication, high standards of work quality and organizational performance and continuous learning. Ensure that the project and program expenditures are controlled and maintained within approved budget limitations, and identifies, mitigates, and escalates risks to project budgets and schedules. He is the focal point between the different institutions’ staff working on this project (RBC, MoH, RHA, MINECOFIN, AFD, Ruhengeri Referral Hospital and Musanze District).
* See the ToR of the SPIU in Annex 3

1. **Design and supervision company**

* It is in charge of design the future hospital in compliance with all technical documents of the project and national guideline. The company will ensure the overall supervision of the construction works. ( See the RFP in the Annex 4)
* The technical assistance will avoid duplication and conflict with the supervision company. On behalf of the client the technical assistance will challenge the supervision company in a very objective and qualitative way.

**e) The resident expert**

* The resident expert will be embedded at RHA. In close collaboration with the SPIU, he will coordinate and oversee the daily construction activities on site on behalf of the Project Owner.
* He will coordinate the short-term assignments of the experts with the technical assistance company.
* He will ensure quality deliverable from the supervision company, contractor and short term TA expert.

1. **Expected cross-functional competencies:**

* Knowledge of sub-Saharan African contexts;
* Knowledge of bioclimatic design issues;
* Intervention on hospital projects of equivalent size (at least 450 beds and comparable care provision);
* Perfect command of English (read, spoken, written);
* Ability to work in intercultural contexts;
* Managing stress and contexts with high political expectations.
* Experience of AFD funded project is a plus