CALLING APPLICATIONS FOR A NATIONAL CONSULTANT

CLINICAL SPECIALIST – PROGRAMMATIC MANAGEMENT OF DRUG-RESISTANT TUBERCULOSIS (PMDT)

Mid-Term Review of the National Tuberculosis Programme – 2026

1. Background

The National Programme for Tuberculosis Control and Chest Diseases (NPTCCD), Ministry of Health, Sri Lanka, will conduct a Mid-Term Review (MTR) of the National Tuberculosis Programme in 2026. The review will assess programme implementation and performance, identify achievements, implementation gaps and operational bottlenecks, and develop prioritized recommendations to strengthen implementation of the National Strategic Plan and accelerate progress towards national and End TB targets.

The MTR will be conducted by a multidisciplinary team and will assess major components of the National TB response, including case finding, diagnostic and laboratory services, treatment and care, TB preventive treatment, Programmatic Management of Drug-Resistant TB (PMDT), health-system participation, community and stakeholder engagement, monitoring and programme management.

NPTCCD therefore seeks a National Consultant with expertise in the clinical and programmatic management of drug-resistant TB to lead the review of the PMDT component of the Mid-Term Review.

2. Purpose of the Consultancy

To independently assess the implementation and performance of Programmatic Management of Drug-Resistant Tuberculosis (PMDT) in Sri Lanka, identify achievements, gaps and operational challenges, and develop evidence-based, feasible and prioritized recommendations for strengthening the prevention, diagnosis, treatment, monitoring and continuity of care of people with drug-resistant TB.

3. Scope of Work / Key Responsibilities

1. Conduct a desk review of relevant national strategic plans, PMDT guidelines and SOPs, previous programme-review recommendations, programme reports, recording and reporting systems, and other documents relevant to DR-TB.
2. Assess the implementation of national policies, guidelines, algorithms and SOPs for the diagnosis and management of drug-resistant TB.
3. Review the identification and investigation of presumptive DR-TB patients, including access to and utilization of appropriate diagnostic and drug-susceptibility testing (DST) services.

4. Assess the implementation of DR-TB treatment, including treatment regimens, availability and use of second-line anti-TB medicines, management of adverse drug reactions, clinical and bacteriological follow-up, and patient monitoring.
5. Review the organization and coordination of hospital-based, ambulatory and community-based DR-TB care, including referral, transfer, continuity of care, adherence and treatment support.
6. Assess patient-centred support for people with DR-TB, including treatment adherence, psychosocial support, management of treatment interruption and, where relevant, palliative and end-of-life care.
7. Review recording, reporting, monitoring and evaluation of DR-TB/PMDT activities, including the completeness, accuracy and use of relevant programme records and electronic information systems.
8. Assess infection prevention and control measures relevant to DR/MDR-TB patients and service-delivery settings.
9. Participate in the in-country mission and conduct field assessments at selected District Chest Clinics, hospitals and other relevant PMDT service-delivery settings, using document review, key informant interviews, direct observation and stakeholder consultations.
10. Identify strengths, implementation gaps, operational bottlenecks and opportunities for improving PMDT, and develop prioritized, feasible and time-bound recommendations, specifying responsible agencies where appropriate.
11. Present the key PMDT findings and recommendations at the end-of-mission debriefing and prepare the PMDT component of the Mid-Term Review report, incorporating feedback from NPTCCD and the review team.

4. Expected Deliverables

- Desk-review summary and identification of priority areas for PMDT assessment.
- Completed field-assessment findings, including relevant interview/consultation notes and consolidated PMDT findings.
- Presentation of preliminary PMDT findings and recommendations at the end-of-mission debriefing.
- Comprehensive draft PMDT section/component of the Mid-Term Review report.
- Finalized PMDT component incorporating comments from NPTCCD and the review team, with prioritized, feasible and time-bound recommendations and responsible agencies, where appropriate.

5. Duration and Working Arrangement

The consultancy will be undertaken in accordance with the MTR schedule (05.10.2026 -01.11.2026) and will include: (i) desk review (5-11 Oct); (ii) participation in the in-country mission and field assessments (12-18 Oct); and (iii) synthesis of findings, report writing and finalization (19 Oct – 8 Nov). The consultant will work under the overall coordination of the Director, NPTCCD, and in close collaboration with the international laboratory consultant, NPTCCD technical officers and other members of the multidisciplinary review team.

6. Essential Qualifications and Experience

- Medical degree from a recognized university.
- Postgraduate specialist qualification/Board Certification in Respiratory Medicine, or another relevant clinical specialty acceptable to NPTCCD.
- At least eight (5) years of relevant professional experience following postgraduate specialist qualification, or equivalent relevant experience acceptable to NPTCCD.
- Substantial clinical experience in the diagnosis and management of tuberculosis, including drug-resistant TB.
- Demonstrated experience in Programmatic Management of Drug-Resistant TB (PMDT).
- Good understanding of DR-TB diagnostic pathways, DST, treatment regimens, treatment monitoring, adverse-effect management and patient-centred care.
- Experience in programme reviews, evaluations, technical assessments or similar technical assignments would be an advantage.
- Strong analytical and technical report-writing skills in English.
- Ability to work effectively within a multidisciplinary team.
- Good computer literacy, including use of standard word-processing, spreadsheet and presentation applications.

7. Evaluation Criteria

No.	Criterion	Assessment considerations	Maximum marks
1	Relevant professional/clinical experience following specialist qualification	Experience beyond the minimum requirement; relevance and seniority of assignments	10
2	Experience in TB clinical management and TB control	Depth and duration of TB programme and clinical experience	20
3	Specific experience in management of DR-TB/PMDT	Depth of clinical and programmatic DR-TB experience, including diagnosis, treatment and follow-up	25
4	Experience in programme reviews, evaluations, technical assistance or programme assessments	Priority given to TB/communicable-disease and national-level assignments	15
5	Contribution to TB/DR-TB guidelines, protocols, training, programme development or technical activities	Guidelines, protocols, manuals, training materials, technical working groups or similar contributions	10
6	Analytical and technical report-writing experience	Quality and relevance of substantial technical reports, review reports or technical assistance outputs	10
7	Research/publications relevant to TB or DR-TB	Relevant peer-reviewed publications and/or operational research	5

8	Computer literacy and ability to work with programme data and prepare reports/presentations	Demonstrated competence with standard applications and programme information	5
TOTAL			**100**

Eligibility and technical threshold: Applicants should satisfy the essential eligibility requirements before proceeding to technical scoring. A minimum technical score of 70/100 is recommended for consideration for appointment, subject to the applicable NPTCCD/Global Fund procurement and recruitment procedures.

9. Documents to be Submitted

- Cover letter expressing interest in the consultancy.
- Detailed curriculum vitae.
- List of relevant TB/DR-TB programme reviews, evaluations, technical assistance assignments or major technical contributions, indicating the applicant's role.
- List of relevant publications, guidelines, protocols, manuals or other technical contributions, where applicable.

10. Application Procedure

Eligible specialists are invited to submit the above documents to the Director, National Programme for Tuberculosis Control and Chest Diseases (NPTCCD), Ministry of Health, Sri Lanka **on or before 25th of September 2026** via email, nptccddirector@gmail.com. to Director NPTCCD.

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& Chest Diseases
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