

## Terms of Reference (ToR)

- **Position:** Block Coordinator
- **project:** GFATM Supported IMEP-3
- **Location:** Gadchiroli, Maharashtra
- **Reporting to:** District Coordinator
- **Remuneration:** Rs. 30,000 per month
- **Last date to apply:** 9 January 2026
- **Blocks:** Korchi, Kurkheda, Wadsa, Armori, Dhanora, Gadchiroli, Chamorshi, Mulchera, Ettapalli, Bhanragad, Aheri, Sironcha. (each block coordinator will cover two blocks)

### 1. Background

TCI Foundation invites applications for the position (06 Nos.) of Block Coordinator for malaria project in Maharashtra State (Gadchiroli District) under the Global Fund Grant GC7. The malaria project is implemented by TCI Foundation in close coordination with the National Centre for Vector Borne Diseases Control (NCVBDC) Ministry of Health & family Welfare and the Maharashtra State Health Department.

Gadchiroli District in Maharashtra is among the priority districts for malaria elimination due to its tribal and hard-to-reach areas with persistent transmission. Effective malaria surveillance, case management, and community participation at the block level are crucial for achieving elimination goals. The Block Coordinator will serve as the key focal point for programme implementation and monitoring within the block, ensuring timely reporting, training support, and coordination with health staff and community stakeholders.

### 2. Objective

To strengthen malaria elimination interventions at the block level by supporting surveillance, reporting, capacity building, and community mobilization in alignment with district and state malaria control strategies.

### 3. Key Responsibilities

#### A. Monitoring and Supervising CHVs and Community Coordinator

- Oversee the work of Community Health Volunteers (CHVs) and the Community Coordinator to ensure effective service delivery.
- Provide guidance, feedback, and continuous support to CHVs for smooth implementation of health programs at the block level.
- Ensure CHVs are well-trained and equipped with knowledge and resources for their duties, especially on health-seeking behaviors, prevention of diseases, and malaria control.

#### B. House-to-House Visits for SBCC on Health Seeking Behavior and EDCT

- Conduct House-to-House visits in the block for Social and Behavioral Change Communication (SBCC) on promoting health-seeking behaviors and encouraging Early Diagnosis and Complete Treatment (EDCT) for malaria and other communicable diseases.
- Engage with households to raise awareness about common health issues, prevention strategies, and the importance of timely medical intervention.

#### C. Implementation and Support to Programme Activities and IHIP at the Field Level

- Actively support and implement Integrated Health and Infrastructure Program (IHIP) activities at the field level.

- Work closely with field staff, local health providers, and other stakeholders to ensure the effective roll-out of program interventions.
- Ensure that all health programs are in alignment with district-level goals and national health standards.

#### **D. Active Surveillance for Malaria Detection**

- Undertake regular field visits (minimum 15 days per month) for Active Surveillance to detect potential malaria cases.
- Coordinate and assist in Malaria Detection, including rapid diagnostic testing (RDT), and ensure timely reporting of findings to the appropriate authorities.
- Ensure EDCT (Early Diagnosis and Complete Treatment) protocols are followed, including ensuring patients are tracked through follow-up treatments and ensuring compliance.

#### **E. Operational Planning and Reporting**

- Assist in the Operational Planning for all health programs within the block.
- Monitor program progress and provide regular updates to Sub-Centers and Community Health Centers (CHCs) on the status of health initiatives and challenges faced.
- Ensure timely reporting of progress, issues, and field activities to the District Coordinator and MO-CHC.

#### **F. Convergence Between Line Departments and Organizations**

- Foster collaboration and Convergence between various government departments, NGOs, Self-Help Groups (SHGs), and other relevant organizations.
- Work towards Integrated Vector Management (IVM) and the Prevention and Control of Malaria, leveraging multiple resources for effective intervention strategies.
- Act as the liaison for the block, ensuring that communication and coordination between different stakeholders are smooth and efficient.

#### **G. IEC/BCC Activities, Mass Clean-Up Campaigns, and Source Reduction**

- Lead and support Information, Education, and Communication (IEC) and Behavior Change Communication (BCC) campaigns aimed at increasing awareness and changing community attitudes towards malaria prevention and other health-related issues.
- Organize Mass Clean-Up Campaigns in the community to eliminate mosquito breeding grounds and promote source reduction activities.
- Advocate for proper waste management, sanitation, and environmental practices that contribute to vector control.

#### **H. Testing, tracking and treating of Malaria patients in the Community level and perform LQAS data collection.**

- Ensure the Testing, Tracking, and Treating of malaria patients at the community level by facilitating access to diagnostic tests, treatment regimens, and ensuring that all necessary protocols are followed.
- Work with healthcare providers to ensure patients receive appropriate follow-up treatment and ensure no cases are left untreated.

### **4. Deliverables**

- Monthly malaria block performance report with verified data.
- Reports of supportive supervision visits and follow-up actions.
- Updated database of block-level trained staff and frontline workers.
- Documentation of community mobilization and IEC activities.

- Regular participation in district review meetings with updated block progress.

## **5. Qualifications & Experience**

- Any Graduate with knowledge of MS Office, preferably experience in health care sector for 1-2 years
- Familiarity with rural/tribal health systems and community engagement desirable
- Proficiency in Marathi and Hindi; working knowledge of English desirable.
- Good computer skills (MS Office, data entry/reporting tools).
- Willingness to travel extensively within assigned block.

## **6. Reporting & Supervision**

- The Block Coordinator will report directly to the District Coordinator and functionally to the District Malaria Officer (DMO).
- Will maintain close coordination with Medical Officers, Health Supervisors, ASHAs, and other block-level stakeholders.

## **7. Duration of Assignment**

The positions are contractual for the period November 2025 to March 2027.

## **8. Code of Conduct**

- Work with transparency, accountability, and respect for community values.
- Ensure confidentiality of health data and beneficiary information.
- Avoid any form of discrimination based on caste, gender, religion, or socio-economic status.
- Refrain from misuse of position or programme resources.

## **9. Support & Supervision**

- Block Coordinator will receive periodic training, orientation, and supportive supervision from TCI Foundation.
- They will be provided necessary reporting formats, health communication materials, and supplies for carrying out their duties.

## **10. Remember:**

- Merely fulfilling the eligibility and applying for the position does not entitle the candidate to be called for interview.
- No TA/DA will be paid to attend the interview in person.
- The advertised position can be cancelled/varied as per the discretion of the employer.

## **11. Equal Opportunities**

TCI Foundation is an equal opportunity employer. Employment at TCI Foundation is based solely on individual's merit and qualifications directly related to professional competence. TCI Foundation does not discriminate against any employee or applicant because of race, caste, creed, colour, religion, gender, origin, disability, marital status, or any other basis protected by law.

## **12. Selection:**

Selection will be based on an interview and other factors, including qualifications, experience, skills, and overall suitability for the role.

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