

THE FEDERAL REPUBLIC OF NIGERIA
NIGERIAN HUMAN CAPITAL OPPORTUNITIES FOR PROSPERITY AND EQUITY (HOPE)
INTERDEPENDENT SERIES OF PROGRAMS

TERMS OF REFERENCE

For

ENGAGEMENT OF A FIRM AS INDEPENDENT VERIFICATION AGENT OF THE HOPE GOVERNANCE (HOPE-GOV), PRIMARY HEALTHCARE PROVISION STRENGTHENING (HOPE-PHC) AND QUALITY PRIMARY EDUCATION FOR ALL (HOPE-EDU) PROGRAMS

1. BACKGROUND

The Human Capital Opportunities for Prosperity and Equity (HOPE) Program is a Federal Government of Nigeria (World Bank supported) comprehensive initiative designed to address critical challenges in the primary healthcare and basic education sectors in Nigeria. The program is structured around three interdependent operations:

HOPE-Governance (HOPE-GOV): A USD500 million Program for Results (PforR) operation that addresses cross-cutting governance issues, related to financial and human resource management in the education and health sectors. The Program aims to improve governance, budget credibility, fiscal transparency, procurement practices, human resource management (HRM) and payroll integrity in these sectors. Building upon the achievements of the Federal Government of Nigeria (World Bank supported) State Fiscal Transparency, Accountability, and Sustainability (SFTAS) Program for Results (PforR), HOPE-GOV will strengthen the upstream requirements necessary for better service delivery in primary healthcare and basic education. Specifically, the Program will deepen these reforms through a detailed and disaggregated focus on the basic education and primary healthcare sectors, following the fiscal management chain from planning and budgeting, as well as HRM, through downstream implementation, reporting, and oversight. Currently, all 36 States and the Federal Capital Territory (FCT) are eligible and have indicated interest in participating in the program. It includes three results areas in which financial rewards are disbursed against the achievement of results.

- Results Area (RA) 1: Increased availability and effectiveness of financing for basic education and primary healthcare service delivery.
- Results Area (RA) 2: Enhanced transparency and accountability for basic education and primary healthcare financing.
- Results Area (RA) 3: Improved recruitment, deployment and performance management of basic education teachers and primary healthcare workers by federal, state and local governments.

HOPE-Primary Healthcare (HOPE PHC): A USD 570 million PforR dedicated to strengthening Nigeria's primary healthcare system. It focuses on improving service delivery at the facility level, particularly for quality and accessibility. The Program Development Objective (PDO) of the HOPE - PHC is to improve utilization, of quality essential healthcare services and health system resilience in the Federal Republic of Nigeria. Currently all 36 States and the FCT are also eligible and have indicated interest in

participating in the program. Just like the HOPE GOV component, three Results areas are tied to the eleven Disbursement Linked Indicators (DLIs) in HOPE PHC namely:

- Results Area (RA) 1 – improving quality of service
- Results Area (RA) 2 – improving utilisation of essential services
- Results Area (RA) 3 – improving resilience of the health system

HOPE-Basic Education (HOPE-EDU):

A USD 552 million PforR operation that supports the government’s Universal Basic Education (UBEC) program. The operation’s objectives are to improve foundational learning outcomes, increase access to basic education and enhance education systems in participating States. It includes three results areas in which financial rewards are disbursed against the achievement of results.

- Results Area (RA) 1 is ‘Improving Quality’, with 3 DLIs. Currently, 33 states and the FCT have indicated they will participate in this RA.
- RA2 is ‘Increasing Access’, with 2 DLIs. The number of states that can participate in this RA is capped at 15.
- RA3 is ‘Enhancing Key Systems’, with 3 DLIs. This RA covers all 36 states and the FCT.

Table 1: Responsible Ministries

S/No.	Program	National Program Coordinating Unit (NPCU)
1.	HOPE-GOV	Federal Ministry of Budget and Economic Planning
2.	HOPE-PHC	Federal Ministry of Health and Social Welfare
3.	HOPE-EDU	Federal Ministry of Education

2. ELIGIBILITY CRITERIA

All 36 States plus the Federal Capital Territory (FCT) are eligible for participation in HOPE GOV and HOPE PHC. For HOPE EDU, see tiered States participation by Results Area above.

Table 2: Annual Eligibility Criteria Table for HOPE-GOV Disbursements

	Year 0: 2025 partial year	Year 1: 2025	Year 2: 2026	Year 3: 2027
EC-1	FY25 state budget, prepared under national Chart of Accounts, approved by the State Assembly and	FY26 state budget, prepared under national Chart of Accounts with program segment for basic education and primary healthcare,	FY27 state budget, prepared under national Chart of Accounts with program segment for basic education and primary healthcare,	FY28 state budget, prepared under national Chart of Accounts with program segment for basic education and

	Year 0: 2025 partial year	Year 1: 2025	Year 2: 2026	Year 3: 2027
	published online by January 31, 2025.	approved by the State Assembly and published online by January 31, 2026.	approved by the State Assembly and published online by January 31, 2027.	primary healthcare, approved by the State Assembly and published online by January 31, 2028.
EC-2	FY24 audited financial statement, prepared in accordance with IPSAS, submitted to the State Assembly and published by July 31, 2025.	FY25 audited financial statement, prepared in accordance with IPSAS, submitted to the State Assembly and published by July 31, 2026.	FY26 audited financial statement, prepared in accordance with IPSAS, submitted to the State Assembly and published by July 31, 2027.	FY27 audited financial statement, prepared in accordance with IPSAS, submitted to the State Assembly and published by July 31, 2028.
EC-3		FY25 quarterly budget implementation reports with detailed section on basic education and primary healthcare published on average within 30 days of quarter end.	FY26 quarterly budget implementation reports with detailed section on basic education and primary healthcare published on average within 30 days of quarter end.	FY27 quarterly budget implementation reports with detailed section on basic education and primary healthcare published on average within 30 days of quarter end.

Table 3: Eligibility Criteria Table for HOPE-PHC

	Year 1 – 2025	Year 2 – 2026	Year 3 - 2027	Year 4 - 2028
EC-GOV	Participation in and achievement of Annual EC for HOPE-GOV	Participation in and achievement of Annual EC for HOPE-GOV	Participation in and achievement of Annual EC for HOPE-GOV	Participation in and achievement of Annual EC for HOPE-GOV
EC-1	State Annual Operational Plan that aligns with the goals of the sector wide approach as articulated in the signed health compact is approved by the	State Annual Operational Plan that aligns with the goals of the sector wide approach as articulated in the signed health compact is approved by the SCO.	State Annual Operational Plan that aligns with the goals of the sector wide approach as articulated in the signed health compact is approved by the SCO.	State Annual Operational Plan that aligns with the goals of the sector wide approach as articulated in the signed health compact is approved by the SCO.

	SWAp Coordinating Office (SCO).			
EC-2	State revises the terms of reference and composition of the BHCPF State Oversight Committee.	State maintains composition and functioning of the State Oversight Committee in accordance with the revised terms of reference.	State maintains composition and functioning of the State Oversight Committee in accordance with the revised terms of reference.	State maintains composition and functioning of the State Oversight Committee in accordance with the revised terms of reference.
EC-3	State adopts and signs Funds Release Policy for management of PforR earnings.			

Table 4: Eligibility Criteria Table for HOPE-EDU

Results Areas (DLIs)	
RA1: Improving Quality (DLIs 1,2,3)	Excluded States are Oyo, Adamawa and Katsina (currently supported under GPE-funded Better Education Service Delivery for All – Additional Financing (BESDA-AF) program). All other 33 States and the FCT are eligible under this RA if they are also participants under HOPE-GOV due to strong linkages between the two operations. HOPE-GOV’s annual Eligibility Criteria are provided above.
RA2: Increasing Access (DLIs 4, 5)	The number of States is capped at 15 (fifteen). The States will be ranked by the number (most to least) of out-of-school children aged 5-14 years. The first 15 States to meet the following criteria will be eligible: (a) it is a participant under RA1; and (b) it provides their own counterpart funds to access UBEIF infrastructure matching grants for CY2026. If any of these 15 States decides not to participate, the next eligible State(s) will be invited to join until the cap has been reached.
RA3: Enhancing Key Systems (DLIs 6,7,8)	All 36 States and FCT

3. PROGRAM RESULT AREAS

Table 5. Governance (HOPE-GOV)

Results Area 1: Increased availability and effectiveness of financing for basic education and primary healthcare service delivery.	
DLI 1	Enhanced access and equity of UBEC financing of basic education <ul style="list-style-type: none"> 1.1: UBEC guidelines revised to: (i) enhance Participating States' access and reporting process including publication of releases; and (ii) set rules for managing un-accessed funds
DLI 2	Strengthened state budget planning and execution for basic education and primary healthcare <p>2.1: Participating State adopts comprehensive guidelines for preparation and submission of consolidated work plan for State basic education budget; approved budget by Participating State based on annual work plan and (ii) budget deviation for basic education <20% (Number); then <15%</p> <p>2.2: (i) Participating State adopts comprehensive guidelines for preparation and (ii) submission of consolidated work plan for State primary healthcare budget; Approved state budget based on annual PHC consolidated work plan and (ii) budget deviation for primary healthcare < 20%; then <15%</p> <p>2.3: Local governments adopt harmonized budget guidelines and National Chart of Accounts</p>
Results Area 2: Enhanced transparency and accountability for basic education and primary healthcare.	
DLI 3	Strengthened accountability and transparency of federal funding for basic education and primary health care. <ul style="list-style-type: none"> 3.1: UBEC and FMOHSW (through BHCPF MoC secretariat) publish online: (i) annual audited financial statements (ii) Dates, amounts and recipients of all transfers made to subnational level on a quarterly basis within 15 days of the end of the quarter
DLI 4	Strengthened accountability and transparency for basic education and primary health care funding at state level. This DLI will support subnational financial reporting and audit. <ul style="list-style-type: none"> 4.1: Participating State (i) publishes citizen budget for basic education and primary health and (ii) Citizens performance audit report for basic education and primary health 4.2: Financial and performance audits of basic education and primary health sub-sectors submitted by Participating State to State Assembly and published Publish contract award information for all procurements in the education and health sectors on a quarterly basis within 30 days of the end of the quarter in OCDS format on the online portal.
Results Area 3: Improved recruitment, deployment and performance management of basic education teachers and primary healthcare workers by federal, state and local governments.	
DLI 5	Increased number of basic education teachers and primary healthcare workers deployed. <ul style="list-style-type: none"> 5.1: (i) Baseline exercise mapping the number and duty stations of basic education teachers across the Participating State and (ii) a multi-year costed teacher recruitment and deployment plan to address the staffing gap completed and published; Participating State publishes online report on actions taken and progress made in filling staffing gap and promoting equitable deployment and (ii) meets basic target or stretch target for gaps filled 5.2 (i) Baseline exercise mapping number and duty stations of PHC workers in the Participating State and (ii) multi-year costed PHC worker recruitment plan to address

	staffing gap completed and published; Participating State (i) publishes PHC staff gaps actions report; (ii) meets basic or stretch targets for gaps and (iii) meets base target consisting of: (a) Staff in Level 2 Primary Healthcare facilities (CEmONC) by 15%, (b) Community Health Workers (CHW) linked to Level 2 PHCs and deployed to communities by 15%; then 20%
DLI 6	Improved payroll and performance management for basic education teachers and primary health care workers. <ul style="list-style-type: none"> 6: Biometric capture and bank verification numbering data of 80 percent of basic education and PHC workers in the public service completed and linked to payroll and identified ghost workers taken off the payroll

Table 6: Primary Healthcare Provision Strengthening (HOPE-PHC) Program

Results Area 1: Improving Quality of Services	
DLI 1	Improved service readiness <ul style="list-style-type: none"> 1.1: Improved primary healthcare facility readiness, quality, and climate resilience in Participating States (percentage) 1.2: Increased empanelment and refurbishment of CEmONC facilities that demonstrate service readiness and climate resilience and energy efficiency (number)
DLI 2	Increased availability of essential commodities <ul style="list-style-type: none"> DLR 2.1: Federal expenditure on quality family planning commodities increased (percentage) DLR 2.2: Frontline availability of tracer products improved In Participating States (percentage)
Results Area 2: Improving Utilization of Essential Services	
DLI 3	Increased enrollment of poor and vulnerable populations <ul style="list-style-type: none"> DLR 3.1: Financial protection for poor and vulnerable populations increased in Participating States (number)
DLI 4	Enhanced community delivery of health services <ul style="list-style-type: none"> DLR 4.1: Women and children who receive tracer essential health services in the community increased in Participating States (number)
DLI 5	Increased utilization of priority secondary care services <ul style="list-style-type: none"> DLR 5.1: Secondary Facility Quality of Care for CEmONCs (Prior Result) DLR 5.2: Women and neonates receiving CEmONC and neonatal services and/or vesico-vaginal fistula surgeries (number)
DLI 6	Increased Primary Healthcare utilization of priority services <ul style="list-style-type: none"> DLR 6.1: Deliveries with skilled birth attendant present increased in Participating States (percentage) DLR 6.2: Introduction of MMS for pregnant women during antenatal care in Participating States (percentage)
DLI 7	Increased utilization of emergency medical services

	<ul style="list-style-type: none"> DLR 7.1: Patients with obstetric and neonatal complications transported through emergency medical transport to selected facilities using the digitized EMS dispatch system (number) in Participating States (number)
Results Area 3: Improving Resilience of the Health System	
DLI 8	Improved allocation and disbursement of BHCPF funds <ul style="list-style-type: none"> DLR 8.1: Governance for improved resource allocation and performance (Prior Result) DLR 8.2: Participating States receiving funds in compliance with allocation formula in revised guidelines (number)
	Enhanced pandemic preparedness and response (PPR) through deployment <ul style="list-style-type: none"> DLR 9.1-9.4: System and standards for state EPR programs are established (number)
	Improved climate resilience <ul style="list-style-type: none"> DLR 10.1-10.4: Climate and health adaptation plan developed, costed, and validated (number)
	Stronger digital foundation <ul style="list-style-type: none"> DLR 11.1: National enterprise architecture developed, costed, and adopted (Prior Result) DLI 11.2: Participating States adopting national enterprise architecture and integrating core health functions (number)

Table 7: Quality Basic Education for all (HOPE- EDU) Program

DLI	DLR	Recipient
1: Number of schools with sufficient TLMs for literacy and numeracy, by grade	1.1: Primary schools have sufficient TLMs for literacy and numeracy (Target: 50,000 schools)	States/ FCT
	DF Trigger 1.1g (GPE only): 80 percent of public primary schools have sufficient TLMs for literacy and numeracy for Grades 1-3	States/ FCT
	DLR 1.2 (GPE only): 80 per cent of public primary schools have sufficient TLMs for literacy and numeracy for Grades 4-6	States/ FCT
	1.2: Textbooks usage guidelines approved	Federal
2: Number of primary teachers with improved structured pedagogy practices (SPP)	2.1: All primary teachers and mentors enabled to improve SPP (Target: 420,000 teachers)	States/ FCT
	2.2: All Grades 1-3 teachers regularly mentored on SPP (Target: 210,000 teachers)	States/ FCT
	2.3: All primary teachers regularly mentored on SPP (Target: 420,000 teachers)	States/ FCT
	2.4: Number of primary teachers with improved SPP (Target: 200,000 teachers)	States/ FCT

3: Percentage of children proficient in literacy and numeracy	3.1: Learning evaluation mechanisms for Grades 1-2 literacy and numeracy approved (Target: 30 states)	States/ FCT
	3.2: Number of LGEAs acting on early learning evaluations (Target: 625 LGEAs)	States/ FCT
	3.3: Number of LGEAs acting on early learning evaluations (Target: 625 LGEAs)	States/ FCT
	3.4: Increased percentage of children proficient in literacy and numeracy (Targets: Increase over baseline in 30 states and federally)	States/ FCT
4: Number of new primary classrooms created through community participation	4.1: Government-community agreements signed to create new classrooms (Target: 15 states)	States/ FCT
	4.2: 13,000 new classrooms created	States/ FCT
5: Number of out-of-school children who complete a non-formal basic education (NFBE) program	5.1: 10,000 NFLCs have Management Committee, teacher, and TLMs	States/ FCT
	5.2: 1,500,000 out-of-school children complete NFBE program	States/ FCT
6: Percentage of core UBE funds managed at decentralized level	6.1: Increased number of states accessing UBE matching funds	Federal
	6.2: 50% of core UBE funds de-centrally managed	Federal
	6.3: 80% of core UBE funds de-centrally managed	Federal
7: Percentage of public primary schools using annual school grant (ASG)	7.1: ASG amount and management regulations approved (Target: 37 states/FCT)	States/ FCT
	7.2: 70% of public primary schools use ASG (DF Trigger 2 for GPE states)	States/ FCT
	7.3: 80% of public primary schools use ASG	States/ FCT
	7.4: 90% of public primary schools use ASG	States/ FCT
8: Percentage of schools included in current-year Annual School Census (ASC) Report	8.1: State digital ASC system operational (Target: 37 states/FCT)	States/ FCT
	8.2: 90% of schools included in current-year State ASC Report (Data Trigger 1 for GPE states: 80% of schools included in current-year State ASC Report).	States/ FCT
	8.3: 90% of schools included in current-year National ASC Report	Federal
	8.4: 95% of schools included in current-year State ASC Report	States/ FCT

The full matrices of HOPE-EDU DLIs/DLRs and year of verification can be found in Annex 1 to these Terms of Reference (ToR).

4. OBJECTIVES OF THIS ASSIGNMENT

- i. To assess whether participating states and the Federal Capital Territory meet the annual Eligibility Criteria to participate in the program.
- ii. To assess and confirm that participating states and the federal entities achieve the required DLRs for the HOPE-GOV, HOPE-PHC and HOPE-EDU Programs for the period 2025-2028.
- iii. To conduct performance assessments (PAs) to verify the performance of the relevant federal agencies and participating states in the six (6) HOPE-GOV, eleven (11) HOPE-PHC and eight (8) HOPE-EDU Disbursement-Linked Indicators (DLIs). These assessments will typically occur in the third and fourth quarters of the fiscal year (July-December), or closer to the completion date for EC with mid-year deadlines.

5. THE PERFORMANCE ASSESSMENT PROCESS

Program Verification Plan: The IVA in collaboration with the three NPCUs will develop a Program Verification Plan and update it on an ongoing basis. The plan will set out in summary and in detail the proposed timelines and activities to verify performance across federal entities, participating States and FCT for all the DLIs, as well as the responsible parties (including the NPCUs, the IVA, and the World Bank) involved in the execution of various tasks within the plan.

1. The IVA will establish a Program verification plan extending to the end of the Program in 2028, thus including a last verification period in October-December 2029. This will include a work plan for carrying out the PAs and assessment of the EC. It will be submitted to the NPCU for clearance. The work plan will subsequently require periodic – yearly for HOPE GOV and EDU, and semiannually for HOPE PHC- updates to reflect emerging circumstances and events.
2. The IVA will collect the state performance data necessary to carry out the assessments for the 2025, 2026, 2027 and 2028 APA and for the assessments of all the annual ECs.
3. The IVA will draft test programs, verification checklists and reporting templates for the NPCU/WB review and approval. These will be regularly updated for each round of APA.
4. The IVA will verify all evidence of States and Federal entities achieving the DLIs in accordance with the approved DLI Verification Protocol; this would entail central desk review and some physical verification at the state and federal levels.
5. The IVA will formally submit to the NPCUs and the World Bank, the final Result Verification Report.

6. THE PROGRAM FOR RESULTS INSTRUMENTS: Implementation Arrangements, Disbursements and Verification Protocols

a. Verification Protocols: The work of the IVA in assessing the performance of the Federal entities, participating States and the FCT in achieving the HOPE-GOV, HOPE-PHC, and HOPE- EDU DLIs is guided by a set of protocols, which are documented in Verification Protocol documents for each Program. It is important for the IVA to understand the detailed requirements of the protocols and demonstrate this understanding in their technical proposals, as well as in the course of the assignment. The NPCUs for the respective Programs take the lead in the update of the protocols and will consult with all implementing agencies and delivery partners including the IVA on an ongoing basis to ensure appropriate enhancements are made to the protocols (subject to approval by the World Bank), as necessary.

7. IVA SCOPE OF WORK

- i. To prepare a detailed test program and reporting template for each Program to be cleared by the respective NPCU and the World Bank.
- ii. To conduct workshops with stakeholders on the PA process as approved by the NPCU
- iii. To conduct desk reviews and physical inspections to confirm the authenticity of the results according to the DLI matrix and Verification Protocol.
- iv. The IVA will produce reports that will be subject to technical review by the National Program Coordinating Unit (s) in collaboration with the World Bank. This may include requests for reassessments to ensure accuracy and compliance.
- v. To ensure that the verification process adheres to established guidelines, procedures, and proper documentation.
- vi. All other assignments/tasks as may be required by the verification protocol of HOPE-GOV, HOPE-PHC and HOPE-EDU, which are attached herewith as annexes as may be reviewed/updated from time to time.

8. PROGRAM DELIVERABLES

Deliverables will be in the form of periodic reports, and they will be submitted in English based on the requirements of each of the HOPE-GOV, HOPE-PHC and HOPE-EDU Programs. The reports should be submitted in both hard and editable soft copies.

Report/Checklist	Description	Timeline	Submission/Recipient
Inception Report including Verification Checklist/Test Questions	<ul style="list-style-type: none"> Detailed methodology for verification of each DLI, including methodology for establishing/verifying baselines. IVA's work plan, staffing plan, verification templates, random sampling procedures, specific needs from NPCU Checklist for each DLI. Includes DLI description, proposed timeline, required documentation, targeted deliverables, achieved deliverables, and general performance comments. Specific tests to be conducted for each element of the DLIs/DLRs. Checklist must be generic and not state-specific. 	Within 30 days of engagement for Year 1 Verification and 30 days before each periodic verification exercise	National Project Coordination Units (NPCU)

Report/Checklist	Description	Timeline	Submission/Recipient
Results Verification Report (RVR)	<ul style="list-style-type: none"> Detailed report for each DLI in the Results Areas, in accordance with the verification protocols in the POM. Performance reports should be for each State, FCT and Federal Implementing Agencies. Report must respond to the specific tests for each element of the DLIs/DLRs above mentioned so that it is clear what was satisfactory and what was not satisfactory Includes executive summary, verification methodology, statistics, evidence of DLR achievement, future projections, and Annex materials. 	Within 30 days after end of each verification period	IVA to submit RVR once a year for HOPE GOV and EDU, and twice a year for HOPE PHC to NPCU and World Bank. One report will be prepared for all States under each project per each cycle of verification.
Review of Draft Report by States and Implementing Entities	<ul style="list-style-type: none"> Draft Report is disseminated to States and Implementing Entities. Responses or objections if any are provided by States and Implementing Entities. 	2 weeks after dissemination of draft report.	
Final Verification Report	<ul style="list-style-type: none"> Overall description of all activities and results achieved during the Program period. Summarizes findings, performance, and recommendations for improvements or adjustments to the Program. Submitted at the end of each verification round. 	End of each round of verification	IVA to submit RVR once a year for HOPE GOV and EDU, and twice a year for HOPE PHC to NPCU and World Bank

9. COMPETENCE OF THE CONSULTING FIRM

1. The IVA will be a reputable consulting firm, or consortium of firms, with a lead firm having a minimum of 15 years operational existence as an organization
2. Minimum of two similar assignments in the last 10 years.
3. Demonstrated experience in verification/audit as well as M&E exercises, with both desk-and field verification methods.
4. Deep understanding of governance structures, accountability mechanisms, and financial management systems in the public sector.
5. Experience in assessing and strengthening transparency and accountability in the management of financial and human resources.
6. In-depth knowledge of the primary healthcare and basic education sectors, including their specific challenges, regulatory frameworks, and best practices.
7. Familiarity with the Nigerian context and the operational environment of the HOPE Programs.
8. Demonstrated experience working in virtual work/desk research environment.
9. Comprehensive knowledge and understanding of controls within an IT environment, including experience and competence in managing, storing, filing data electronically.
10. Persons carrying out the tasks should be fluent in English.

To perform the required verification tasks, the IVA shall be a firm or a consortium of firms. In the case of a Consortium, which shall not be more than three (3) firms, the profile of each of the firms shall be submitted in the proposal,

9.1 Team Composition & Qualification Requirements for the Key Experts

Needed Personnel in the Team

- **Key Expert 1 – Team Leader:** A team leader with a minimum of a Master's degree in a relevant field such as economics, public administration, finance, or a related discipline, along with at least 15 years of professional experience in program evaluation, auditing, or verification, with a focus on public sector reforms and service delivery. Additionally, proven leadership and project management skills, including experience leading multidisciplinary teams, are required. A certified expert with qualifications in Project Management such as PRINCE2, PMP or another relevant PM Framework.
- **Key Expert 2 - Sector Specialist (Health):** A sector specialist with a minimum of a Master's degree in public health or a related field, along with at least 10 years of experience in the primary healthcare system with a focus on program evaluation and service delivery. A medical degree will be an advantage.
- **Key Experts 3 and 3a: Sector Specialist (Education):** A sector specialist with a minimum of a Master's degree in education, economics or a related field, along with at least 10 years of experience in the basic education system with a focus on program evaluation and service delivery. In Year 4 only, the IVA will need to quality assure and validate large-scale and sample-based assessments of teaching-learning practices and learning levels, and for this purpose must include an expert with

extensive experience in pedagogy and pedagogical research, preferably at the basic education level, with at least 10 years of experience in the design and conduct of school-based research pertaining to teachers and students.

- **Key Expert 4: Governance and Accountability Specialist:** A Governance and Accountability Specialist with a minimum of a Master's degree in public administration, governance, finance, or a related field, along with at least 10 years of experience in assessing and strengthening transparency and accountability in the public sector. A sound knowledge of public sector budgeting and the National Chart of Accounts will be required.
- **Key Expert 5: Public Financial Management Specialist** with a minimum of Master's degree in finance or related field and proven minimum of 10 years' experience in the use of integrated financial management information systems (IFMIS).
- **Key Expert 6: Human Resource Management Specialist** with a minimum of Master's degree in Human Resource Management or a related field and demonstrated minimum of 10 years of experience in manpower planning in the primary health care or basic education.
- **Key Expert 7: ICT Specialist** with a minimum of Master's degree in Computer Science or related field with a minimum of 10 years' experience in financial application management.
- **Key Experts 8/9: Research/Data Verification Analysts:** A minimum of two research/data verification analysts per participating state. Each analyst should have a university degree in statistics, accounting, law, economics, or a related field, with at least two years of professional experience. Analysts must demonstrate knowledge in statistical and data analysis procedures, including sampling, data collection, and data analysis; and using desk/remote verification methods for verifying state achievements, with field-verification experience considered an advantage
- **Key Expert 10:** A Civil Engineer specialized in construction or an Architect will be required to verify results under DLI 4 of HOPE-EDU. The Expert must have either a degree in Civil Engineering or Architecture along with at least 10 years of experience in the construction industry, including supervisory and quality control roles. Experience in the education sector will be a strong asset

9. REPORTING AND SUPERVISION ARRANGEMENTS

The IVA will report on each Program directly to NPCU for that Program in the fulfilment of its responsibilities. Copies of all reports and supporting documents submitted to NPCU should be made available to the World Bank Task Team. The NPCU refers to HOPE-GOV, NPCU-PHC and HOPE-EDU matters respectively.

10. INTELLECTUAL PROPERTY RIGHT

All deliverables will be the property of the Federal Government of Nigeria. The consultant shall not use or withhold the data gathered for its own research purposes, nor lease the data to be used by others.

11. DURATION OF THE CONSULTANCY

The result verification activities will be performed once a year for HOPE-GOV, twice a year for (HOPE-PHC), and once a year for HOPE-EDU over a 4-year period spanning October 15, 2025 to October 15, 2028 or as may be agreed with each NPCU at the time of signing of the contract.

12. CLIENT'S INPUT AND COUNTERPART PERSONNEL

The client will provide the following services and facilities:

- The NPCU will provide the selected firm with copies of all information submitted by the States, and other federal institutions towards the APAs/assessments as they are received as well as copies of all guidance/feedback/communication from the NPCU and World Bank related to the APAs/assessments.
- Access to government policies, documents, and reports.
- Timely feedback on consultant outputs.
- Release of funds and review of reports on satisfactory completion of relevant deliverables.
- Working space in Abuja
- Some facilitation of travel to project area locations for field visits, information gathering, discussions with local planning and management agencies, stakeholder consultations and implementation support.

13. LOCATION

- The IVA team will carry out most of its assignments remotely. However, to facilitate the implementation of the APA/assessment process, the team from the selected firm is expected to carry out a significant part of their activities in Abuja, Nigeria. The team from the selected firm will travel to the States as necessary to perform the APAs.

14. CODE OF CONDUCT

- The Consultant will, at all times, be expected to carry out the assignment with the highest degree of professionalism and integrity. The Consultant will be expected to conduct his/her duties in an open and transparent manner;
- The Consultant will not, under any circumstance, take any actions or be seen to be taking any actions, which may hinder or prevent the Nigeria HOPE-GOV, HOPE-PHC and HOPE-EDU Programs from executing this assignment;
- The Consultant will study all documents related to the Nigeria HOPE-GOV, HOPE-PHC and HOPE-EDU Programs, guidelines and policies and will be expected to ensure that the assignment is concluded with the strictest adherence to all such policies and regulations;
- The Consultant will not, under any circumstances, take any material decision pertinent to this assignment without the express permission and written consent of an authorized representative of Nigeria HOPE-GOV, HOPE-PHC and HOPE-EDU Programs; and
- The Consultant will not, under any circumstances, discuss, divulge or use any information regarding this assignment or any other transaction conducted as part of the FGN's program,

15. METHOD OF SELECTION

The IVA Consulting firm will be selected using the Quality and Cost-based Selection (QCBS) method. It will be an Open National Market Approach.

16. FEES, REIMBURSABLE, AND PAYMENT SCHEDULE

The consultant will be paid, as the outputs are delivered and consistent with the value to be adopted. Consequently, every bid shall as much as possible show the detailed costing by deliverable, as shown below:

SN	Output and deliverables	Payments	Total Contract Sum
1.	Inception Report (One-off) – On the Global Verification Fee (GVF)	10%	
2.	First Acceptable Verification Report (HOPE-GOV, PHC and EDU) as applicable to each operation	20%	
5.	Second Acceptable Verification Report (HOPE-GOV, PHC and EDU) as applicable to each operation	20%	
8.	Third Acceptable Verification Report (HOPE-GOV, PHC and EDU) as applicable to each operation	20%	
11.	Fourth Acceptable Verification Report (HOPE-GOV, PHC and EDU) as applicable to each operation	20%	
14.	Final Consolidated Report	10%	

Annex 1: HOPE-EDU DLRs to be verified, by DLI, year and financing category of state

There are two sources of financing DLRs under the HOPE-EDU operation: the International Development Association (IDA) and the Global Partnership for Education's System Transformation Grant (STG). The STG finances the DLRs in six states: Abia, Akwa-Ibom, Bauchi, Kebbi, Kwara and Lagos.¹ The DLRs for all other participating states are financed by the IDA. While there is substantial overlap in the DLRs and verification protocols between these two sources of financing, there are two important differences in terms of verification. First, there are some IDA-financed DLRs for which there is no equivalent STG-financed DLRs; in these cases, there is no verification of the DLR in the STG-financed participating states. Second, the character and grace periods of certain DLRs differ to some extent between those financed by the IDA and STG. In particular:

- Under DLI 1, the STG-financed states must achieve their target to supply at least 80 percent of public primary schools with Grades 1-3 teaching-learning materials (TLMs) by the end of Year 2; this is the STG Domestic Financing (DF) Trigger 1. For IDA-financed states, the DLR pertaining to TLMs has a grace period and is calculated on a different basis: the number of schools, by grade.
- Under DLI 8, the Year 2 DLR pertaining to the percentage of schools included in the current-year State Annual School Census Report has a different target for STG-financed states (80 percent, vs. 90 percent for IDA-financed states), and has no grace period (unlike IDA-financed states, where the DLR can also be achieved in a later year).

Full detail can be found in the verification protocols. The protocols provide for each DLR a description of the expected activities and results, and indicate what must be verified and the general procedures to be followed by the IVA. The procedures are sufficiently detailed to enable the IVA to develop a verification methodology, and to provide a basis for estimating the quantitative scope of work. In this latter regard, the IVA will also take into account that for each year the number of DLRs to be verified in participating states will differ. Some DLRs must be achieved in the year in which they are scheduled; others have a grace period of one year, while others can be achieved over a period of up to three years. Further, all scalable DLRs are eligible for rewards only as long as the total funds allocated to the DLR are not exhausted.² Therefore, in any given year the number of DLRs to verify and the number of participating states in which to verify them will depend on whether or not any given DLR has a grace period; how states schedule (and actually achieve) their DLRs; the number of states participating in each RA; and (particularly in later years) the availability of funds to disburse against scalable DLRs. Further detail can be found in the table below on the DLRs to be verified in each of Years 1-4, by DLI and category of DLRs financing (IDA vs. STG). The presentation of DLRs in the table below also takes into account grace periods, that is, by repeating DLRs in all those years in which the grace period allows them to be achieved.

¹ Of these six, only Bauchi, Kebbi and Kwara may participate in RA2. All may participate in RA3; as well as in RA1, but Akwa-Ibom is not eligible for any reward under DLR 1.2. See Table 1 for details on the DLRs.

² In a scalable DLR, the amount rewarded is in some way proportionate to the extent of achievement, up to a maximum amount (i.e. the amount allotted to the DLR). For example, if a certain amount is rewarded for each teacher trained, the DLR is scalable; and a reward will be disbursed for each teacher trained up to the maximum amount. In a non-scalable DLR, the amount rewarded is contingent upon fully achieving the targeted result; if not achieved, no amount is disbursed. It is clear that for scalable DLRs, once the maximum amount has been disbursed; there is no longer any need to verify the results.

	Year 1	Year 2	Year 3	Year 4
DLI 1				
DLR 1.1: Primary schools have sufficient TLMs for literacy and numeracy	IDA-financed participating states (PS): only grades at schools reported to be covered	IDA-financed PS: only grades at schools not previously verified	IDA-financed PS: only grades at schools not previously verified (if reward funds not exhausted)	IDA-financed PS: only grades at schools not previously verified (if reward funds not exhausted)
Domestic Financing (DF) Trigger 1 (STG only): 80% of public primary schools have sufficient TLMs for literacy and numeracy for Grades 1-3		STG-financed PS		
DLR 1.2 (STG only): 80% of public primary schools have sufficient TLMs for literacy and numeracy for Grades 4-6			STG-financed PS (except Akwa-Ibom): only if DLR reported achieved	STG-financed PS (except Akwa-Ibom): only those states that did not report DLR achieved in Year 3
DLI 2				
DLR 2.1: All primary teachers and mentors enabled to improve SPP	All PS reporting teachers/mentors trained	All PS reporting additional teachers/mentors trained	All PS reporting additional teachers/mentors trained (if reward funds not exhausted)	All PS reporting additional teachers/mentors trained (if reward funds not exhausted)
DLR 2.2: All Grades 1-3 teachers regularly mentored on SPP		All PS		
DLR 2.3: All primary teachers regularly mentored on SPP			All PS	
DLR 2.4: Number of primary teachers with improved SPP				Quality control of assessment exercise in all IDA-financed PS (report-based)
DLI 3				

DLR 3.1: Learning evaluation mechanisms for Grades 1-2 literacy and numeracy approved	All PS reporting DLR achieved ³	All PS who did not report DLR achieved in Year 1		
DLR 3.2: Number of LGEAs acting on early learning evaluations		All PS		
DLR 3.3: Number of LGEAs acting on early learning evaluations			All PS	
DLR 3.4: Increased percentage of children proficient in literacy and numeracy				Quality control of assessment exercise in all IDA-financed PS (report-based)
DLI 4				
DLR 4.1: Government-community agreements signed to create new classrooms	All PS reporting DLR achieved	All PS who did not report DLR achieved in Year 1		
DLR 4.2: 13,000 new classrooms created		All PS reporting classrooms created	All PS reporting additional classrooms created	All PS reporting additional classrooms created (if reward funds not exhausted)
DLI 5				
DLR 5.1: 10,000 NFLCs have Management Committee, teacher, and TLMs	All PS reporting DLR achieved	All PS who did not report DLR achieved in Year 1		
DLR 5.2: 1,500,000 out-of-school children complete NFBE program		All PS reporting children completing	All PS reporting additional children completing	All PS reporting additional children completing (if reward funds not exhausted)
DLI 6				
DLR 6.1: Increased number of states accessing UBE matching funds		Federal reward to be verified in this year		
DLR 6.2: 50% of core UBE funds de-centrally managed			Federal reward to be verified in this year	
DLR 6.3: 80% of core UBE funds de-centrally managed				Federal reward to be verified in this year
DLI 7				

³ Some participating states may achieve DLR 3.1 in the first half of calendar year 2026. For these states only, the DLR 3.1 will be verified under a separate contract covering Year 0 DLRs of the HOPE-EDU operation. For any states that achieve the DLR 3.1 subsequently, the verification will be covered by these ToRs.

DLR 7.1: ASG amount and management regulations approved	All PS			
DLR 7.2: 70% of public primary schools use ASG (Nb. This is also DF Trigger 2 for STG-financed states).		All PS reporting DLR achieved		
DLR 7.3: 80% of public primary schools use ASG			All PS reporting DLR achieved	
DLR 7.4: 90% of public primary schools use ASG				All IDA-financed PS reporting DLR achieved
DLI 8				
DLR 8.1: State digital ASC system operational	All PS			
DLR 8.2: 90% of schools included in current-year State ASC Report		All IDA-financed PS reporting DLR achieved	IDA-financed PS who did not report the DLR achieved in Year 2	IDA-financed PS who did not report the DLR achieved in Year 2 or 3
Data Trigger 1 (STG only): 80% of schools included in current-year State ASC Report		All STG-financed PS		
DLR 8.3: 90% of schools included in current-year National ASC Report			To be verified at national level, if reported achieved	To be verified at national level, if not reported achieved in Year 3
DLR 8.4: 95% of schools included in current-year State ASC Report				All IDA-financed PS reporting DLR achieved

Annex 2: HOPE-GOV Program Operation Manual including Verification Protocol

Annex 3: HOPE-PHC Program Operation Manual including Verification Protocol

Annex 4: HOPE-BED Program Operation Manual including Verification Protocol