

Terms of Reference (ToR)
ADVERTISEMENT
Cost-Benefit Analysis of the IMCI Digital Application Integrated with MIS
under MoHFW
(ONLY FOR INDIVIDUAL CONSULTANT)

1. PROJECT SUMMARY

Type of study	Implementation Research
Name of the project	NA
Project Start and End dates	January – December 2025
Project duration	12 months
Project locations:	Dhaka and Barishal
Thematic areas	Health and Nutrition
Sub themes	Child Health
Donor	NA
Estimated beneficiaries	Children under 5, parents, and caregivers.

2. INTRODUCTION

In collaboration with the Directorate General of Health Services (DGHS), the Integrated Management of Childhood Illness (IMCI) digital application was developed by Save the Children to improve the management of common childhood illnesses in Bangladesh. The IMCI app aims to enhance the assessment, classification, and referral/treatment process for children aged 0-5 years suffering from common childhood illnesses such as pneumonia, diarrhea, malnutrition, fever, and ear infections. This innovation aligns with the Ministry of Health and Family Welfare (MoHFW) guidelines, i.e, national IMCI guidelines, and was developed in collaboration with the National Newborn Health Program (NNHP) & IMCI Team, child specialists, Program Team of SCI, and the Global Technical Advisors. The digital tool simplifies the IMCI protocol, enabling healthcare workers to provide accurate and efficient care. It was observed during the field test of the IMCI App in 27 government health facilities in three districts that it enhances the quality-of-service delivery at both health facilities, e.g. Community Clinics, IMCI corner at UHC. It also improves treatment accuracy and enhances supervision & monitoring through digital health analytics.

It also enables the service providers to report real-time data. Based on the learning from the field test, it is integrated into the MoHFW Management Information System (MIS), and this integrated system will be piloted in 316 government facilities in Barishal.

However, Save the Children, with the support of DGHS, intends to conduct implementation research where a rigorous Cost-Benefit Analysis (CBA) will be carried out. The CBA will help us to understand the economic viability, efficiency, and scalability of the IMCI App intervention across Bangladesh.

3. SCOPE OF WORK

The consultant will:

- Conduct a desk review of existing documentation, cost records, and MIS data.
- Engage stakeholders, including DGHS, MoHFW, SCI staff, service providers, and IT teams.
- Develop and apply a methodological framework for Cost-Benefit Analysis.
- Collect primary and secondary data to quantify both costs and benefits.
- Conduct comparative analysis with traditional IMCI service models (where feasible).
- Prepare a final report and policy brief with actionable recommendations.

Scope of Analysis

- **Population:** Children aged 0–5 years served through community clinics, IMCI corner under Upazila Health Complex, and other health facilities.
- **Geographic Focus:** Pilot and early implementation areas in Barisal.
- **Timeframe:** Retrospective and prospective.
- **Stakeholders:** Government health workers, digital health teams, policymakers, and implementing partners.

4. OBJECTIVES

The primary objective is to conduct a **comprehensive cost-benefit analysis** of the IMCI App to evaluate its economic viability and cost-efficiency compared to traditional IMCI service delivery mechanisms.

Specific Objectives

- **To estimate the full economic cost** (development, deployment, training, maintenance) of the IMCI App.
- **To quantify benefits**, including improved health outcomes, time efficiency, service quality, and system responsiveness.
- **To assess potential cost savings** from reductions in incorrect treatments, unnecessary referrals, and paper-based reporting.
- **To generate evidence** for scaling the IMCI App through national digital health strategies.
- **To provide recommendations** for policymakers and development partners regarding future investments and scale-up strategies.

5. STAKEHOLDERS / AUDIENCES

The key stakeholders/audiences for this research are:

Stakeholders	
Lead Implementers	SCI Bangladesh (Sponsorship Program, Health Sector & Tech Hub Teams)

Government Partners	DGHS, NNHP, Divisional Health Director & CS Office etc.
Support Agencies	WHO, UNICEF etc.
Health Facilities (Community Clinic, IMCI Corner)	Pilot and implementation sites

6. METHODOLOGY

Cost Estimation:

- Development and operational costs (hardware, software, training, supervision)
- Recurrent costs (maintenance, updates, connectivity)

Benefit Estimation:

- Health outcomes: improved diagnosis, reduced morbidity and mortality (prefer LIST)
- Efficiency: time saved per consultation, reduced referrals, fewer stock-outs
- Cost savings: reduced printing/logistics, supervision efficiency, fewer repeat visits

Data Sources: Project financials, MIS data, field survey/interviews, routine health data, national reports

7. DATA COLLECTION

The study is required to adhere to the SCI Child Safeguarding, Data Protection, and Privacy policies throughout all project activities. All the data, reports, and other deliverables produced in this study will be treated as the property of SCI, and information, data, or deliverables related to this assignment cannot be sold, used, or reproduced in any manner by the researchers without prior permission from SCI.

8. ETHICAL CONSIDERATIONS

The consultant (individual) will lead the process of **IRB approval** from the renowned board in Bangladesh and follow the SCI procedure below:

- **Child participatory.** Where appropriate and safe, children should be included in the research. Any child participation, whether consultative, collaborative or child-led, must abide by the [9 Basic Requirements for meaningful and ethical child participation](#).
- **Inclusive.** Ensure that children from different ethnic, social, and religious backgrounds have the chance to participate, as well as children with disabilities and children who may be excluded or discriminated against in their community.
- **Ethical:** The evaluation must be guided by the following ethical considerations:
 - Safeguarding – demonstrating the highest standards of behavior towards children
 - Sensitive – to child rights, gender, inclusion, and cultural contexts
 - Openness - of information given to the highest possible degree to all involved parties.
 - Confidentiality and data protection - measures will be put in place to protect the identity of all participants and any other information that may put them or others at risk.¹
 - Public access - to the results when there are no special considerations against this.

¹ If any Consultancy Service Provider, Freelancer or Contingent worker will have direct contact with children and/or vulnerable adults and/or beneficiaries and/or have access to any sensitive data on safeguarding and/or children and/or beneficiaries, it is the responsibility of the person receiving the consulting service to contact the local HR team and child safeguarding focal point to ensure vetting checks and on-boarding are conducted in line with statutory requirements, local policies and best practices guidance.

- Broad participation - the relevant parties should be involved where possible.

Reliability and independence - the study should be conducted so that findings and conclusions are correct and trustworthy.

9. EXPECTED DELIVERABLES

Deliverables and Due Dates

Deliverable	Due Date
Agreement starts	1 June 2025
Submission of the inception report with tools	15 June 2025
Submission for IRB Approval	20 June 2025
Data collection and analysis	1 July – 15 October 2025
Draft report by the consultant	1 November 2025
Feedback from Save the Children	5 November 2025
Final report and policy brief	10 November 2025
Findings presentation at DGHS	15 November 2025
All data: calculation file & methodology, final list of costs and cost estimation details of benefits, dataset, report	25 November 2025

*All reports are to use the Save the Children Report template (research focal will be shared with the consultant).

All documents are to be produced in MS Word format or MS Excel format and provided electronically by email to the research focal of SCI. Copies of all PowerPoint presentations used to facilitate briefings for the project should also be provided to SCI in an editable digital format.

10. REPORTING AND MANAGEMENT

The consultant will work closely with Save the Children. The consultant will attend regular meetings at SCI and or DGHS.

11. CONSULTANT QUALIFICATIONS

For Individual Consultant/Team Lead:

- Advanced degree in Health Economics, Public Health, Development Economics, or a related field.
- At least 8 years of relevant experience in an economic evaluation of health programs.
- Proven experience in conducting cost-benefit or cost-effectiveness analysis, preferably in Bangladesh.
- Demonstrated track record of conducting economic evaluations for health or digital health interventions.

12. TECHNICAL EVALUATION CRITERIA

The organization will assign a committee composed of management and the technical team to evaluate the proposals submitted by consultants. One representative must be from the Central Evidence & Learning team.

13. SCHEDULE OF PAYMENT

Payment will be made in tranches against deliverables:

- 20% on submission and approval of the Inception Report
- 30% on submission of Interim Findings
- 50% on submission and acceptance of the Final Report and Policy Brief

14. APPLICATION PROCEDURE

Interested **individual consultants** are requested to submit the following documents in the mentioned email address:

- **A Technical Proposal** including (max 10 pages)–
 - ✓ Brief understanding of the task
 - ✓ Descriptions in brief on the experiences of carrying out high-quality and credible completion of relevant tasks (proof required)
 - ✓ Brief on the methodologies for task completion
 - ✓ Tentative schedule for completing the task
 - ✓ Work references – contact details (e-mail addresses) of 2 referees (organizations by whom you were contracted for similar assignments)
 - ✓ CV and a Cover Letter
 - ✓ NID copy and TIN certificate and with acknowledgement copy of income tax return for the most recent year
 - **A Financial Proposal** including -
 - ✓ Detail breakdown of costs and consultancy fees (tax will be deducted as per government rules)
 - Email: asrarul.rifat@savethechildren.org.
 - **Please only mention “IMCI Cost-Benefit Analysis” in the subject line of the email.**
 - Application closing date: **May 15, 2025**
-