CARE NEPAL

Terms of Reference (ToR)
Scoping Study for Identification of Digital Health Tools and Platforms for the Sanjeevani Project

BACKGROUND

CARE Nepal is a not-for profit organization that works across the range of humanitarian action and long-term development programs to fight poverty and achieve social justice by addressing gender-based violence, women and girls' leadership and voice, inclusive governance, sexual & reproductive health, livelihoods, food and nutrition security, disaster risk reduction, and climate justice. It brings on its global experience to address the underlying causes of poverty and social injustice, with a distinct focus on the most marginalized and vulnerable women and adolescent girls. It works in partnerships with government, donors, NGOs, civil society organizations, research institutes, private sectors, and closely collaborates with community members.

CARE Nepal, in partnership with SPARSHA Nepal, is implementing the Tuberculosis (TB) project named Sanjeevani Project in Rautahat District, Madhesh Province. The project aims to strengthen local health systems, improve community engagement, enhance TB case detection and treatment outcomes, and institutionalize the TB-Free Municipality Initiative.

Digital health is one of the core components of the project because of its potential to strengthen service delivery, enhance capacity building, facilitate patient follow-up, and support evidence-based decision-making. In this regard, the Sanjeevani Project intends to introduce an appropriate digital health tool to support TB service delivery at the community and health facility levels and identify an appropriate existing digital health platform to deliver these digital health tools; and be accessible offline.

The Sanjeevani Project recognizes that digital tools are only effective when they respond to clearly defined health system and user needs. Therefore, this study will prioritize the identification and analysis of key workflows requiring digital support before assessing potential technology solutions. The study will explore priority use cases including, but not limited to:

- Frontline health worker learning, mentorship, and job aids;
- Community-based TB screening, referral, and follow-up;
- Patient tracking, adherence monitoring, and treatment completion;
- Health facility-level TB case management and reporting; and
- Municipal and program-level monitoring, supervision, and decision-making.

Accordingly, CARE Nepal intends to undertake a scoping study that will identify priority use cases for digital health within the Sanjeevani Project, assess Nepal's existing digital health ecosystem, evaluate opportunities for reuse and interoperability, and recommend the least complex, most inclusive, and sustainable digital solution aligned with Government of Nepal priorities.

OBJECTIVE

To identify the health-system and user workflows that would benefit most from digital support within the Sanjeevani Project and recommend the least complex, most inclusive, sustainable, and scalable digital solution(s) that can be implemented within Nepal's existing digital health ecosystem.

Specific objectives are to:

- Map and analyze TB-related health systems and user workflows at community, health-facility, municipal, and program levels.
- Define and prioritize use cases where digital technologies can improve service delivery, capacity building, data use, and patient outcomes.
- Assess existing government, partners, and global digital health platforms and determine opportunities for adaptation, integration, or reuse.
- Develop prioritized functional and non-functional requirements for potential digital solutions.
- Evaluate shortlisted platforms against agreed technical, operational, governance, and sustainability criteria.
- Recommend the most appropriate digital solution(s), including options for integration with existing systems.
- Develop an costed implementation roadmap for adoption and scale-up.

SCOPE OF WORK

The consultant/firm will undertake, but not be limited to, the following tasks:

A. Situational Assessment/Desk Review

- Review existing digital health policies, standards, and enterprise architecture relevant to Nepal.
- Map and document existing government and partner digital health systems and tools relevant to TB and primary healthcare.
- Assess opportunities for integration, adaptation, or configuration of existing platforms.
- Assess infrastructure readiness, including connectivity, devices, electricity, digital literacy, and technical support.
- Assess the minimum required period for offline functionality (e.g., the number of days the tool should operate without internet connectivity) and the data handling protocol if a device is lost, shared, or delayed in syncing.
- Access local language and low literacy interface requirements for frontline users, audio/icon-based navigation, not only Nepali-language content.
- Map current TB workflows at community, facility and municipal levels.
- Assess opportunities to integrate with existing national digital health systems before considering new platform deployment. This should explicitly map current reporting flows into DHIS2/HMIS and NTCC TB registers, to avoid creating parallel or duplicate data-entry burden for facility staff.

- Identify operational bottlenecks and opportunities for digital support.
- Prioritize digital use cases based on feasibility, value, user needs, and sustainability

B. Stakeholder Consultations

As relevant, conduct consultations with:

- National Tuberculosis Control Centre (NTCC)
- Ministry of Health and Population
- Provincial and local health authorities
- Health facility staff and FCHVs
- Global Fund partners
- Technology providers
- CARE Nepal and SPARSHA Nepal project teams

The consultations should explore:

- Existing system uses and pain points;
- User requirements and accessibility needs;
- Gender-related barriers to digital adoption including Phone ownership, access and control within household, and mechanism for safe, confidential receipts of TB related communication
- Implications of new digital tasks for FCHVs and frontline health workers
- Data governance and security considerations;
- Compliance with Nepal's Privacy Act, including consent processes and data minimization for TB sensitive identifiers collected at community level
- Sustainability and ownership considerations.

C. Platform Evaluation

- Assessment criteria should include:
- Alignment with prioritized use cases;
- Interoperability with national systems;
- Data governance and privacy standards;
- Cybersecurity considerations;
- Offline functionality;
- User-friendliness; including simplicity and fit with locally available technical capacity, so the chosen solution can realistically be maintained after project completion;
- Gender responsiveness and accessibility

D. Develop Recommendations and Implementation Roadmap

Prepare recommendations on:

- Whether existing systems can be reused, configured, or integrated;

- Whether additional digital tools are required;
- Preferred platform option(s);
- Required governance arrangements;
- Capacity-building requirements;
- Risk mitigation measures;
- Sustainability strategy; including considerations for institutional ownership, fit with technical capacity, maintenance, scalability, financing, and long-term system support.

METHODOLOGY

The study should employ a mixed-methods approach that includes:

- Desk review of relevant policies, strategies, and existing digital platforms
- Key informant interviews (KIIs)
- Focus group discussions (FGDs) with health workers and FCHVs
- Comparative platform analysis against agreed criteria
- Functional and non-functional requirements analysis
- Digital architecture and interoperability assessment
- Validation meeting/ workshop with key stakeholders
- Workflow mapping and business process analysis

Guiding question for the study: What health-system and user workflows require digital support, and what is the least complex, most inclusive, interoperable, and sustainable way to meet those needs within Nepal's existing digital health ecosystem?

DELIVERABLES

1. Inception Report with methodology, stakeholder engagement plan, and detailed workplan
2. Comparative evaluation matrix of digital platforms
3. Final Scoping Study Report with findings and recommendations, Risk register, Governance considerations, Sustainability assessment, Implementation roadmap
4. Slide deck and validation meeting report from validation workshop

REQUIRED QUALIFICATIONS

The consultant or consulting firm should meet the following minimum requirements:

- The Lead Consultant should hold an advanced degree (Master's or higher) in Public Health, Health Informatics, Digital Health, Information Systems, or a related field.
- The Lead Consultant should have a minimum of 3–5 years of professional experience in digital health assessments, digital health system design, implementation, or related areas.
- The consultant or consulting team should have demonstrated experience working in Tuberculosis (TB) program, community health, health systems strengthening, or related public health program.
- The consultant or consulting team should have a sound understanding of Nepal's health system, digital health policies, systems, platforms, and the broader digital health landscape.

- Strong analytical, facilitation, communication, stakeholder engagement, and report-writing skills are required, with demonstrated ability to synthesize findings and provide practical recommendations.

SUBMISSION GUIDELINE:

Interested applicants should submit:

- Separate Technical proposal (focusing on approach and methodology) and Financial Proposal in pdf format with signature and stamp along with the date.
- CVs of Consultant/team members.
- For firms: Copies of- Firm registration certificate, VAT registration certificate, latest tax clearance certificate. For firms that are tax exempted by the government, a copy of the tax exemption certificate should be submitted.
- Sample report of previous similar assignment.
- If any documents/information is not available or not applicable, the reason(s) must be clarified in the proposal form. CARE Nepal will have the right to disqualify the proposals from the selection process if the proposal submission guideline has not been followed.

Note: Service providers, both institutional and individual, who are registered for VAT are encouraged to participate in this assignment.

EVALUATION CRITERIA:

The evaluation will be conducted in four stages, with a total score of 100 marks as follows:

Stage 1: Technical Evaluation - **70 Marks**

- Methodology
- Team composition and expertise
- Demonstrated understanding of the assignment
- Clear workplan with Timeline
- Organizational experiences and demonstration of any relevant prior works if any

Stage 2: In-Person Meeting and Discussion — **10 Marks**

- Formal meeting with the shortlisted consultant/firms
- Presentation of approach and clarifications on proposed methodology

Stage 3: Financial Evaluation — **20 Marks**

- 5 marks – Legal compliance
- 5 marks – Quality and clarity of the financial proposal
- 10 marks – Lowest budget

Stage 4: Consolidation of Scores and Final Ranking

- Combined scoring from all stages
- Recommendation for award of contract

Note: *A consultancy firm must obtain a minimum of 80% of the total technical evaluation score to be considered eligible for the further interview stage and* CARE Nepal will not have any liabilities on any unanticipated incident (accident, injury, natural disaster, etc.) to the consultant.

COORDINATION & OFFICIAL TRAVEL:

The project will likely require ground-level information; therefore, the consultant/consultancy will have to manage all required coordination and transportation in Kathmandu and outside Kathmandu themselves.

BUDGET AND PAYMENT MODALITY

A. The allocated budget and charging for this assignment will be as per financial proposals.
B. Payment will be made based on the completion and approval of deliverables:
    - 40% of the contract value after approval of the Inception report.
    - 60% of the contract value after approval of the Final Report

    (Budget will include consultant fees, field travel, data collection, and reporting costs)
C. The consultant shall submit the final report in accordance with the agreed timeline. Payment will be made upon the satisfactory completion of the assignment, acceptance of all deliverables, and submission of the required financial documents.
D. CARE Nepal will not bear any additional costs associated with the assignment. Therefore, the consultant/firm is required to include and clearly specify all costs related to the execution of the assignment in their financial proposal like Daily consultancy fees, Travel, DSA and Accommodation.

PROPOSAL SUBMISSION:

Interested service providers registered in VAT and meet the requirements must send their technical and financial proposals (both documents in separate PDF file) to the following email address: NPL.CareNepal@care.org indicating in the subject line: ***"Proposal- Digital Health Scoping_Sanjeevani"***. The deadline for submitting proposals is **14th August 2026**.

TIMEFRAME AND SCHEDULE

The assignment is expected to take approximately 25 days. The tentative timeline for the evaluation is to be completed by 30 September 2026 with assignments starting from 3rd week of August 2026.

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