

Results-Based Financing for Health Impact Evaluation
[Country] Evaluation Team
Terms of Reference
Technical Assistance for Impact Evaluation

1. PURPOSE OF THIS CONSULTANCY

The purpose of this consultancy is to provide technical assistance for a prospective, rigorous impact evaluation of a Results-Based Financing for Health program in [Country]. This includes the following services:

- A. Research services: design and oversee all aspects of the implementation of the impact evaluation
- B. Data quality assurance services: provide direct technical support to the survey firm(s) on data quality assurance related to the design and implementation of the impact evaluation.
- C. Learning, knowledge management and dissemination services: help translate lessons from the Impact Evaluation to the larger benefits of [Country] Health Policy and Practice

2. BACKGROUND: HEALTH RESULTS INNOVATION TRUST FUND (HRITF)

The objective of the HRITF is to design and implement sustainable Results-Based Financing (RBF) pilot programs that cost-effectively improve maternal and child health outcomes (i.e MDGs 4 & 5). The hypothesis is that RBF can be used to increase access to appropriate medical care, improve the quality of medical care, and encourage individuals to adopt health-improving behaviors.

The HRITF is financing RBF pilot interventions - both supply-side (provider payment schemes, contracting out) and demand-side (conditional cash transfers). A central element of the HRITF is to learn about and document the extent to which RBF policies are effective, are operationally feasible, and in what circumstances. As such, rigorous evaluation of all HRBF programs is essential for generating new knowledge that can inform governments and partners to effectively design and use RBF mechanisms. The eventual learning objective is not only to assess the impact of the RBF intervention(s) in [Country], but also to compare these impacts across the other countries with similar interventions, and to be able to provide externally valid advice on the feasibility and effectiveness of these approaches to other countries.

The [Country] team at the World Bank is seeking a Firm to provide comprehensive technical assistance to the impact evaluation of its RBF program. The Firm will be responsible for the design, implementation, analysis and dissemination of results for the impact evaluation. The Firm will collaborate with the country Task Team Leader (TTL) and project team, key country counterparts (e.g. Government and survey firm), and the the Results-Based Financing for Health anchor team at the World Bank, to develop an impact evaluation design that measures the causal effects of the program, is compatible with operational requirements and ensures results are comparable with other RBF impact evaluations.

2. BACKGROUND: THE [country] RBF PROGRAM/PROJECT

insert information on the [country] RBF program

3. SCOPE OF WORK

The assignment includes the following tasks:

A. RESEARCH SERVICES

- a) **Establish an in-country advisory panel:** The firm will work with World Bank Task Team and the FMOH – DPRS to establish an in-country advisory panel made up of key stakeholders: project design team members, government counterparts, local researchers, etc. This team will provide guidance to the impact evaluation team on the policy relevance, country context on other country specific issues for the impact evaluation, as well as generate buy-in from the relevant stake-holders on the impact evaluation design.
- b) **Develop the Evaluation Design:** The Firm will develop an impact evaluation design which isolates the causal impact of the intervention on key outcome indicators (standard measures of poverty and health, facility costs, quality of care, use of services, household out-of-pocket payments for health care, health outcomes, and administrative costs), in consultation with the [Country] team and Results-Based Financing for Health anchor team.

The Firm will propose a preliminary experimental or quasi-experimental design for the impact evaluation in [Country] that is consistent with the common framework detailed in the Results-Based Financing for Health Impact Evaluation Toolkit. The evaluation design will be developed with the HRBF country team and country counterparts. S/he will seek stakeholder feedback on the preliminary experimental design and revise design based on feedback.

S/he will develop a detailed Impact Evaluation Concept Note and Gantt Chart with the [Country] RBF team which details the agreed upon identification strategy, data collection and analysis plan, staffing, budget and time frame. The Impact Evaluation Concept Note will be integrated into the overall RBF project implementation plan. The impact evaluation design should include collation and analysis of secondary data sources in order to inform power calculations and a rigorous identification strategy.

- c) The firm will work with the World Bank team to ensure **peer review of the protocol/design** by [Country] and international experts. The firm will also ensure that in coordination with implementing agencies they will obtain Ethical clearances for the study as a whole.
- d) **In collaboration with [xx] and on the basis of the draft impact evaluation design, the firm will prepare a detailed Impact Evaluation Gantt Chart.** The Gantt chart will be integrated into the overall project implementation plan.
- e) **Identify and Help Contract a Qualified Survey Firm(s):** The firm will support [XX] to recruit and contract the survey firm(s) required to complete data collection and entry activities. This includes:

- Draft specifications and finalize terms of reference
 - Provide recommendations on preferred firm(s)
 - Firm will provide support on reviewing technical and financial proposal for issues such as, but not limited to:
 - Survey team composition
 - Total number of field teams and field team structure
 - Field team salary and per diem costs
 - Proposed time and budget allocated to training
 - Procurement of proper materials for anthropometrics, biomarkers, and other required consumables
 - Negotiate and recommend detailed survey firm budget(s)
- f) Together with the [government] and World Bank task teams, **identify key outcomes indicators and other variables that will be measured** as part of the impact evaluation. This will include individual, household, community, facility and programmatic indicators. It will also include defining the data sources and methods of collection and preferred measurement methods. This will include:
- Reviewing Results-Based Financing for Health Questionnaire templates and adapt them to the country specific context. Provide in-country support on pretesting of questionnaire(s). Track necessary revisions to the questionnaire(s) based on lessons learned from pretest and document all recommendations for questionnaire content and execution
 - Review questionnaires with advisory panel
 - Finalize questionnaire based on feedback from pilots and advisory panel
 - Review questionnaire(s) for consistency, accuracy and content. Ensure skip patterns are correct, formatting is consistent and print-ready
 - Review English back-translation following translation into local language for consistency and accuracy in content
 - Develop a detailed Research Protocol
- g) The Firm will collaborate with the Survey Firm(s) to **identify and fulfill all requirements for ethical clearance of the impact evaluation activities**. This includes:
- the Firm will lead development of the research protocol, which will include an overview of methodology, data collection and analysis plan, measures taken for the protection of human subjects, including informed consent and respondent confidentiality including on public availability of the data, assessment of respondent risks and benefits
 - The firm will identify the ethical review board(s) and/or institutional review boards that are appropriate for the study.
 - The firm will ensure that the packages are submitted and cleared by all required committees.
- h) The Firm will refine the **definition of the sample sizes** required to estimate program impacts, as well as the sampling strategy. This will include:
- The outcome indicator(s) that are used to determine the sample size(s)
 - The minimum impacts that the study should be designed to measure
 - The number of communities/facilities/households in each of the control and treatment groups

- The number of households and individuals in each community; and (if relevant) the number of repeat visits before and after the interventions
 - Definition of the sample inclusion criteria
 - Definition of central or field-based sampling methodology in collaboration with the Survey Firm(s)
- i) The Firm will support the principal investigator in performing all necessary analysis that will lead to the **assignment of the treatment and comparison status**
- Compile the list of geographic locations and facilities
 - Perform any necessary stratifications
 - Write the programming code to perform the assignment and run the code
 - Produce the final list of treatment and control areas
 - Produce the sample control file
- j) The Firm will **oversee all activities related to preparation and implementation** of the baseline data collection , including:
- Developing the Field Work Plan with the Survey Firm(s)
 - Adaptation of Results-Based Financing for Health survey training materials
 - Interviewer recruiting and training
 - Pilot testing with field team(s)
 - Production of Survey Firm progress reports
 - Collection and compilation of any required secondary data (e.g., health provider reports, community surveys, etc.)
- k) **Data cleaning and analysis and validation of the evaluation design** (baseline): The firm will perform an initial analysis of the baseline data in order to validate the evaluation design (through baseline difference in means tests) and verify the quality of data produced. This includes production of STATA (or other appropriate statistical software) code, descriptive tables and a report. The firm will:
- Review data files and basic data cleaning to ensure all observations are uniquely identified and reported data is internally consistent
 - Conduct merging across data files to ensure clean merges
 - Construct variables in accordance with international and local definitions (see WHO indicators definitions and JHU indicator report)
 - Construct baseline difference in means tests and export to excel
 - Produce summary statistics of key outcome and covariate variables
 - Produce a written descriptive report following the RBF for Health Descriptive Report template
 - Produce PPTs summarizing the report
 - Results, reports and PPTs will need to be presented in two formats: (i) disaggregated for the 3 intervention states and corresponding control states; (2) aggregated over the 3 intervention states and corresponding control states
- l) **Dissemination of baseline results:** The firm will be in charge of organizing the dissemination of the results from the baseline surveys. This will include workshops in the three states.

- m) **Manage Data Documentation and Storage (baseline data):** The Firm is responsible for ensuring proper, comprehensive documentation of the impact evaluation activities and ensuring all baseline data and corresponding documentation are stored on the Results-Based Financing for Health Data Catalog. The firm will be expected to follow international metadata standards (DDI and Dublin Core) in the documentation of data.
- n) **Monitor and document the intervention between the baseline, midline and follow-up surveys.** The firm will be responsible for monitoring and documenting the implementation of the intervention. In particular, the firm will:
- Pay close attention to any significant changes in either the intervention or the control area programs (PBF and DFF), including possibly confounding programs – report every 6 months
 - Conduct periodic qualitative work to monitor the implementation of the programs in both the treatment and comparison areas – report every 6 months
 - Conduct qualitative work to identify the channels of causal impact of the program, with an eye of reviewing the data collection instruments for the follow up surveys.
 - Track and analyze any available administrative data that could help estimate impact at the stage between the baseline and follow-up surveys.
- o) The Firm will **oversee all activities related to preparation and implementation** of the **endline** data collection, including:
- Recruitment of a survey firm (as in e) above)
 - Developing the Field Work Plan with the Survey Firm(s)
 - Adaptation of Results-Based Financing for Health survey training materials
 - Interviewer recruiting and training
 - Pilot testing with field team(s)
 - Production of Survey Firm progress reports
 - Collection and compilation of any required secondary data (e.g., health provider reports, community surveys, etc.)
- p) **Data cleaning and analysis (endline surveys):** The firm will support the principal investigator to perform an initial analysis of the midline data in order to determine the impact of the program. This includes production of STATA (or other appropriate statistical software) code, descriptive tables and a report. The firm will:
- Review data files and basic data cleaning to ensure all observations are uniquely identified and reported data are internally consistent
 - Conduct merging across data files to ensure clean merges
 - Construct variables in accordance with international and local definitions (see WHO indicators definitions and JHU indicator report)
 - Construct difference in means tests, run regressions to estimate impact and export to excel
 - Produce summary statistics of key outcome and covariate variables
 - Produce a written report
 - Produce PPTs summarizing the report
 - Results, reports and PPTs will need to be presented in two formats: (i) disaggregated for the 3 intervention states and corresponding control states; (2) aggregated over the 3 intervention states and corresponding control states
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- q) **Dissemination of *endline* results:** The firm will be in charge of organizing the dissemination of the results from the midline surveys. This will include workshops in the three states.
- r) **Manage Data Documentation and Storage (*endline* data):** The Firm is responsible for ensuring proper, comprehensive documentation of the impact evaluation activities and ensuring all *endline* data and corresponding documentation are stored on the Results-Based Financing for Health Data Catalog. The firm will be expected to follow international metadata standards (DDI and Dublin Core) in the documentation of data as well as guidelines from the HRITF trust fund.

B. DATA QUALITY ASSURANCE SERVICES

The Firm will provide data quality assurance services during Phase I and Phase II of the consultancy. During Phase I of the consultancy, these services would be for the baseline round of surveys and the midline round of surveys. During Phase II of the consultancy, these services would be for the endline round of surveys.

- a) **Technical Support on Training Program and Materials:** The Firm will provide support on the following:
- Review Survey Firm(s) training program curriculum and provide recommendations on structure and content
 - Develop/adapt training program materials, such as supervisor manual, interviewer manual, powerpoint presentations
 - Deliver/observe training program and provide feedback to Survey Firm(s) on curriculum and execution
- b) **Technical Support on Data Entry Program and Management:** The Firm will provide support on the following:
- Develop/adapt the household/health facility CS-Pro or similar data entry program, including necessary consistency and out-of-range checks, as well as proper labeling of data
 - Organizing entry on a unique menu, defining strong case-IDs
 - Provide remote/in-country support to Survey Firm(s) on installation
 - Provide remote/in-country support to Survey Firm(s) on exportation from CS-Pro to STATA
 - Determine to either tailor a networked environment for conveying the entered data to a concentrator computer if possible, or design an alternate transference channel via pendrives (or other).
 - Identify any security threats and recommend methods to mitigate threats to data during data entry and management
 - Provide clear protocol to data entry supervisor for planning and controlling the progress of the data entry job, as well as managing data coming from field (proper labeling, storage)
 - Provide accurate estimation on the duration of the entire entry, and an assessment of the expected quality based on direct observation of the staff' performance
- c) **Technical Support on Field Work :** The Firm will provide support on the following:
- Develop/adapt or advise on the Survey Firm's sample control file for data collection
 - Develop/adapt or advise on the field team structure, transportation and data management plan

- d) The Firm is responsible for **ensuring data quality assurance mechanisms** are in place for data collection, entry and management, including field supervision, questionnaire checking in the field, re-surveying a sample of households, etc. The firm will supervised the data quality assurance mechanisms put in place by the survey firm and report on a regular basis both to the NSHPIC management and to the Bank.

C. LEARNING, KNOWLEDGE MANAGEMENT AND DISSEMINATION SERVICES

The firm will support learning, knowledge management and dissemination of results generated around the impact evaluation of the NSHPIC. This is to help translate lessons from the Impact Evaluation results to the larger benefits of [country] Health Policy and Practice. In particular, the firm will:

- a) Analyze the diverse types of information generated by the project on a regular basis; create policy briefs and disseminate to stakeholders
- b) Provide technical Support to the [Government/MOH] for the results monitoring of the [project].
- c) Facilitate the use of health facility surveys across the rest of [country].

4. TEAM COMPOSITION

Interested firms should propose the team composition that they consider adequate. However at the minimum, the following requirements should be observed:

- Lead investigator: substantial presence in the country. Proposals should include proposed time allocation in country and time commitment overall (in country and remote if applicable)
- Sr investigator: preferably full time presence in the country. Proposals should include proposed time allocation in country.
- Data quality assurance expert: substantial presence in the country during survey preparation and implementation time. Proposals should include proposed time allocation in country.
- Field coordinator/ research assistant: full time presence in the country.

Lead investigator: required skills and experience

- PhD in relevant field, preferably economics or health policy.
- Minimum 5 years of project impact evaluation experience
- Minimum 5 years experience in designing and implementing quantitative impact evaluations using randomized or otherwise controlled designs
- Relevant experience in measurement of health outcomes through household surveys
- Relevant experience designing and coordinating field work for large household surveys and health facility surveys
- Relevant experience analyzing quantitative data (household and facilities) using statistical analysis software
- Relevant experience in coordinating implementation of impact evaluation field work
- Excellent written English communication skills, with focus on research protocols, research papers and descriptive reports for diverse audience

- Ability to facilitate communication between various levels of management and work independently in order to meet deadlines
- The lead investigator should have published evaluations in peer reviewed journals.

Sr investigator: required skills and experience

- PhD in relevant field, preferably economics or health policy.
- Minimum 3 years of project impact evaluation experience
- Minimum 3 years experience in designing and implementing quantitative impact evaluations using randomized or otherwise controlled designs
- Relevant experience in measurement of health outcomes through household surveys
- Relevant experience designing and coordinating field work for large household surveys and health facility surveys
- Relevant experience analyzing quantitative data (household and facilities) using statistical analysis software
- Relevant experience in coordinating implementation of impact evaluation field work
- Excellent written English communication skills, with focus on research protocols, research papers and descriptive reports for diverse audience
- Ability to facilitate communication between various levels of management and work independently in order to meet deadlines
- Ideally, the sr investigator should have published evaluations in peer reviewed journals.

Data quality assurance expert: required skills and experience

- 5-10 years experience managing large scale data collection including household surveys and health facility surveys. Experience with maternal and child health data collection is a plus.
- Extensive experience with data quality assurance mechanisms (training of enumerators, design and adaptation of questionnaires, field work management, data entry programming, data management, etc)
- Ability to communicate in English, local language a plus
- All written documentation must be submitted in English
- Proven ability to facilitate communication between different levels of government and between government and development partners
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Field coordinator: required skills and experience

- Master’s degree in relevant field, preferably health or economics
- Experience managing projects, including procurement and field work.
- Relevant experience analyzing quantitative data (household and facilities) using statistical analysis software
- Ability to communicate in English, local language a plus
- All written documentation must be submitted in English
- Familiarity with the health sector in country a plus
- Proven ability to facilitate communication between different levels of government and between government and development partners

5. DELIVERABLES

	Deliverables	Expected Delivery Date	Days	Responsible team
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					members
A	a	Establish Advisory Panel			
	b	IE Concept Note			
	c	Gantt Chart			
	d	Survey Firm TOR(s) Final written summary of comments and recommendations regarding survey firm proposals			
	e	Final English Questionnaires with comments and recommendations from pretest and advisory panel Research Protocol Final English questionnaire			
	f	Ethical clearance package(s) Ethical clearance			
	g	Power calculations Survey inclusion criteria Central or field sampling plan			
	h	Compilation of geographic locations and facilities Assignment to treatment and control including programming code Sample control file			
	i	For baseline surveys: Field work plan Final training materials Summary of pilot test Any required secondary data			
	j.	Baseline report Report on Validation of Evaluation Design Includes STATA do files, tables and reports and powerpoints.			
	k	Baseline Dissemination workshops			
	l	Final Baseline Data and Documentation uploaded on RBF for Health Data Catalog Nesstar and XLM files			
	m	6-month updates on implementation of the program and possible confounding programs in the treatment and comparison areas Reports on qualitative work regarding channels of causal impact Analysis of administrative data to estimate impact at preliminary stages			
	n	For midline surveys: Field work plan Final training materials Summary of pilot test Any required secondary data			
	o	Midline report Midline impact report Includes STATA do files, tables and reports and powerpoints.			

	p	Final Midline Data and Documentation uploaded on RBF for Health Data Catalog Nesstar and XLM files			
	q	Midline Dissemination workshops in 3 states			
B	a	For baseline survey round: Final written summary of comments on training curriculum and materials Final manual(s) and PPTs Final written summary of comments and recommendations for training, in terms of content and execution			
	b	For baseline survey round: Final DEP with data dictionary Written summary of data entry protocol, including management of data from field, threats to security and necessary recommendations, description of network vs. pendrive management, estimation of productivity (questionnaires per day, total days)			
	c	For baseline survey round: Final sample control file with comments and recommendations Written summary of recommendations related to field work management, including field team structure, transportation and data management plan			
	d	For baseline survey round: Detailed description of quality control measures implemented and assessment of success			
B	a	For midline survey round: Final written summary of comments on training curriculum and materials Final manual(s) and PPTs Final written summary of comments and recommendations for training, in terms of content and execution			
	b	For endline survey round: Final DEP with data dictionary Written summary of data entry protocol, including management of data from field, threats to security and necessary recommendations, description of network vs. pendrive management, estimation of productivity (questionnaires per day, total days)			
	c	For endline survey round: Final sample control file with comments and recommendations Written summary of recommendations related to field work management, including field team			

		structure, transportation and data management plan			
	d	For endline survey round: Detailed description of quality control measures implemented and assessment of success			
C	a	Policy briefs			
	b	Results monitoring of the [project]			
	c	Report on use of health facility surveys across the rest of [country]			

6. LOGISTICAL SUPPORT

The team will be collocated in the FMOH Department of Planning Research and Statistics.

7. ESTIMATED TIMELINE

The consultancy will be required for the full period of project implementation ie [start date] to [end date] subject to the availability of funds. This is expected to include one round of baseline surveys as well as the endline surveys.

8. MANAGEMENT

The consultant will report directly to the World Bank Task Team Leader. It is important to note that all data, tools and reports produced for the impact evaluation in the context of this contract will be the property of the World Bank and the Government of [country]. While the firm will be involved in analysis of the impact evaluation data, nothing in these TOR should be construed as implying that the Firm will have ownership or exclusive rights over the data. The General conditions of contract with the World Bank are applicable to this contract. Data may be available to the contracted firm for academic or publication purposes; however this will be the subject of a memorandum of understanding between the Government of [country], the World Bank and the firm.

In no case will data, tools or reports be held back from the Government of [country] or the World Bank, except where so required under rules of protection of human subjects sanctioned by an Institutional Review Board.

At the discretion of the World Bank TTL, additional principal investigator(s) for the study may be added to the study. If collaboration with local researchers is desired, please include, bearing in mind that there may be conflict of interest if those researchers work for the survey firm.