

Terms of Reference for

Engaging a Service Provider to Facilitate Healthcare Services at RMG Factories and Adjacent Areas

1. Introduction

Swisscontact, Swiss Foundation for Technical Cooperation, is headquartered in Zurich and was founded in 1959 by leading figures from the Swiss private sector and Swiss universities. It is exclusively involved in international cooperation and, since 1961, has carried out its own and mandated projects. A part of the organisation, Swisscontact Bangladesh, is registered as an international non-governmental organisation (INGO) under the NGO Affairs Bureau, Government of the People's Republic of Bangladesh, carrying out diverse projects across sectors such as Ready-Made Garments (RMG), Agriculture, Health, Water and Sanitation, Light Engineering, and Financial Inclusion.

This Request for Proposals (RFP) is issued to invite eligible local firms to submit proposals to design, put in place, and support the operation of health care point(s) in RMG factories and adjacent areas.

The Promoting Green Growth in the Ready-Made Garments Sector through Skills (PROGRESS) is funded by the Embassy of Sweden and the Embassy of Switzerland in Bangladesh and implemented by Swisscontact. The project supports the RMG sector to advance in the green transition by building its resilience and competitiveness.

2. Background and Rationale

Many RMG factories in PROGRESS's target clusters already operate an in-house health point, staffed with doctors and nurses and equipped with beds, providing workers free medical consultation and free over the counter (OTC) medicines. However, these health points generally lack the means to offer basic tests and related services on site, including eye care. As a result, workers requiring even basic laboratory or imaging tests, or vision care, must be referred to facilities located far from the factory.

This referral pathway has several direct consequences. Workers lose significant time away from the workplace, often requiring multiple visits to distant facilities which disrupts productivity. These repeat visits also impose direct out-of-pocket costs on workers for transport and lost working time. Delayed care further prolongs recovery, and in areas such as maternal health and vision care, needs often go unaddressed entirely due to limited access. Bringing extended healthcare capability directly into or adjacent to the existing factory health point would close this gap, enabling faster, more affordable, and more accessible care for workers, while giving factories a low-cost, high-impact way to support worker health and retention.

The surrounding communities in these clusters face the same gap: they too generally lack access to proper, quality health services nearby. Faced with the time and cost of travelling to a distant, reliable centre, workers and their family members alike often delay seeking care altogether, hoping their condition will resolve on their own. This delay allows preventable and treatable conditions, including vision problems, to progress further, resulting in more complicated, costlier, and longer treatment later, and in more lost working days than early care would have required. A health service point embedded at or near the factory, and where feasible extended into the surrounding community, addresses this behaviour directly by removing the time and cost barriers that currently discourage workers and their families from seeking timely preventive health care.

The project is intended to test three delivery models. However, **bidders may also propose alternative or hybrid delivery approaches that achieve the same objectives:**

- Model A – Factory-only access: the centre serves factory workers only; fees are charged to workers at cost-recovery rates.

- Model B – Factory and community access: the centre is located at the factory boundary, remaining accessible to workers (free or subsidised) as well as to community members who cannot enter the factory premises (fee-based), with community fees cross-subsidising operations. This model applies only to where the factory agrees.
- Model C – The centre is established outside the factory premises through a partnership with a qualified entrepreneur or health service provider. The centre remains accessible to both factory workers and the surrounding community, with services provided on a fee-for-service basis to all clients. Factory workers may receive negotiated discounts or preferential access, subject to agreements between the factory, project, and service provider. The entrepreneur is responsible for day-to-day operations, business sustainability, and compliance with applicable quality and regulatory standards.

3. Objective of the Assignment

The objective of this assignment is to enable access to essential health care services, including eye care, within or adjacent to existing RMG factory health points and, where feasible, in surrounding communities, so that workers can receive care close to their workplace, without incurring long travel times or productivity loss. Bidders are encouraged to propose their own approaches and innovations. The selected firm will:

1. Assess health service needs and demand across factory and community populations, based on historical referral and test-demand data from factories, and supplementary community-level demand data (e.g., local health facility referral patterns, population catchment size, prevalent health needs), to determine appropriate service scale, offer, and staffing for each site;
2. Propose and put in place an appropriate health service offer, including eye care, with the resources and arrangements needed to deliver it;
3. Enable the services to begin and run effectively at each site;
4. Build the capacity of healthcare point personnel and other designated staff, supported by qualified personnel as proposed;
5. Ensure the quality, upkeep, and continuity of services over time;
6. Support a digital system for recording and reporting service data.
7. Overall, support the development of a viable and sustainable service model covering demand-based revenue projections, pricing strategy, operating cost structure, and break-even analysis, so that services can continue beyond the project's direct support period.
8. Services are expected to remain affordable to workers and communities, with arrangements for their continuity proposed by the firm and agreed with the participating factories.

4. Geographic Coverage

This assignment covers RMG clusters in Gazipur, Dhaka, Narayanganj, and Chattogram, prioritising areas where quality health services are scarce or absent. Target factories will be jointly identified by PROGRESS and the selected firm based on a needs assessment (see Section 6.1).

5. Scope of Services

5.1 Needs and Gap Assessment

The firm will work with PROGRESS and each participating factory to review historical referral patterns and demand data, and to identify the health services, including eye care, most needed by workers (and, where applicable, community members) at that site.

5.2 Service Offer, Including Eye Care

PROGRESS is not prescribing a fixed solution. Bidders must propose the service offer they consider best suited to typical RMG worker health needs, (for example; in premises diagnosis facility, vision screening, health insurance etc.), together with the proposed resources, delivery approach, staffing, and any

partnerships, and a clear statement of what distinguishes the offer from options already available in the Bangladesh market. Bidders are encouraged to propose innovative or alternative solutions beyond those described in this RFP.

5.3 People and Capacity

The firm will identify, engage, and deploy the qualified personnel needed at each site, as per the proposed service model, and define reporting lines to the factory's existing medical staff.

5.4 Capacity Building and Service Start-up

The firm will be responsible for supporting site readiness and for bringing the proposed services to effective use within the space allocated by the factory. It will also build the capacity of deployed personnel and relevant factory medical staff on service delivery, sample handling, result interpretation, referral thresholds, and infection prevention and control protocols.

5.5 Quality and Continuity of Services

The firm will propose arrangements for upkeep, quality assurance, and continuity of services (including supplies and consumables), with the cost of ongoing support presented separately from initial start-up costs.

5.6 Digital Health and Reporting System

The firm will propose a digital or software-based system for recording service data, linking it to the factory's existing worker health records where feasible, and generating periodic reports for PROGRESS's monitoring purposes.

Note: If the interested party identifies any additional requirements that are not explicitly outlined above, such as sample transportation, referral arrangements for needs beyond the service's capacity, or specific consumables, these should be clearly described and justified in the technical and financial proposal.

6. Contract Duration

The contract is expected to commence in November 2026 and run through 30 June 2027. The arrangement may be extended or scaled to additional sites beyond this date, subject to mutual agreement, performance review, and availability of resources.

7. Eligibility

This RFP is open to local (Bangladeshi) firms only. There is no mandatory prior certification requirement; however, bidders must be legally registered and authorised to conduct health care service and/or related supply business in Bangladesh and must demonstrate this in their technical proposal along with relevant business experience. Where any statutory licence, approval, or registration is required for establishing or operating healthcare facilities within participating factories, the selected firm shall be responsible for obtaining, coordinating, and maintaining such licences and approvals in compliance with applicable laws and regulations of Bangladesh.

8. Deliverables and Reporting

The selected firm will be responsible for the following deliverables, **to be confirmed and detailed at contract negotiation, and fixed based on the proposal of the selected firm:**

#	Deliverable	Evidence / Reporting Format
1	Needs assessment report per selected site	Report summarising the demand data reviewed and the recommended service offer

#	Deliverable	Evidence / Reporting Format
2	Service rollout and capacity building report	Brief report with supporting evidence (e.g., photographs, participant lists)
3	Periodic performance and financial reports	Monthly/quarterly report covering service volumes, eye care uptake, and revenue

9. Proposal Submission Requirements

Proposals must contain: a Technical Proposal and a Financial Proposal. Financial information must not appear anywhere in the Technical Proposal.

9.1 Technical Proposal Guidelines

- Firm profile, legal eligibility, organisational capacity, and relevant experience/track record.
- Understanding of the assignment, proposed service model, technical approach, and key differentiators from existing market offerings.
- Implementation approach, including staffing, capacity building, service start-up, quality assurance, and continuity/after-sales support arrangements.
- Digital reporting, cost-recovery, and any innovative or alternative solutions proposed to enhance service sustainability and impact.
- Implementation timeline
- CVs of key personnel
- References or descriptions of similar past assignments
- It is mandatory for the bidding organisations to submit documentary evidence demonstrating their legal, taxation, and financial status. This includes:
 - A certificate of incorporation (for individual companies, a trade license)
 - Registration related document (trade licence, registration with any government entities/NGO bureau registration)
 - An organisational organogram of key personnel, inclusive of the names of such personnel
 - Tax identification number (TIN)
 - VAT registration number
 - Proof of a segregated account (providing the name and address of such account)
 - A signed statement testifying that all information contained within the proposal is correct and true.

9.2. Financial Proposal Guideline

The Financial Proposal must present the full cost of the proposed solution for the development and monthly operation of one (1) health care point, itemised by: resources and solutions; personnel; capacity building; digital/reporting system; and annual upkeep, quality assurance, and continuity of services. Bidders should also indicate any co-investment and an indicative service fee structure that keeps services affordable to low-income workers while allowing the service to reach operational sustainability. If a bidder proposes any other solutions or additional services, the budget must be prepared so that these are itemised separately and can be accepted, deferred, or declined independently of the core offer. Bidders are encouraged to propose their anticipated contribution, as well as the expected contributions from participating factories and PROGRESS, as part of their financial proposal. The final cost-sharing arrangement, including the allocation of contributions among the selected firm, participating factories, and PROGRESS, will be subject to discussion and negotiation during the evaluation and contracting process. Prices must be quoted in BDT, state whether VAT/Tax is included, and remain valid for a minimum of 90 days from the submission deadline. If the pilot proves feasible, PROGRESS may scale the service(s) to additional factory health points, including factory-only, factory-and-community, and community-based models, under the same terms. Scale-up will depend on pilot

performance, factory and community demand, and available resources. Site-specific service offer, pricing, and delivery model may be adjusted from the pilot proposal to reflect each site's actual demand and access profile, following the same needs-assessment methodology.

9.3. Evaluation Criteria

The following selection criteria are generally applicable for the evaluation. Technical Proposals will be opened and scored first; only bidders whose Technical Proposal scores at least 50 out of 70 will have their Financial Proposal open and evaluated. The final combined score will weigh the Technical Proposal at 70% and the Financial Proposal at 30%.

Evaluation Criterion	Weight
Total Technical Score	70
Firm profile, legal eligibility, organizational capacity, and relevant experience/track record	10
Understanding of the assignment, proposed service model, technical approach, and key differentiators from existing market offerings	30
Implementation approach, including staffing, capacity building, service start-up, quality assurance, and continuity/after-sales support arrangements	20
Digital reporting, financing, cost-recovery, and any innovative or alternative solutions proposed to enhance service sustainability and impact	10
Total Financial Score	30

11. Submission Instructions

- Submission deadline: 10 November 2026.
- Submission address/format: - The Technical and financial proposals must be sent as two separate files, via the same email, to the following email address: bd.progress@swisscontact.org. The email subject line must state: “**Engaging a Service Provider to Facilitate Healthcare Services at RMG Factories and Adjacent Areas**”
- Late submissions will not be considered.

12. Pre-bid Meeting

PROGRESS will organise an **online pre-bid meeting** for interested bidders on **29 October 2026 from 11:00 AM to 12:00 PM** (Bangladesh Standard Time). The meeting will provide an opportunity for prospective bidders to seek clarification regarding the RFP, scope of work, expectations, and proposal requirements. Participation is encouraged but not mandatory. Interested bidders are requested to confirm their participation by email. The online meeting link will be shared with confirmed participants.

13. General Conditions

- PROGRESS reserves the right to accept or reject any or all proposals, or to cancel this RFP process, at any stage, without assigning any reason and without liability to bidders.
- PROGRESS will not bear any cost associated with the preparation or submission of proposals.
- All information submitted will be treated confidentially and used only for the purpose of this evaluation.
- The selected firm will be required to comply with Swisscontact's Code of Conduct, safeguarding, and anti-corruption policies.
- Final scope, pricing, and cost-sharing arrangements will be confirmed in the contract signed with the selected firm.