

August 29, 2014.

SUBJECT : ANNUAL PROGRAM STATEMENT (APS) No: APS-386-14-000002

PROJECT NAME : Quality Data for Decision Making (QDDM)

Issuance Date of APS: August 29, 2014
Deadline for Questions: September 12, 2014
Concept Papers Due: September 26, 2014 0900hrs, India time
Full Applications Requested: October 24, 2014 (by invitation only)
Full Applications Due: November 14, 2014 0900hrs, India time

This program is authorized in accordance with Part I of the Foreign Assistance Act of 1961, as amended

The United States Agency for International Development Mission India (USAID/India) seeks applications from *local organizations*¹ registered in India that are eligible to receive funding directly from USAID for “Quality Data for Decision Making” Project. This APS provides prospective Applicants an opportunity to submit applications to USAID/India for a range of programs and services for vulnerable populations especially women and children.

This Annual Program Statement (APS) will be open for a period of up to 12 months from the issuance date of **August 29, 2014**, until such time as funding identified for this APS has been fully obligated. USAID/India invites eligible organizations to submit brief concept papers of no more than five (5) pages, including an illustrative budget of no more than one (1) page, that demonstrate innovative approaches to addressing the program area.

Concept papers must be received by the closing date and time specified on this page. **Facsimile submissions are not authorized and will not be accepted.** Concept papers must be received by the closing date and time specified in this cover letter. **Facsimile submissions are not authorized and will not be accepted.**

The application process is comprised of two steps: (1) concept papers are sought from prospective Applicants; and (2) full applications are requested from those Applicants with the most highly evaluated concept papers. A Cooperative Agreement will be awarded to each successful applicant.

Pursuant to 22 CFR 226.81, it is USAID policy to not award fee or profit under assistance instruments. As such, any for-profit organization receiving an award under this APS will not

¹ 1) is legally organized under the laws of;

2) has as its principal place of business or operations in;

3) is majority owned by individuals who are citizens or lawful permanent residents of; and

4) managed by a governing body the majority of who are citizens or lawful permanent residents of the country in which this award will be primarily performed.

be eligible for fee or profit; however, all reasonable, allocable, and allowable expenses, both direct and indirect, that are related to the grant program and are in accordance with applicable cost standards (22 CFR 226, OMB Circular A-122 for non-profit organizations, OMB Circular A-21 for universities, and the Federal Acquisition Regulation (FAR) Part 31 for-profit organizations) may be recognized.

USAID reserves the right to make a single award, make multiple awards, fund parts of an application, or not to make any awards at all. Issuance of this APS does not constitute an award commitment on the part of the U.S. Government (USG), nor does it constitute a commitment to pay for costs incurred in the preparation and submission of an application. In addition, final award of any resultant Agreement cannot be made until funds have been fully appropriated, allocated, committed and obligated through internal USAID procedures, on which condition this APS is issued. While it is anticipated that these procedures will be successfully completed, potential Applicants are hereby notified of these requirements and conditions for award and that Applicants will not be compensated for any proposal preparation and submission costs. The USG reserves the right to reject any or all applications received. This APS may be amended at the discretion of USAID.

The preferred method of distribution of USAID procurement information is via www.Grants.gov on the World Wide Web (www). This APS and any future amendments can be downloaded from the Agency website. To access the Agency website from Grants.gov: Click "Find Grant Opportunities," then click "Browse by Agency" and choose "Agency for International Development." If you have difficulty registering or accessing the Grants.gov website, please contact the Grants.gov Contact Center at 1-800-518-4726 or via e-mail at support@grants.gov for technical assistance. Receipt of this APS through Grants.gov must be confirmed by written notification to the contact person noted below. It is the responsibility of the recipient of the application document to ensure that it has been received from Grants.gov in its entirety and USAID bears no responsibility for data errors resulting from transmission or conversion processes.

POINT OF CONTACT

For questions please contact :

Vandana Shali Vats, Acquisition & Assistance Specialist, USAID/India C/o American Embassy, Shantipath, Chanakya Puri, India. E-mail should be sent to e-mail address: indiarco@usaid.gov with a copy to vvats@usaid.gov

TABLE OF CONTENTS

SECTION I

PROGRAM DESCRIPTION

A. BACKGROUND

A.1 Overview of Health Systems Challenges and Opportunities in India

B. GOAL , OVERALL APPROACH, AND RESULTS

B.1 USAID/India's Health Sector Priorities

B.2. USAID/India's Strategic Direction and Overall Approaches

C. PROGRAM AREA : Quality Data for Decision Making (QDDM)

D. GENDER

SECTION II

APPLICATION AND SUBMISSION INFORMATION FOR CONCEPT PAPERS

A. INSTRUCTIONS TO APPLICANTS

1. Eligibility

2. Program Duration

3. Anticipated Number of Awards

4. Substantial Involvement

5. Official Source Documents

B. Cost Share, Authorized Geographic Code, Branding and Marking

C. Application Process

D. Concept Paper Format

E. Technical Evaluation Criteria For Concept Papers (Step 1)

SECTION III

APPLICATION AND SUBMISSION INFORMATION FOR FULL APPLICATIONS

A. TECHNICAL EVALUATION CRITERIA FOR FULL APPLICATION(S) (Step 2)

B. REVIEW AND EVALUATION PROCESS

SECTION I

PROGRAM DESCRIPTION

A. BACKGROUND

A.1 Overview of Health Systems Challenges and Opportunities in India

India is a country of contrasts. As a rising economy, it has become a defining force in geopolitics and the global economy, and is South Asia's dominant regional power. It has the world's fourth largest economy in purchasing power parity terms, helping to lift millions of Indians out of poverty. Yet, there are many significant development challenges on the horizon for India. With one-sixth of the world's population and one-third of the world's poor, equitable economic and social progress in India is critical to achieving the Millennium Development Goals (MDGs). Despite India's sufficient food grain stocks, it ranks 65th out of 79 countries in the Global Hunger Index². And, while the economy continues to grow, human rights and the ability of vulnerable populations to access services continues to be weak.

Approximately 1.9 million children die before their fifth birthday every year in India. The sex ratio at birth and gender differential in under-five mortality continues to be skewed against girls. About 67,000 mothers die each year due to complications during pregnancy and childbirth. About 30 million couples have an unmet need for contraception. Nearly half of all Indian children are undernourished. Tuberculosis (TB) remains the most common disease in India, killing more than 1,000 people a day. India's urban poor are exceptionally vulnerable to many health risks as a consequence of appalling living conditions, which lead to poor health indicators. Some of the children who are particularly vulnerable in the Indian context are the approximately four million children affected by HIV/AIDS.

There have been some notable areas of progress in particular areas of reproductive, maternal, newborn, and child health (RMNCH); particularly increasing the proportion of institutional-based deliveries through demand-side financing, and also in reducing the incidence of polio, having completed a second year without a single case of polio after being one of the major contributors to the global polio case count. In spite of these significant achievements, India still faces significant challenges in achieving MDGs 4 and 5, related to maternal and child health. The major challenge pertains to reducing the Infant Mortality Rate (IMR) from 44 (SRS 2011) to less than 30 and the Maternal Mortality Ratio (MMR) from 212 (SRS 2007–2009) to less than 100 by 2015.

The size and magnitude of India's health problems make partnerships with Indian organizations to end preventable maternal and child deaths and create an AIDS-free generation, critical U.S. Agency for International Development (USAID)/India priorities. These priorities are also core goals for the Government of India (GOI) as outlined in

² The Global Hunger Index (GHI) is a multidimensional statistical tool that describes the state of countries' hunger situation. The 2012 GHI was calculated for 120 developing countries and countries in transition. 79 countries were ranked and their food security situation was compared to 1990 levels. The remaining 41 countries had a 2012 GHI of under 5 ("low hunger") and were not included in the ranking.

initiatives such as the National Rural Health Mission (NRHM). The original focus of the NRHM on rural populations has resulted in strengthening program management structures and implementation of new activities and schemes at the state and district levels. In addition to this, numerous civil society and private sector organizations have intensified their efforts for developing and implementing innovative health pilots, some of them demonstrating impressive success, albeit at a limited scale at which most of these are implemented. The limited impact of these interventions can be attributed to the fact that pilots are often not scaled up to their full potential. The GOI faces numerous challenges in scaling up proven high-impact RMNCH interventions³ due to variable capacity of states, districts, blocks and facilities in planning and implementation. For the private sector to scale up high-impact RMNCH interventions, commercial viability is a pre-requisite. Civil society networks cover a very small proportion of women and children and many lack resources or incentives for scaling up. And, the success of these interventions to be implemented at scale meeting desired quality standards is largely dependent on important health systems components, such as an effective health workforce, appropriate engagement of the private sector, financial access to healthcare, and use of reliable data for decision making at all levels.

B. GOAL, OVERALL APPROACH, AND RESULTS

B.1 USAID/India's Health Sector Priorities

The health system in India is highly complex and is at a cross-road. On the one hand, India's health system continues to respond to preventable infections, pregnancy and childbirth, and under-nutrition, while on the other hand, it increasingly must address the enormous burden of non-communicable diseases such as heart diseases, diabetes, and mental illness. The focus of USAID/India's support is to catalyze India's effort to complete the primary and preventive health care agenda and reduce morbidity and mortality in support of India's efforts toward Millennium Development Goals (MDGs) 1, 4, 5, 6 and 7. This Annual Program Statement (APS) is USAID/India's invitation to local Indian organizations to identify and suggest ways to catalyze, facilitate, and support interventions, development solutions, innovations, and partnerships to support improvements in the health of vulnerable populations in India. Specifically, this APS is to improve specific critical elements of the health system to increase access to and quality of priority reproductive, maternal, new-born and child health (RMNCH) services at scale to respond to: 1) the Government of India's Call for Action Child Survival and Development to accelerate child survival and development, and, 2) USAID's global goals to end preventable maternal and child deaths.

Activities funded under this APS will support system improvements to make substantial contributions to:

³ Proven, high-impact RMNCH interventions are many, for example including a mix of adolescent girl and maternal health, newborn health, child health, family planning, and cross-cutting facility-based interventions. These might include, but are not limited to, basic and comprehensive emergency obstetric and newborn care, immediate essential new born care, newborn resuscitation, management of preterm/low birth weight newborns, newborn screening and management, case management of pneumonia and diarrhea, post-partum family planning spacing methods, and prevention and management of healthcare-acquired infections.

Maternal Health

- Reduction in maternal mortality ratio
- Reduction in anemia among girls (15-19 years)

Child and Newborn Health

- Reduction in under-5 mortality rate
- Reduction in infant mortality rate
- Reduction in neo-natal mortality rate
- Reduction in stunting among children under three years of age

Family Planning / Reproductive Health

- Reduction in total fertility rate (TFR)
- Reduction in percentage of women 15-49 years who had first sexual intercourse by 15 years
- Reduction in percentage of pregnant women aged 15-49 who are anemic

Tuberculosis (TB)

- Prevalence rate associated with TB
- Mortality rate associated with TB

More immediate objectives that activities under this APS are expected to contribute to include, but are not limited to:

Maternal Health

- Births assisted by doctor/nurse/Lady Health Visitor (LHV)/Auxiliary Nurse Midwife (ANM)
- Percentage women who had four or more antenatal care visits
- Mothers who received postnatal visits within 10 days of delivery

Child and Newborn Health

- Children 12-23 months fully immunized (BCG, measles, and 3 doses each of polio/DPT)
- Children exclusively breastfed till six months of age
- Newborns receiving three or more post natal checkups within 10 days after birth
- Children (<five years) with diarrhea in the last 2 weeks who received Oral Rehydration Salts (ORS) packets
- Children (<five years) who had symptoms of acute respiratory infection in preceding two weeks received antibiotics
- Children (<five years) who had symptoms of acute respiratory infection in the last two weeks for whom treatment was sought from a health facility or provider (excluding pharmacy, shop, and traditional practitioner)

Family Planning/ Reproductive Health

- Currently married women (15-49 years) using any modern methods of contraception
- Currently married women (15-49 years) with unmet need (total) for family planning
- Currently married women (15-49 years) with unmet need (spacing) for family planning

- Women (15-19 years) receiving Iron Folic Acid (IFA)
- Women delivering in previous 12 months consumed 100 or more IFA during pregnancy

Target Population

This APS targets India's vulnerable, marginalized, and underserved populations spread across rural areas, urban slums, and tribal pockets – including those currently outside the realm of effective service provision for reasons related to economics, gender, and social inclusion (notably females across the life cycle). Specific target populations are identified for each of the Program Components outlined in Section C.

Geographic Focus

It is envisaged that the successful applicant(s) will work at both the national level and in a minimum of 30 districts spread over at least six states.

C. PROGRAM AREA

PROGRAM AREA : Quality Data for Decision Making (QDDM)	
Value of Award	Up to \$ 6 million (in total)
Implementation Period	4 years

USAID/India's Strategic Direction and Overall Approaches

USAID India's Country Development Cooperation Strategy (CDCS) for the period 2012-2017 recasts the USAID-India relationship from a traditional donor-recipient relationship to a peer-to-peer partnership for addressing Indian and global development challenges. USAID recognizes that different solutions and approaches are needed to truly effect the significant magnitude of change required to meet the challenges outlined above in a cost-effective and sustainable manner. These might include:

Building Locally-Led Alliances and Multi-Stakeholder Platforms: Locally-led alliances and multi-stakeholder platforms have the potential to enable public and private sector partners to collaborate and contribute significant shared resources to identify, diffuse, and scale-up “game-changing,” proven, high-impact interventions. Successful scale up will be measured by widespread improvements in health outcomes that can only be achieved by significant, widespread uptake of key services and interventions.

Establishing Linkages with Priority National Programs: USAID seeks to further the goals and objectives of national programs implemented and funded by the GOI, for example the National Health Mission and National AIDS Control Program.

Promoting Game-Changing Innovations and Proven High Impact Solutions: USAID defines innovations as those interventions that introduce novel business or organizational models; operational or production processes; or products or services that lead to dramatic (not

incremental) improvements in addressing health challenges. Innovation could help produce significant health outcomes more effectively, more cheaply, more sustainably, reaching more beneficiaries, and in a shorter period of time.

Strengthening Health Systems: Capitalizing on opportunities to promote innovations and implementation of proven high-impact interventions at scale will have lasting health impact. Success will depend, in part, on strong health systems. The program components outlined under this APS directly contribute to the health systems strengthening assistance objective and the five intermediate results outlined in Health Partnership Program Agreement that was signed between the Governments of India and the United States of America on September 30, 2010. The five intermediate results include: i) Increased access to quality services; ii) Strengthened policy and regulatory environment; iii) Increased healthy behaviors, iv) Increased use of data for decision making; and; v) Increased private sector engagement in quality health services.

Utilizing Appropriate Frameworks and Tools for Reaching Scale: Successful applicant/s will function primarily as “intermediary organizations,” meaning that they will work closely with national and selected state governments and private sector partners to: 1) identify potentially effective and scalable approaches, global best practices, technologies, etc., and 2) develop and implement scale-up plan(s) in selected districts and states, partly by establishing pre-conditions for scale up, building capacity for scale up and facilitating implementation of scale up by public and/or private sector partners. Successful applicant/s must demonstrate the use of robust internationally recognized and appropriate tools and frameworks or approaches to facilitate the scale up of proven, high-impact interventions through the public and/or private health care systems. Some examples of proven approaches include: 1) the Scaling-Up Management (SUM) Framework developed and field-tested by Management Services International (MSI), 2) the positive deviance approach that can help communities to discover desired behaviors demonstrated by a few within the community and promoting their adoption by all, and 3) market shaping approaches and tools to create sustainable health markets to deliver appropriate, high quality, and affordable health outcomes at scale.

Background: The Ministry of Health and Family Welfare (MOHFW) is committed to enhancing the use of quality data to improve the status of RMNCH+A. In 2005, along with the launch of the National Rural Health Mission, a need was felt to strengthen the health management information systems (HMIS) to facilitate availability of good quality data for efficient program planning. In recent years, a great deal of effort has been made to improve the quality and use of HMIS data. During the Call to Action for Child Survival and Development, the GOI established a system to track progress at the national and state level through a National Child Survival and Development Score Card and a National Dashboard (developed using HMIS and survey data respectively) for key RMNCH+A health indicators along the continuum of care – pre-pregnancy, pregnancy, childbirth, postnatal, early childhood, and adolescence. States are encouraged to introduce State Dashboards to monitor health in districts. In the past, various policy and planning documents (Working Group Papers, Records of Proceedings, Program Implementation Plans, District Health Action Plans, etc.) have used data (HMIS, survey, surveillance, Sample Registration System, Census, etc.) for planning purposes but such use of data is yet not optimum.

Evidently, HMIS data quality and use has improved over the years, however, both the quality and use especially at district and facility level has scope for improvement. MOHFW intends to strengthen health information systems and enhance use of good quality data (from various sources) to inform program planning. Specifically, validity and accuracy of HMIS data needs to be improved.

Program Goal: Increased access to quality, proven high impact RMNCH+A services by improving data quality and enhancing evidence-based decision-making.

Program Purpose: To facilitate evidence-based decision-making using improved quality of and use of data.

Result 1: Quality of HMIS data and mother and child tracking system (MCTS) improved in minimum 30 high priority districts across select states.

The quality of HMIS data and MCTS has not been assessed. There is need to: a) use internationally recognized standardized tool to assess HMIS data quality and MCTS system; b) develop a roadmap for improvement of data quality especially the validity of the HMIS data, and strategies to strengthen the MCTS system, c) help establish annual targets for data quality improvement, d) provide support to implement the road-map for data quality improvement, and, e) develop and implement strategies for replication and scale-up.

Result 2: Evidence-based decision-making enhanced in minimum 30 high priority districts across select states.

HMIS data as well as data from various other sources needs to be used for program planning, budgeting, prioritization, monitoring, and evaluation. There is need to: a) assess use of data for evidence-based decision-making in various policies and planning documents at national, state, and district level; b) develop plans to effectively use data from various sources to improve evidence-based decision-making at various levels including district specific Child Survival and Development Score Card and Dashboards; c) demonstrate enhancement in evidence-based decision-making; and; d) develop and implement strategies for replication and scale-up.

One of the important tools that has been recently introduced is the MCTS. This could potentially have a substantial impact on improving utilization of key maternal and child health services. The selected organization will work in select districts to assess the current implementation of MCTS and will help in strengthening the maternal and child health tracking.

D. GENDER

Pursuant to ADS 201.3.12.6, proposals/concept paper should clearly state the respondents' gender mainstreaming expertise and capacity, and propose meaningful approaches to address gender, clearly answering the following three questions:

- (1) Are women, including girls, and men involved and benefiting equally at different levels (effort, decision-making, etc.) or affected differently by the proposed intervention?
- (2) Do the opportunity costs of participation differ between men and women (including girls)?

- If either (1) or (2) are affirmative, what is the difference and magnitude and how will the proposed intervention mitigate these differences to ensure sustainable and appropriate program impact?

E. INSTRUCTIONS TO APPLICANTS

E.1 Eligibility

USAID seeks applications from “local Organizations”. Organizations registered in India, including non-governmental organizations,⁴ civil society organizations, universities or institutes, para-statal organizations, or for-profit organizations. While both for profit, as well as not-for-profit organizations are eligible to submit applications under this Annual Program Statement (APS); for-profit institutions will not be eligible for fee or profit. Illustrative Indian organizations may include, but not be limited to:

- non-government organizations (NGOs) including any non-profit or voluntary organizations
- faith-based groups
- labor unions
- academic institutions
- consulting firms
- research institutions
- For-profit private companies

Indian organizations should preferably meet the following criteria:

- Have a minimum of 3 years of experience implementing programs of similar scope and complexity
 - Organizations with less than 3 years of experience **may apply** but will need to demonstrate capacity to implement an activity of the proposed scope and complexity.
- Demonstrate institutional/management capacity to manage donor funds, for example:
 - Board of directors
 - Mission statement
 - Personnel, procurement and administrative systems
 - Financial management capacity utilizing an accounting system
 - Appropriate infrastructure to implement proposed program
- Have in place monitoring and evaluation systems (capacity to collect, enter, store, and report on program data)

⁴ NGOs include any non-profit or voluntary organizations, organized on a local or national level, duly registered with stated goals to improve the lives of Indians.

- Demonstrate linkages to local networks

An Indian applicant may propose an international sub-partner if the partner is providing technical assistance (TA), and;

- It is critical to the activity's success
- For a minimal period of time (a rare occurrence and time bound),
- Clearly demonstrates specific rationale and role
- Is less than 20% in the activity and budget
- Assistance represents real value for the money.

A "local organization" must,

• Be organized under the laws of the recipient country; • Have its principal place of business in the recipient country; • Be majority owned by individuals who are citizens or lawful permanent residents of the recipient country or be managed by a governing body, the majority of whom are citizens or lawful permanent residents of a recipient country; and • Not be *controlled by a foreign entity* or by an individual or individuals who are not citizens or permanent residents of the recipient country.

The term "*controlled by*" means a majority ownership or beneficiary interest as defined above, or the power, either directly or indirectly, whether exercised or exercisable, to control the election, appointment, or tenure of the organization's managers or a majority of the organization's governing body by any means, e.g., ownership, contract, or operation of law. "*Foreign entity*" means an organization that fails to meet any part of the "local organization" definition.

Government controlled and government owned organizations in which the recipient government owns a majority interest or in which the majority of a governing body are government employees, are included in the above definition of local organization. Support for government owned or controlled organizations will be subject to applicable USAID rules.

USAID will not accept applications from individuals. All applicants must be legally recognized organizational entities under applicable law.

E.2 Program Duration

This APS will be open for a period of up to one year or 12 months from the issuance date, which should be approximately **August 29, 2014** or until such time as funding identified for this APS has been fully allocated. The duration of any proposed program implementation (life of project) may not exceed four (4) years. USAID reserves the right to incrementally fund activities over the duration of the program, if necessary, depending on program length, performance against approved program indicators, and availability of funds. Depending on the availability of funds, the APS may be extended, revised or re-issued.

E.3 Anticipated Number of Awards

Under this APS, USAID reserves the right to make a single award, multiple awards, fund parts of an application, or not to make any awards at all. Issuance of this APS does not constitute an award commitment on the part of the U.S. Government, nor does it commit the U.S. Government to pay for any costs incurred in the preparation and submission of any application.

E.4 Substantial Involvement

USAID anticipates that grant(s) in the form of Cooperative Agreement(s) will be awarded as a result of this APS. Under a Cooperative Agreement, USAID may be substantially involved in the following areas:

- USAID approval of the recipient's Annual Work/Implementation Plans
- USAID approval of key personnel funded under the agreement (limited to five positions)
- USAID approval of the program's Monitoring and Evaluation (M&E) Plans, including indicators
- USAID approval of sub-recipients (sub-grants/sub-awards) and corresponding activities

E.5 Official Source Documents

This APS is the official source document for the application. Oral explanations of the Applications will not be evaluated or considered; only written applications will be evaluated. Applicants should retain for their records a copy of the application and all attachments or enclosures that accompany their application. USAID will only consider applications conforming to the prescribed format. Explanations or instructions given before award of a Cooperative Agreement will not be binding. Any information given to a prospective Applicant concerning this APS will be furnished promptly, via www.grants.gov, to all other prospective Applicants as an amendment of this APS.

F.1 Cost Share

The proposed recipient cost share for the four-year, with the budget of up to U.S.\$6 million Quality Data for Decision Making Project should be 10%.

The cost share may be a combination of cash and in-kind. Actual and/or expected sources and amounts of the cost-share amount from all sources (other donors, community members, business, etc.) must be stipulated. Criteria for acceptance and allowability for the non-U.S. federal contributions are set forth in 22 CFR 226 (Copies of 22 CFR 226 may be obtained from <http://transition.usaid.gov/policy/ads/cfr.html>).

F.2 Authorized Geographic Code

Geographic Code : 937

F.3 Branding and Marking Plan

It is a federal statutory and regulatory requirement that all USAID programs, projects, activities, public communications, and commodities that USAID partially or fully funds under a USAID grant or cooperative agreement or other assistance award or subaward, must be marked appropriately overseas with the USAID Identity. See Section 641, Foreign Assistance Act of 1961, as amended; 22 CFR 226.91. Under the regulation, USAID requires the submission of a Branding Strategy and a Marking Plan, but only by the “apparent successful Recipient,” as defined in the regulation. The apparent successful Recipient’s proposed Marking Plan may include a request for approval of one or more exceptions to marking requirements established in 22 CFR 226.91. The Agreement Officer is responsible for evaluating and approving the Branding Strategy and a Marking Plan (including any request for exceptions) of the apparently successful Recipient, consistent with the provisions “Branding Strategy,” “Marking Plan,” and “Marking of USAID-funded Assistance Awards” contained in AAPD 05-11 and in 22 CFR 226.91. Please note that in contrast to “exceptions” to marking requirements, waivers based on circumstances in the host country must be approved by Mission Directors or other USAID Principal Officers, see 22 CFR 226.91(j). Branding and marking under this Cooperative Agreement will be carried out in accordance with AAPD 05-11

SECTION II: APPLICATION SUBMISSION INFORMATION FOR CONCEPT PAPERS

A. APPLICATION PROCESS

USAID/India invites eligible organizations to submit brief concept papers of no more than five (5) pages, including an illustrative budget of no more than one (1) page, that demonstrate innovative approaches to scaling up reproductive, maternal, newborn, and child health and/or scaling up interventions for HIV/AIDS orphans and vulnerable children, including service outreach programming.

Applicants are welcome to submit more than one concept paper for each program area of the application for which they have programmatic expertise as described in Section B. Each concept paper must stand alone and only address one program area. However if an applicant wishes to combine the two program areas into one concept paper this must also be a stand-alone concept paper in addition to the individual concept paper(s) for the individual program areas.

This is a two-stage process. Applicants are required to submit short concept papers per the instructions below; concept papers need not be in the format or detail of a full proposal. The submitted concept papers will be reviewed using the criteria set forth below. The most highly rated Applicants will be invited to participate in the second stage through the submission of Full Applications per the instructions in Section III.

Deadline for Submission of Concept Paper: Concept papers for the first round of awards submitted after the **September 26, 2014 deadline** will not be considered.

Applicants interested in being considered for funding should submit a concept paper via e-mail to both to indiarco@usaid.gov and yvats@usaid.gov. Only those concept papers that are received by the deadlines specified above will be reviewed for responsiveness to the requirements set forth in this APS.

Applicants will be notified via email if USAID will request them to expand the concept paper into a full application. **Applicants should not prepare full applications unless specifically requested to do so by USAID/India's Office of Procurement.**

B. CONCEPT PAPER FORMAT

The concept papers must be written in English and formatted on standard A4 paper, with single space, 11 or 12 point font Times New Roman or similar font with margins no less than one inch on each border, and each page numbered consecutively. The concept paper should include three sections and total submission **should not exceed 5 pages total, including cover page, technical narrative, budget and notes. Any materials beyond 5 pages will not be reviewed or considered.** The concept papers are to be presented in the following format:

1. **Cover Page (one page).** The cover page must include

- The APS number,
- The names of the organization(s) involved (with the name of the lead or primary Applicant clearly identified),
- Authorized representatives name for the primary Applicant, title or position with the organization, mailing address, email address, telephone numbers. Application should be signed by the authorized representative who has the authority to negotiate both program issues and budget on behalf of the Applicant; and
- Type of organization and cost share, if any.

2. Technical Narrative. A narrative of **not more than three (3) pages** should outline the following:

- Goals – Describe the goals of the program.
 - Define the problem/issues and provide analysis of the context that demonstrates understanding of the needs, the complexity of the current situation, and the challenges of programming and/or service provision in the identified geographic states/districts.
 - Technical Approach – Describe the technical approach to be used to achieve the goals, in line with USAID’s new strategic direction and assistance approaches, including the types and scale of activities, geographic spread, general sequencing, and roles and responsibilities of partners and stakeholders. Describe how activities will capitalize on innovations and link into and complement existing programs. Explain how or why the proposed approach will be more successful or effective than other development approaches and be appropriate to effective scale up. The Application should describe the geographic and audience targeting and targeted behaviors based on epidemiology, local context, and culture. If the Applicant is proposing capacity building of Indian organizations, describe what areas are targeted (i.e. strategic planning, business development, quality assurance, etc.) and how the capacity building will be delivered.
 - Sustainability – Describe how ownership, leadership and program management will build on existing programs and resources and will be sustained, post-USAID funding. The technical discussion should include proposed partners and arrangements for effective and complimentary operations among partner organizations, including linkages to existing networks, structures, and resources.
 - Expected Results – Outline the expected results and how results will be measured (including mechanisms of measurement) for progress, benchmark achievements, and greater sustainability. Results must be measureable on an annual basis as well as over the life of the award.
 - Organizational Capacity – Describe technical, senior management and capacity-building expertise and capabilities with regards to project implementation and quality assurance. If applicable, describe how the approach will strengthen the capability of the Applicant.
- 3. Budget.** Provide a **one page** budget that clearly identifies the major cost line items, such as personnel, travel, training, program activities, sub-awards, commodities, etc., by year, for the full program period. Applicants are encouraged to focus resources on

project implementation rather than salaries, equipment and supplies and must demonstrate growing cost-effectiveness over the life of the award. The proposed costs and budget aspects of applications will be reviewed for cost realism to evaluate the relationship between the proposed costs and proposed program as well as the likelihood for success. Cost share contribution if any, should also be reflected separately. Cost-share could contribute to the achievement of the results of this funding opportunity and is highly encouraged

C. TECHNICAL EVALUATION CRITERIA FOR CONCEPT PAPERS (Step 1)

For all concept papers meeting the basic eligibility requirements, a technical evaluation panel will evaluate the concept paper to determine the application's relevance to improving either: 1) reproductive, maternal, newborn, and child health or 2) health and social services for HIV/AIDS orphans and vulnerable children (depending on which program area the application addresses). In addition, the panel will determine whether the approach described reflects the new strategic direction of USAID and its health programs.

Concept papers that are acceptable to USAID will move on to Step 2, where in a full application will be requested. ***Only those concept papers that reflect how the program purpose and results will be achieved will move on to Step 2. In other cases, the full applications will not be requested.*** Requested full applications will be evaluated based on technical evaluation criteria provided in section IV.

SECTION III

APPLICATION SUBMISSION INFORMATION FOR FULL APPLICATIONS

A. FULL APPLICATION FORMAT (Step 2)

Only submit a full application if requested to do so by USAID/India. Full Applications (if invited) shall be submitted in an original and two (2) hard copies as well as submitted electronically to indiarco@usaid.gov in two separate volumes: (a) technical and (b) cost application. The e-mails must contain unzipped attachments and the size of each e-mail submission along with the attachments must not exceed 10MB. If necessary, send separate e-mails in order to stay within the 10MB size limit. The electronic version of the cost application must be prepared using Microsoft Excel with workable calculations shown in the spreadsheet along with a detailed narrative explaining the costs in Microsoft Word.

Courier Address:

USAID/India
Regional Acquisition and Assistance Office
American Embassy, Shantipath, Chanakyapuri,
New Delhi 110021, India. Tel: +91-11-24198568

e-mail address:

indiarco@usaid.gov

Late applications will not be accepted. Acceptance is upon receipt of the hard copy **NOT** the electronic copy.

The formats for the Full Application which would be split into two separate parts: (1) Technical Application; and (2) Cost Application are set forth below:

A.1 Technical Application Format

The technical application must be:

- a) A maximum of 30 pages in length;
- b) Typed, singled space on letter size, not legal size, paper;
- c) 12 point font Times New Roman; charts, tables and spreadsheets may be not less than 10 font;
- d) Written in English in MS Word or Adobe PDF format;
- e) Spreadsheets must be in MS Excel or tables that are compatible with MS Word;
- f) All pages except for the cover page must be numbered

The 30 page limit does not include the cover page; and past performance and institutional capabilities. The attachments must be concise and not a continuation of the 30 page main content.

The attachments should include the following, apart from other relevant information: Relevant information on past performance and institutional capabilities (for main applicant and key partner organizations)

The technical application should include the following components and be organized according to the outline below.

1. Cover Page

- a. USAID APS # APS-386-14-000002
- b. Name and address of organization
- c. Contact person (lead contact name; telephone number, fax and e-mail)
- d. Signature of authorized representatives of the applicant

2. Executive Summary

The executive summary must summarize the key elements of the Applicant's technical application, including, but not limited to, the technical approach (see following section), and cost-sharing and/or public-private partnership leveraging, if applicable.

3. Technical Approach

Use clear logic describing the links between the context analysis, program hypothesis, the objectives, methods, and anticipated results. The technical approach section should contain the following subsections in demonstrating a clear understanding of the key issues identified in the Program Description (Refer to Section I, Program Description, "C. Program areas" for technical approaches to be addressed):

- a. **Situation Analysis**: Describe the specific development context. Include relevant background information and analysis of the problem, demand for a solution, opportunity or challenge in the proposed sector or value chain. Describe the innovation to be shared and proof of its success;
- b. **Program Hypothesis and Theory of Change**: Include a program hypothesis that clearly explains the theory or theories of change that underlie the approach of the proposed innovation. The program hypothesis should describe the link between the proposed activities and their intended impact on the problem, opportunity, challenge, and demand identified in the situation analysis.
- c. **Program Goals and Objectives**: List the goals(s) of the proposed program. Include clear, measureable program objectives that will contribute to achieving the stated goal. Include an explanation of why the stated objectives represent the most appropriate response to the problem, opportunity, and/or challenge presented in the situation analysis.
- d. **Methods**: Describe the methods and activities the program will utilize to achieve the stated objectives. Include a brief description of the human, financial, technical, and material resources that will be applied to achieve the objectives including the roles and responsibilities of the applicant and partners, if any. If partnerships are proposed, discuss how these will be managed. Discuss alternative methods considered and reasons that the selected approach was chosen to transfer the innovation over alternative pathways and approaches.
- e. **Outcomes/ Results**: State the anticipated outcomes that result from the proposed methods/activities and how they will contribute to the overall FTF goals in the country where the innovation will be shared.

- f. **Sustainability**: Describe the strategies that will be employed to sustain the activities beyond USAID funding for these activities as well as the potential for scaling up to achieve broad based impact where possible and appropriate.
 - g. **Risk Analysis**: Describe the risks associated with the proposed methods that are likely to affect the program outcomes. Include factors that are both within and outside of the Applicant's control. List strategies the Applicant will utilize to reduce risk and ensure proposed results are achieved.
- 4. *Project Management Approach and Implementation Plan***
- The project management approach should include the following components:
- a. Applicant's program management plan;
 - b. Respective roles, responsibilities, and accountability of the applicant and its partners, including roles and responsibilities of key staff;
 - c. Description of the management systems in place, if applicable;
 - d. Implementation plan that outlines activities, inputs, outputs, outcomes, indicators, and a breakdown showing the responsibilities of partners, if applicable. The implementation plan should have two components:
 - i. Proposed first-year work-plan that is presented in a matrix format that includes proposed activities and when they will take place for the timeframe indicated. Identify partners for activities where appropriate. The first year work plan, inputs, outputs, and outcomes should be realistic and achievable within proposed budget and timeframe and reflect a grasp of the necessary steps to ensure efficient, effective execution of program activities.
 - ii. The proposed life of the project implementation plan that outlines a timeline for phasing of interventions. This plan should contain inputs, outputs, and present outcomes per year that are realistic and achievable within the proposed budget and timeframe and reflect a grasp of necessary steps to ensure rapid, effective execution of the program activities. Provide indicators that are clear and measurable.
The organizational structure of the program implementation will be proposed by the applicants.
- 5. *Past Performance and Institutional Capabilities***
- Applicants shall include the following information on performance of relevant current programs or those completed during the past three years. This section should include:
- a. A description of the applicant's institutional capacity to manage (technically, administratively, and financially) the proposed program in a technically and culturally appropriate fashion;
 - b. A list of key staff and their qualifications with respect to the project goals and objectives as well as language capabilities where appropriate (qualifications can be

included as attachments. If attached, include reference here to location of this attachment)

- c. Concise description of the Applicant's, as well as prospective or existing partners' previous work and experience relative to the activities being proposed during the past three years. For each award, include a brief statements about:
 - i. The relevance of the Applicant's past development work to the program being proposed;
 - ii. Results achieved;
 - iii. Duration, size, and value of the project;
 - iv. List of references with contact numbers & e-mail addresses; and information such as location, award numbers if available, brief description of work performed, and contact information with current email addresses and telephone numbers;
 - v. Include a copy of the final evaluation if one was done within the past five years.

A.2 Cost Application Format

The Cost or Business Application is to be submitted under separate cover from the technical application. There is no page limitation on the Cost Application.

The following sections describe the documentation that applicants must submit to USAID/India with their application. While there is no page limit for this portion, applicants are encouraged to be as concise as possible, but still provide the necessary detail to address the following:

1. A detailed budget with an accompanying budget narrative that provides in detail the rationale for proposed costs. The budget narrative should provide information regarding the basis of estimate for each line item, including reference to sources used to substantiate the cost estimate (e.g. organization's policy, payroll document, vendor quotes, etc.). In addition to the detailed budget, a summary of the budget must be submitted using the following Standard Forms, which can be downloaded from <https://apply07.grants.gov/apply/FormsMenu?source=agency>:
 - a) Form SF-424, Application for Federal Assistance;
 - b) Form SF-424A, Budget Information – Non-construction Programs;
 - c) Form SF-424B, Assurances – Non-construction Programs; and
 - d) Pre-award certifications, assurances, and other statement of recipients (available at <http://transition.usaid.gov/policy/ads/300/303mav.pdf>)
2. The cost/business application should contain the following budget categories:
 - a. Direct Labor – Direct salaries, wages and annual increases for all personnel proposed under the application shall be in accordance with the applicant's established personnel policies. To be considered adequate, the policies must be in writing, applicable to all employees of the organization, is subject to review and approval at a high enough organizational level to assure its uniform enforcement, and result in costs which are

- reasonable and allowable in accordance with applicable cost principles. The narrative should include a level of effort analysis specifying personnel, rate of compensation, and amount of time proposed. Anticipated salary increases during the period of the agreement should be included.
- b. Supplies and Equipment - Differentiate between expendable supplies and nonexpendable equipment (note: Equipment is defined as tangible nonexpendable personal property including exempt property charged directly to the award having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit, unless the applicant's established policy establishes nonexpendable equipment anticipated to be required to implement the program, specifying quantities and unit cost.)
 - c. Allowances- Allowances must be broken down by specific type and by person and must be in accordance with the applicant's established policies.
 - d. Travel and Per Diem - The narrative should indicate number of trips, domestic and international, and the estimated unit cost of each travel in accordance with the technical application. Proposed per diem rates must be in accordance with the applicant's established policies and practices that are uniformly applied to federally-financed and other activities of the applicant.
 - e. Other Direct Costs - This could include any miscellaneous costs such as office rents, communications, transportations, supplies and utilities, report preparation costs, passports, visas, medical exams and inoculations, insurance (other than the applicant's normal coverage), etc. The narrative, or supporting schedule, should provide a complete breakdown and support for each item of other direct costs.
 - f. Proposed Sub-contracts/agreements - Applicants who intend to utilize sub-contractors or sub recipients should indicate the extent intended and a complete cost breakdown, as well as all the information required herein for the applicant. Sub-contract/agreement cost applications should follow the same cost format as submitted by the applicant.
 - g. Indirect costs are not allowed for awards to indigenous organizations (see Implementing Partner Notice IPN 08-006 at http://transition.usaid.gov/in/working_with_us/ipn.html).
 - h. Applicants should submit any additional evidence of responsibility deemed necessary for the Agreement Officer to make a determination of responsibility. The information submitted should substantiate that the applicant:
 - 1. Has adequate financial resources or the ability to obtain such resources as required during the performance of the award;
 - 2. Has the ability to comply with the award conditions, taking into account all existing and currently prospective commitments of the applicant, nongovernmental and governmental;
 - 3. Has a satisfactory record of performance. Past relevant unsatisfactory performance is ordinarily sufficient to justify a finding of non-responsibility, unless there is clear evidence of subsequent satisfactory performance.
 - 4. Has a satisfactory record of integrity and business ethics; and
 - 5. Is otherwise qualified and eligible to receive a grant under applicable laws and regulations (e.g., FCRA).

Please note that applications that do not follow the instructions above may not be considered.

SECTION IV:
TECHNICAL EVALUATION CRITERIA FOR FULL APPLICATION(S) (Step 2)

The criteria presented below have been tailored to the requirements of this APS. Applicants should note that these criteria serve to: (a) identify the significant matters which applicants should address in their applications and (b) set the standard against which all applications will be evaluated. To facilitate the review of applications, applicants are requested to organize the narrative sections of technical applications according to the technical application format set forth below.

The specific evaluation criteria are as follows:

1. Technical Evaluation:

B. EVALUATION CRITERIA FOR FULL APPLICATION(S) (Step 2)

The criteria presented below have been tailored to the requirements of this APS. Applicants should note that these criteria serve to: (a) identify the significant matters which applicants should address in their applications and (b) set the standard against which all applications will be evaluated. To facilitate the review of applications, applicants are requested to organize the narrative sections of technical applications according to the technical application format set forth below.

The specific evaluation criteria are as follows:

B.1 Technical Evaluation:

	EVALUATION CRITERIA	MAXIMUM SCORE
i.	Technical Approach	40
ii.	Key Personnel	25
iii.	Management Plan	20
iv.	Past Experience and Past Performance	15
	TOTAL SCORE	100

i. Technical Approach **40 points**

A technical approach that is well-conceived, technically sound, result-oriented, feasible, and sustainable, which demonstrates a clear understanding of the key issues identified in the Program Description. Refer to Section I, Program Description “C. Program Areas” for technical approaches to be addressed.

ii. Key Personnel **25 points**

Individuals proposed as key personnel will be evaluated based on their sector specific qualifications, professional competence, relevant academic background, demonstrated success in carrying out proposed activities, experience.

iii. Management Plan

20 points

The Management Plan will be evaluated based on its ability to support the achievement of results. The Management Plan must consist of a clear and concise description of how internal management plans, organizational structures, lines of communication and authority, and partnerships are conducive to effective project implementation.

iv. Past Experience and Past Performance

15 points

Past experience managing or implementing similar programs or partnerships that involved elements of strategic partnership and advocacy; supporting and scaling successful and innovative education projects; and knowledge management. USAID will also examine the quality of the applicant's past performance to list the projects by name, sponsoring agency or firm and person to contact.

Applicants will be evaluated for demonstrated successful past performance in the following for the projects they list for Past experience:

- a. The overall quality of the product /services provided
- b. Cost control performance,
- c. timeliness of performance,
- d. End-user /customer satisfaction with the performance; and
- e. Performance of key personnel.

B.2. Cost Evaluation:

Points will not be awarded for cost. Cost will primarily be evaluated for reasonableness, realism, allowability and the applicant's understanding of the work to be performed. Effective cost saving measures to improve cost efficiency of the program will also be considered. Given the nature of this activity, USAID/India will weigh carefully potential benefits from the proposed staffing plans and level of effort.

[**Note:** Applications that do not present realistic costs may risk not being considered for award.]

C. REVIEW AND EVALUATION PROCESS

Application which is deemed to offer the best overall value and meet USAID objectives will be selected for award. The Technical Evaluation Committee (TEC) will evaluate the technical/programmatic merit of each application as measured against the evaluation criteria mentioned above.

Once an "apparent successful applicant" is identified, additional information and discussion may occur between the applicant and USAID Agreement Officer, before the final funding decision is made. The "apparent successful applicant" means the applicant recommended for an award of a component after evaluation, but who has not yet been awarded a grant, cooperative agreement or other assistance award by the Agreement Officer. "Apparently successful applicant" status confers no right and constitutes no USAID commitment to an award.

The recommendation or selection of an application for award does not in any way guarantee an award. The USAID Agreement Officer must be fully satisfied that the applicant has the capacity to adequately perform in accordance with standards established by USAID and the Office of Management and Budget (OMB). This issue of organizational capability is generally referred to as a pre-award “responsibility determination.” The Agreement Officer must also complete any other necessary pre-award arrangements.

Details on USAID pre-award responsibility determination policy and procedure can be found on our agency website, in its automated directive system (ADS) chapter 303, section 303.3.9: <http://www.usaid.gov/policy/ads/300/303.pdf>.

USAID/India intends to make this award without any discussion. To the extent that they are necessary, negotiations will be conducted with the applicant(s) whose application(s), has or have a reasonable chance of being selected for award. The final award decision will be made by the Agreement Officer, with consideration of the Technical Evaluation Committee recommendations.

Other areas of review and discussion will vary according to the circumstances pertaining to the application. The following areas commonly require discussion and agreement prior to award:

- A. Branding Strategy and Marking Plan. In accordance with ADS 303.3.6.3.f and 22 CFR 226.91, must be submit for evaluation and approval by the Agreement Officer. “Marking Plan” and “Marking of USAID-funded Assistance Awards” are contained in **AAPD 05-11** and in **22 CFR 226.91**. The AO evaluates the Branding Strategy and Marking Plan (including any requests for exceptions) for approval, consistent with the provisions “Branding Strategy,” “Marking Plan,” contained in the Certifications, Assurances, Other Statement of the Recipient and Solicitation Standard Provisions, and “Marking and Public Communications Under USAID-funded Assistance” contained in the **ADS 303mab, Standard Provisions for Non-U.S. Nongovernmental Organizations, 22 CFR 226.91**, and **ADS 320**, Branding and Marking. Please note that in contrast to “exceptions” to marking requirements, waivers based on circumstances in the host country must be approved by Mission Directors or other USAID Principal Officers, see **22 CFR 226.91(j)**. USAID approved Branding Strategy and Marking Plan is required for award execution.
- B. Final program and budget plans.
- C. Payment terms.
- D. Procedures concerning administrative reporting and logistical requirements for program including training components.
- E. Other award terms including audit, special provisions and/or special award conditions.

All other factors being technically equal, USAID/India reserves the right to ensure geographic diversity in applications selected for award.