



Amendment No. 01 Issue Date: June 8, 2015

Notice of Funding Opportunity Issue Date: May 20, 2015

Closing Date and Time: June 19, 2015 at 4:00 p.m. Zimbabwe time

Questions Due: May 27, 2015 at 4:00 p.m. Zimbabwe time

**Subject: Amendment No. 01, Notice of Funding Opportunity (NFO) Number RFA-613-15-000005
Zimbabwe Assistance Program in Malaria (ZAPIM)**

This Amendment No. 01 to the subject NFO is hereby issued to: 1) provide USAID's response to questions received from interested applicants, and 2) amend noted sections of the NFO.

All other terms of conditions of the original NFO remain unchanged.

Thank you for your consideration of this USAID initiative. We look forward to your participation in the competitive process.

Sincerely,

Leona Sasinkova
Agreement Officer
USAID Zimbabwe

I. QUESTIONS AND ANSWERS

Question 1:

According to the five key objectives outlined in the Overview section on page 7, Objective 4 is in support of malaria surveillance, monitoring and evaluation and operational research activities, and Objective 5 is in support of quality therapeutic efficacy trials together with the MoHCC. According to the detailed Project Activities on pages 22 to 23, Objective 4 is in support of quality therapeutic efficacy trials and Objective 5 deals with the malaria surveillance, monitoring and evaluation and operational research activities. In terms of the order of objectives, may USAID please confirm whether applicants should refer to the objectives outlined in the Overview on page 7 or in the Project Activities on pages 22-23 of the RFA? It would be most appreciated if you could please confirm receipt of this email at your earliest opportunity.

Answer 1:

Thank you for pointing out this inconsistency in the ZAPIM RFA. Please refer to the objective ordering on page 7 that states that Objective 4 is malaria surveillance, monitoring and evaluation and operational research activities; and Objective 5 is quality therapeutic efficacy trials together with the MoHCC.

Question 2:

Can USAID please provide more information on how FELTP will be included in ZAPIM?

Answer 2:

We do not anticipate that ZAPIM will support the FETP program. However, as a sister PMI partner, there may be mutually beneficial collaborating events or activities with the FETP under the University of Zimbabwe MPH program that trains future public health professionals in Zimbabwe. For example, ZAPIM may include FETP students in events such as malaria meetings, technical working groups or field research activities (Surveys, data collection, etc.). FETP students are often already trained professionals that are enrolled in the MPH program and interested in being a part of such activities as learning opportunities. In turn, ZAPIM staff may be invited to attend the monthly MPH conferences where FETP students present their work on malaria and other health topics throughout Zimbabwe.

Question 3:

In the FY15 PMI Zimbabwe MOP, what does “New Malaria Bilateral” in Table 2 refer to?

Answer 3:

In Table 2 of the MOP, the “New Malaria Bilateral” is now designated as the Zimbabwe Assistance Program in Malaria (ZAPIM).

Question 4:

Can USAID please provide more clarification on the status of the rollout of TrainSMART? There are very different budget and planning implications depending on whether ZAPIM will be supporting the roll-out

of TrainSMART (an existing system), as compared to developing and rolling out a new system (if TrainSMART does not become the MOHCC/NMCP-accepted system)?

Answer 4:

At this time, PMI does not anticipate allocating resources to the roll out of TrainSMART. However, ZAPIM would be expected to use TrainSMART as it becomes operational and is a MOHCC/NMCP-accepted system. If TrainSMART is not available or not accepted, a good practice to consider is a system for capturing, storing, and analyzing training data so there is awareness and transparency in cadres (and individuals) trained in what topics and when. This may help avoid duplication in training and ensure that the right target groups are trained.

Question 5:

Objective 1 seems to conflate malaria case management with malaria in pregnancy. Can USAID please clarify the expected focus of malaria case management – is it in general (i.e., for under-fives and the general population), or is it for pregnant women?

Answer 5:

In PMI programs in many countries, malaria case management and malaria in pregnancy training curricula and supportive supervision are combined. However, they are both seen as distinct key areas of intervention for malaria treatment and control. Malaria case management is intended for all persons that have tested positive for malaria and require treatment. Children under-five and pregnant women may require a different protocol for treatment (i.e. different doses and different curative drugs. However, malaria in pregnancy is considered to be a key PMI intervention area because pregnant women and their unborn children are more vulnerable to malaria and pregnant women that live in malarious areas are advised to temporarily take malaria prevention medicine under the Intermittent Preventive Treatment in Pregnancy (IPTp).

Question 6:

Question #20 explicitly says, “Supply chain management and procurement is outside the scope for ZAPIM.” Question 33 also says, “PMI/Zimbabwe supports procurement and supply management through another partner.” Question #33 then says, “ZAPIM would support distribution, tracking and possibly temporary warehousing of LLINs.” Can USAID please provide more details on what is expected of applicants with respect to procurement and supply chain management? It is difficult to plan and budget for this activity without knowing more details of the size and locations of the procurement.

Answer 6:

Applicants will not be expected to procure commodities, as that will be done by a different partner, currently via USAID DELIVER Project. The applicant will be involved with mass and routine distribution of LLINs beyond the provincial level and will be expected to coordinate with NMCP, the PMI partner procuring commodities, and any other donors to optimize the size and timing of deliveries in country and to distribution points to meet programmatic needs. Additionally, the applicant should provide guidance to NMCP and facility staff to facilitate distribution and tracking of LLINs to distribution points and from there to recipients. It is not anticipated that ZAPIM will need to support temporary warehousing for mass campaign LLINs. However, should there be a logistical delay in distribution of LLINs from the central level to the distribution points for routine

distribution, the applicant may need to provide temporary warehousing until the commodities can be delivered to the final distribution points at facilities or schools. In other countries, the host government provides warehouse space. However, since the LLIN routine distribution program is new, this detail is not yet settled.

Question 7:

Is there any level of the MOHCC health system at which ZAPIM can fund staff?

Answer 7:

PMI has funded staff dedicated to MOHCC in the Department of Pharmacy Services and a Vector Control Officer at NMCP for a brief period. Such a PMI is open to creative, clearly justified ideas for staff funding and would consider such a notion carefully.

Question 8:

Can applicants assume that the FY 2015 Malaria Operational Plan was fully funded and is being implemented and therefore that ZAPIM activities would be in addition or complementary to those outlined in the FY 2015 MOP?

Answer 8:

We expect that the FY15 MOP will be fully funded based upon historical funding trends. However, MOP15 figures should only be used for planning purposes since a reprogrammed version of MOP 15 funding allocation has been submitted to PMI leadership for approval. The approved, reprogrammed funding allocation will be posted on www.pmi.gov.

Question 9:

We acknowledge your earlier response on targeting. We feel the issue still requires further clarification. We note that USAID stated, "ZAPIM will likely be in some of the 47 malarious districts..." they also stated that this number might change during the life of the project depending on the epidemiology. However, we feel this is not enough information to plan and budget well. We think we should ask this question again and ask for an expected coverage of the malarious districts, for example, will ZAPIM cover at least 50% of the districts? This would help our planning.

Answer 9:

There are currently 47 malarious districts in Zimbabwe and four key malaria prevention and treatment interventions. 47 districts are targeted for IRS and LLIN distribution. Approximately 30 are targeted for IPTp. And, case management training and supervision are performed in all 47. PMI strives to fund the gaps in these four key interventions annually. Each year's district coverage change may per year under the leadership and advice of NMCP based on malaria burden and need. To gain a better understanding on budgeting for interventions conducted by ZAPIM it may be useful to look at past MOP Table 2 allocations. That amount would indicate the gap PMI filled each year. For example, funding allocation for case management/malaria in pregnancy training for health workers is X amount for certain year. That X amount could help estimate the amount of persons trained and/or supervised for X year in X amount of districts.

Question 10:

In one response for the questions, USAID states that they could consider additional funding for supporting community activities but there is no reference to this in the RFA. Can USAID provide more details on this funding?

Answer 10:

Reaching the community and community members to prevent and treat malaria is one of the primary goals of the NMCP. For the past several years, USAID/PMI has funded community activities, such as training and supervision of village health workers through MCHIP. MCHIP/Zimbabwe is expected to end in December 2016. USAID/PMI plans to continue funding VHW support but it is not absolutely clear under which partner. Funding for this work may be included under ZAPIM. Other types of community work included in ZAPIM are community SBCC, routine LLIN distribution via schools and VHWs, and SBCC in school among teachers, school headmasters, and students.

Question 11:

Page 22 -- Objective 4: It is stated "ZAPIM will coordinate all planning and implementation activities with WHO and a therapeutic efficacy study technical working group..." as well as "ZAPIM will have an influential and active role in the therapeutic efficacy studies of 2016 and 2018." Given the above, should applicants include estimated costs in their ZAPIM budget for the actual implementation/conducting of the 2016 and 2018 therapeutic efficacy studies, or will funds for study implementation be supplied from other sources (WHO, NIHR, etc.)?

Answer 11:

Applicants should budget for actual implementation/conducting costs (planning through results dissemination) of the proposed therapeutic efficacy studies in addition to other activities referenced, e.g., assembling study tool kits, coordinating the technical working group, etc. The World Health Organization has provided some support in previous years but future funding support is unknown so the ZAPIM applicant should not plan on other sources of funds being supplied. The next therapeutic efficacy study was just rescheduled for 2017. So, possibly there will now be studies in 2017 and 2019.

Question 12:

One of the illustrative activities listed for Objective 1 is "Develop a solution to keep track of health care professionals that have been trained in malaria case management/MIP" (page 19 of the RFA). Does PMI expect ZAPIM to prioritize the usage of Trainsmart database assuming Trainsmart becomes fully functional instead of developing another solution? Can ZAPIM resources be used to enhance the functionality of Trainsmart to meet the tracking (and quality) objectives of the NMCP?

Answer 12:

At this time, PMI does not anticipate allocating resources to the roll out of TrainSMART. However, ZAPIM would be expected to use TrainSMART as it becomes operational and is a MOHCC/NMCP-accepted system. If TrainSMART is not available or accepted, a good practice to

consider to a system for capturing, storing, and analyzing training data so there is awareness and transparency in cadres (and individuals) trained. This may help avoid duplication in training and ensure that the right target groups are trained. Developing a training data gathering and storage system that could easily be compatible with (or rather with data that could be easily downloaded to TrainSMART) TrainSMART is something to consider.

Question 13:

Under Objective 2, ZAPIM is tasked with finalizing documentation on LLIN quantification and LLIN routine campaign distribution, using documentation previously created by Networks project. Would PMI be able to make the Networks documentation available to applicants?

Answer 13:

Malaria partners in Zimbabwe used the Networks NetCalc tool (Developed by Albert Killian for Malaria Consortium) to quantify LLINs needed to attain universal coverage in Zimbabwe and estimate replacement and new LLINs required over time. PMI supported a workshop in Zimbabwe to learn and use NetCalc but there is no NetCalc Zimbabwe data set available for distribution. PMI also supported development of documents to plan for the routine distribution pilot facilitated by NetWorks and VectorWorks projects respectively but final versions of these documents are not available for distribution at this time.

Question 14:

Through Q&A released on May 21, PMI has asserted that PMI/Zimbabwe may support diagnosis quality via microscopy in the future but via another mechanism. As hospitals are a major source of treatment of both uncomplicated and severe malaria, won't malaria microscopist (i.e. personnel such as lab scientist, lab technician, biologist) be included in any supportive supervision initiative. As any improvements in malaria case management will require improvements in the diagnosis of malaria using microscopy and RDTs, we believe clarifications of this issue would be relevant. Of course if another PMI supported platform is under consideration, it will be imperative that implementation activities are closely coordinated with ZAPIM.

Answer 14:

Supportive supervision will be expected to be supplied by qualified health workers with demonstrated expertise in fund of knowledge and technical proficiency. For malaria diagnosis many, if not most supervisors, will have a laboratory background, or a clinical background including relevant laboratory training. PMI agrees that malaria diagnostic quality encompasses both the use of RDTs and microscopy. Some laboratorians are included in case management trainings and are trained to be trainers in case management for facility- and community-based workers so will have knowledge of different aspects of malaria case management beyond diagnosis. Any targeted support for lab quality control or assurance (i.e. supportive supervision for lab staff) by PMI would be provided through another mechanism.

Question 15:

Is it safe to assume that there will be a smooth transition from MCHIP under the Associate Award in Zimbabwe to MCSP? When is it anticipated that MCSP will become operational in Zimbabwe?

Answer 15:

MCHIP/Zimbabwe is a three-year associates award that is scheduled to end December 2016. At this time, it is unknown if MCSP will be working in Zimbabwe or when this might occur. It is also unknown at this time if there will be any other follow-on project taking up the work of MCHIP.

Question 16:

Under Objective 5, ZAPIM will play a supportive role in the upcoming MIS scheduled for 2016 and any additional national or sub-national malaria-related surveys. However, under M&E Requirements (page 24 of the RFA), ZAPIM is tasked with carrying out a Baseline Assessment at the beginning of the project. Is it expected that ZAPIM will conduct a national baseline survey or can it focus on the targeted project areas? Related to this is the question whether the project target areas will be the 30 highest burden districts or all 47 malarious districts? We understand that not all interventions will be introduced in all 47 districts uniformly, e.g. IRS; in addition, it is anticipated that interventions may change on an annual basis based on NMCP guidance. This being the case, it suggests that the baseline assessment should cover all 47 districts, if not nationally.

Answer 16:

It's a good practice to establish a baseline at the beginning of a project or intervention, if resources are available. However, if the MIS takes place as planned in early 2016 then it may serve as a baseline for ZAPIM.

Question 17:

Under subsection b. Staffing and Management Capacity and Approach, the RFA states, "Complete descriptions of key personnel roles, responsibilities, skills and experiences must be included in the technical application. Applicants should also provide a clear description of how the cooperative agreement will be managed, and explain communication and synergies among staff. This should include the roles and responsibilities of each sub-recipient and the lines of authority and communication among the prime and all proposed subrecipients in order to maximize efficiency..." Under Annex III (p.34), applicants are instructed to submit a Management Plan and Staffing Plan that includes in its description some of the components described under sub-section b. We respectfully request further clarification of which components related to staffing and management should be included within the technical application as compared to Annex III to avoid duplication.

Answer 17:

As to Staffing and Management and Capacity Approach, some duplication is expected in the Technical Application Body and Annex III, however this duplication should be kept at a minimum. The Technical Application Body should present a general summary of the proposed staffing and management plan highlighting key elements critical to the success of the project. Annex III should include details of the staffing and management plan (detailed descriptions of the roles/responsibilities of the prime and subrecipients, organizational chart with proposed positions including detailed position descriptions and reporting relationships, and other items as noted in the NFO to be included in Annex III such as CVs, letters of commitment, professional references, etc.).

Question 18:

Page Number – 33 Question – Under subsection c. Performance Monitoring and Evaluation, the RFA states to see Annex II below. Should applicants provide any narrative or quantitative information related to M&E in the technical approach section c (and subject to the overall 30 page limitation for the technical application), or should all of those components be included under Annex II?

Answer 18:

Any information related to the M&E plan that is relevant to the applicant's technical approach and critical to the success of the project should be highlighted in the technical application body (subject to the overall 30 page limitation). However, the actual detailed and comprehensive preliminary M&E Plan should be included in Annex II as instructed in the NFO.

Question 19:

Proposal Section – D Page Number – 33 Question – Under subsection c. Performance Monitoring and Evaluation, the RFA states that the M&E plan should provide baselines by result and/or sub-intermediate result. Given that applicants will be conducting a full baseline (using existing data) upon award, should applicants include baseline estimates using existing data for proposed indicators? Or can this requirement be omitted until a full PMP is developed?

Answer 19:

If the MIS takes place as planned in early 2016 then it may serve as a baseline for ZAPIM. Other smaller, more targeted baseline surveys conducted prior to ad hoc research may also be conducted but that could be included with the performance monitoring plan.

Question 20:

Proposal Section – Responses to comments and Questions Page Number – 5 Question – Under Question 20, USAID states that supply chain management and procurement are outside of the scope of ZAPIM. Given the frequent stock outs at facility level for RDTs and ACTs, and the commensurate prioritization for health facility use, can applicants provide modest budget funds to support buffer stocks for community-based case management?

Answer 20:

It is expected that procurement and supply chain management will remain with another partner and outside of the scope of ZAPIM. Applicants should not budget funds to support an alternative supply chain mechanism to provide buffer stocks for community-based case management. However, communicating the unexpected discovery of stock outs or other stock irregularities during other implementation activities is encouraged, alerting NMCP, PMI, and other partners that can take action to correct short- and long-term stock challenges.

Question 21:

In strengthening the capacity of the MOHCC/NMCP, will USAID/Zimbabwe expect ZAPIM to second staff at NMCP or upgrade logistics/ offices of NMCP at national and/or provincial level?

Answer 21:

USAID/PMI does not have specific plans for seconded staff members to NMCP supported by ZAPIM. However, applicants may feel free to propose such an arrangement in line with their technical approach.

Question 22:

Under ZAPIM, will USAID provide funding for procurement of LLINs for LLIN campaigns and routine distribution? If not what would be the role of ZAPIM?

Answer 22:

USAID/PMI allocates funds for LLIN procurement currently under the USAID DELIVER project. Resources for LLIN procurement are not anticipated under ZAPIM. PMI/Zimbabwe will look to ZAPIM for LLIN distribution, SBCC related to LLINs, and taking up phases two and three of a net durability study begun this year.

Question 23:

A DHS is scheduled in 2015 and a MIS planned for 2015. Could we consider the results of these two surveys as the baseline for ZAPIM?

Answer 23:

Yes, the DHS data would be useful but does not focus on the 47 malarious districts and data collection is done outside of malaria season. MIS data will be more useful as a baseline because it is collected during malaria season and focuses on the malarious districts.

Question 24:

Page Number – 32 Question - Page 32, 5.b mentions 3 keys positions; page 34 (key personnel) mentions up to five key personnel. Could you clarify? Does that mean the applicant has the ability to choose 2 extra Key Personnel besides the ones listed by USAID in the RFA?

Answer 24:

Thank you for pointing out this inconsistency in the RFA. There are only three key personnel for ZAPIM. Other personnel that the applicant is expected to name are not anticipated to be key personnel.

Question 25:

Salary and Wages: The RFA indicates that details for basis of estimate for each proposed salary should be sufficiently addressed in the budget narrative. It then proceeds to list the items that are expected to fall under this category, including consultants. These instructions differ from usual USAID instructions for salary costs on other similar RFAs. Can USAID confirm if the inclusion of consultants in Salary and Wages in this budget is correct?

Answer 25:

ZAPIM applicants may choose to budget for consultant positions, local and international. Other PMI partners have included plans for short term consultants from time to time. Any costs proposed for consultants should be included in the Salary and Wages line item.

Question 26:

These instructions differ from usual USAID instructions for budget preparation on other similar RFAs. Can USAID confirm if the breakdown of Program Management, Administrative and Program costs is needed in the presentation of the budget, or if these cost groupings can be presented in the budget notes? Can USAID also provide a definition for each requested category in the breakdown and examples of costs that should be placed in each category.

Answer 26:

The breakdown of “programmatic” and “administrative” costs is not required. However, Applicants should attempt to minimize their administrative and support costs for managing the project to maximize the funds available for program activities.

Question 27:

We understand that charts and graphics within the main technical application count toward the page limit. For ease of reading and design quality, may applicants use a smaller than 12-point font on graphics.

Answer 27:

Footnotes, charts, tables and other similar types of graphic displays may be in no smaller than 10 point Times New Roman font. However, USAID reserves the right to not review pages in the application if this practice is abused.

Question 28:

As a follow-up to question 18 of the draft program description could USAID identify the level of MIS support applicants should include in order to provide for accurate budgeting?

Answer 28:

Applicants may refer to the PMI’s official website (www.pmi.gov) under MOP14 to find out additional information regarding the level of MIS support.

Question 29:

As a follow-up to questions 9 and 39 presented in response to the draft program description, we respectfully request that USAID provide further clarification on how the choice of instrument meets the guidance in ADS chapter 304, acquisition versus assistance, in light of the fact that Project Objectives 1 and 2 appear to require technical assistance.

Answer 29:

The choice of instrument was selected based upon the nature of the relationship USAID seeks with the recipient. USAID/PMI intends to financially support the recipient in its accomplishment of a public purpose while achieving Agency results. The recipient of this award should possess the ability to comprehensively support a malaria prevention and treatment program and have accompanying organizational goals. USAID/Zimbabwe and PMI/Zimbabwe do not wish to have control or direct involvement with routine implementation of activities under ZAPIM. Therefore USAID has selected a Cooperative Agreement as the most appropriate mechanism for ZAPIM.

Question 30:

The RFA instructs applicants to prepare a budget for a 60-month period. Should applicants assume pre-planned funding levels for Year 1 based upon previous MOPs and, if so, can USAID provide estimated

funding levels for the first year of implementation based upon those allocations? The RFA instructs applicants to continue managing the ongoing net durability study through its completion. Are applicants expected to budget for study implementation costs, or only analysis, technical assistance and guidance, and dissemination? If study implementation costs are required, would USAID share a rough budget estimate that applicants should plan for the continuing years under ZAPIM?

Answer 30:

MOP14 and MOP15 funding allocations are published on PMI's official website (www.pmi.gov) under "New Malaria Bilateral". Although the MOP15 funding allocations have not been approved yet, applicants may use the listed figures when preparing the cost application. PMI designates budgeting guidance for net durability studies, a flat amount for years 2 and 3, at \$100,000 for each year.

Question 31:

The RFA describes the types of technical support and coordination applicants should provide to the NMCP, NIHR, and partners to conduct planned therapeutic studies recently rescheduled for 2016 and 2018 on p. 22-23. Are applicants also expected to budget study implementation costs in addition to the other activities referenced (assembling study toolkit, coordinate technical working group, etc.)?

Answer 31:

Applicants should budget implementation costs for therapeutic efficacy studies, recently rescheduled for 2017 and 2019, (planning through results dissemination) in addition to the other activities referenced (assembling study tool kit, coordinating technical working group, etc.). WHO and PMI may be resources for understanding the process and resources for a therapeutic efficacy study.

Question 32:

The RFA states, "ZAPIM will work with the NMCP and PMDs to introduce the process and production of monthly/quarterly malaria bulletins." Should applicants budget for printing and production of these items, or will the NMCP or others assume those costs?

Answer 32:

NMCP and Provincial Medical Directors have expressed interest in producing monthly/quarterly malaria bulletins. It is not known if production costs of the bulletins would be covered by the Ministry of Health and Child Care or the Global Fund Malaria Grant or ZAPIM. Applicants may decide to cover the costs of production and dissemination.

Question 33:

Should applicants plan and budget for a household level baseline survey, or use existing resources?

Answer 33:

It's a good practice to establish a baseline at the beginning of a project or intervention, if resources are available. However, if the Malaria Indicator Survey takes place as planned in early 2016 then it may serve as a baseline for ZAPIM.

Question 34:

Can USAID please provide more clarity on what is required for the staffing and management plan in the Technical Application Body and what should go in Annex III? It is clear that organizational charts, key personnel CVs and letters of commitment, and letters of commitment from proposed subrecipients and stakeholders should go in Annex III. However, in terms of descriptions of the management and staffing plans, there is a lot of overlap in the requirements for the Technical Application Body and Annex III. Also under Annex III, are applicants required to submit three fully written out professional references for each of the proposed key personnel, or just three contact names with email addresses and telephone numbers to eventually provide written professional references?

Answer 34:

As to Staffing and Management and Capacity Approach, some duplication is expected in the Technical Application Body and Annex III, however this duplication should be kept at a minimum. The Technical Application Body should present a general summary of the proposed staffing and management plan highlighting key elements critical to the success of the project. Annex III should include details of the staffing and management plan (detailed descriptions of the roles/responsibilities of the prime and subrecipients, organizational chart with proposed positions including detailed position descriptions and reporting relationships, and other items as noted in the NFO to be included in Annex III such as CVs, letters of commitment, professional references, etc.). As to professional references, no, “fully written out professional references”, or letters of recommendation, are not required for each of the proposed key personnel. Contact information only, as described in the NFO, is required for 3 recent professional references for each of the proposed key personnel.

Question 35:

Can USAID please clarify whether organizational capacity information should be included in the technical application body, and where, or just the past performance references. There are only brief mentions of capacity, which can be found under the Evaluation Criteria for the Staffing and Management Capacity and Approach: “Proposed subcontractors/subrecipients, private sector and local partners possess complementary skills that are balanced and well utilized in project implementation” and “The application demonstrates the applicant’s proposed ZAPIM team capacity, organizational systems and competence to creatively plan and implement the project.”

Answer 35:

“Organizational capacity” information is not a requirement of this Notice of Funding Opportunity.

Question 36:

Is the Preliminary Monitoring and Evaluation Plan that goes in Annex II with information by indicator the only M&E information required? Is there any M&E information required in the technical application body?

Answer 36:

Any information related to the M&E plan that is relevant to the applicant’s technical approach and critical to the success of the project should be highlighted in the technical application body (subject

to the overall 30 page limitation). However, the actual detailed and comprehensive preliminary M&E Plan should be included in Annex II as instructed in the NFO.

Question 37:

We kindly request that USAID allows for the Technical Application to be submitted in Adobe PDF format. Additionally, we kindly request that USAID allows for the Cost/Business Application to be submitted in Adobe PDF with budgets submitted in Microsoft Excel.

Answer 37:

Adobe PDF versions of the application may accompany the Technical and Cost Applications. However, as stated in the Notice of Funding Opportunity, all documents must be in Microsoft Word and Excel format to ensure that applications can be reviewed to determine whether they meet the requirements of the NFO.

Question 38:

Other Direct Costs: Can USAID clarify what is expected by a 'procurement plan for commodities' and if applicants required to submit one as it has been indicated that commodities will be procured by another partner?

Answer 38:

The budget should not include any proposed costs for commodities.

Question 39:

Branding Strategy and Marking Plan, the first sentence instructs applicants to submit a Branding Strategy and Marking Plan. However the last sentence says the plan will be requested at a later date, and a Branding Strategy and Marking Plan are not part of the prescribed technical application format. Can USAID please clarify its wishes in connection with branding and marking?

Answer 39:

The Branding and Marking Plan is not required to be submitted with the Technical Application and will be requested from the apparent successful applicant at a later date. However, the Cost Application should include proposed costs for branding and marking supplies in the Other Direct Costs line item.

Question 40:

Please confirm the size limitations (i.e. MB size) for the application submission via email.

Answer 40:

Emails may contain up to 10 attachments/annexes (5MB limit per email). Multiple emails may be sent to accommodate the application size and content, but each must contain very clear identification of the attachment and instructions for assembling the application.

Question 41:

Given that USAID/Zimbabwe faced technical difficulties and the full RFA was uploaded after the initial notice, would USAID consider extending the application closing date to 22 June to allow for the original/intended application preparation period?

Answer 41:

The application date will not be extended.

Question 42:

The RFA states that “Funding will be planned and allocated through the PMI annual malaria operational plan (MOP) process. MOP14 and MOP15 have already planned for some initial funding for ZAPIM.” Under the cost proposal instructions on p.35, the RFA instructs applicants to prepare a budget for a 60 month period. Should applicants assume pre-planned funding levels for Year 1 based upon previous MOPs and, if so, can USAID provide estimated funding levels for the first year of implementation based upon those allocations?

Answer 42:

Please refer to answers #8 and #30 above.

II. AMENDMENT

The NFO is hereby amended as follows:

1. Section A: Program Description, No. 13 Project Activities, Page 22, DELETE “Objective 4: Increase the capacity of MOHCC/NMCP, NIHR, and partners to conduct quality therapeutic efficacy studies.” and REPLACE with “Objective 5: Increase the capacity of MOHCC/NMCP, NIHR, and partners to conduct quality therapeutic efficacy studies.”
2. Section A: Program Description, No. 13 Project Activities, Page 23, DELETE “Objective 5: Strengthen and support the MOHCC/NMCP in malaria surveillance, monitoring and evaluation; and operational research to assess the efficacy/effectiveness of currently deployed malaria control tools.” and REPLACE with “Objective 4: Strengthen and support the MOHCC/NMCP in malaria surveillance, monitoring and evaluation; and operational research to assess the efficacy/effectiveness of currently deployed malaria control tools.”
3. Section D: Application and Submission Information, No. 4 Technical Application Format, No. (6) The Annex, c. Annex III: Management and Staffing Plan and Key Personnel, Page 34, Key Personnel section, DELETE “USAID requests applicants to identify (up to five) key personnel” and REPLACE with “USAID requests applicants to identify (up to three) key personnel”.
4. Section D: Application and Submission Information, No. 5 Cost/Business Application Format, Page 36, DELETE “6. As written above, the proposed budget should provide separate cost estimates for the management of the program (including program monitoring) or “administrative” costs and a cost estimate for program or “programmatic” costs. The Applicant should provide a basis or explanation for how costs were categorized as one or the other.”
5. Section D: Application and Submission Information, No. 4 Technical Application Format, Page 31, third paragraph, ADD “Footnotes, charts, tables and other similar types of graphic displays may be in no smaller than 10 point Times New Roman font. However, USAID reserves the right to not review pages in the application if this practice is abused.”
6. Section D: Application and Submission Information, No. 5 Cost/Business Application Format, No. 4, Page 36, Other Direct Costs, DELETE “(procurement plan for commodities)”.
7. Section D: Application and Submission Information, No. 2 Content and Form of Application Submission, Page 29, second paragraph, ADD “Emails may contain up to 10 attachments/annexes (5MB limit per email). Multiple emails may be sent to accommodate the application size and content, but each must contain very clear identification of the attachment and instructions for assembling the application.”

END OF AMENDMENT NO. 01 TO NFO RFA-613-15-000005

