Issuance Date: March 13, 2018
Deadline for Questions: March 22, 2018 at 14:00 Kigali Time
Application Closing Date: April 23, 2018
Application Closing Time: 14:00 Kigali Time

Subject: Notice of Funding Opportunity (NOFO) Number: 72069618RFA00002

Activity Title: **Rwanda Service Delivery Activity (RSDA)**

Dear Prospective Applicants:

The United States Agency for International Development (USAID) in Rwanda (USAID/Rwanda) is seeking applications from qualified and eligible U.S. or non-U.S. Non-Governmental Organizations (NGOs) (non-profit, including private voluntary organizations (PVOs), for-profit willing to forego profit, and institutions of higher education) to implement health service delivery interventions in Rwanda as further described in Section A of this NOFO. Eligibility for this award is unrestricted. See Section C of this NOFO for eligibility requirements.

USAID intends to be substantially involved in the implementation and performance of the Activity; therefore, the award will be a cooperative agreement rather than a grant.

Subject to the availability of funds a cooperative agreement will be made to the applicant(s) whose application(s) best meets the objectives of this funding opportunity based on the merit review criteria contained herein and who poses an acceptable risk based on a risk assessment. While one award is anticipated as a result of this NOFO, USAID reserves the right to fund any or none of the applications submitted.

For the purposes of this NOFO the term "Grant" is synonymous with "Cooperative Agreement"; "Grantee" is synonymous with "Recipient"; and "Grant Officer" is synonymous with "Agreement Officer". Eligible organizations interested in submitting an application are encouraged to read this funding opportunity thoroughly to understand the type of Activity sought, application submission requirements and selection review process.

To be eligible for award, the applicant must provide all information as required in this NOFO and meet eligibility standards in Section C of this NOFO. This funding opportunity is posted on www.grants.gov, and may be amended. Potential applicants should regularly check the website to ensure they have the latest information pertaining to this NOFO. Applicants will need to have available or download Adobe program to their computers in order to view and save the Adobe forms properly. It is the responsibility of the applicant to ensure that the entire NOFO has been received from the internet in its entirety and USAID bears no responsibility for data errors resulting from transmission or conversion process. If you have difficulty registering on

www.grants.gov or accessing the NOFO, please contact the Grants.gov Helpdesk at 1-800-518-4726 or via email at support@grants.gov for technical assistance.

The successful Applicant will be responsible for ensuring the achievement of the Activity objectives.

Please send any questions to the point(s) of contact identified in section D of this NOFO. The deadline for questions is shown above. Responses to questions received prior to the deadline will be furnished to all potential applicants through an amendment to this notice posted to www.grants.gov

Applicants should retain a copy of their application, and any enclosures thereto, for their records.

Issuance of this NOFO does not constitute an award commitment on the part of USAID nor does it commit USAID to pay for any costs incurred in the preparation or submission of any application. Applications are submitted at the risk of the applicant. USAID reserves the right to reject any or all applications received.

Thank you for your interest in USAID Activities.

Sincerely,

Peggy L. Manthe

Peggy L. Manthe
Agreement Officer

TABLE OF CONTENTS

SECTION A: PROGRAM DESCRIPTION

A.1. Objective

USAID/Rwanda plans to award a five-year Cooperative Agreement to implement the "Rwanda Service Delivery Activity" (RSDA)[1]. RSDA aims to improve the utilization and quality of Reproductive, Maternal, Newborn and Child Health (RMNCH) and Malaria services, in a sustainable manner with the goal of reducing infant and maternal mortality in Rwanda. RSDA will build upon the tremendous gains Rwanda has made in the health sector as well as previous USAID investments in the health sector.

A.2. Background

A.2.1 Country context

Rwanda is the most densely populated country in Africa with an estimated 10,515,973 million people (2012), a population density of 415 people per square kilometer and an annual population growth rate of 2.6% (approx. 400,000 births/year). Data from the 2012 Rwanda Census further describes a country that is young (50% of the population is below 20 years of age), and rural (83% of the population). Despite these demographic challenges, Rwanda has experienced impressive economic growth in the past decade, averaging more than 8% per year since 2001. Furthermore, Rwanda has seen a reduction in the proportion of Rwandans living below the poverty line from 57% in 2005/2006 to 39% in 2013/14, with 16.3% still categorized as extremely poor, down from 37% during the same period (Rwanda Poverty Profile Report, August 2015).

Rwanda's foremost development challenge from the viewpoint of the Government of Rwanda (GOR) is to transform the country from one that is largely agrarian to one in which the economy is driven by a knowledge-based workforce, and in which adequate economic opportunities and social services are widely and equitably provided, to include the equitable provision of basic health services across the country. Rwanda's long term goal is to become a middle income country by 2050. This goal is outlined in its Vision 2050 strategy and is implemented through the GOR's medium term strategic plan, the National Strategy for Transformation (NST). The NST provides the foundation for sectoral strategies, including the Health Sector Strategic Plan (HSSP).

Rwanda's positive economic development trends are mirrored by tremendous success in the health sector, though challenges remain to make continued progress. According to the 2015 Rwanda Demographic and Health Survey[2] (RDHS) under-five and maternal deaths have declined by more than two thirds, meeting the Millennium Development Goals 4 and 5, respectively. Out of pocket spending on health has also declined from $9 per capita in 2006 to $4 per capita in 2010 (Rwanda Health Financing Policy, March 2015). These gains are attributed, in part, to the high uptake of the community health insurance scheme "*Mutuelle de Sante*" which benefits mostly low income Rwandans, the elderly and those in the informal economic sector

[1] "RSDA" is a working title for this activity and applicants are requested to propose a relevant name in *kinyarwanda* for the activity.

[2] https://dhsprogram.com/pubs/pdf/FR316/FR316.pdf

where employer provided health insurance or private health insurance do not apply. It is currently estimated that 82% of the population is covered by *Mutuelle* (2015/16 Rwanda Social Security Board report).

On the policy front, the Ministry of Health (MOH) historically has worked collaboratively with a range of stakeholders in the health sector to develop its five-year strategic plans, the HSSP and the Health Sector Policy (HSP). Health has been identified, and prioritized, as a development issue by the GOR[3]. As such, HSSP targets are included in the NST and are consequently monitored by the Ministry of Finance and Economic Planning (MINECOFN). HSSP IV outlines the vision and overall objective of the Rwanda health sector and will guide the health sector toward the Sustainable Development Goals (SDGs).

A.2.2 Health System

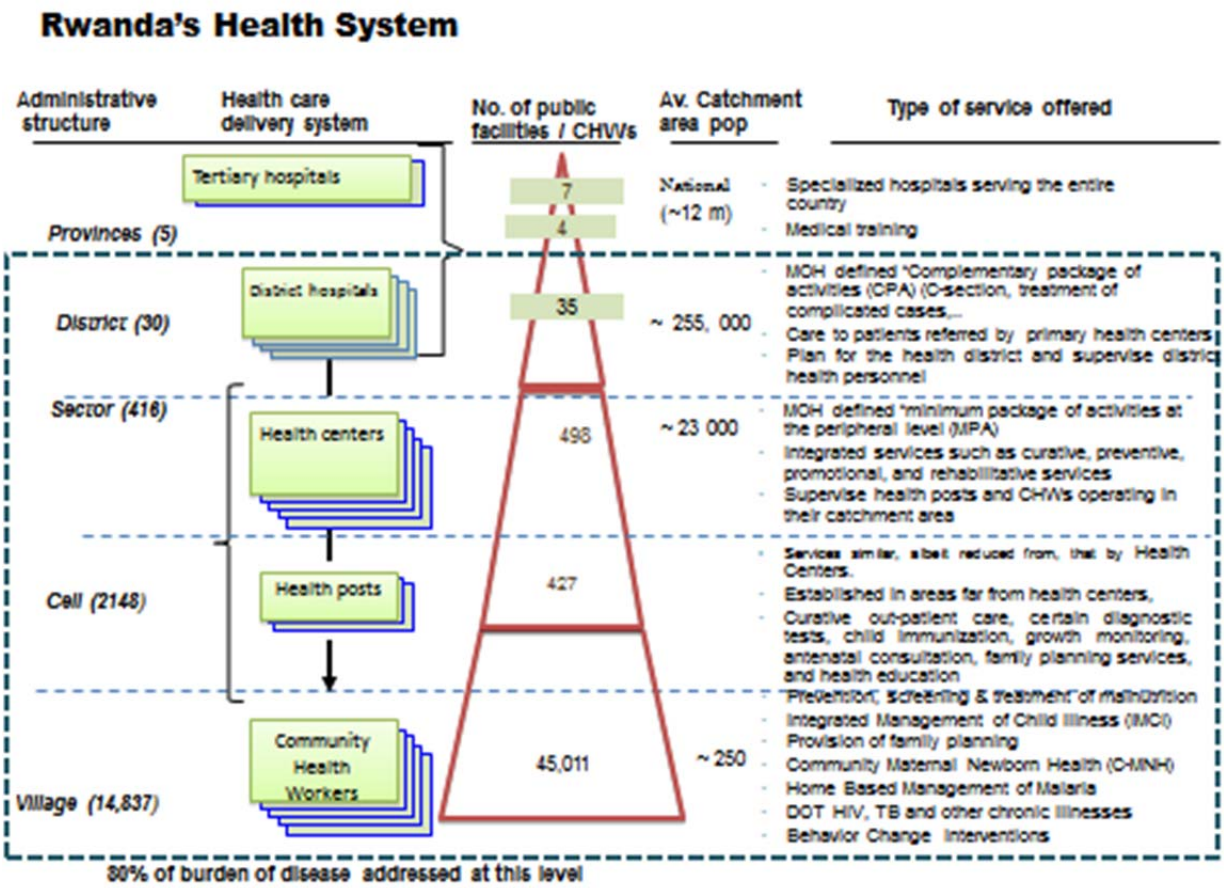
Health services in Rwanda are largely provided by the GOR and Faith Based Organizations (FBOs), and to a lesser extent, the private sector. Public health facilities account for 65.5% of health services with an additional 13.9% of public facilities run in partnership with FBOs (also known as *"Agréé"* facilities). The remaining health facilities are run by the private sector (19.4%), and community owned health facilities account for 1.3%.[4] *Agréé* facilities, which are subsidized by the GOR, provide health services at the same cost and quality as public facilities and are almost indistinguishable from public facilities with some exceptions that include specifically the provision of family planning services. While the MOH provides overall leadership on health issues, 15 additional GOR Ministries also implement activities that either directly, or indirectly, impact health outcomes. Currently, the health sector is heavily supported by development partners and both national and international nongovernmental organizations (NGOs). It is estimated that 61% of public spending on health is from external funding (Rwanda Health Financing Policy, March 2015).

A.2.2.1 Organization of the Health Care Delivery System The public sector is organized into four levels 1) the national referral hospitals; 2) provincial hospitals; 3) district hospitals; and 4) the Primary Health Care (PHC) level which includes health centers, health posts and community health workers (CHWs). Health service delivery levels correspond to administrative structures of the local government, as shown in Figure 1 below. Each service delivery level has a defined technical and administrative structure that clearly states the catchment population, corresponding local administration level, minimum staffing and infrastructure standards that are expected to support the minimum package of services at that level. In theory, the different levels coordinate through a referral system to prevent overlap, reduce patient overload, use resources efficiently and improve quality of care for patients.

[3] The National Dialogue, December 18 and 19, 2017. http://ktpress.rw/2017/12/the-2017-national-dialogue-resolutions/

[4] Rwanda Health Statistical Booklet, published 2014, http://moh.gov.rw/fileadmin/templates/HMIS_Docs/MOH_Statistical_Booklet_2014.pdf

Rwanda's Health System - Figure 1



A.2.2.2 Achievements in Health

Rwanda has made significant improvements within the health sector, benefiting from the strong support and vision of the GOR, and especially the MOH. According to the 2010 Household Living Conditions Survey Report there has been a significant increase in health service utilization between 2005 and 2010, particularly among the lowest socioeconomic category, with medical consultations increasing from 31% to 40% among individuals with medical illness. Similarly, the Rwanda annual health statistics booklet based on Health Management Information Systems (HMIS) data showed an increased primary health care utilization rate from 0.81 to 0.94 visits per inhabitant between 2009 and 2013 (HMIS 2009 and 2013).

Over the same period, public spending on health increased from 8.2% of the national budget in 2005 to 15.5% in 2013 (MOH annual report 2012/13). During the past decade access to health services increased through the proliferation of an expanded community health program. This included an increase in the number of health centers across the country, development of disease specific management guidelines (primarily focused on diseases contributing the most to mortality for mothers, newborns and children under five years of age), and the introduction of performance based financing to incentivize well performing staff and facilities.

Table 1. *What have we done and where do we need to go? RDHS results and HSSP IV Targets*

Indicators	DHS				Target HSSP IV
	2005	2007/8	2010	2014/15	2024
Infant Mortality Rate (deaths per 1,000 live births)	86	62	50	32	22.5
Under-5 mortality	152	103	76	50	35
Maternal Mortality Ratio (deaths per 100,000 live births)	750	-	476	210	126
Contraceptive Prevalence Rate among married women	27		45	48	72
Total Fertility Rate	6.1		4.6	4.2	3.3
Antenatal care visit	94	96	98	99	
Facility Delivery	28	45	69	91	95
Postnatal Visit in two days of delivery			18	43	
Reduction in Malaria incidence /1,000	-	-	-	-	122/1,000
HH with at least one LLINs	-	-	82	81	>90
Under 5 Stunting	50		44	38	19

A.2.3 Development Challenges

Despite tremendous progress, Rwanda still faces significant challenges to further improve RMNCH, and to control and manage malaria. A combination of a failure to adequately utilize available health services and varying levels with regards to quality of care limits further health care gains in Rwanda.

Ultimately, utilization of services by Rwandans is impacted by socioeconomic factors and negative experiences with the health care system. While not exhaustive, socioeconomic factors include low levels of education, financial constraints, long distances to health facilities, and the burden of domestic chores. This may result in limiting time and ability to seek care, and for some, limit the ability to appreciate the importance of timely health care seeking, or translate knowledge into healthy behaviors and practices. Additionally, gender imbalances and cultural norms constrain decision making by female clients and caretakers to seek timely care either for themselves or children under their care. These social factors combine to inhibit Rwandans' ability to maximize available health care services, leading to outcomes such as non-compliance with antenatal care appointments, low utilization of family planning methods, and inconsistent use of insecticide treated mosquito nets.

The quality of care is impacted by a range of factors such as limited or variable skills among providers, which in many cases results in delayed or poor quality care that negatively impacts health outcomes and health care seeking behavior. Waiting times of up to 6 hours have been reported in some facilities. Provider skills in turn are impacted by a high attrition rate among health care workers (partly due to a lack of motivation for various reasons including inadequate remuneration). Additionally health care providers may be challenged to provide quality health care due to inadequate access to necessary medical equipment. Additionally, there is limited

capacity for health services management at decentralized levels and this, ultimately, leads to inefficiencies and a less than ideal working environment.

For specific challenges pertaining to RMNCH and Malaria please see Annex B.

A.2.3.1 Commodities and Life Saving Equipment

Stock-out of life saving drugs, although not common, is not unheard of in Rwanda. More often than not it is a problem of logistics and distribution rather than actual commodity stock outs from the central medical stores, where all medicines are received, housed and distributed. Poor maintenance, or lack thereof, of life saving equipment on the other hand is very common, and is the result of a lack of training and availability of qualified repair technicians or staff. Compounding this is the variety of equipment that has been brought by partners into the country, despite the fact that the MOH issues specifications for desired equipment. Additionally, adequate maintenance of this equipment is a complex challenge currently facing Rwanda's health system.

A.2.3.2 Monitoring and evaluation - use of data for Health Care decision-making

Monitoring and evaluation are key Activity management components, to monitor and track progress in implementation and achievement against Activity objectives and provide data for decision making. The Recipient will build district, region, and facility capacity to track and use key RMNCH and malaria indicators over time, primarily using District Health Information System-2, to examine progress towards national, regional and program goals. The Recipient will also provide continuous technical support to CHWs, facilities and District Health Management Teams (DHMTs) on data management and data use for decision-making, including data quality assurance and data analysis.

A.2.3.3 Gender and gender based violence

Gender integration into programming and gender based violence (GBV) prevention and response are among priority areas in all USAID Activities, including health. Similarly, the GOR continues to champion gender mainstreaming efforts in all sectors through required gender budget statement development, implementation and reporting. The GOR outlines priorities to be achieved in various sectors including integration of a package of GBV services in the healthcare system, provided under one roof in order to minimize the risk of re-victimization, tampering with evidence and delayed justice. Despite the progress, gender issues and GBV still exist in Rwanda. A USAID/Rwanda gender analysis carried out in 2014 revealed that despite strong gender sensitive policies implemented by the GOR, gender disparities due to cultural norms still pose barriers to the achievement of desired health outcomes. Findings include: lack of male engagement in caregiving and domestic work; high illiteracy rate for women; limited involvement in decision-making and control of household resources; social norms and stigma that are a major barrier to accessing health services, particularly for the most vulnerable people; limited knowledge about reproductive health for rural adults and youth in general; and gaps in training and sensitization of health care providers, which cause further marginalization of vulnerable populations.

A.3. Relationship with USAID/Rwanda

USAID/Rwanda's Country Development Cooperation Strategy (CDCS)[5] lays out the Mission's strategic vision for its assistance to Rwanda, which is aligned with the country's long term development goals. The CDCS has four Development Objectives (DO) that compliment GOR sector strategies under the NST. DO 3 of the CDCS aims to improve the health and nutritional outcomes of Rwandans, aligning directly with HSSP IV. DO 3 summarizes the conceptual framework linking improvements in health to the overarching goal of sustaining self-sufficient country development programs. RSDA's interventions will support the following Intermediate Results (IR) and sub IRs in USAID/Rwanda's CDCS:

- IR 3.1: Strengthened capacity of health sector to deliver high quality services:
- Sub IR 3.1.1: Central level health systems strengthened
- Sub IR 3.1.2: Decentralized health systems improved

- IR 3.2: Increased utilization of quality health services/products by target populations and communities:
- Sub IR 3.2.1: Increased awareness of, access to, and demand for high-impact health practices

In addition, RSDA interventions should be closely linked with the following sub IRs of IR 3.2:

- Sub IR 3. 2.2: Improved protection of vulnerable populations against adverse circumstances
- Sub IR 3.2.3: Increased nutrition knowledge and adoption of appropriate nutrition and hygiene practice

A.4. Relationship with USAID Partners

In order to maximize the impact of USAID/Rwanda's health activities, close coordination between RSDA and other relevant USAID activities is expected. The Recipient will coordinate closely with the GOR and development partners through regular participation in key technical working groups and other avenues of engagement. A list of specific USAID activities with which RSDA should collaborate is included in Annex C.

A.5. Government of Rwanda

The GOR has developed a number of documents which will help guide interventions under RSDA--these include the HSSP IV; Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) policy; Maternal, Newborn and Child Health (MNCH) strategy; Adolescent, Sexual and Reproductive Health and Family Planning (ASRH/FP) strategy;[6] and the National Malaria Control Strategy.

[5] USAID/Rwanda's CDCS can be found at: https://www.usaid.gov/rwanda/cdcs

[6] http://www.moh.gov.rw/fileadmin/templates/Docs/Rwanda-Family-Planning-Policy.pdf

A.6. Other Donors

Currently, the major donors and multilateral organizations in the health sector in Rwanda include the United States Government (USG); the Government of Canada; the Belgian Technical Cooperation (BTC); the Gavi Alliance; and the Global Fund for AIDS, Tuberculosis and Malaria (GFATM). United Nations entities also have a presence in Rwanda, these include the World Health Organization (WHO), United Nations Children's Fund (UNICEF), United Nations Population Fund (UNFPA), and United Nations Programme on HIV/AIDS (UNAIDS). Technical forums for coordination amongst these organizations include the Technical Working Groups (TWGs) at national level, the Joint Action Forum (JAF) at the district level and various other meetings coordinated by the Local Government.

A.7. Results and Goals

A.7.1 Goal and Development Hypothesis

RSDA will build on past USAID support to the health sector in Rwanda to provide a healthier, more productive future for all Rwandans. The following goal, strategic objective, development hypothesis and results framework provide the foundation for RSDA to effectively address the previously stated development challenges.

*Goal***:** To contribute to the reduction of infant and maternal mortality in Rwanda.

*Objective***:** To improve the utilization and quality of RMNCH and malaria services in Rwanda, in a sustainable manner.

*Development Hypothesis***:** If the capacity, and functionality, of the healthcare system to deliver RMNCH and malaria services is further institutionalized and strengthened, then gains made in RMNCH and malaria will be sustainably improved and will, ultimately, contribute to continued reductions in maternal and infant mortality in Rwanda as well as increased self-reliance of the GOR.

Table 2: ***Results Framework***

Strategic Objective: To improve the utilization and quality of RMNCH and malaria services in a sustainable manner.		
IR 1: Increased equitable access to RMNCH/malaria services in targeted districts.	**IR 2:** Improved quality of high impact RMNCH/malaria services along the continuum of care in targeted districts.	**IR 3:** Strengthened performance of the health system at central and decentralized levels.
Sub-IR 1.1: Increased availability of RMNCH/malaria services.	**Sub-IR 2.1:** Improved provider skills in RMNCH/malaria (doctors, nurses, midwives and CHWs).	**Sub-IR 3.1:** Strengthened capacity at the national and decentralized levels to plan and manage RMNCH/malaria services.

Sub-IR 1.2: Improved health seeking behaviors for RMNCH/malaria services.	**Sub-IR 2.2:** Institutionalized quality improvement approaches for RMNCH/malaria interventions.	**Sub-IR 3.2:** Strengthened capacity of hospitals to achieve RMNCH/malaria related accreditation indicators.
Sub-IR 1.3 Strengthened referral linkages for RMNCH/malaria services between, and across, different services and levels of service delivery.	**Sub IR2.3:** Improved standardization of RMNCH/malaria services	**Sub-IR 3.3:** Strengthened capacity for district planning, reporting and M&E frameworks.

A.8. General Activity Parameters

A.8.1 Target Beneficiaries

Given that RSDA is focused on RMNCH and malaria, the direct beneficiaries must be women, adolescents and children under-five. Indirect beneficiaries may include the millions of Rwandans who utilize public health services, the MOH and local government. The general population will benefit as a result of the improved capacity of facilities to deliver quality services. MOH and local government will benefit from the capacity building received, ultimately contributing to the overall sustainability of the Activity. Specific interventions under RSDA will identify other priority populations and hard to reach communities. It is expected that RSDA will, ultimately, result in improved health services for over 50% of the Rwandan population.

A.8.2 Geographic Coverage

The 2015/16 RDHS confirmed widespread disparities in health outcomes across Rwanda and at all levels of healthcare provision. In response to these disparities the geographic coverage of RSDA must be divided geographically into national/central interventions and provincial/district level interventions. National/central interventions may include, but are not limited to, interventions such as participation in TWGs, policy development and other interventions which respond to national MCH, FP and malaria priorities. Provincial/district level interventions may include, but are not limited to, targeted interventions such as technical assistance and support to District Health Management Teams (DHMT), communities, facilities (hospitals and health centers) and providers. Geographic coverage for the provincial/district category of interventions must be 20 targeted districts across Rwanda and these will be determined during the development of the implementation plan. However, for budgeting purposes an illustrative list of the 20 districts is included in Annex D. Finally, USAID envisions that the suite of interventions offered under RSDA may differ according to geographic location, for example a particular district/facility may require more assistance in FP than MCH. With regards to malaria interventions, USAID envisions that these will only be implemented in 7 districts under RSDA, for illustrate purposes these are also reference in Annex D.

The geographical coverage of this Activity may change in order to respond to GOR requests, and/or the United States Government's current and future plans and priorities.

A.8.3 Sustainability

The GOR has set the ambitious goal in Vision 2020 of becoming independent of International aid by 2020. However, as previously stated, at present Rwanda is heavily dependent on external resources. Under the current HSSP IV, GOR prioritizes diversification and increasing domestically generated resources on top of improving effective resource allocation. USAID/Rwanda supports this vision and is committed to moving Rwanda away from the need for foreign assistance and promoting the sustainability of its investments. This includes supporting Rwanda's ability to finance and manage their own development. As such, RSDA is intended to build upon and maintain the substantial gains made in the health sector during the past two decades and to take advantage of the space created by the GOR and MOH to advance health outcomes in Rwanda.

A local solutions approach should be emphasized for the sustainability of RSDA. Specifically, the approach should target interventions that will positively impact the sustainability of Rwanda's health care systems responsible for RMNCH and Malaria. Entry points for interventions should also be carefully selected, with an eye toward building sustainability in not only RSDA supported districts per se, but sustainability in the ability of the GOR to deliver quality health care, and sustainability in improved utilization by Rwandans for health services, and improved health practices. Well-chosen entry points and associated interventions may also seek to bolster planned and ongoing activities (by government, USAID, other donors), or may seek to address difficult challenges receiving little to no attention. While not exhaustive, sustainable approaches may include building skills, knowledge, and institutions that can help make development processes self-sustaining; may support behavior change among Rwandans; and may engage the private sector.

If the GDP continues to increase at a rate of approximately 8% per year and it maintains its commitment in the HSSP IV to increase the percent of general budget allocations to be 15%, the expected approximate per capita annual expenditure on health will be $45. With these commitments maintained, Rwanda will be able to support the same standard of health services it is currently providing without any external assistance. However, as stated previously, currently the Ministry of Finance is only predicting an increase in the absolute amount of funds contributed to the health system, but not the percentage. RSDA will assist MOH in advocating for itself as well as prioritizing its needs as they move towards self-reliance.

Economically, a healthier population is a wealthier population. Rapid and sustained improvement in health outcomes among the Rwandan population will ensure that economic growth continues at the rate it has in the recent past. Maintaining support to the health program with building institutional capacity of the health system ensures a successful transition to supporting the health system in the medium term.

A.8.4 Gender

In alignment with USAID's Policy on Gender Equality and Female Empowerment, all interventions will be undertaken with a gender-sensitive approach to ensure empowerment and inclusion of women and girls, prevent and respond to GBV issues, while also supporting engagement of men and boys to mitigate harmful attitudes. Interventions will also be dynamic in addressing identified and emerging gender gaps.

This Activity focuses on strengthening the decentralized health system, leading to better services for both men and women. However, as many of USAID's health interventions place an emphasis on maternal and child health, and reproductive health, women stand to benefit greatly from this Activity. Each invention under RSDA should be implemented with a gender lens ensuring that they do not reinforce harmful norms or further marginalize vulnerable populations.

A.8.5 Local Capacity

The Recipient should build on USAID previous investments by continuing to strengthen the Ministry of Health and District Administration Offices. Seeking to build GOR's ability to maintain its health program independent of development partner support in its journey towards self-reliance.

The Recipient should provide mentorship and institutional capacity building to decentralized levels of the health system that ensure that key players are appropriately equipped to take on their new roles in the newly strengthened health system. Ultimately, the skills transferred under RSDA will develop the institutional capacity of the health sector.

A.8.6 Management Approach/Staffing

In order to effectively implement this activity to scale, USAID expects that the Recipient will establish regional/provincial offices, potentially co-located in GOR facilities to maximize exposure and collaboration and also to reduce costs. USAID also envisions the appropriate proportion of technical staff will be based at these offices in order to provide technical assistance to the facilities (hospitals and health centers) and communities on a routine basis. It is expected that this cost-effective approach will limit the number of technical staff required in Kigali.

In an effort to use the resources and skills available locally, USAID strongly encourages the Recipient to partner with Rwandan Professional Associations (PA) to accomplish some specific interventions under RSDA (i.e. mentorship). PA's are a cost-effective method to building capacity in the country while also utilizing in-country experience and increasing the self-reliance of Rwanda.

A.8.7 Guiding Principles for Implementation

The following principles should be considered by the Recipient in all proposed RSDA interventions:

1. Sustainability and ensuring skills and knowledge are transferred that will provide Rwandans with a healthier, self-reliant future.
2. Strategies for reaching youth should be considered in all interventions, with a particular focus on family planning.

3. Promote gender equality and women's empowerment through evidence-based planning, monitoring and evaluation, reporting, and learning
4. Close collaboration with the MOH in all aspects of the Activity, including planning, implementation, monitoring, and evaluation including use of key performance and quality indicators that are linked to the RMNCH and malaria.
5. Advocacy with multiple levels of government and all stakeholders to enhance their involvement and promote sustainability and scale up of best practices.
6. Systematic documentation and sharing of innovations and best practices to enhance policy, and service delivery.
7. A strong focus on data**,** including an initial analysis to determine focus areas of programming, identification of potential areas for implementation research and/or impact evaluation, and use of data to model impact of interventions.
8. Leveraging the presence of the private sector to improve the quality of health care in urban settings.
9. Advocating for the equity of quality RMNCH, malaria and nutrition services across the country.
10. Collaboration with existing and future USAID investments.

A.9. Activity Description

RSDA will be implementation plan driven with the results framework serving as the foundation for annual implementation plan development. The following section serves as a guide to the types of interventions envisioned for RSDA. Proposed interventions under each IR should reflect focus areas of RSDA including maternal health, newborn care, child health, family planning/reproductive health and malaria. Collectively, these interventions should comprise a comprehensive suite of services that will improve RMNCH and malaria outcomes while reducing maternal and infant mortality. Interventions should reflect the appropriate Activity emphasis and allocated funding type.

A.9.1 IR 1 Increased equitable access to RMNCH/malaria services in targeted districts (40% Activity emphasis)

External support for the health sector has declined over the last five years, and as a result there is limited support for RMNCH and malaria services. Consequently, there is emerging evidence from routine service statistics that links disparity of services provided in facilities with no donor or partner support, leading to increased rates of maternal and newborn mortality as well as malaria. In order to address this, the Recipient will work at the national level with the ability to respond to districts and/or sectors demonstrating the increased need at any given time throughout the implementation period. The Recipient also needs to pay careful attention to how it builds in sustainability so as to avoid a similar situation in which the activity ends and maternal or newborn mortality rates rise. If RSDA is implemented successfully, equitable RMNCH and malaria services will be available at all facilities across Rwanda in the targeted districts.

Please note, under RSDA the Recipient will **not** construct or rehabilitate health facilities.

A.9.1.1 Sub IR 1.1 Increased availability of RMNCH/malaria services

In line with the overall health sector vision and mission and the HSSP IV goal of ensuring universal accessibility of equitable and affordable health services, the RSDA will contribute to improved availability of RMNCH and malaria services in designated districts that demonstrate

poorly performing maternal and child health indicators. Support should include working with MOH and decentralized levels to improve facility planning and staff management to ensure services are available every day of the week and that providers have the required skills. RSDA should place a significant focus on community level interventions that cut across technical areas of support.

A.9.1.2 Sub IR 1.2 Improved healthcare seeking behaviors for RMNCH/malaria services

Equitable access to healthcare services includes both, physical availability of services within reasonable distance for all Rwandans in the supported districts, as well as the willingness of people to demand services. Therefore, interventions to improve healthcare seeking behaviors for RMNCH and malaria services should target socio-economic factors that negatively impact health services utilization and provider practices and attitudes. Evidence-based, innovative Social Behavioral Change and Communication (SBCC) approaches are key to increasing demand for quality RMNCH and malaria services in Rwanda. The Recipient is expected to work with other USAID SBCC partners to develop innovative SBCC approaches, and, more importantly, implement these at the community and facility levels. RSDA community level SBCC interventions will largely be implemented by CHWs, using tools developed by RSDA and SBCC partners. Under this Sub IR, there should be a particular focus on youth especially with regards to reproductive health and family planning SBCC approaches. Proposed SBCC approaches shall align with, and reflect those, of the GOR, and should promote conflicting or contradictory SBCC approaches or messaging.

A.9.1.3 Sub IR 1.3 Strengthened referral linkages between and across RMNCH/malaria services and levels of service delivery

In order to address the most challenging health issues remaining in Rwanda, a focused, multi-faceted approach with coordinated services is required. Establishing strong linkages across services is imperative for ensuring that clients have access to the full continuum of care and receive the services they need in a timely fashion. Recent HMIS data shows that a substantial proportion of maternal mortality and morbidity may be due to late arrival at health facilities. Furthermore, a secondary analysis of RDHS data revealed that 39% of married women have a potential need for FP but are not using it, suggesting a lapse in the referral system. Improved referral linkages are key to ensuring clients receive comprehensive care, and it is also important to note the referral system should go "both ways", whereby, patients are referred to facilities and when they are discharged there is follow up at the community level. Strengthening the referral system from the facility to the community and vice versa is key to achieving the desired outcomes under this IR.

***A.9.1.4 IR 1 Illustrative Indicators*:**

- Number of health workers (facility and community) trained in case management with Artemisinin-based combination therapy (ACTs) with USG funds.
- Number of USG-assisted community health workers (CHWs) providing family planning (FP) information, referrals, and/or services during the year.
- Number of children under five years of age with suspected pneumonia receiving antibiotics by trained facility or community health workers in USG-assisted programs.
- Number of USG-assisted community health workers (CHWs) providing family planning (FP) information, referrals, and/or services during the year.

- Percent of USG-assisted service delivery sites providing family planning (FP) counseling and/or services.
- Percent of audience who recall hearing or seeing a specific USG-supported RH/FP message.
- Number of pregnant women attending all 4 ANC visits.
- Number of women giving birth who received uterotonics in the third stage of labor (or immediately after birth).

A.9.2 IR 2 Improve quality of RMNCH/malaria services along the continuum of care in targeted districts (45% Activity emphasis)

Improving quality directly relates to the skill level of providers who comprise the health sector's most valuable and sustainable resource. Capacity building with the MOH and decentralized levels under RSDA should emphasize working through existing country programs and systems. The Recipient should strengthen GOR capacity to coordinate partners in the health sector with the goal of fostering synergy and efficiency of resources in the sector.

USAID's prior investments in the health sector have helped institutionalize how the GOR's health facilities maintain quality of care. The Recipient should build on these prior investments and quality of care processes so as to strengthen work that has already been done and to create a continuum of support for quality care. It is imperative the Recipient take previous USG investments into account and not duplicate prior or existing efforts. USAID encourages proposed interventions that continue to scale up the quality of RMNCH and malaria services at the facility level. USAID strongly recommends that capacity building interventions be cost-effective and complementary to previous efforts while emphasizing on-the-job training and/or mentoring. By supporting mentorship interventions (largely through PAs) at the facility level (mainly district hospitals), RSDA will support the delivery of quality services by building the capacity of providers both at the local and central level.[7] Proposed interventions should minimize the time that providers are away from their duty stations.

RSDA is also expected to support limited nutrition and WASH interventions at the facility level that contribute to improved maternal and child health outcomes. The Recipient is expected to establish linkages with USAID's CHAIN partners implementing WASH and nutrition interventions at the community level. The Recipient will also be expected to promote adherence to universal standards of infection control, including handwashing practices for providers and caregivers in order to improve control of infection.

A.9.2.1 Sub IR 2.1 Improved provider skills in RMNCH/malaria (doctors, nurses, midwives and CHWs)

RSDA should improve the quality of care provided by clinicians at the facility level and CHWs in the community. National accreditation standards, the PHC package and numerous other policies and strategies provide the foundation for improving provider skills. RSDA should build upon these with targeted interventions that improve upon the skills providers require and the needs of the facility or population they work in. USAID has invested in mentorship and coaching of clinicians and CHWs, with an emphasis on transferring practical skills via on-the-job experience or simulations. The Recipient is expected to continue mentoring/coaching for

[7] http://www.moh.gov.rw/fileadmin/templates/policies/Health_Sector_Policy___19th_January_2015.pdf

providers. USAID strongly encourages innovative, cost-effective interventions that will build, and sustain, provider skills. These approaches should be accompanied by strategies to measure competency in clinical skills and adherence to protocols, both at facility and community levels.

A.9.2.2 Sub IR 2.2 Institutionalized quality improvement/assurance approaches for RMNCH/malaria interventions

Through RSDA, USAID will continue to support Quality Assurance (QA) and Quality Improvement (QI) in health system strengthening and service delivery programs. In the past, USAID has implemented QI activities working very closely with district quality assurance teams. These interventions were supported by the mentorship program that supported both clinical care and health service management. Real-time use of data is critical to the success of QA/QI. In the past, USAID has initiated the use of dashboards at the national level and within DHMTs. This included supporting the roll out to 10 district hospitals and several health centers in the supported districts. The dashboards are effective as they visually demonstrate activity within the health system and service delivery areas; are easily understood by health managers and providers; and are practical tools that feed directly into the QI activities. Additionally, USAID also supported the introduction of Geographic Information Systems (GIS) which has been useful in mapping activities and visualizing data. It is crucial that QA/QI approaches are institutionalized for sustainability. The Recipient is expected to support GOR M&E teams and district health managers to institutionalize QA/QI approaches for RMNCH and malaria interventions.

A.9.2.3 Sub IR 2.3: Improved standardization of RMNCH/malaria services

USAID has supported the MOH to define service packages for RMNCH and malaria at various levels of the health sector, differentiated by level of service, with a goal to standardize care at facilities of the same level. The Recipient will be expected to collaborate with both supply chain partners and the MOH in order to ensure that proper RMNCH equipment is in place to make service delivery possible. However, procurement of equipment will not be a core activity.

USAID's support under the RSDA should align with USAID's Maternal Health Vision for Action, the global Every Newborn Action Plan (ENAP), in addition to the GOR strategies noted earlier in this Program Description. Interventions under this sub IR are expected to comprise a suite of interventions that support the delivery of primary health care (PHC) packages across health centers and at the community level, which are essential to promoting basic and equitable health care in Rwanda. Together, the PHC package, along with hospital accreditation, defines what is expected at the service delivery level under RSDA.

A.9.2.4 IR 2 Illustrative Indicators

- Number of women giving birth who received uterotonics in the third stage of labor (or immediately after birth) through USG-supported programs.
- Number of newborns not breathing at birth who were resuscitated in USG-supported programs.
- Number of cases of child correctly diagnosed and treated for diarrhea in USG-assisted programs.
- Percentage increase in adherence to ANC visits according to national guidelines.
- Percentage increase in new users of contraceptive methods following SBCC interventions.

- Increased method mix among family planning users at health center level.
- Increased use of long lasting insecticide treated nets following SBCC campaigns.
- Increased number of referrals for RMNCH and malaria diagnosis whose outcome is known.
- Number of babies who received postnatal care within two days of childbirth in USG-supported programs.
- Number of women receiving surgery for fistula from USG-supported programs.

A.9.3 IR 3 Strengthened leadership and governance of the health system at central and local levels (15% Activity emphasis)

The MOH is the lead ministry that sets the policy agenda for the health sector. RSDA is expected to strengthen the capacity of the MOH and its institutions to develop and review national policies and strategies on RMNCH. Additionally, several other line ministries are responsible, either directly or indirectly, for health outcomes in the country and RSDA is expected to strengthen these linkages when feasible. Above all, RSDA will support the implementation of evidence-based, high impact interventions to strengthen leadership and citizen responsive governance of the health system at all levels.

A.9.3.1 Sub IR 3.1 Strengthened capacity at the National and decentralized levels to plan and Manage RMNCH/malaria services

Building on USAID's past support of high impact practices for RMNCH and malaria control, RSDA must continue to support the MOH at the national and decentralized levels. National and district level health planners and managers should have the capacity to develop and/or adopt new policies, strategies, guidelines and job aids as new scientific evidence or best practices for RMNCH and malaria become available. Newly available global and regional evidence or practices will also need to be adopted to the Rwandan context. Support under this IR may also include reviewing existing tools and strategies as the need arises.

Often there is limited coordination within the health sector and this has resulted in delayed implementation and often times missed opportunities for synergy and efficiency. The Recipient is expected to engage with the Rwanda Biomedical Center (RBC), the MOH and DHMT's to strengthen collaboration and enhance relevant skills under this sub IR. The Recipient will also be expected to increase the capacity to develop and implement RMNCH and malaria policies, strategies, protocols, service standards and job aids.

A.9.3.2 Sub IR 3.2 Strengthened capacity of hospitals to achieve RMNCH/malaria related accreditation indicators

Under this sub IR, there should be a clearly defined approach of how the RSDA will utilize the existing accreditation system to support the minimum service standards across facilities of the same level, and how the support will strengthen the accreditation system for improved maternal and child health, family planning and malaria outcomes. Assessments of key contributors to maternal deaths at the facility level will be critical to ensuring that RSDA focus on specific factors contributing to maternal mortality and morbidity within the Rwandan context. Also, support for family planning should ensure high-quality, highly effective provider and client approaches that provide a broad range of contraceptive information, products, and services in ways that help clients choose, and correctly use, the contraceptives that meet their lifestyle and reproductive needs for delaying, spacing, or limiting childbearing. RSDA interventions should complement USAID social marketing and SBCC activities.

A.9.3.3 Sub IR 3.3 Strengthened capacity for district planning, reporting and M&E frameworks

USAID support for data use has been, and continues to be aimed at strengthening the health management information system (HMIS) and health facilities (community to the hospital levels) to be able to generate quality data, analyze it and use it at service delivery sites. HMIS is a web based information system based upon an open source District Health Information System *(DHIS-2).* The MOH with support from partners, including USAID, has made significant progress on developing operating procedures for data use, developing reporting channels, data capture tools and lately designing a data warehouse from which different reports can be accessed or run. However, gaps remain--some of the indicators in the HMIS have not been clearly defined, and HMIS' data sources are not consistent across all facilities and are not disaggregated enough to provide as much useful information as it could. The process of integrating new indicators is very lengthy and may be due to lack of capacity required to develop the tools for capturing data correctly. Furthermore, the capacity to analyze data at the decentralized level is weak, yet this is exactly where timely decisions need to be guided by accurate date. The Recipient, in close collaboration with other USAID partners, is expected to work with the RBC, facility management and DHMTs to identify areas of weakness and address them accordingly. Similarly, the Recipient should also support the community health program to improve capacity for data use at the community level.

The Recipient should support the RBC to assess and address gaps in the HMIS that linked to improved service delivery of RMNCH and malaria services. USAID's vision is to see functional DHMTs that clearly understand the health related issues within the district and that are able to make real time decisions that drive improvements in RMNCH and malaria outcomes. As such, the Recipient should build the capacity of the DHMTs and other staffs to collect, verify, and interpret the quality of health data.

A.9.3.4 IR 3 Illustrative Indicators:

- Number of Policies developed/revised
- Number of Guidelines developed/reviewed
- Improved data quality; DQAs and Integrated Supportive Supervision reports
- Improved accreditation scores linked to quality of care (maternal and child health outcomes)
- Number of indicators audited per quarter and findings.

A.10 Monitoring, Evaluation and Learning (MEL)

Monitoring of results, evaluating performance and/or impact and learning from performance to adapt Activities are essential elements of USAID programing.The resultant Cooperative Agreement will have a Monitoring, Evaluation, and Learning (MEL) Plan that describes how the Recipient will monitor Activity implementation progress and assess its impact.

A.11 Authority

The authority for this NOFO is found in the Foreign Assistance Act of 1961, as amended. For US organizations, 2 CFR 200, 2 CFR 700 and USAID Standard Provisions for U.S. Non-Governmental Organization will be applicable. The applicable OMB circulars for U.S. applicants are available in the following links:

2 CFR 200:

https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl

2 CFR 700:

https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr700_main_02.tpl

2 CFR 200 and 2 CFR 700 do not apply to non-U.S. organizations (except for the cost principles in Subpart E of 2 CFR 200). Instead, ADS-303 (https://www.usaid.gov/sites/default/files/documents/1868/303.pdf) and the USAID Standard Provisions for Non U.S. Nongovernmental recipients (https://www.usaid.gov/sites/default/files/documents/1868/303mab.pdf) will apply to such organizations.

[END OF SECTION A]

SECTION B: FEDERAL AWARD INFORMATION

B.1 Anticipated Number of Awards and Estimate of Funds Available

USAID intends to award one (1) Cooperative Agreement pursuant to this NOFO. USAID reserves the right to fund any or none of the applications received.

USAID/Rwanda intends to provide up to $49,800,000 in total USAID funding over a five year period. Funding for this Cooperative Agreement will be provided on an incremental basis subject to the availability of funds and successful performance. USAID reserves the right to change the funding amounts, cycle, and terms of the resulting Cooperative Agreement as a result of availability of funds and U.S. Government requirements. The Recipient will be notified in writing should such changes occur.

For budgeting purposes, the funding types and estimated amounts per year are as follows:

Funding Type	**Year 1**	**Year 2**	**Year 3**	**Year 4**	**Year 5**	**Total**
MCH	$2,500,000	$3,000,000	$3,800,000	$3,800,000	$3,400,000	$16,500,000
FP	$3,000,000	$4,200,000	$5,000,000	$5,000,000	$4,800,000	$22,000,000
MALARIA	$2,000,000	$2,000,000	$2,000,000	$2,000,000	$2,000,000	$10,000,000
WATER	$350,000	$200,000	$250,000	$250,000	$250,000	$1,300,000
TOTALS	**$7,850,000**	**$9,400,000**	**$11,050,000**	**$11,050,000**	**$10,450,000**	**$49,800,000**

B.2 Anticipated Start Date and Period of Performance for Federal Award

The period of performance anticipated herein is five (5) years. The estimated start date will be upon signature of the award, on or about July 27, 2018.

B.3 Nature of Relationship between USAID and the Recipient

The principal purpose of the relationship with the Recipient and under the subject Activity is to transfer funds to accomplish a public purpose of support or stimulation of the Rwanda Service Delivery Activity which is authorized by Federal statute. The successful Recipient will be responsible for ensuring the achievement of the Activity objectives and the efficient and effective administration of the award through the application of sound management practices. The Recipient will assume responsibility for administering Federal funds in a manner consistent

with underlying agreements, Activity objectives, and the terms and conditions of the Federal award.

B.4 Substantial Involvement

USAID will be substantially involved during the performance of the Cooperative Agreement. This substantial involvement will be through the Agreement Officer (AO), except to the extent that the AO delegates authority to the Agreement Officer's Representative (AOR) in writing. The intended purpose of the AOR involvement during the implementation of the Activity is to assist the recipient in achieving the supported objectives. It is expected that the AO will delegate the following approvals to the AOR, except for changes to the Program Description or the approved budget. Such changes shall only be approved by the AO. Substantial involvement will be limited to:

B.4.1 Approval of Recipient's Implementation Plans

If at the time of award, the program description does not establish a timeline in sufficient detail for the planned achievement of milestones or outputs, USAID may delay approval of the recipient's implementation plan for a later date. USAID may not require approval of implementation plans more often than annually, The AOR will review and approve the Annual Implementation plan including planned interventions for the current year and any subsequent years including revisions thereto.

B.4.2 Approval of Specified Key Personnel

USAID may designate as key personnel only those positions that are essential to the successful implementation of the recipient's Activity. USAID's policy limits this to a reasonable number of positions, generally no more than five positions or five percent of recipient employees working under the award, whichever is greater.

The following key personnel positions have been designated as essential to the successful implementation of this Activity - Chief of Party and Chief Finance and Administrative Officer. Additional key personnel positions may be proposed within USAID's policy limits.

B.4.3 Agency and Recipient Collaboration or Joint Participation:

When the recipient's successful accomplishment of program objectives would benefit from USAID's technical knowledge, the AO may authorize the collaboration or joint participation of USAID and the recipient on the program. There should be sufficient reason for Agency involvement and the involvement should be specifically tailored to support identified elements in the program description. When these conditions are met, the AO may include appropriate levels of substantial involvement such as the following:

B.4.3.1 Collaborative involvement in selection of advisory committee members, if the program will establish an advisory committee that provides advice to the recipient. USAID may participate as a member of this committee as well. Advisory committees must only deal with programmatic or technical issues and not routine administrative matters.

B.4.3.2 Concurrence on the substantive provisions of sub-awards. 2 CFR 200.308 already requires the recipient to obtain the AO's prior approval for the subaward, transfer, or contracting out of any work under an award. This is generally limited to approving work by a third party under the agreement. If USAID wishes to reserve any further approval rights for sub-awards or contracts, it must clearly spell out such Agency involvement in the substantial involvement provision of the agreement.

B.4.3.3 Approval of the recipient's monitoring and evaluation plans.

B.4.3.4 Monitor to authorize specified kinds of direction or redirection because of interrelationships with other projects. All such activities must be included in the program description, negotiated in the budget, and made part of the award.

B.5 Title to Property

Title to property under the resultant agreement shall vest with the recipient in accordance with the requirements regarding use, accountability, and disposition of such property in 2 CFR 200.310 through 2 CFR 200.316 for U.S. NGOs or the USAID mandatory Standard Provision for non-U.S. NGOs entitled "Title To And Use Of Property".

B.6 Authorized Geographic Code

For the award(s) resulting from this NOFO, the authorized geographic code for the *source* of USAID-financed commodities (other than "restricted commodities," as discussed below), and for the *nationality* of suppliers of USAID-financed commodities (other than restricted commodities) and services (other than ocean and air transportation and certain engineering and construction services) is Geographic Code **935**. Geographic Codes are described in 22 CFR 228.03 (https://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&SID=260c5b7cc4cf7639856f204d96e3515f&rgn=div5&view=text&node=22:1.0.2.22.25&idno=22) and the Internal Mandatory References to Chapter 310 of USAID's Automated Directives System (ADS 310) entitled "List of Developing Countries" (https://www.usaid.gov/ads/policy/300/310maa), "List of Advanced Developing Countries" (https://www.usaid.gov/ads/policy/300/310mab), and "List of Prohibited Source Countries" (https://www.usaid.gov/ads/policy/300/310mac**).**

"Restricted Commodities" are certain agricultural commodities , motor vehicles, pharmaceuticals, condoms and contraceptives, pesticides, used equipment, and fertilizer. Special rules apply to restricted commodities, and are described in ADS 312.3.3 (https://www.usaid.gov/sites/default/files/documents/1876/312.pdf).

Ocean and air transportation services will be subject to the requirements of the USAID standard provisions for U.S. NGOs and non-U.S. NGOs entitled "Ocean Shipment of Goods" and "Travel and International Air Transportation," respectively. Engineering and construction sevices are subject to 22 CFR 228.14 and 22 CFR 228.17, as well as USAID's policy entitled "USAID Implementation of Construction Activities" (https://www.usaid.gov/ads/policy/300/303maw).

B.7 Relevant Provisions

Standard provisions for US Nongovernmental Organizations or Non-US Governmental Organizations will be applicable to any final award. The following provision is applicable to this notice of funding opportunity:

Protecting Life in Global Health Assistance (Formerly known as the Mexico City Policy)

On January 23, 2017, a Presidential Memorandum was issued reinstating the 2001 Presidential Memorandum on the Mexico City Policy for USAID family planning assistance and directing the Secretary of State to implement a plan to extend the requirements of the Mexico City Policy to "global health assistance furnished by all Departments or Agencies." USAID began implementing the policy, now known as the Protecting Life in Global Health Assistance Policy, on May 15, 2017 for grants and cooperative agreements that provide global health assistance. The policy requires foreign NGOs to agree, as a condition of receiving global health assistance, that they will not perform or actively promote abortion as a method of family planning and will not provide financial support to any other foreign NGO that conducts such activities. To implement the Protecting Life in Global Health Assistance Policy, USAID issued a new standard provision on May 15, 2017. This provision must be included in all new USAID awards that include global health assistance (see also Section H, Other Information).

[END OF SECTION B]

SECTION C: ELIGIBILITY INFORMATION

C.1 Eligible Applicants

U.S. and non-U.S. non-profit Non-Governmental Organizations (NGOs), including private voluntary organizations (PVOs), for-profit NGOs which are willing to forego profit, and colleges and universities are eligible to submit applications. Faith-based and community organizations that fit the criteria above are also eligible to apply. Eligibility for this NOFO is not restricted (see also Section D.7 "Funding Restrictions").

C.2 Fee/Profit

Note, it is USAID policy that no fee/profit is payable under the prime award or under any subawards made thereunder. However, fee/profit is payable by the prime recipient or a sub-recipient to a contractor/vendor if the recipient or sub-recipient is procuring goods or services in furtherance of the Activity being supported by the award or sub-award. Please refer to the following for additional information:
https://www.usaid.gov/ads/policy/300/303sai.

C.3 New Implementing Partners

In support of the Agency's interest in fostering a larger assistance base and expanding the number and sustainability of development partners, USAID/Rwanda encourages applications from potential new implementing partners. However, resultant awards to these organizations may be significantly delayed if USAID must undertake necessary pre-award reviews of these organizations to determine their "risk assessment" (see Section E.3 below). These organizations should take this into account and plan their implementation dates and interventions accordingly. Non-U.S. Organization Pre-award Survey Guidelines and Support is available at the following link: http://www.usaid.gov/sites/default/files/documents/1868/303sam.pdf.

C.4 Cost Sharing or Matching

USAID has established a required cost share of ten percent (10%) of the total estimated USAID amount for this Activity. Applications that do not meet the minimum cost share requirement are not eligible for award consideration. Cost-share means that portion of Activity costs not borne by the U.S. Government. Cost-sharing includes cash and in-kind (this includes things such as volunteer time; valuation of donated supplies, equipment, and other property; and use of unrecovered indirect costs contributions), and is subject to 2 CFR 200.306 for U.S. organizations and the Standard Provision entitled "Cost Share" for non-U.S. organizations which, *inter alia*, requires that cost-sharing be verifiable from the Recipient's records. Cost-share is normally associated with contributions from the same prime and sub-recipient sources that also receive USAID funds under an award. Failure to meet a cost-sharing requirement can result in reducing the amount of USAID funding for the following funding period, require the recipient to refund the difference to USAID when this award expires or is terminated, or reduce the amount of cost share required under the award.

C.5. Other

C.5.1 Exclusivity

In order to maximize the number of competitive applications, exclusivity agreements between the prime applicant and proposed sub-awards are not required. Sub-awardees must be allowed to be listed on multiple applications by multiple applicants as they choose. Exclusivity agreements between the prime applicant and proposed key personnel are also not required.

C.5.2 Number of Applications

Applicants may submit only one application under this NOFO. Additional applications will not be reviewed. If correction of a submitted application is required prior to the application deadline, please utilize the Agency Point of Contact.

[END OF SECTION C]

SECTION D: APPLICATION AND SUBMISSION INFORMATION

D.1 GENERAL CONDITIONS AND INSTRUCTIONS

D.1.1 Agency Points of Contact

Peggy L. Manthe
Agreement Officer
U.S Agency for International Development
USAID/Rwanda, 2657 Avenue de la Gendarmerie
Kacyiru, Kigali
E-mail Address: pmanthe@usaid.gov

Ali M. Ali
Senior Acquisition & Assistance Specialist
U.S Agency for International Development
USAID/Rwanda, 2657 Avenue de la Gendarmerie
Kacyiru, Kigali
E-mail Address: alali@usaid.gov

D.1.2 Oral Presentations

The Apparently Successful Applicant may be requested to deliver an oral presentation that augments the technical application and addresses USAID questions and comments on the entire application. The proposed Chief of Party and one representative from the apparently successful applicant's Home Office who will be responsible for managing or supervising the implementation of RSDA are required to be in attendance. The oral presentation must be made through video teleconferencing (VTC) technology that facilitates the communication and interaction of the presenter and USAID/Rwanda and which has a combination of high-quality audio and video over Internet Protocol (IP) networks. Further information will be provided to the Apparently Successful Applicant once identified.

D.1.3 Questions and Answers

All questions related to this NOFO must be in writing and submitted to the Points of Contact listed in D.1 above by e-mail: pmanthe@usaid.gov with copy to alali@usaid.gov and received no later than the due date and time specified on the cover letter, as amended, of this NOFO. Following this date, questions received by the deadline (without attribution to the organization) and answers will be posted as an amendment to the NOFO if that information is necessary in submitting applications or if the lack of such information would be prejudicial to any other prospective applicant. Unless otherwise notified by an amendment to the NOFO, no questions will be accepted after the due date. Applicants must not submit questions to any other USAID staff except those identified in D.1 above.

D.1.4 General Content and Form of Application

All application files submitted must be compatible with Microsoft (MS) Office in a MS Windows environment and/or Adobe Acrobat (.pdf). It is preferable that the various parts of the technical application be consolidated into a single document before sending, if possible. If this is not possible, please provide instructions on how to collate the attachments. USAID will not be responsible for errors in compiling electronic applications if no instructions are provided or are

unclear.. Applicants may submit *.zip files format. The subject of each e-mail must read as follows: (a) 72069618RFA00002; "RSDA;" abbreviated organization name of applicant; technical or cost/business application, email X of X.

D.1.5 Preparation of Applications

Each Applicant must furnish the information required by this NOFO. Applications must be submitted in two separate parts: the Technical Application and the Cost/Business Application. This subsection addresses general content requirements applying to the whole application. Please see subsections D.6 and D.7, below, for information on the content specific to the Technical and Cost/Business application. The Technical Application must address technical aspects only while the Cost/Business Application must present the budget, budget narrative and address risk and other related issues. Applicants may chose to submit a cover letter with the technical and cost/business application which will serve only as a transmittal letter to the Agreement Officer. The cover letter will not be reviewed as part of the merit review criteria or count towards the page limit of the technical application.

D.1.5.1 Cover Page

Both the Technical and Cost/Business Application must include a cover page containing the following information:

i. Name of the organization(s) submitting the application;
ii. Identification and signature of the primary contact person (by name, title, organization, mailing address, telephone number and email address) and the identification of the alternate contact person (by name, title, organization, mailing address, telephone number and email address);
iii. Activity name
iv. Notice of Funding Opportunity number
v. Name of any proposed sub-recipients or partnerships (identify if any of the organizations are local organizations, per USAID's definition of 'local entity' under ADS 303.3.6.5[b][2]

D.1.5.2 Non-disclosure

Applicants who includes data that they do not want disclosed to the public for any purpose or used by the U.S. Government except for evaluation purpose, should mark the title page with the following legend:

> *"This application includes data that shall not be disclosed outside the U.S. Government and shall not be duplicated, used, or disclosed – in whole or in part – for any purpose other than to evaluate this application. If, however, a grant is awarded to this Applicant as a result of – or in connection with – the submission of this data, the U.S. Government shall have the right to duplicate, use, or disclose the data to the extent provided in the resulting grant. This restriction does not limit the U.S. Government's right to use information contained in this data if it is obtained from another source without restriction. The data subject to this restriction are contained in sheets {insert sheet numbers} and, mark each sheet of data it wished to restrict with the following legend:*

Additionally, the Applicant must mark each sheet of data it wishes to restrict with the following:

> *"Use or disclosure of data contained on this sheet is subject to the restriction on the title page of this application.*"

Any erasures or other changes to the application must be initiated by the person signing the application. Applications signed by an agent on behalf of the Applicant shall be accompanied by evidence of that agent's authority, unless that evidence has been previously furnished to the issuing office.

D.1.5.3 Formatting

Applications must comply with the following:

- USAID will not provide to the selection committee for review any pages in excess of the page limits noted in subsequent sections of this NOFO. Thus, please ensure that applications comply with the page limits.
- Written in English and in U.S. dollars
- Use standard 8 ½" x 11", single sided, single-spaced, 12 point Times New Roman font, 1" margins, left justification and headers and/or footers on each page including consecutive page numbers, date of submission, and Applicant's name.
- 10 point font can be used for graphs and charts. Tables however, must comply with the 12 point Times New Roman requirement.
- Submitted via Microsoft Word and PDF formats (searchable), except budget files which must be submitted in Microsoft Excel with all cells unlocked, no hidden formulas or sheets and not password protected.
- A PDF version of the Excel spreadsheet may be submitted in addition to the Excel version at the Applicant's discretion, however, the official cost/business application submission is the unlocked Excel version The technical application must be searchable and editable Word or PDF format as appropriate.
- The estimated start date identified in Section B of this NOFO must be used in the budget of the cost/business application as Year 1.

D1.6 General Application Submission Instructions

Applicants must review, understand and comply with all aspects of this NOFO. Failure to do so may be considered as being non-responsive and may be evaluated accordingly. Applicants should retain for their records one (1) copy of the application and all enclosures which accompany it.

D.1.6.1 Submission of Electronic Applications

Applications **must** be submitted by email to Peggy Manthe at pmanthe@usaid.gov with a copy to Ali M. Ali at alali@usaid.gov. The subject of each e-mail must read as follows: 72069618RFA00002; "RSDA"; abbreviated organization name of applicant; technical or cost/business application, email X of X. For example, an application sent by multiple emails should indicate in the subject line of the email whether the email relates to the Technical or Cost/Business application, and the sequence of multiple emails (if more than one is sent) and of attachments e.g., "No.1 of 4", etc.). Applicants are reminded that email is NOT instantaneous, in

some cases delays of several hours occur from transmission to receipt. Therefore, applicants are requested to send the application in sufficient time ahead of the deadline.

Applications consist of a technical and cost/business application which must be submitted as separate email attachments, each of which must be organized by the sections set forth below and must include the information described below.

After you have sent your application electronically, immediately check your email to confirm that the attachments intended to be sent were indeed sent. If you discover an error in your transmission, please send the material again and note in the subject line of the email and indicate in the file name if it is also submitted via grants.gov that it is a "corrected" submission. Do not send the same email more than once unless there has been a change, and if so, please note that it is a "corrected" email.

D.1.6.2 Closing Date and Time

Applications in response to this NOFO must be received no later than the closing date and time indicated on the cover letter unless the NOFO is amended to extend the deadline. All applications received by the submission deadline will be reviewed for responsiveness to the NOFO. It is the Applicant's responsibility to ensure that all necessary documentation is complete and received on time. Applicants must contact pmanthe@usaid.gov if experiencing technical difficulty with the submission of the application.

D.1.6.3 Modifications

Applicants may submit modifications to their applications at any time before the NOFO closing date and time. No modifications to the application will be accepted after the submission deadline.

D.1.6.4 Late or Incomplete Submissions

Any application received at the office designated in the cover letter of this NOFO after the exact date and time specified for receipt of applications will not be considered unless (a) there is acceptable evidence to establish that it was received at the USAID Mission and was under USAID's control prior to the time set for applications, and the Agreement Officer determines the late application would not cause an undue delay; or (b) it is the only application received. For this NOFO, the initial point of entry to the government infrastructure is the USAID mail server. Acceptable evidence to establish the time of receipt at the USAID Mission includes system generated documentation of delivery receipt date and time or confirmation from the receiving office. Applicants must retain proof of timely delivery. The AO will notify applicants in writing of late or incomplete applications.

D.1.6.5 Withdrawal of Applications

Applications may be withdrawn by written notice received by the AO at any time before award. Applications may be withdrawn in person by an applicant or an authorized representative, if the representative's identity is made known and the representative signs a receipt for the application before award. Withdrawals are effective upon receipt of notice by the AO.

D.2 Technical Application Instructions

The technical application should be specific, complete, and presented concisely. The application must demonstrate the Applicant's capabilities and expertise with respect to achieving the goals of

this Activity. The application should take into account the requirements of the Activity and merit review criteria found in this NOFO.

The technical application must be written in English and typed on standard 8-1/2" x 11" paper, single sided, single spaced text with each page numbered consecutively. The technical application must not exceed 25 pages. The technical application must be in MS Word compatible format and .pdf, and must use Times New Roman font in 12-point or larger size, no less than 1" margins on all sides, left justification and headers and/or footers on each page including date of submission and applicant's name. 10 point font can be used for graphs and charts. Tables however must comply with the 12 point Times New Roman requirement. Footnotes, graphs, charts and tables will be included in the 25 page limit. Scanned PDF documents may be used for information requiring signatures and copies of documents. general content requirements applying to the whole application

All technical applications should include the sections and content below, addressing the specifics of the Activity for which the application is submitted:

The sections for the technical application are as follows:

1. Cover Page (*not to exceed one (1) page; not included in the 25 page limit)*
2. Table of Contents *(not to exceed two (2) pages; not included in the 25 page limit)*
3. List of Acronyms (*optional; not included in the 25 page limit*)
4. Executive Summary *(not to exceed two (2) pages; not included in the 25 page limit*)
5. Technical Application *(not to exceed a total of **25** pages)*
   a. Technical Approach
   b. Key Personnel
   c. Management and Staffing Plan
6. Required Annexes *(will not count toward the technical application page limit)*
   Annex 1: Draft Implementation Plan *(not to exceed 4 (four) pages)*
   Annex 2: Draft Monitoring, Evaluation and Learning (MEL) Plan (*not to exceed 5 (five) pages)*
   Annex 3: Detailed Results Framework
   Annex 4: Resumes of proposed Key Personnel including up to 3 references each
   Annex 5: Key Personnel Letters of Commitment (Non-exclusive)
   Annex 6: Management and Staffing Plan including Organizational Chart
   Annex 7: Letters of Commitment from all proposed partners and sub-awardees (Non-exclusive)

1. **Cover Page**: The cover page of the technical application must include:
   - Activity Title
   - Date of Submission
   - Request for Application Reference No.
   - Name of the applicant applying for the award, name and contact information for the primary point of contact. State whether the contact person is the individual authorized to legally bind the applicant, if not, provide the name and title of that person;
   - If any partner organizations are included in the application, they must be listed separately, and indicated as subordinate to the prime applicant. A summary table

must be included that lists the prime applicant and all partner organizations (which could include sub-awardees as well as members of a formal joint venture or consortium) as well as the percentage of overall Activity interventions that each partner will contribute; and
- DUNS number for primary applicant.

2. Table of Contents: include major sections and page numbering to easily cross-reference and identify merit review criteria.

3. List of Acronyms (optional)

4. Executive Summary: shall provide a high-level, concise summary of key elements of the applicant's technical application including proposed program description, program methodology and expected results.

5. Technical Application: The technical application may not exceed twenty-five (25) pages, excluding cover page, executive summary, acronym page (if any), table of contents, and annexes. Unless otherwise indicated, a page in the technical application which contains a table, chart, graph, etc. will count as a page within the page limit. Annexes are limited to a total of fifty (50) pages. Information which exceeds the page limitations will not be furnished to the USAID selection committee.

Applicants are expected to use their relevant expertise and capacities to address the development challenges described in the Program Description (See Section A.2.3 and Annex B) of this NOFO. Applicants must describe the proposed interventions and how they will effectively address existing development challenges.

The technical application will be the critical item of consideration in selection of an applicant for an award. The information provided in the technical application must be specific, complete, and presented concisely. The technical application must demonstrate how it contributes to achieving RSDA goals and objectives, including specific results anticipated, and must demonstrate the applicant's capabilities and expertise with respect to successfully implementing, managing, and monitoring the proposed Activity.

The merit review criteria set forth in Section E (Application Review Information) of the NOFO indicates the relative order of importance of the evaluation criteria, so that applicants will know which areas require emphasis in the preparation of the technical application. Applicants are advised that lack of completeness or superficiality of the application may constitute grounds for excluding it from consideration.

a. Technical Approach (Merit Review Criterion 1)

The Applicant must submit a narrative that demonstrates an in-depth understanding of the development challenge and local context (See Section A.2.3 and Annex B) and describe sound technical and programmatic approaches that meet the objectives of the Activity as outlined in the Program Description and the applicant's expected results. The Applicant must describe clear, ambitious yet feasible, innovative, evidence-based approaches that appropriately address each IR

and reflect the funding breakdown by funding type, and must fully embody the guiding principles outlined in the Program Description (see Section A.8.7).

The applicant(s) must submit the following Annexes as part of its technical approach:

Annex 1: Draft Implementation Plan

As part of the technical application, applicants must present an initial Implementation Plan covering the first fourteen (14) months of the Agreement. Applicants must also describe what steps and corresponding timeline will be taken to mobilize Activity personnel, award key sub-awards and procure equipment necessary to open offices in a timely manner. The first fourteen months' Implementation Plan must describe the main tasks, actions and timeline required to achieve set targets/results. The Implementation Plan must be presented in a format that clearly links interventions to specific results, and associated resources.

Annex 2: Draft Monitoring, Evaluation and Learning (MEL) Plan

The draft MEL plan (not to exceed five pages) must include a preliminary monitoring, evaluation and learning (MEL) plan that describes the overall anticipated life of the Activity results, including a preliminary list of indicators, benchmarks and targets as well as the potential sources of data/information (i.e. HMIS, DHS, etc.) that the applicant will utilize to monitor implementation of the Activity and progress towards Activity targets and results.

The draft MEL plan should describe how the information collected, analyzed, and reported will track progress in achieving results; and help to improve Activity implementation and effectiveness. The draft MEL plan must provide preliminary five-year performance indicator baselines and targets which will be reviewed and possibly revised during the implementation plan process. The draft MEL plan must also include indicators and targets for measuring quality improvement processes and outcomes, and gender sensitive indicators and targets. The draft MEL plan, including data collection approach and calculation methods, should be included in a table format with notes. The notes should describe how any missing baseline data would be collected. The draft MEL plan will include data required by USAID/Rwanda's Performance Monitoring Plan that is relevant to the Activity (see Annex E and Annex F for the Performance Monitoring Plan Indicators and Program Performance Report Indicators respectively), as well as other custom indicators proposed by the Applicant.

The MEL plan should summarize the data management plan; methods and frequency of data collection, data quality assurance, storage and security procedures as well as analysis and use of data generated by the M&E system.

The Learning section of the draft MEL plan should illustrate how the M&E system will support learning, fill knowledge gaps and support decision-making.

Annex 3: Detailed Results Framework

The Application must include a draft detailed results framework that clearly displays how the Activity will achieve the objectives and results presented in the Program Description (Section A.7). The results framework (see Section A.7 of the NOFO) for the Activity included in the Program Description provides the foundation for the detailed results framework.

b. Key Personnel (Merit Review Criterion 2)

Two key personnel positions have been identified in the Federal Award Information (see Section B.3); the Chief of Party and the Chief Finance and Administrative Officer. Applicants have the option to propose additional key personnel positions within USAID's policy limits that are deemed essential to the realization of the Activity results. The applicant should describe specific position titles, roles and responsibilities, and qualifications that make them suitable for the positions and also how the proposed qualifications are conducive to achieving the expected results of the Activity.

The Applicant(s) must submit the following Annexes related to its key personnel:

Annex 4: Resumes of proposed key personnel (each resume is not to exceed three (3) pages) with relevant professional qualifications and experience appropriate to manage and achieve the expected results, including three professional references for each individual (name of reference, position/title, professional relationship, email address and phone number). USAID may seek references from the provided sources as well as additional references as needed.

Annex 5: Key Personnel Letters of Commitment (not to exceed one page for each proposed key personnel position) The letter of commitment of each candidate will indicate an (i) availability to serve in the stated position; (ii) intention to serve for the full period of performance of the award; and (iii) agreement to the compensation levels which correspond to the levels set forth in the cost/business application.

c. Management and Staffing Plan (Merit Review Criterion 3)

The management and staffing plan should relate directly to the approaches, strategies, and interventions proposed for achieving the results, and include anticipated short-term technical assistance (STTA) needs.

Information in this section should include the following:

- Brief description of organizational strength as represented by past experience with Activities of similar scope and complexity.
- Sub-awardee or contractor capabilities and expertise.

The applicant(s) must submit the following Annexes related to the management and staffing plan:

Annex 6: A **detailed management and staffing plan** for the Activity including an organizational chart. The Application must include an appropriate, well-justified and complete staffing plan including an organizational chart, which clearly shows proposed lines of

responsibility, authority and communication procedures to ensure productivity as well as cost and quality control, proposed use of local staff with appropriate expertise, and promotes gender balance. The applicants should provide information on proposed management structure as well as details on home office backstopping and its purpose, if applicable. This includes detailed identification of the roles and responsibilities of each partner/entity, their relationships between each other, lines of authority and accountability, and patterns for utilizing and sharing resources. Of particular importance is the need to clarify the types of administrative and management adjustments which will be made to ensure that incompatible bureaucratic and scheduling requirements of participating institutions will not limit the Recipient's (or any sub-recipients'/contractors') ability to respond to Activity needs on a timely basis.

Annex 7: **Letters of commitment from all proposed partners/team members** for implementation of the cooperative agreement ([sub]contractors or sub-recipients). The letters should be non-exclusive in nature.

D.3 Cost/Business Application Instructions

The Cost/Business Application must be submitted separately from the Technical Application. While no page limit exists, Applicants are encouraged to be as concise as possible while still providing the necessary level of detail. The Cost/Business Application must illustrate the entire period of performance, using the budget categories in D.7.3 below.

The Cost/Business Application must contain the following sections (which are further elaborated below this listing with a description for each requirement):

1. Cover Page
2. SF 424 Forms
3. Budget and Budget Narrative
4. Prior Approvals in accordance with 2 CFR 200.407
5. Duns and Bradstreet and SAM Registration
6. Funding Restrictions
7. History of Performance
8. Certifications, Assurances and Other Statements of the Recipient
9. Certificate of Compliance, if applicable

Prior to award, Applicants may be required to submit additional documentation deemed necessary for the AO to assess the Applicant’s risk in accordance with 2 CFR 200.205. Applicants should not submit any additional information with their initial application.

D.3.1 Cover Page (See Section D.2 above)

D.3.2 SF 424 Form(s)

The Applicant must sign and submit the cost/business application using the SF-424 series. Standard Forms can be accessed electronically at www.grants.gov or using the following links:

Instructions for SF-424	http://www.grants.gov/web/grants/form-instructions/sf-424-instructions.html
Application for Federal Assistance (SF-424)	https://www.grants.gov/web/grants/forms/sf-424-family.html
Instructions for SF-424A	http://www.grants.gov/web/grants/form-instructions/sf-424a-instructions.html
Budget Information (SF-424A)	https://www.grants.gov/web/grants/forms/sf-424-family.html
Instructions for SF-424B	http://www.grants.gov/web/grants/form-instructions/sf-424b-instructions.html
Assurances (SF-424B)	https://www.grants.gov/web/grants/forms/sf-424-family.html

Failure to accurately complete these forms may result in the rejection of the application.

D.3.3 Detailed Budget and Budget Narrative

The SF 424A should be supplemented by additional cost breakdowns/details which provide a summary line item budget, and complete cost breakdowns in sufficient detail to permit cost analysis. The detailed budget must be submitted as one unprotected Excel file (MS Office 2000 or later versions) with visible formulas and references and must be broken out by fiscal year, including itemization of the federal and non-federal (cost share) amount. Files must not contain any hidden or otherwise inaccessible cells. Budgets with hidden cells lengthen the cost analysis time required to make award, and may result in a rejection of the cost/business application. The detailed budget must set forth the basis for all proposed costs including those which are proposed to be funded by USAID under the award(s) resulting from this NOFO and those to be funded by non-USG cost-sharing (matching) contributions (cash or in-kind) to be provided by the applicant, the applicant's teaming partners, or third parties. The budget shall contain a separate column for each source of funds/contributions. It shall include supporting schedules and budget narrative explanations as may be necessary to adequately support and/or explain proposed costs. It is recognized that it may be difficult for the applicant to project actual needs and costs. Accordingly, estimates, based on assumptions, are acceptable. However, the applicant must indicate the basis of the estimate, and/or the assumptions on which the estimate is based. This information is required in order to permit USAID to determine whether estimated costs are fair and reasonable, necessary, allowable in accordance with the cost principles found in 2 CFR 200 Subpart E, allocable, and realistic, which, in turn, are a prerequisite for making an award. The applicant must ensure the budgeted costs address any additional requirements identified in Section F, such as Branding and Marking.

The Budget must include the following worksheets or tabs, and contents, at a minimum:

i. Summary Budget, inclusive of all Activity costs (federal and non-federal), broken out by major budget category and by fiscal year for interventions to be implemented by the Recipient and any potential sub-recipients for the entire period of the program. See Annex G for Summary Budget Template

ii. Detailed Budget, including a breakdown by fiscal year, sufficient to allow the Agency to determine that the costs represent a realistic and efficient use of funding to implement the applicant's program and are allowable in accordance with the cost principles found in 2 CFR 200 Subpart E.
iii. Detailed Budgets for each sub-recipient, for all federal funding and cost share, broken out by budget category and by year, for the entire implementation period of the project.

The detailed budget breakdown must provide the information described below. The detailed budget breakdown shall follow the budget format, including the major budget line items, set forth below, and shall be broken-down by fiscal year. The application shall include a subtotal for each budget line item. Each page shall indicate the applicable year and the applicant's name clearly marked at the top of each page

1) **Salary and Allowances (Personnel)**– Direct salaries and wages must be proposed in accordance with the applicant's personnel policies and must include position title, salary rate, level of effort, and salary escalation factors. Allowances, when proposed, should be broken down by specific type and by person. Allowances should be in accordance with the applicant's policies and the applicable regulations and policies. Explain assumptions in the Budget Narrative. If the organization has standing policies across all projects for annual salary escalations that exceed current inflation rates, those policies and the effective date of those policies must be provided with the application. The Applicant must also confirm that the policy applies to all staff across all projects.

2) **Fringe Benefits** – (if applicable) If the Applicant has a fringe benefit rate approved by an agency of the U.S. Government, the Applicant must use such rate and provide evidence of its approval. If an Applicant does not have a fringe benefit rate approved, the Applicant must propose a rate and explain how the Applicant determined the rate. In this case, the Budget Narrative must include a detailed breakdown comprised of all items of fringe benefits (e.g., superannuation, gratuity, etc.) and the costs of each, expressed in U.S. dollars and as a percentage of salaries.

3) **Travel and Transportation** – Provide details to explain the purpose of the trips, the number of trips, the origin and destination, the number of individuals traveling, and the duration of the trips. Per Diem and associated travel costs must be based on the applicant's normal travel policies. When appropriate please provide supporting documentation as an attachment, such as company travel policy, and explain assumptions in the Budget Narrative.

4) **Overseas Allowances -** Overseas allowances (excluding per diem and shipping/storage allowances, which shall be budgeted under "Travel, Transportation, and Per Diem," above) shall be in accordance with the applicant's established policies and practices which are consistently applied. The Standardized Regulations (Government Civilians, Foreign Areas) shall be used as a test of reasonableness for overseas allowances if the applicant does not have established policies and practices.

5) **Nonexpendable Equipment & Supplies (broken out separately)** – must include information on estimated types of equipment, models, supplies and the cost per unit and quantity. The Budget Narrative must include the purpose of the equipment and supplies and the basis for the estimates. The Budget Narrative must support the necessity of any rental costs and reasonableness in light of such factors as: rental costs of comparable property, if any; market conditions in the area; alternatives available; and the type, life expectancy, condition, and value of the property leased.

6) **Subawards and Contracts (Contractual)** – The applicant's budget shall include a lump-sum for each sub-award and contract, and identify the purpose of the sub-award/contract and the sub-award recipient or contractor, if known. The lump-sum(s) must be consistent with the detailed sub-award/contractor budgets described in the NOTE below. The cost application must indicate whether the instrument will be a contract or sub-award, as the terms are defined in 2 CFR 200.122 and 2 CFR 200.92 (for U.S. NGOs) or the USAID standard provisions for non-U.S. NGOs "Procurement Policies" and "Sub-Awards." Contracts awarded by U.S. NGOs are subject to 2 CFR 200.317-326 and the USAID standard provision entitled "USAID Eligibility Rules for Goods and Services." Contracts awarded by non-U.S. NGOs are subject to the USAID standard provisions for non-U.S. NGOs entitled "Procurement Policies" and "USAID Eligibility Rules for Procurement of Commodities and Services."

   NOTE: Following the applicant's detailed budget breakdown, detailed budget breakdowns for each sub-award and contract shall be presented. Sub-award/contract budgets shall not be intermingled. The first page shall be a summary budget, following the same budget format and line items as are set forth above, for the full term of the sub-award/contract. Following the summary budget, a detailed budget breakdown for each year shall be presented in accordance with the instructions provided above for the applicant. Each page shall have the year and the sub-recipient's/contractor's name (if known) clearly marked, and be signed and dated by an authorized representative of the sub-recipient/contractor (if the sub-recipient/contractor is known). A tab or colored divider page shall separate each sub-recipient's/contractor's detailed budget breakdown.

7) **Consultants** - The budget must specify the position, title(s), name(s) of proposed individual(s), to fill the position(s), if known, number of units (days, months, FTEs) for each position, proposed unit rate(s) for each position, and the total consultant costs. The level of effort and position titles must be consistent with the technical application.

8) **Construction** – Not applicable

9) **Other Direct Costs** – This may include other costs not elsewhere specified, such as report preparation costs, passports and visas fees, medical exams and vaccinations, as well as any other miscellaneous costs, including those associated with branding and marking USAID programs, such as magnets, plaques, stickers, banners, press events, materials, and so forth, which directly benefit the Activity proposed by the applicant. The applicant should indicate the subject, venue and duration of any proposed conferences

and seminars, and their relationship to the objectives of the Activity, along with estimates of costs. Otherwise, the narrative should be minimal.

10) **Indirect Costs** – Applicants must indicate whether they are proposing indirect costs or will charge all costs directly. The application must identify which approach they are requesting and provide the applicable supporting information:

Method	**Eligibility**	**Initial application requirements**
Direct Charge Only	Any applicant	See above on direct costs
Existing Negotiated Indirect Cost Rate Agreement (NICRA)	Any applicant with an approved NICRA	Submit your approved NICRA and the associated disclosed practices.
De minimis rate of 10% of modified total direct costs (MTDC)	Any applicant that has never received a NICRA; the applicant may choose to charge a de minimis rate of 10% of modified total direct costs (see 2 CFR 200.414(f)). If the prospective applicant chooses the de minimis rate, the 10% indirect cost rate will be incorporated in the award budget and the recipient must follow the requirements in 2 CFR 200.414(f).	Costs must be consistently charged as either indirect or direct costs, but may not be double charged or inconsistently charged as both. If chosen, this methodology once elected must be used consistently for all Federal awards until such time as a non-Federal entity chooses to negotiate a rate, which the non-Federal entity may apply to do at any time. The applicant must describe which cost elements it charges indirectly vs. directly.

Indirect Costs Charged As A Fixed Amount	Certain U.S. educational institutions & non U.S. non-profit organizations may request, but approval is at the discretion of the AO	Provide the proposed fixed amount and a worksheet that includes the following (For Education institutions, see 2 CFR 200 App III): ● Total costs incurred by the organization for previous fiscal year and estimates for the current year ● Indirect costs (common costs that benefit the day-to-day operations of the organization, including categories such as salaries and expenses of executive officers, personnel administration, and accounting, or that benefit and are identifiable to more than one program or activity, such as depreciation, rental costs, operations and maintenance of facilities, and telephone expenses) for the previous fiscal year and estimates for the current year ● Proposed method for prorating the indirect costs equitably and consistently across all programs and activities of using a base that measures the benefits of that particular cost to each program or activity to which the cost applies.
No current NICRA, but applicant has an indirect rate other than the de minimis	Any applicant may request but approval is at the discretion of the Agency	A NICRA may be negotiated after award at the discretion of the Agency. Provisional rates may be set forth in the award subject to audit and finalization. The applicant must identify the indirect cost rate and base it is proposing. See USAID's Indirect Cost Rate Guide for Non Profit Organizations for further guidance.

If the applicant does not have an approved NICRA and does not elect to utilize the 10% de minimis rate, the AO will provide further instructions and request additional supporting information, including financial statements and audits, should the application still be under consideration after the merit review. USAID is under no obligation to approve the applicant's requested method.

NOTE: If the Applicant has established a consortium or another legal relationship among its partners, the Cost/Business application must include a copy of the legal relationship between the parties. The agreement should include a full discussion of the relationship between the Applicant and Sub-Applicant(s) including identification of the Applicant with whom USAID will work with for purposes of Agreement administration, identity of the Applicant which will have accounting responsibility, how Agreement effort will be allocated and the express agreement of the principals thereto to be held jointly and severely liable for the acts or omissions of the other.

11) Cost Sharing: The Applicants should estimate the amount of cost-sharing resources to be mobilized over the life of the agreement and specify the sources of such resources, and the basis of calculation in the budget narrative. Applicants should also provide a breakdown of the cost

share (financial and in-kind contributions) of all organizations involved in implementing the resulting Cooperative Agreement.

D.3.4 Prior Approvals in accordance with 2 CFR 200.407 and Waivers

Inclusion of an item of cost in the detailed application budget does not satisfy any requirements for prior approval by the Agency. If the applicant would like the award to reflect approval of any cost elements for which prior written approval is specifically required for allowability, the applicant must specify and justify that cost. See 2 CFR 200.407 for information regarding which cost elements require prior written approval.

In addition, if the applicant foresees the need for waivers from, or approvals required under, USAID's source and supplier nationality requirements the application should describe which goods and services need approval/waivers, and provide an explanation and justification for the same.

D.3.5 Dun and Bradstreet and SAM Requirements

USAID may not award to an applicant unless the applicant has complied with all applicable unique entity identifier (DUNS number) and System for Award Management (SAM) requirements. Each applicant (unless the applicant is an individual or Federal awarding agency that is excepted from those requirements under 2 CFR 25.110(b) or (c), or has an exception approved by the Federal awarding agency under 2 CFR 25.110(d)) is required to:

1. Provide a valid DUNS number for the Applicant before submitting an application and all proposed sub-recipients;
2. Be registered in SAM before submitting its application. SAM is streamlining processes, eliminating the need to enter the same data multiple times, and consolidating hosting to make the process of doing business with the government more efficient (http://www.sam.gov).
3. Continue to maintain an active SAM registration with current information at all times during which it has an active Federal award or an application or plan under consideration by a Federal awarding agency.

The registration process may take many weeks to complete. Therefore, Applicants are encouraged to register early to be eligible to apply for this Funding Opportunity.

DUNS number: http://fedgov.dnb.com/webform
SAM registration: http://www.sam.gov

D.3.6 History of Performance

Prior to award, the apparently successful applicant will be requested to provide information regarding its recent history of performance for all its cost-reimbursement contracts, grants, or cooperative agreements involving similar or related programs during the past three years, as follows:

- Name of the Awarding Organization;

- Award Number;
- Activity Title;
- A brief description of the activity;
- Period of Performance;
- Award Amount;
- Copies of audited financial statements for the last three years, which a Certified Public Accountant or other auditor satisfactory to USAID has performed;
- Projected budget, cash flow, and organization charts; and
- Copies of applicable policies and procedures (*e.g.*, accounting, purchasing, property management, personnel, travel) and
- Name of at least two (2) updated professional contacts who most directly observed the work at the organization for which the service was performed with complete current contact information including telephone number, and e-mail address for each proposed individual.

If the Applicant encountered problems on any of the referenced Awards, it may provide a short explanation and the corrective action taken. The applicant should not provide general information on its performance. USAID reserves the right to obtain from any sources relevant information concerning an Applicant's history of performance and may consider such information in its review of the Applicant's risk. The Agency may request additional information and conduct a pre-award survey if it determines that it is necessary to inform the risk assessment.

D.3.7 Funding Restrictions

D.3.7.1 Profit
Profit is not allowable for recipients or subrecipients under this award. See 2 CFR 200.330 for assistance in determining whether a sub-tier entity is a subrecipient or contractor.

D.3.7.2 Construction
Construction is not authorized under this award.

D.3.7.3 Pre-award costs
USAID will not reimburse any applicant for pre-award costs unless specifically authorized by the Agreement Officer, who may, at his/her sole discretion, authorize the selected applicant(s), at its own risk, to begin program implementation and the incurrence of costs prior to a signed cooperative agreement as of a specified date, with no commitment to reimburse costs in the event that the cooperative agreement was not subsequently

D.3.7.4 Geographic Code
Except as may be specifically approved in advance by the Agreement Officer, all commodities and services that will be reimbursed by USAID under this award must be from the authorized geographic code specified in Section B.6 of this NOFO and must meet the source and nationality requirements set forth in 22 CFR 228.

D.3.8 Required Certifications and Assurances and Other Statements of the Recipient and Solicitation Standard Provisions

The applicant must complete the following documents and submit a signed copy with their application:

Annex 8: "Certifications, Assurances, and Other Statements of the Recipient and Solicitation Standard Provisions" document found at:
http://www.usaid.gov/sites/default/files/documents/1868/303mav.pdf

which includes:

1. Assurance of Compliance with Laws and Regulations Governing Nondiscrimination in Federally Assisted Programs (This assurance applies to Non-U.S. organizations, if any part of the program will be undertaken in the U.S.);
2. Certification Regarding Lobbying (22 CFR 227);
3. Prohibition on Assistance to Drug Traffickers for Covered Countries and Individuals (ADS 206, Prohibition of Assistance to Drug Traffickers);
4. Certification Regarding Terrorist Financing;
5. Certification Regarding Trafficking in Persons; and
6. Certification of Recipient

Other certifications and statements found in ADS 303 mav, Certifications, Assurances, and Other Statements of the Recipient and Solicitation Standard Provisions:

1. A signed copy of Key Individual Certification Narcotics Offenses and Drug Trafficking, (ADS 206.3.10) when applicable;
2. A signed copy of Participant Certification Narcotics Offenses and Drug Trafficking (ADS 206.3.10) when applicable;
3. A completed copy of Representation by Organization Regarding a Delinquent Tax Liability or a Felony Criminal Conviction;
4. Other Statements of Recipients.

Assurances for Non-Construction Programs (SF-424B)

Annex 10: Self-Certification of Compliance: For U.S. NGOs, if your organization has self-certified its personnel (including salaries), travel and procurement policies, please submit a copy of your "Recipient Certification of Compliance" which was submitted to USAID/Washington's Office of Acquisition and Assistance, Cost and Audit Support, Overhead, Special Cost and Close-out (M/OAA/CAS/OCC).

[END OF SECTION D]

SECTION E: APPLICATION REVIEW INFORMATION

E.1 Merit Review Criteria

The merit review criteria prescribed herein are tailored to the requirements of this particular NOFO. Applicants should note that these criteria serve to: (a) identify the significant matters which the Applicants should address in their applications, and (b) set the standard against which all applications will be evaluated.

Technical and other factors will be evaluated relative to each other, as described herein and prescribed by the Technical Application Format. The Technical Application will be evaluated by a Selection Committee (SC) using the merit review criteria described in this section

E.2 Review and Selection Process

E.2.1. Technical Merit Review

USAID will conduct a merit review of all applications received that complies with the instructions in this NOFO. Gender sensitivity and sustainability will be cross-cutting themes of the merit review criteria. Applications will be reviewed and evaluated in accordance with the following criteria shown in descending order of importance:

Criterion 1: Technical Approach:

The extent to which the proposed technical approach demonstrates a clear understanding of the development challenges, including local context, and includes sound programmatic approaches that respond to Activity Objectives. This includes the following:

- A detailed description of how the Applicant will address the goal, strategic objective and expected results specified in the Program Description (PD).
- The overall quality of the technical and programmatic approaches that reflect evidence-based programming.
- The extent to which the Application embodies the guiding principles outlined in the program description (see section 5 of the PD) and reflects the funding breakdown by funding type as outlined in the NOFO.
- The extent to which the implementation plan, MEL plan and detailed results framework address the Activity goal, objective and results.

Criterion 2: Key Personnel:

The extent to which proposed Key Personnel:

- Demonstrate subject matter expertise and experience in relevant technical areas and managerial and interpersonal skills.
- Demonstrate the ability and experience to successfully implement the proposed approach, strategies and interventions of the Activity towards achieving the results.

Criterion 3: Management and Staffing Plan:

The management and staffing plan will be reviewed as follows:

- The extent to which the management and staffing plan aligns with the Activity goal, objective and results.
- The extent to which the management and staffing plan clarifies organizational, supervisory and reporting relationships between the Recipient's staff and any sub-recipients/contractors, procedures to ensure productivity as well as cost and quality control, proposes use of local staff with appropriate expertise, and promotes gender balance.
- The extent to which Short-Term Technical Assistance (STTA) and home office backstopping needs are strategic and cost effective and clearly describe how STTA home office backstopping will contribute to the Activity goals, objectives and results while building local capacity.
- The extent to which management adjustments which will ensure that incompatible bureaucratic and scheduling requirements of participating institutions will not limit the Recipient's (or any sub-recipients'/contractors') ability to respond to Activity needs on a timely basis.

E.2.2 Budget Review

USAID will evaluate the cost/business application of the applicant under consideration for an award as a result of the merit review to determine the extent to which the costs represent a realistic and efficient use of funding to implement the applicant's Activity and are allowable in accordance with the cost principles found in 2 CFR 200 Subpart E.

E.3 Pre-Award Risk Assessment: In accordance with ADS 303.3.9 and 2 CFR 200.205

The AO must evaluate the risks posed by applicants before making an award. This includes an examination and analysis of whether the applicant has the necessary experience, organizational capacity, accounting/financial management, monitoring and evaluation processes operational and internal control systems, policies and procedures, financial resources, and other management and technical competence and skills – or has the ability to obtain them – in order to conduct the proposed Activity and achieve the objectives of the Activity, and to comply with the USG standards, requirements, laws, and regulations, as set forth in the terms and conditions of the award. This will include a review of:

- The conformity of the application to USAID Activity objectives and requirements (see Section A of this NOFO);
- The applicant's financial stability and status;
- The applicant's history of performance on and management of similar USAID, USG, or other Activities, including compliance with the terms and conditions of the funding agreement and timeliness of compliance with applicable reporting requirements;
- The applicant's record of business integrity;
- The quality of the applicant's management systems (accounting, recordkeeping, and overall financial management systems; system of internal controls, including segregation of duties, handling of cash, contracting procedures, and personnel and travel policies; procurement system; property management system; system for the administration and monitoring of sub-awards)

- The applicant's ability to meet the USG and USAID management standards and award terms and conditions (as set forth in 2 CFR 200, 2 CFR 700, and the USAID standard provisions for U.S. NGOs; and in the USAID standard provisions for non-U.S. NGOs, as applicable);
- The applicant's eligibility (see Section C. of this NOFO);
- The applicant's professional, management, and technical experience and competence.

To this end, USAID will review information available through USG or other repositories of eligibility, qualification, or financial integrity information, as appropriate. This includes, but is not limited to:

- The USG'S System for Award Management (SAM) (http://www.sam.gov);
- The non-public segment of the USG's Federal Awardee Performance and Integrity Information System (FAPIIS), which is accessible through SAM;
- The Federal Audit Clearinghouse (https://harvester.census.gov/facweb/) for Single Audit information per 2 CFR 200 Subpart F (U.S. NGOs only);
- The List of Specially Designated Nationals (SDN) and Blocked Persons maintained by the U.S. Department of the Treasury's Office of Foreign Assets Control (https://www.treasury.gov/resource-center/sanctions/Pages/default.aspx);
- The United Nations ISIL (Da'esh) & Al-Qaida Sanctions List (https://www.un.org/sc/suborg/en/sanctions/1267/aq_sanctions_list); and
- The USG's Contractor Performance Assessment Reporting System (CPARS) and the Past Performance Information Retrieval System (PPIRS) for acquisition awards (contracts, task orders, purchase orders, etc.) if there is information available on the applicant in these systems, taking into account the differences between performance under acquisition and performance under federal financial assistance awards (grants and cooperative agreements) such as is contemplated under this NOFO.

In addition, the AO will also review other information as part of the pre-award risk assessment. This includes, but is not limited to:

- The statutory and regulatory Certifications, Assurances, and other Statements of Applicant/Recipient (see Section D.3.8 of this NOFO);
- Recipient-Contracted Audits per the USAID standard provision for non-U.S. NGOs entitled (Accounting, Audit, and Records" (non-U.S. NGOs only);
- The application;
- Past performance and other references;
- Pre-award survey (if conducted); and
- For organizations new to USAID and organizations with outstanding audit findings, USAID may request the following information (which does not need to be submitted with the initial application, but may be requested subsequently from the apparently successful applicant):
  - ➢ Copies of audited financial statements for the last three years, which a Certified Public Accountant or other auditor satisfactory to USAID has performed;
  - ➢ Projected budget, cash flow, and organization charts; and

- ➢ Copies of applicable policies and procedures (*e.g.*, accounting, purchasing, property management, personnel, travel).

Depending on the result of the risk assessment, the AO will determine whether to execute the award, not to execute the award, or make an award with "specific conditions" (*i.e.*, additional non-standard award requirements designed to minimize the risk presented to USAID, as described in 2 CFR 200.207 and ADS 303.3.9.2), but only where it appears likely that the applicant can correct the deficiency in a reasonable period.

The applicant, at its option, may review information in the designated integrity and performance systems (FAPIIS) and comment on any information about itself that a USG awarding agency previously entered and is currently in the designated integrity and performance system. USAID will consider any comments by the applicant, in addition to the other information in FAPIIS, in making a judgment about the applicant's integrity, business ethics, and record of performance under USG awards when completing the pre-award risk assessment.

E.4 Review of Proposed Award Budget

The budget of the apparently successful applicant will be reviewed to ensure that costs, including cost sharing, are in compliance with OMB's and USAID's policies. The recipient must justify in advance the proposed costs for each element of the Activity. When reviewing costs, the cost breakdown will be reviewed; and specific elements of costs will be evaluated and analyzed for reasonableness and allocability of costs in the budget, and the allowability of the costs under the applicable cost principles.

E.5 Cost Sharing

USAID has established a required cost share of ten (10) percent of the of the total USAID funded amount. Leveraged non-USAID resources from private firms and institutions (such as equipment, training, level of effort and any in-kind contributions) may be considered part of cost share. Cost sharing may be also demonstrated either through direct funding, beneficiary contributions, in-kind assistance, or a combination thereof. USAID shall make the final determination and assess whether or not the Applicants cost share contributions (e.g. categories or items) meet the standards set in 2 CFR 200. Applicants that offer additional cost-sharing above the required percentage will be treated the same as those that do not.

[END OF SECTION E]

SECTION F: FEDERAL AWARD ADMINISTRATION INFORMATION

F.1 Federal Award Notices

Award of the agreement contemplated by this NOFO cannot be made until funds have been appropriated, allocated and committed through internal USAID procedures. While USAID anticipates that these procedures will be successfully completed, potential applicants are hereby notified of these requirements and conditions for the award. The Agreement Officer is the only individual who may legally commit the Government to the expenditure of public funds. No costs chargeable to the proposed Agreement may be incurred before receipt of either a fully executed Agreement or a specific, written authorization from the Agreement Officer.

Award Issuance: Below is the procedure for the award issuance process:

1. Although an earlier notification may be provided to the applicant regarding their recommended selection for award, only a Cooperative Agreement signed by the USAID Agreement officer will constitute the USAID commitment of the selection of the applicant.
2. USAID will provide the cooperative agreement to the successful applicant's designated point of contact electronically. The signed cooperative agreement will authorize the selected applicant to begin implementation of the activities described in their technical application or revised technical application/addenda, and will obligate funds for payment to the recipient of the cooperative agreement for costs incurred in such implementation. The signed award will be accompanied by a USAID Agreement Officer's Representative (AOR) and Alternate AOR Designation letter.
3. The unsuccessful applicants designated point of contact will be notified electronically of their non-selection once USAID decides which applicant the Agency will consider for award. Within 10 working days after an applicant receives notice that USAID will not fund its application, the unsuccessful applicant may send a written request for additional information to the Agreement Officer. Additional information may be provided at the discretion of the Agreement Officer following the procedures included in ADS 303.3.7.2.

F.2 Administrative & National Policy Requirements

The resulting award from this NOFO will be administered in accordance with the following policies and regulations.

For US organizations: ADS 303, 2 CFR 700, 2 CFR 200, and
https://www.usaid.gov/sites/default/files/documents/1868/303maa.pdf

For Non US organizations:
https://www.usaid.gov/sites/default/files/documents/1868/303mab.pdf

F.3 Standard Provisions:

The applicable Standard Provisions will be attached to the final award document. However, the following Standard Provisions indicated below in full text should be specifically noted by the prospective applicants.

I. PROHIBITION ON PROVIDING FEDERAL ASSISTANCE TO ENTITIES THAT REQUIRE CERTAIN INTERNAL CONFIDENTIALITY AGREEMENTS – REPRESENTATION (MAY 2017)

(a) Definitions.

"Contract" has the meaning given in 2 CFR Part 200.

"Contractor" means an entity that receives a contract as defined in 2 CFR Part 200.

"Internal confidentiality agreement or statement" means a confidentiality agreement or any other written statement that the recipient requires any of its employees or subrecipients to sign regarding nondisclosure of recipient information, except that it does not include confidentiality agreements arising out of civil litigation or confidentiality agreements that recipient employees or subrecipients sign at the behest of a Federal agency.

"Subaward" has the meaning given in 2 CFR Part 200. "Subrecipient" has the meaning given in 2 CFR Part 200.

(b) In accordance with section 743 of Division E, Title VII, of the Consolidated and Further Continuing Appropriations Act, 2015 (Pub. L. 113-235) and its successor provisions in subsequent appropriations acts (and as extended in continuing resolutions), Government agencies are not permitted to use funds appropriated (or otherwise made available) for federal assistance to a non- Federal entity that requires its employees, subrecipients, or contractors seeking to report waste, fraud, or abuse to sign internal confidentiality agreements or statements that prohibit or otherwise restrict its employees, subrecipients, or contractors from lawfully reporting such waste, fraud, or abuse to a designated investigative or law enforcement representative of a Federal department or agency authorized to receive such information.

(c) The prohibition in paragraph (b) of this provision does not contravene requirements applicable to Standard Form 312, (Classified Information Nondisclosure agreement), Form 4414 (Sensitive Compartmented Information Nondisclosure Agreement), or any other form issued by a Federal department or agency governing the Nondisclosure of classified information.

(d) Representation. By submission of its application, the prospective recipient represents that it will not require its employees, subrecipients, or contractors to sign or comply with internal confidentiality agreements or statements prohibiting or otherwise restricting its employees, subrecipients, or contractors from lawfully reporting waste, fraud, or abuse related to the performance of a Federal award to a designated investigative or law enforcement representative of a Federal department or agency authorized to receive such information (for example, the Agency Office of the Inspector General).

II. PROTECTING LIFE IN GLOBAL HEALTH ASSISTANCE (MAY 2017)

APPLICABILITY: *This provision is applicable to those awards using federal funding predictably for international health activities with a primary purpose or effect of benefitting a foreign country, typically funded from the GHP, ESF, AEECA, or successor accounts, as*

applicable, including awards reported on under the Health category of the Foreign Assistance Standardized Program Structure, except those under program area HL.8, Water Supply and Sanitation, the American Schools and Hospitals Abroad Program, or programs funded by Food for Peace. This provision applies whenever implementation of the activity involves assistance to or implemented by foreign nongovernmental organizations.

PROTECTING LIFE IN GLOBAL HEALTH ASSISTANCE (MAY 2017)

(a) Ineligibility of Foreign Non-governmental Organizations that Perform or Actively Promote Abortion as a Method of Family Planning

This provision is in two parts: I, applicable to foreign non-governmental organizations; and II, applicable to U.S. non-governmental organizations. Both part I and part II should be included in awards.

I. Grants and Cooperative Agreements with Foreign Non-governmental Organizations

(1) The recipient agrees that it will not, during the term of this award, perform or actively promote abortion as a method of family planning in foreign countries or provide financial support to any other foreign non-governmental organization that conducts such activities. For purposes of this paragraph (a), a foreign nongovernmental organization is a for-profit or not-for-profit non-governmental organization that is not organized under the laws of the United States, any State of the United States, the District of Columbia, or the Commonwealth of Puerto Rico, or any other territory or possession of the United States.

(2) The recipient agrees that authorized representatives of USA may, at any reasonable time, announced or unannounced, consistent with 2 CFR Part 200: (i) inspect the documents and materials maintained or prepared by the recipient in the usual course of its operations that describe the health activities of the recipient, including reports, brochures, and service statistics; (ii) observe the health activities conducted by the recipient, (iii) consult with healthcare personnel of the recipient; and (iv) obtain a copy of audited financial statements or reports of the recipient, as applicable.

(3) In the event USAID has reasonable cause to believe that the recipient may have violated its undertaking not to perform or actively promote abortion as a method of family planning, the recipient must make available to USAID such books and records and other information as USAID may reasonably request to determine whether a violation of that undertaking has occurred, consistent with 2 CFR Part 200.

(4) Health assistance furnished to the recipient under this award must be terminated if the recipient violates any undertaking required by this paragraph (a), and the recipient must refund to USAID any unexpended amounts furnished to the recipient under this award, plus an amount equivalent to that used by the recipient to perform or actively promote abortion as a method of family planning while receiving funding under this award. The amount to be refunded to USAID under this subparagraph (4) may not exceed the total amount of health assistance furnished under this award.

(5) The recipient may not furnish health assistance under this award to another foreign non-governmental organization (the subrecipient) unless: (i) subrecipient agrees, by entering into such subaward, that it does not perform or actively promote abortion as a method of family planning in foreign countries and will not provide financial support to any other foreign non-governmental organization that conducts such activities; and (ii) such foreign non-governmental organization's agreement contains the same terms and conditions as described in subparagraph (6) below.

(6) Prior to entering into an agreement to furnish health assistance to a foreign non-governmental organization under this award, the recipient must ensure that such agreement with the subrecipient includes the following terms:

(i) The subrecipient will not, while receiving assistance under this award, perform or actively promote abortion as a method of family planning in foreign countries or provide financial support to other foreign non-governmental organizations that conduct such activities;

(ii) The recipient and authorized representatives of USAID may, at any reasonable time, announced or unannounced, consistent with 2 CFR Part 200: (A) inspect the documents and materials maintained or prepared by the subrecipient in the usual course of its operations that describe the health activities of the subrecipient, including reports, brochures, and service statistics; (B) observe health activities conducted by the subrecipient; (C) consult with healthcare personnel of the subrecipient; and (D) obtain a copy of audited financial statements or reports of the subrecipient, as applicable;

(iii) In the event that the recipient or USAID has reasonable cause to believe that a subrecipient may have violated its undertaking not to perform or actively promote abortion as a method of family planning, the recipient will review the health program of the subrecipient to determine whether a violation of such undertaking has occurred. The subrecipient must make available to the recipient such books and records and other information as may be reasonably requested to conduct the review. USAID may review the health program of the subrecipient under these circumstances, and the subrecipient must provide access on a timely basis to USAID to such books and records and other information upon request, consistent with 2 CFR Part 200;

(iv) Health assistance provided to the subrecipient under this award must be terminated if the subrecipient violates any award terms under subparagraphs (6)(i)-(iii), above, and the subrecipient must refund to the recipient any unexpended amounts furnished to the subrecipient under this award, plus an amount equivalent to that used by the subrecipient to perform or actively promote abortion as a method of family planning while receiving funding under this award, up to the total amount of health assistance furnished to the subrecipient under this award; and

(v) The subrecipient may furnish health assistance under this award to another foreign non-governmental organization only if: (A) such foreign nongovernmental organization agrees, by entering into such agreement, that it will not perform or actively promote abortion as a method of family planning in foreign countries and will not provide financial support to any other foreign

non-governmental organization that conducts such activities, and (B) such foreign non-governmental organization's agreement contains the same terms and conditions as those provided by the subrecipient to the recipient as described in subparagraphs (6)(i)-(iv), above.

(7) Where the terms and conditions of the award require USAID approval of subawards, the recipient must include a description of the due diligence performed by the recipient on the subrecipient before furnishing health assistance under this award.

(8) The recipient is liable to USAID for a refund for a violation by the subrecipient of any requirement of this paragraph (a) only if: (i) the recipient knowingly furnishes health assistance under this award to a subrecipient that performs or actively promotes abortion as a method of family planning, or (ii) the subrecipient did not abide by its award terms required by subparagraphs (6)(i)-(iii), above, and the recipient failed to make reasonable due diligence efforts prior to furnishing health assistance to the subrecipient, or (iii) the recipient knows or has reason to know, by virtue of the monitoring that the recipient is required to perform under the terms of this award, that a subrecipient has violated any of the award terms required by subparagraphs (6)(i)-(iii), above, and the recipient fails to terminate health assistance to the subrecipient, or fails to require the subrecipient to terminate assistance furnished under a subaward that violates any award terms required by subparagraphs (6)(i)-(iii), above.

(9) The recipient acknowledges that USAID may make independent inquiries in the community served by the recipient or a subrecipient under this award regarding whether it performs or actively promotes abortion as a method of family planning.

(10) The following definitions apply for purposes of paragraph (a):

(i) Abortion is a method of family planning when it is for the purpose of spacing births. This includes, but is not limited to, abortions performed for the physical or mental health of the mother and abortions performed for fetal abnormalities, but does not include abortions performed if the life of the mother would be endangered if the fetus were carried to term or abortions performed following rape or incest.

(ii) "To perform abortions" means to operate a facility where abortions are provided as a method of family planning. Excluded from this definition is the treatment of injuries or illnesses caused by legal or illegal abortions, for example, post-abortion care.

(iii) "To actively promote abortion" means for an organization to commit resources, financial or other, in a substantial or continuing effort to increase the availability or use of abortion as a method of family planning.

(A) This includes, but is not limited to, the following activities:

(I) Operating a service-delivery site that provides, as part of its regular program, counseling, including advice and information, regarding the benefits and/or availability of abortion as a method of family planning;

(II) Providing advice that abortion as a method of family planning is an available option or encouraging women to consider abortion (passively responding to a question regarding where a safe, legal abortion may be obtained is not considered active promotion if a woman who is already pregnant specifically asks the question, she clearly states that she has already decided to have a legal abortion, and the healthcare provider reasonably believes that the ethics of the medical profession in the host country requires a response regarding where it may be obtained safely and legally);
(III) Lobbying a foreign government to legalize or make available abortion as a method of family planning or lobbying such a government to continue the legality of abortion as a method of family planning; and
(IV) Conducting a public information campaign in foreign countries regarding the benefits and/or availability of abortion as a method of family planning.

(B) Excluded from the definition of active promotion of abortion as a method of family planning are referrals for abortion as a result of rape or incest, or if the life of the mother would be endangered if she were to carry the fetus to term. Also excluded from this definition is the treatment of injuries or illnesses caused by legal or illegal abortions, for example, postabortion care.

(C) Action by an individual acting in the individual's capacity shall not be attributed to an organization with which the individual is associated, provided that the individual is neither on duty nor acting on the organization's premises, and the organization neither endorses nor provides financial support for the action and takes reasonable steps to ensure that the individual does not improperly represent that he or she is acting on behalf of the organization.

(iv) Furnishing health assistance to a foreign non-governmental organization includes the transfer of funds made available under this award or goods or services financed with such funds, but does not include the purchase of goods or services from an organization or the participation of an individual in the general training programs of the recipient or subrecipient.

(v) To "control" an organization means to possess the power to direct, or cause the direction of, the management and policies of an organization.

(11) In determining whether a foreign non-governmental organization is eligible to be a recipient or subrecipient of health assistance under this award, the action of separate non-governmental organizations shall not be imputed to the recipient or subrecipient, unless, in the judgment of USAID, a separate non-governmental organization is being used purposefully to avoid the provisions of this paragraph (a). Separate non-governmental organizations are those that have distinct legal existence in accordance with the laws of the countries in which they are organized. Foreign organizations that are separately organized shall not be considered separate, however, if one is controlled by the other. The recipient may request the USAID Agreement Officer's approval to treat as separate the health activities of two or more organizations, which would not be considered separate under the preceding sentence. The recipient must provide a written justification to USAID that the health activities of the organizations are sufficiently distinct to warrant not imputing the activity of one to the other.

(12) Health assistance may be furnished under this award by a recipient or subrecipient to a foreign government or parastatal even though the government or parastatal includes abortion in its health program, provided that no such assistance may be furnished under this award in support of the abortion activity of the government or parastatal and any funds transferred to the government or parastatal must be placed in a segregated account to ensure that such funds may not be used to support the abortion activity of the government or parastatal.

(13) For the avoidance of doubt, in the event of a conflict between a term of this paragraph (a) and an affirmative duty of a healthcare provider required under local law to provide counseling about and referrals for abortion as a method of family planning, compliance with such law shall not trigger a violation of this paragraph (a).

II. Grants and Cooperative Agreements with U.S. Non-governmental Organizations

(1) The recipient (A) agrees that it will not furnish health assistance under this award to any foreign non-governmental organization that performs or actively promotes abortion as a method of family planning in foreign countries; and (B) further agrees to require that such subrecipients do not provide financial support to any other foreign non-governmental organization that conducts such activities. For purposes of this paragraph (a), a foreign non-governmental organization is a for-profit or not-for-profit non-governmental organization that is not organized under the laws of the United States, any State of the United States, the District of Columbia, or the Commonwealth of Puerto Rico, or any other territory or possession of the United States.

(2) Prior to entering into an agreement to furnish health assistance to a foreign non-governmental organization (subrecipient) under this award, the recipient must ensure that such agreement with the subrecipient includes the following terms:

(i) The subrecipient will not, while receiving assistance under this award, perform or actively promote abortion as a method of family planning in foreign countries or provide financial support to other foreign non-governmental organizations that conduct such activities;

(ii) The recipient, and authorized representatives of USAID may, at any reasonable time, announced or unannounced, consistent with 2 CFR Part 200: (A) inspect the documents and materials maintained or prepared by the subrecipient in the usual course of its operations that describe the health activities of the subrecipient, including reports, brochures, and service statistics; (B) observe the health activities conducted by the subrecipient; (C) consult with healthcare personnel of the subrecipient; and (D) obtain a copy of audited financial statements or reports of the subrecipient, as applicable;

(iii) In the event that the recipient or USAID has reasonable cause to believe that a subrecipient may have violated its undertaking not to perform or actively promote abortion as a method of family planning, the recipient will review the health program of the subrecipient to determine whether a violation of such undertaking has occurred. The subrecipient must make available to the recipient such books and records and other information as may be reasonably requested to conduct the review. USAID may review the health program of the subrecipient under these

circumstances, and the subrecipient must provide access on a timely basis to USAID to such books and records and other information upon request, consistent with 2 CFR part 200;

(iv) Health assistance provided to the subrecipient under this award must be terminated if the subrecipient violates any award terms required by subparagraphs (2)(i)-(iii), above, and the subrecipient must refund to the recipient any unexpended amounts furnished to the subrecipient under this award, plus an amount equivalent to that used by the subrecipient to perform or actively promote abortion as a method of family planning while receiving funding under this award, up to the total amount of health assistance furnished to the subrecipient under this award; and

(v) The subrecipient may furnish health assistance under this award to another foreign non-governmental organization only if: (A) such foreign nongovernmental organization agrees, by entering into such agreement, that it will not perform or actively promote abortion as a method of family planning in foreign countries and will not provide financial support to any other foreign non-governmental organization that conducts such activities; and (B) such foreign non-governmental organization's agreement contains the same terms and conditions as those provided by the subrecipient to the recipient as described in subparagraphs (2)(i)-(iv), above.

(3) Where the terms and conditions of the award require USAID approval of subawards, the recipient must include a description of the due diligence **p**erformed by the recipient on the subrecipient before furnishing health assistance under this award.

(4) The recipient is liable to USAID for a refund for a violation by the subrecipient of any requirement of this paragraph (a) only if: (i) the recipient knowingly furnishes health assistance under this award to a subrecipient that performs or actively promotes abortion as a method of family planning; or (ii) the subrecipient did not abide by its award terms required by subparagraphs (2)(i)-(iii), above, and the recipient failed to make reasonable due diligence efforts prior to furnishing health assistance to the subrecipient; or (iii) the recipient knows or has reason to know, by virtue of the monitoring that the recipient is required to perform under the terms of this award, that a subrecipient has violated any of the award terms required by subparagraphs (2)(i)-(iii), above, and the recipient fails to terminate health assistance to the subrecipient, or fails to require the subrecipient to terminate assistance furnished under a subaward that violates any award terms required by subparagraphs (2)(i)-(iii), above.

(5) The recipient acknowledges that USAID may make independent inquiries in the community served by a subrecipient under this award regarding whether such subrecipient performs or actively promotes abortion as a method of family planning.

(6) The following definitions apply for purposes of this paragraph (a):

(i) Abortion is a method of family planning when it is for the purpose of spacing births. This includes, but is not limited to, abortions performed for the physical or mental health of the mother and abortions performed for fetal abnormalities, but does not include abortions performed if the life of the mother would be endangered if the fetus were carried to term or abortions performed following rape or incest.

(ii) "To perform abortions" means to operate a facility where abortions are provided as a method of family planning. Excluded from this definition is the treatment of injuries or illnesses caused by legal or illegal abortions, for example, post-abortion care.

(iii) "To actively promote abortion" means for an organization to commit resources, financial or other, in a substantial or continuing effort to increase the availability or use of abortion as a method of family planning.

(A) This includes, but is not limited to, the following activities:

(I) Operating a service-delivery site that provides, as part of its regular program, counseling, including advice and information, regarding the benefits and/or availability of abortion as a method of family planning;

(II) Providing advice that abortion as a method of family planning is an available option or encouraging women to consider abortion (passively responding to a question regarding where a safe, legal abortion may be obtained is not considered active promotion if a woman who is already pregnant specifically asks the question, she clearly states that she has already decided to have a legal abortion, and the healthcare provider reasonably believes that the ethics of the medical profession in the host country requires a response regarding where it may be obtained safely and legally);

(III) Lobbying a foreign government to legalize or make available abortion as a method of family planning or lobbying such a government to continue the legality of abortion as a method of family planning; and

(IV) Conducting a public-information campaign in foreign countries regarding the benefits and/or availability of abortion as a method of family planning.

(B) Excluded from the definition of active promotion of abortion as a method of family planning are referrals for abortion as a result of rape or incest, or if the life of the mother would be endangered if she were to carry the fetus to term. Also excluded from this definition is the treatment of injuries or illnesses caused by legal or illegal abortions, for example, postabortion care.

(C) Action by an individual acting in the individual's capacity shall not be attributed to an organization with which the individual is associated, provided that the individual is neither on duty nor acting on the organization's premises, and the organization neither endorses nor provides financial support for the action and takes reasonable steps to ensure that the individual does not improperly represent that he or she is acting on behalf of the organization.

(iv) Furnishing health assistance to a foreign non-governmental organization includes the transfer of funds made available under this award or goods or services financed with such funds, but does not include the purchase of goods or services from an organization or the participation of an individual in the general training programs of the recipient or subrecipient.

(v) To "control" an organization means to possess the power to direct, or cause the direction of, the management and policies of an organization.

(7) In determining whether a foreign non-governmental organization is eligible to be a subrecipient of health assistance under this award, the action of separate non-governmental organizations shall not be imputed to the sub-recipient, unless, in the judgment of USAID, a separate non-governmental organization is being used purposefully to avoid the provisions of this paragraph (a). Separate nongovernmental organizations are those that have distinct legal existence in accordance with the laws of the countries in which they are organized. Foreign organizations that are separately organized shall not be considered separate, however, if one is controlled by the other. The recipient may request the USAID Agreement Officer's approval to treat as separate the health activities of two or more organizations, which would not be considered separate under the preceding sentence. The recipient must provide a written justification to USAID that the health activities of the organizations are sufficiently distinct to warrant not imputing the activity of one to the other.

(8) Health assistance may be furnished under this award by a recipient or subrecipient to a foreign government or parastatal even though the government or parastatal includes abortion in its health program, provided that no such assistance may be furnished under this award in support of the abortion activity of the government or parastatal and any funds transferred to the government or parastatal must be placed in a segregated account to ensure that such funds may not be used to support the abortion activity of the government or parastatal.

(9) For the avoidance of doubt, in the event of a conflict between a term of this paragraph (a) and an affirmative duty of a healthcare provider required under local law to provide counseling about and referrals for abortion as a method of family planning, compliance with such law shall not trigger a violation of this paragraph (a).

(b) This provision shall be inserted verbatim in subawards in accordance with the terms of paragraph (a).

[END OF PROVISION]

F.4. Quarterly Financial Reporting

Financial reporting requirements will be in accordance with 2 CFR 200.327. The recipient must submit the Federal Financial Form (SF-425) on a quarterly basis via electronic format to the U.S. Department of Health and Human Services (https://pms.psc.gov)

The recipient must submit a copy of the Federal Financial Report (FFR) at the same time to the AO and the AOR at USAID/Rwanda. Electronic copies of the SF-425 can be found at: https://app_gsagov_prod_rdcgwaajp7wr.s3.amazonaws.com/SF425-V2.pdf

The Recipient must submit a final financial report using Standard Form 425 to the USAID/Washington, M/CFO/CMPLOC Unit, the AO, and the AOR at the end of the award. The Recipient must submit a copy of the final financial report to U.S. Department of Health and Human Services. Final reports shall be submitted no later than 90

after the Agreement period end date.

The Recipient should collaborate with the AOR in providing accrual information, which is the best estimate of the amounts incurred on goods and services for USAID project, during the quarter under consideration, but not yet billed to USAID. The information should be submitted to the AOR no later than 15 days before the end of each quarter.

F.5. Reporting Program Performance

The recipient will submit reports to the USAID/Rwanda AOR as described below.

F.5.2.1 Annual Implementation Plans

The Recipient will be required to submit annual implementation plans to the AOR (except for the first implementation plan which will cover the first fourteen months of the Activity), covering the period October 1 through September 30 (or parts thereof), which describes all interventions planned for the year. A budget and narrative explaining the rationale, sequence, and timeline of interventions will accompany the implementation plan.

The annual implementation plan for the first year will be submitted not later than 60 days after award. Annual implementation plans for subsequent years shall be submitted no later than August 15 prior to the start of the next fiscal year. Annual implementation plans and significant revisions thereto are subject to USAID AOR approval.

F.5.2.2 Monitoring, Evaluation and Learning (MEL) Plan

USAID/Rwanda requires the Recipient to submit a revised Monitoring, Evaluation and Learning (MEL) Plan within 90 days from the effective date of the award. The MEL Plan will elaborate how the recipient and USAID will monitor progress, evaluate performance and/or impact and how the activity intends to learn from the implementation and use the lessons learned to adapt its programing. The MEL Plan will contain a section on "Monitoring," a section on "Evaluation" and a section on "Learning."

The *Monitoring section* will specify indicators, targets, and monitoring methodologies that allow the recipient and USAID/Rwanda to track the progress of activity interventions towards achieving the expected results and targets related to activity objectives. In the Monitoring plan the Recipient identifies appropriate monitoring approaches to be used and selects performance indicators (standard and custom) to use in tracking progress, determines baselines, and sets targets (annual and end of activity targets) aligned to global and national level targets and the CDCS targets for RMNCH and malaria. For each indicator selected, a performance indicator reference sheet (PIRS) containing information such as indicator definition, rationale, mode of analysis, type, baseline value and date, data source, linkage to the outcome and long term impact, reporting frequency, disaggregation etc., must be completed. All indicators must meet USAID data quality standards for validity, integrity, precision, reliability, and timeliness as described in ADS 201.3.5.8 (https://www.usaid.gov/sites/default/files/documents/1870/201.pdf). For this activity, the Recipient may also be asked to include indicators established by the GOR as part of a national harmonization exercise.

In line with USAID gender guidelines the recipient must collect and report sex disaggregated data. In this section also, the recipient describes the data collection and management structure, systems and processes.

The *Evaluation section* will describe how interventions will be assessed at the performance and/or impact level, and include a schedule and tools for periodic evaluation/re-evaluation and revision of the approach if and as necessary.

Given that RSDA is a large activity and may change geographical coverage during implementation. USAID/Rwanda intends to commission a mid-term performance evaluation to assess the performance of this activity half way through the implementation and provide recommendations for the remaining part of the activity implementation. The evaluation section will take this into account in its evaluation schedule and facilitate the evaluation implementation. The evaluation section may also contain a description of how and when planned facility assessments and cross-sectional surveys will be conducted and their purpose.

The *Learning section* will describe how knowledge and learning will be gained from implementation, evaluation findings, and monitoring data, to adjust interventions and approaches as needed.

The MEL plan must be submitted to the AOR for review and approval. The MEL plan must be updated annually, or any time it is deemed necessary as agreed upon between the AOR and the Recipient.

F. 5.2.3 Quarterly Performance Reports

The recipient must submit a Quarterly Performance Report on progress toward agreed performance targets every three (3) months. Quarterly Performance Reports shall be submitted 30 calendar days after the end of the quarter pursuant to 2 CFR 200.328, except for the fourth quarters of project performance which are included in the annual performance reports. The quarterly reports shall contain the information as required in 2 CFR 200.328. The scope and format of the quarterly progress reports will be finalized in consultation with the AOR.

The quarterly report should provide a brief yet precise description of the interventions, with emphasis on issues that have arisen, impacts made, constraints encountered, and suggestions for additional actions that might be taken. The quarterly report can be submitted electronically to the AOR

F.5.2.4 Annual Performance Reports

The recipient will submit a draft Annual Performance Report to the USAID/Rwanda AOR each year by October 30. The Annual Report shall contain the following information: i) a summary of key achievements, ii) a comparison of actual accomplishments against goals established for the period in the annual implementation plan and MEL Plan, iii) cumulative quantitative M&E data, including information on progress towards targets, and explanations of any issues related to data quality, iv) a

summary of funds expended during the fiscal year by funding source, v) a cumulative list of report/studies/documents, vi) lessons learned and success stories, vii) information on major challenges and constraints faced during the performance period being reported and viii) prospects for the next year's performance.

Upon receiving AOR approval, the approved Annual Performance Report shall be uploaded to the USAID's Aidtracker system.

F.5.2.5 Final Report

Within 90 days following the estimated completion date of the cooperative agreement, the recipient shall submit a draft of the Final Report to the AOR, including the following information: i) Overall program accomplishments, presented in quantitative terms and described in a narrative that relates interventions, products, and results to the MEL plan . ii) Discussion of why unexpected progress, positive or negative, was made toward the planned results. If the performance monitoring system (indicators) indicate that expected results were not achieved, the partner shall seek to determine and explain the reason. iii) Analysis of lessons learned, summary of responses to problems encountered during Activity implementation, and a bibliography of all products, tools, reports, and studies produced through the Activity. Upon receiving AOR approval, the approved Final Report shall be submitted to the USAID's Aidtracker system

F.5.3 AIDTracker Plus (AT+)

USAID/Rwanda utilizes a performance management information system called AIDtracker Plus (AT+) to track progress for all mission-funded activities. The performance information provided by partners through AT+ is used by the Mission to assess overall performance of its activities and to generate reports for its external stakeholders and other interested parties, including but not limited to USAID Washington, Congress, and the Government of Rwanda.

As applicable, the award recipient shall provide an update of performance information in AIDtracker Plus, including but not limited to performance indicator results, performance report, geospatial coordinates, success stories, and photographs by entering this information into the AIDtracker Plus Partner Portal. The Recipient shall enter information via the partner portal at: https://usaid-gov.secure.force.com/Partners/.

Upon approval of the activity MEL plan, USAID will set up the activity's account in AT+ and provide a user ID and password to each authorized user for access and will train implementing partners' Monitoring and Evaluation staff or other designated program staff on AIDtracker Plus.

F.5.4 Geographic Information Systems (GIS)

The Recipient should apply geospatial methods using Geographic Information Systems (GIS) technology to support USAID's effort to incorporate geographic data and analysis into USAID's overall development planning, design, and monitoring, evaluation, and

learning as applicable. The USAID/Rwanda Mission collects three types of GIS data:

F.5.4.1 Project and Activity Location Data: Project and Activity Location Data will be submitted according to the Mission's data requirements. Project and Activity Location Data refers to data that records a discrete point location for project and activity sites. Project and Activity Location Data is essential in establishing an effective method for managing, analyzing, and communicating project and activity information.

F.5.4.2 Thematic Data: This refers to data such as demographic and health indicators, land use, land cover, hydrology, and transportation infrastructure. Thematic Data is essential for USAID's development planning and project design purposes. When created or acquired using USAID funds, these datasets must be submitted to the AOR.

F.5.4.3 Project Specific Geographic Data: This refers to data such as the analytical output of a geographic analysis that is conducted while implementing a project and is useful to USAID's development planning and project design purposes. When created or acquired using USAID funds, these datasets must be submitted to the AOR.

F.6 Development Experience Clearinghouse Requirements

Consistent with ADS 540 Development experience documentation may be submitted.

- Online: http://www.usaid.gov/results-and-data/information-resources/development-experience-clearinghouse-dec

- By mail (for pouch delivery):

USAID Development Experience Clearinghouse
M/CIO/ITSD/KM/DEC
Ronald Reagan Building M. 01
U.S. Agency for International Development
Washington, DC 20523

For questions on DEC submissions, contact
M/CIO/ITSD/KM/DEC
Telephone: +1 202-712-0579
E-mail: DocSubmit@usaid.gov

F.7 Program Income

If the recipient expects to earn program income during the award period, the schedule of the award must specifically state how the income will be applied. (The definition of program income is located in 2 CFR 200.80 or, for non-U.S. organizations, see the provision "Program Income" and income application suggestions can be found in 2 CFR 200.307.)

F.8 Branding & Marking

The apparently successful applicant will be asked to provide a Branding Strategy and Marking Plan to be evaluated and approved by the AO and incorporated into any resulting award.

Branding Strategy

a. Applicants recommended for an assistance award must submit and negotiate a "Branding Strategy," describing how the program, project, or activity is named and positioned, and how it is promoted and communicated to beneficiaries and host country citizens.

b. The request for a Branding Strategy, by the AOR from the applicant, confers no rights to the applicant and constitutes no USAID commitment to an award.

c. Failure to submit and negotiate a Branding Strategy within the timeframe specified by the AO will make the applicant ineligible for an award.

d. The applicant must include all estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth, in the budget portion of the application. USAID/Rwanda requires implementing partners to procure magnets to label USAID funded vehicles. When vehicles are being used for non-administrative purposes, the magnets should be adhered; at all other times the magnets should be removed. These costs are subject to the revision and negotiation with the AO and will be incorporated into the Total Estimated Amount of the grant, cooperative agreement or other assistance instrument.

e. The Branding Strategy must include, at a minimum, all of the following:

(1) All estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth.

(2) The intended name of the program, project, or activity.

(i) USAID requires the applicant to use the “USAID Identity,” comprised of the USAID logo and brandmark, with the tagline “from the American people” as found on the USAID Web site at https://www.usaid.gov/branding, unless the NOFO states that the USAID Administrator has approved the use of an additional or substitute logo, seal, or tagline.

(ii) USAID prefers local language translations of the phrase “made possible by (or with) the generous support of the American People” next to the USAID Identity when acknowledging contributions.

(iii) It is acceptable to cobrand the title with the USAID Identity and the applicant's identity.

(iv) If branding in the above manner is inappropriate or not possible, the applicant must explain how USAID's involvement will be showcased during publicity for the program or project.

(v) USAID prefers to fund projects that do not have a separate logo or identity that competes with the USAID Identity. If there is a plan to develop a separate logo to consistently identify this program, the applicant must attach a copy of the proposed logos. Section VI of the RFA or APS will state if an Administrator approved the use of an additional or substitute logo, seal, or tagline.

(3) The intended primary and secondary audiences for this project or program, including direct beneficiaries and any special target segments.

(4) Planned communication or program materials used to explain or market the program to beneficiaries.

(i) Describe the main program message.

(ii) Provide plans for training materials, posters, pamphlets, public service announcement, billboards, Web sites, and so forth, as appropriate.

(iii) Provide any plans to announce and promote publicly this program or project to host country citizens, such as media releases, press conferences, public events, and so forth. Applicant must incorporate the USAID Identity and the message, "USAID is from the American People."

(iv) Provide any additional ideas to increase awareness that the American people support this project or program.

(5) Information on any direct involvement from host-country government or ministry, including any planned acknowledgement of the host-country government.

(6) Any other groups whose logo or identity the applicant will use on program materials and related materials. Indicate if they are a donor or why they will be visibly acknowledged, and if they will receive the same prominence as USAID.

f. The AO will review the Branding Strategy to ensure the above information is adequately included and consistent with the stated objectives of the award, the applicant's cost data submissions, and the performance plan.

g. If the applicant receives an assistance award, the Branding Strategy will be included in and made part of the resulting grant or cooperative agreement.

Marking Plan

a. Applicants recommended for an assistance award must submit and negotiate a "Marking Plan," detailing the public communications, commodities, and program materials, and other items that will visibly bear the "USAID Identity," which comprises of the USAID logo and brandmark, with the tagline "from the American people." The USAID Identity is the official

marking for the Agency, and is found on the USAID Web site at https://www.usaid.gov/branding The NOFO will state if an Administrator approved the use of an additional or substitute logo, seal, or tagline.

b. The request for a Marking Plan, by the AO from the applicant, confers no rights to the applicant and constitutes no USAID commitment to an award.

c. Failure to submit and negotiate a Marking Plan within the time frame specified by the AO will make the applicant ineligible for an award.

d. The applicant must include all estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth, in the budget portion of the application. These costs are subject to the revision and negotiation with the AO and will be incorporated into the Total Estimated Amount of the grant, cooperative agreement or other assistance instrument.

e. The Marking Plan must include all of the following:

(1) A description of the public communications, commodities, and program materials that the applicant plans to produce and which will bear the USAID Identity as part of the award, including:

(i) Program, project, or activity sites funded by USAID, including visible infrastructure projects or other sites physical in nature;

(ii) Technical assistance, studies, reports, papers, publications, audio-visual productions, public service announcements, Web sites/Internet activities, promotional, informational, media, or communications products funded by USAID;

(iii) Commodities, equipment, supplies, and other materials funded by USAID, including commodities or equipment provided under humanitarian assistance or disaster relief programs; and

(iv) It is acceptable to cobrand the title with the USAID Identity and the applicant's identity.

(v) Events financed by USAID, such as training courses, conferences, seminars, exhibitions, fairs, workshops, press conferences and other public activities. If the USAID Identity cannot be displayed, the recipient is encouraged to otherwise acknowledge USAID and the support of the American people.

(2) A table on the program deliverables with the following details:

(i) The program deliverables that the applicant plans to mark with the USAID Identity;

(ii) The type of marking and what materials the applicant will use to mark the program deliverables;

(iii) When in the performance period the applicant will mark the program deliverables, and where the applicant will place the marking;

(iv) What program deliverables the applicant does not plan to mark with the USAID Identity , and

(v) The rationale for not marking program deliverables.

(3) Any requests for an exemption from USAID marking requirements, and an explanation of why the exemption would apply. The applicant may request an exemption if USAID marking requirements would:

(i) Compromise the intrinsic independence or neutrality of a program or materials where independence or neutrality is an inherent aspect of the program and materials. The applicant must identify the USAID Development Objective, Interim Result, or program goal furthered by an appearance of neutrality, or state why an aspect of the award is presumptively neutral. Identify by category or deliverable item, examples of material for which an exemption is sought.

(ii) Diminish the credibility of audits, reports, analyses, studies, or policy recommendations whose data or findings must be seen as independent. The applicant must explain why each particular deliverable must be seen as credible.

(iii) Undercut host-country government "ownership" of constitutions, laws, regulations, policies, studies, assessments, reports, publications, surveys or audits, public service announcements, or other communications. The applicant must explain why each particular item or product is better positioned as host-country government item or product.

(iv) Impair the functionality of an item. The applicant must explain how marking the item or commodity would impair its functionality.

(v) Incur substantial costs or be impractical. The applicant must explain why marking would not be cost beneficial or practical.

(vi) Offend local cultural or social norms, or be considered inappropriate. The applicant must identify the relevant norm, and explain why marking would violate that norm or otherwise be inappropriate.

(vii) Conflict with international law. The applicant must identify the applicable international law violated by the marking.

f. The AO will consider the Marking Plan's adequacy and reasonableness and will approve or disapprove any exemption requests. The Marking Plan will be reviewed to ensure the above information is adequately included and consistent with the stated objectives of the award, the applicant's cost data submissions, and the performance plan.

g. If the applicant receives an assistance award, the Marking Plan, including any approved exemptions, will be included in and made part of the resulting grant or cooperative agreement, and will apply for the term of the award unless provided otherwise.

F.9 Environmental Compliance

F.9.1 *General*

- The Foreign Assistance Act of 1961, as amended, Section 117 requires that the impact of USAID's activities on the environment be considered and that USAID include environmental sustainability as a central consideration in designing and carrying out its development programs. This mandate is codified in Federal Regulations (22 CFR 216) and in USAID's Automated Directives System (ADS) Parts 201.5.10g and 204 (http://www.usaid.gov/policy/ADS/200/), which, in part, require that the potential environmental impacts of USAID-financed activities are identified prior to a final decision to proceed and that appropriate environmental safeguards are adopted for all activities. The recipient environmental compliance obligations under these regulations and procedures are specified in the following paragraphs of cooperative agreement.

- In addition, the contractor/recipient must comply with host country environmental regulations unless otherwise directed in writing by USAID. In case of conflict between host country and USAID regulations, the latter shall govern.

- No activity funded under this CA will be implemented unless an environmental threshold determination, as defined by 22 CFR 216, has been reached for that activity, as documented in a Request for Categorical Exclusion (RCE), Initial Environmental Examination (IEE), or Environmental Assessment (EA) duly signed by the Bureau Environmental Officer (BEO). (Hereinafter, such documents are described as "approved Regulation 216 environmental documentation.")

F.9.2 *Compliance with the IEE*

An Initial Environmental Examination (IEE) Title. "Strengthening Capacity of Health Sector to Deliver Quality Health Services in Rwanda (SCHS) Project" signed 08/11/2015) has been approved for the project funding the cooperative agreement expected as a result of this NOFO. The IEE can be located from the following web link: https://ecd.usaid.gov/repository/pdf/44846.pdf. The IEE covers activities expected to be implemented under this cooperative agreement. USAID has determined that a Negative Determination with conditions applies to one or more of the proposed activities. This indicates that if these activities are implemented subject to the specified conditions, they are expected to have no significant adverse effect on the environment. The recipient shall be responsible for implementing all IEE conditions pertaining to activities to be funded under this NOFO.

F.9.3. *Implementation Plans*

- As part of its initial Implementation Plan, and all Annual Implementation Plans thereafter, the recipient, in collaboration with the USAID AOR and Mission Environmental Officer (MEO) or BEO, as appropriate, shall review all ongoing and planned activities under this cooperative agreement to determine if they are within the scope of the approved Regulation 216 environmental documentation.
- If the recipient plans any new activities outside the scope of the approved Regulation 216 environmental documentation, it shall prepare an amendment to the documentation for review and approval of MEO or BEO. No such new activities shall be undertaken prior to receiving written USAID approval of environmental documentation amendments.
- Any ongoing activities found to be outside the scope of the approved Regulation 216 environmental documentation shall be halted until an amendment to the documentation is submitted and written approval is received from USAID.

F.9.4 *Mitigation Measures and Monitoring*

When the approved Regulation 216 documentation is (1) an IEE that contains one or more Negative Determinations with conditions and/or (2) an EA, the recipient shall:

- Unless the approved Regulation 216 documentation contains a complete environmental mitigation and monitoring plan (EMMP) or a project mitigation and monitoring (M&M) plan, the recipient shall prepare an EMMP or M&M Plan describing how the recipient will, in specific terms, implement all IEE and/or EA conditions that apply to proposed project activities within the scope of the award. The EMMP or M&M Plan shall include monitoring the implementation of the conditions and their effectiveness.
- Integrate a completed EMMP or M&M Plan into the initial work plan.
- Integrate an EMMP or M&M Plan into subsequent Annual Work Plans, making any necessary adjustments to activity implementation in order to minimize adverse impacts to the environment.

F.10 Training Results and information Network (TRAINET)

Exchange Visitors and Training

The recipient will conform to USAID Automated Directives System (ADS) Chapter 252 – Visa Compliance for Exchange Visitors and ADS 253 – Participant Training for Capacity Development, as well as USAID/Rwanda-specific requirements for processing of J-1 Exchange Visitors.

The recipient will enter applicable information into TraiNet for any participant Training, third-country training and in-country training that is funded through this award.

[END OF SECTION F]

SECTION G: FEDERAL AWARDING AGENCY CONTACT(S)

G.1 Agreement Officer for this Award resulting from this NOFO:

Peggy L. Manthe or her designee
U.S Agency for International Development
USAID/Rwanda, 2657 Avenue de la Gendarmerie
Kacyiru, Kigali
E-mail Address: pmanthe@usaid.gov

G.2 Points of Contact for Questions:

Peggy L. Manthe or her designee
U.S Agency for International Development
USAID/Rwanda, 2657 Avenue de la Gendarmerie
Kacyiru, Kigali
E-mail Address: pmanthe@usaid.gov

Ali M. Ali
Senior Acquisition & Assistance Specialist
U.S Agency for International Development
USAID/Rwanda, 2657 Avenue de la Gendarmerie
Kacyiru, Kigali
E-mail Address: alali@usaid.gov

[END OF SECTION G]

SECTION H: OTHER INFORMATION

USAID reserves the right to fund any or none of the applications received.

List of Annexes
The following documents are included as annexes to the NOFO to provide additional information to the prospective applicants.

Annex A - Abbreviations and Acronyms
Annex B - Development Challenges
Annex C – Other USAID Activities
Annex D - Illustrative Districts for RSDA Interventions
Annex E – Performance Monitoring Plan Indicators
Annex F – Program Performance Report Indicators
Annex G – Budget Template

Web links

- Standard Foreign Assistance Indicators: https://www.state.gov/f/indicators/
- Grants.gov **:** www.grants.gov
- SF-424 series: http://www.grants.gov/web/grants/forms/sf-424-family.html
- Cable no. 119780 - Salary Supplements for Host Government Employees : http://www.usaid.gov/ads/policy/300/119780
- USAID Gender Equality and Female Empowerment Policy of March 2012: https://www.usaid.gov/sites/default/files/documents/1865/GenderEqualityPolicy_0.pdf

[END OF SECTION H]