USAID
FROM THE AMERICAN PEOPLE

May 17, 2012

Reference: Achieving Universal Diagnosis and Appropriate Case Management for Malaria
RFA #: RFA-OAA-12-000014

Subject: Amendment 01

Dear Applicants,

The purpose of this Amendment 01 is to make the following changes:

1) Publish Questions and Answers submitted via email by May 14, 2012 5pm local time.

Please see the following pages for the changes this Amendment makes to the specific section. Please direct any questions to myself at ssheffield@usaid.gov.

Sincerely,

Shanon Sheffield
Agreement Officer
US Agency for International Development
Office of Acquisition and Assistance
M/OAA/GH

Malaria Technical Questions

Regarding countries:

1. Given current annual PMI planning processes, i.e. Malaria Operational Plans, does USAID anticipate that the award recipient will contribute to the annual planning process for each PMI focus country?

Response: PMI country teams, at their discretion, often solicit input from their implementing partners on future plans for scaling up key malaria control interventions. We would anticipate that the new project implementers would be called upon in a similar fashion in those countries where field support is being to this project.

2. Pg 12 mentions that the focus of the proposed project will mainly be on **PMI focus and non-focus countries in sub-Saharan Africa**. Can USAID clarify which sub-Saharan, non focus countries will potentially be considered to be part of the proposed project?

Response: Currently, PMI non-focus countries include Burkina Faso, Burundi, and South Sudan.

3. Can USAID confirm whether it will be required for the Recipient to work with all of these non focus countries, or whether the Recipient may propose which non focus countries they will work with?

Response: The project will be required to work in all PMI focus and non-focus countries where field support funding is provided by that country. In all PMI countries, the country teams determine which mechanisms will be used to implement different activities. Therefore, it will be at the discretion of each PMI country team whether or not this new project will be used to implement activities and what specific activities are to be implemented. PMI core funding to this project is not intended to support country-specific activities.

4. Please provide an estimate of the number of countries this program is expected to work in.

Response: Because each PMI country team will individually determine whether or not to use this mechanism to support case management and/or malaria diagnosis strengthening, it is difficult to provide an accurate estimate of how many countries the project will be expected to work. A conservative estimate would be from six to 12 countries.

5. Please provide a list of countries where USAID forecasts significant Field Support to this Cooperative Agreement in the next 2 years.

Response: Please refer to the responses to Questions 3 and 4.

6. Does USAID wish bidders to name illustrative countries in which they propose activities? Will USAID provide any additional guidance in terms of the geographic distribution it wishes to see in proposed country activities and budget?

Response: We welcome illustrative country examples for proposed activities, but please note the responses to Questions 3 and 4, which explains the process by which countries will or will not be supported by this project.

7. It seems possible that at the time of project start up, some countries may have an active field support program under the predecessor IMaD project. Can USAID please indicate if this is the case, and if so, which country(ies) would be expecting a continuation of work in Year 1? Are there any countries where the successful applicant would need to ensure no disruption in services?

Response: We anticipate that in all or almost all IMaD countries, all funded activities would have been completed by September 30, 2012. There may be one or two activities in one or two countries that may carry over into the first quarter of FY 2013, but those activities should be completed by December 31, 2012, when the IMaD Project is scheduled to close. The decision of whether the new project will pick up activities previously managed by IMaD will be at the discretion of the PMI country team in each country currently using the IMaD mechanism.

8. Has PMI prioritized the focus countries for project implementation under this Cooperative Agreement during years 1 and 2?

Response: Please refer to the responses to Questions 3 and 4.

9. Pgs 9-10 of the RFA state that the Recipient will be expected to develop a multi-year plan for achieving the project objectives for **each country**. Pg 12 says that the scope of the project is worldwide. Can USAID confirm whether the applicant is required to propose TA to all PMI countries, or whether it is permissible to propose focusing on certain countries (as identified by the applicant, based on need, capacity, or other factors)?

Response: Please refer to the response to Questions 3 and 4 regarding country selection.

10. Pgs 9-10 of the RFA state that the Recipient will be expected to develop a multi-year plan for achieving the project objectives for each country. Pg 1, 1.a states that Applicants must describe how needs and requests for technical assistance will be identified and prioritized. Pg 19 says that the applicant should describe its approach to identifying and addressing bottlenecks to implementation. However, Pg 11, 1 indicates that there will be provision of on-demand technical assistance upon request from countries. Could USAID clarify whether technical assistance needs will be identified and prioritized by the Recipient, or whether the Recipient will exclusively respond to requests for assistance? (Or alternatively, whether there will be some combination of both methods).

Response: Please refer to the responses to Questions 3 and 4.

11. Section C, Page 10: USAID states that the cooperative agreement issued under this RFA will complement USAID's existing mechanisms of support, including USAID DELIVER. Does USAID expect bidders to budget for procurement of commodities, including medicines and

diagnostics? If so, can USAID please provide a plug figure/estimate to be used for budgeting purposes?

Response: We do not expect that this cooperative agreement will be involved in direct procurement of commodities, but rather will provide technical assistance to the USAID DELIVER Project and similar mechanisms by providing technical specifications and support for quantification of requirements for diagnostic equipment and supplies.

12. *Pg 12 mentions that the focus of the proposed project will mainly be on **PMI focus and non-focus countries in sub-Saharan Africa**.*
    a. Can USAID clarify which sub-Saharan, non focus countries will potentially be considered to be part of the proposed project?
    b. Can USAID confirm whether it will be required for the Recipient to work with *all* of these non focus countries, or whether the Recipient may propose which non focus countries they will work with?

Response: Please refer to the responses to Questions 2, 3, and 4.

13. On page 15, the RFA notes the cooperative agreement is anticipated to be awarded September 30, 2012. However, PMI MOPS have been completed for the period beginning October 1, 2012. How will PMI countries and non-focus countries have the opportunity to allocate funding to the project beginning October 1, 2012?

Response: PMI country teams are already aware of this new award and have the option of programming funding for this new mechanism in anticipation of its awarding by the end of this fiscal year.

14. Please identify anticipated country program transitions referenced on page 12 of the RFA. If this is not possible, please indicate the number of anticipated transitions in the first two years.

Response: We cannot accurately assess how many countries who are supported by this new project will develop sufficient capacity to transition to direct government support for implementation of some or all of the supported activities during the entire project period, as it will depend on a number of factors including the Ministry of Health's capacity to manage these funds and the technical and managerial capacity to implement the program activities. We would not anticipate that more than one or two countries would be ready to make that transition in the first two years of this new project. It is also possible that some activities are transitioned to direct government support while others continue to be supported through the project.

Regarding scope of work

15. Specific to objective four, can USAID define laboratory systems? Would RDTs conducted by community health workers be included?

We would define laboratory systems to include all sites where diagnostic testing for malaria is performed, including facilities with laboratories, facilities without laboratories but where malaria rapid diagnostic tests (RDTs) are performed, community health workers that perform RDTs, and private sector outlets that perform diagnostic testing. The focus of this project's activities in specific countries will be determined by the PMI country team, and may be limited to public sector facilities or public sector facilities plus community health workers, or public and private sector facilities.

16. Does USAID and PMI expect the awarded program to target the private sector, in addition to the public sector?

Response: Please refer to the response to Question 15. PMI expects that the primary focus of this project will be in public sector facilities and at community level. But some PMI country teams may elect to use this mechanism to strengthen private sector outlets, as well.

17. Does the donor expect the awarded program to incorporate behavior change communication mechanisms?

Response: Although we anticipate activities to change the behavior of clinical and laboratory staff will be part of this project, we do not anticipate that this project will be focused on IEC/BCC activities targeted at the general population or malaria risk groups.

18. Can USAID please provide guidance as to how technical assistance will be provided to the country missions? Is there an expectation of long term technical assistance to be based in countries where mission field support occurs?

Response: We anticipate that countries providing significant field support to this project will require establishment of a small in-country presence to ensure activities are implemented in a timely and coordinated manner. Whether or not such an in-country presence is required and the size of that in-country team should be determined in consultation with the respective PMI country team.

19. The RFA notes on page 11 "*The recipient will be required, upon request... by providing technical specifications... and assist with quantifications of requirements for these commodities.*" Does USAID and PMI expect the awarded program to 'procure' commodities?

Response: Please see the response to Question 11.

20. Please confirm that the implementing agency of this Cooperative Agreement will not be responsible for procurement of supplies, drugs and commodities, but will only be responsible of providing their technical specifications and forecasting their needs.

Response: Please refer to the response to Question 11.

21. Are information and education activities addressed to the general population part of the scope of this RFA? These activities can promote population demand for appropriate provider behavior (e.g. use of RDT for diagnosis in patients with fever, prescription and use of ACT only if the diagnosis is positive).

Response: Please refer to the response to Question 17.

22. What is the expected role that the implementing agency of this Cooperative Agreement will have with the private sector, both in developed countries and in USAID/PMI countries?

Response: Please refer to the responses to Questions 15 and 16.

23. Apart from malaria, NTD and TB, what other infectious diseases will be the focus of this Cooperative Agreement? What will be the Cooperative Agreement's estimated level of effort for diseases different from malaria? Who/How will this level of effort be determined?

Response: We cannot predict specifically whether or which support for strengthening diagnosis of other infectious diseases will be requested of this project, as this will be at the discretion of individual USAID Missions. We would anticipate that any such requests would likely focus on TB and NTDs, possibly including diagnosis of lymphatic filariasis and schistosomiasis.

24. Given that NTD's comprise an array of diseases, have they been prioritized for the purposes of this Cooperative Agreement?

Response: Please refer to the response to Question 23.

25. Recognizing that rapid diagnostic tests and malaria treatment drugs stock outs have been a major challenge to ensure effective diagnostics and case management in many countries, and Global Fund support is not looking promising in the foreseeable future, will USAID and PMI increase or change support to procurement and supply chain management partners to ensure necessary commodities?

Response: Decisions about commodity requirements are made on a country-by-country basis and are based on systematic quantifications using best available data and taking into account contributions by other donors, including the Global Fund. PMI has successfully filled gaps in commodities in a number of its countries, including conducting emergency procurements of drugs and RDTs to fill acute needs.

Regarding Funding

26. Can the Core Budget be used to fund operations outside the HQ's of the Applicant and its sub-grantees, e.g. (a) regional offices/staff of the Applicant (and its partners), or (b) country-specific offices or staff members in selected PMI countries (regardless of Mission buy-in)?

Response: Core funding is specifically intended to support overall project management and monitoring and evaluation, plus global level activities. It is not intended to support country-specific activities, including country offices, technical assistance, and implementation activities. These inputs should be funded to country Malaria Operational Plans via field support.

27. Related to capacity building, can USAID funds be used to fund off-shore training of key counterpart staff, e.g. Ministry of Health?

Response: We do not envision off-shore training to be a warranted use of PMI funds, although exceptions may be granted if such needs are identified by the PMI country team and approved by the AOTR.

28. Budget – Can the budget be divided into: Core (for HQ and selected permanent locations, e.g. regional offices) and Field Support (based on specific demands of the Missions)? If affirmative, has USAID determined a specific plug-in figure for the Field Support component of the budget?

Response: Please refer to the response to Question 26 regarding the appropriate use of core and field support funding. Offerors are to supply their own plug figures and separate core from field support budgets. For the field support budgets, we expect applicants to propose one detailed, overall budget and 3 budgets, one for small countries, one for medium countries, and one for large countries.

29. Given the uncertainties of budgeting the Field Support component of the budget, please advise on the best way to describe it in the budget? Per line item or as a plug-in figure?

Response: Please refer to the response to Questions 28.

30. Kindly indicate what percentage of the award ceiling will be core, including the anticipated amount of core funds in program years one and two.

Response: Please refer to the response to Question 26 for the appropriate use of core and field support funding. We anticipate that core funding will comprise approximately 25% to 30% of the total budget.

31. Assuming the existence of country-specific budgets, can funds of this Cooperative Agreement be used to hire long-term, field-based personnel to implement the tasks which can't effectively be met through short-term technical assistance?

Response: Please refer to the response to Question 18.

32. Related to monitoring and evaluation of project activities (page 13), project funds can be used to strengthen the host government's monitoring of the diagnostics and treatment activities. Can these project funds also be used to strengthen other malaria-related technical components of these health/malaria information systems (e.g. IPT2, LLIN distribution, IMCI)?

Response: We would not anticipate that this would be a focus of this project.

33. With regard to the Cost/Business Application, please clarify if the RFA budget is to be broken down by core and field funding. If so, is there any specific guidance USAID can provide regarding assumptions that should be used for core and field -funded activities (e.g. amounts, field scenarios, specific activities to be shown on field vs. core, etc)? If illustrative country budgets are desired, what level of detail is required?

Response: Please see responses to Questions 26 and 28.

34. In light of the emphasis on TA and capacity building type activities rather than outright procurement, will USAID reconsider the requirement of cost share in lieu of more leveraging of non-USG projects and other types of maximizing scarce resources?

Response: We believe a cost-share requirement of 5% is reasonable for the scope of the project.

35. Can project funds be used to implement operations research on relevant diagnostic technology, including proof of concept, scaling up and impact evaluation, or transitioning technological innovations to large scale?

Response: At the request of a PMI country team, in consultation with the AOR, operations research may be carried out by this project to address specific questions regarding the implementation and scale-up of project-supported activities.

36. What percentage of the estimated amount of $50,000,000 is expected to be allocated to core funds?

Response: Please refer to the response to Question 30.

37. Can USAID please indicate the level of core funding it plans to allocate over the life of project, and the project level of field support buy-ins to reach the overall ceiling? The level of core funding in Year 1 is especially important to understand for both technical and cost application purposes.

Response: Please refer to the responses to Questions 26 and 30.

38. Please clarify whether the funding for this program will allow for the set-up of in-country offices.

Response: Please refer to the response to Question 18.

39. As mentioned in the RFA (page 13, Building Managerial and Technical Capacity), the recipient will be expected to identify capacity building needs related to technical and managerial expertise in malaria diagnostics and treatment among host country governments and USAID implementing agencies. Is there a budget ceiling on a country by country basis

for the provision of financial and logistical support to meet these capacity building needs? Can either/both Core and Country-specific budgets be used for these purposes?

Response: There are no specific funding limitations on specific activities, but rather all proposed activities should be contained in a country-specific annual work plan and budget, which will undergo review by the PMI country team and the AOTR. All activity budgets will be reviewed to make sure the proposed costs are reasonable.

40. Related to global technical leadership and policy development, can project funds be used to support counterpart participation at international for addressing case management and diagnostics?

Response: With the approval of the AOR, core funding can be used to support participation at relevant meetings of key counterparts, particularly MOH staff directly involved with project activities. The AOR will review each such request individually, to determine its relevance and importance to the project's goals and objectives.

Regarding evaluation criterion

41. Can USAID please help to reconcile the broad selection criteria and scoring provisions in Section V.A. Technical Application Evaluation (page 26), with Section IV.C. Technical Application Guidelines (page 18) and Section II.E., Technical and Support Functions (page 12); specifically: does sub-heading "B Implementation Support (10 points)" on page 27 relate to the definition of "Implementation Support" given on page 18? Or does the former comprise all five lines of work discussed in the Technical Application Guidelines?

Response: The evaluation criteria on Implementation Support relates directly to the definition given on page 18 of the RFA.

42. On page 21, section IV.C.3 Staffing Plan and Qualifications it states that the staffing plan should provide a matrix of all proposed staff (in an appendix) with relevant skills and experience. In the same paragraph, it asks that this information be submitted as a biographical statement not longer than one paragraph. Please clarify if this paragraph is to be included in the matrix or if applicants should provide separate biographical statement for each staff member proposed in addition to a matrix.

Response: We would recommend providing a matrix listing the tiles of all proposed staff and a accompanied by a brief narrative describing the responsibilities of named staff categories.

43. Are IEC/BCC activities viewed as eligible for project support? If affirmative, can the design, production and distribution of IEC/BCC materials be eligible?

Please refer to the response to Question 17.

Regarding key personnel

44. Key Personnel (Section C.3.a) – are the 2 identified key personnel positions expected to be full time for the duration of the 5 year CA? Is it acceptable for key personnel to be based in a beneficiary country in Africa or the Mekong Region?

Response: We would recommend that applicants propose what they feel would be the best arrangement to achieve the goals and objectives of this project and also ensure regular communication with the AOR.

Malaria Cost Questions

1. The deadline is 20 business days from publication of the final RFA. Will USAID consider an extension for a minimum total of 30 business days to prepare the cost and technical applications?
   Answer: Although USAD is sensitive to the time requirements surrounding this application, we are not able to extend the deadline.

2. Will USAID and PMI consider an extension to the due date to June 15, 2012 to enable a more comprehensive response?
   Answer: Although USAD is sensitive to the time requirements surrounding this application, we are not able to extend the deadline.

3. Would USAID please consider an extension of the deadline to June 22nd, 2012?
   Answer: Although USAD is sensitive to the time requirements surrounding this application, we are not able to extend the deadline.

4. On page 2 of the RFA, it states "5% of the total cooperative agreement amount shall be provided by the prime recipient." On page 16, section III.C, it states "Such funds may be mobilized from the Recipient, other multilateral, bilateral, and foundation donors; host governments; and local organizations, communities and private businesses that contribute sharing in grants and cooperative agreements…" Please clarify if the cost share requirement must be mobilized solely by the prime recipient or if members of the proposed consortium may also contribute to meeting the 5% cost share.
   Answer: In accordance with ADS 303.3.10.1 and 303.3.10.2 cost sharing may include "…the host government, private foundations, businesses, or individuals…". Applicants are encouraged to review the guidance provided in the ADS regarding cost share.

5. Please clarify what evaluation criteria USAID will use in reviewing cost applications and how cost applications will be factored in final award selection.
   Answer: Cost applications will be reviewed to determine reasonability, allowability, and allocability in accordance with 22 CFR 226.45

6. Cost Share Minimum Amount (page 2), the RFA requires that cost share of "5% of the total cooperative agreement shall be provided by the prime recipient". Please confirm that the cost share minimum is 5% of the USAID-funded or obligated amount. Also please confirm that sub recipients can contribute to attaining the cost share target.
   Answer: Cost share equal to 5% or more of the total estimated cost should be included in the applicants' budget. Cost share contributions must comply with the requirements in ADS 303.3.10 and 22 CFR 226.23.

7. Can the performance monitoring plan be included as an attachment and not count against the page limit?
   Answer: The PMP should be included as an annex and therefore will not count against the page limit.