



USAID | GUATEMALA

FROM THE AMERICAN PEOPLE

DATE: December 19, 2017

SUBJECT: Strengthening Care and Treatment Cascade Notice of Funding Opportunity
(72052018RFA00002) – Amendment 1

Dear Applicants:

This Amendment No. 1 to the subject solicitation is hereby issued to incorporate the answers to questions in the attachment to this letter.

The due date for applications remains January 16, 2018 (8:00 a.m. Guatemala time).

Sincerely,

Natalie J. Thunberg
Agreement Officer

ATTACHMENT - QUESTIONS AND ANSWERS

Technical Questions:

1. Page 38, paragraph 3, by “*electronic medical record system (also known as electronic patient tracking systems)*”, can USAID please clarify if they want a full medical record system and at what level of the health system or a more streamlined tracking system that will provide health workers information on past visits, prescriptions, viral loads, etc. as patients may show up at different facilities over time?

USAID Response: A PEPFAR partner is responsible for developing the system under another activity. The Recipient for this solicitation will be responsible for ensuring that the health providers have the skills to record and analyze the medical information to ensure continuum of care and keep the information updated. The Recipient will be responsible for supporting the training on the use of the electronic system.

2. Page 38, paragraph 4, “*accreditation of laboratory or blood center/banks.*”

- We understand that another PEPFAR agency/program is already working on this activity. Please clarify what the relative relationship and responsibility of these two efforts should be?

USAID Response: Yes, another PEPFAR agency is already working specifically on accreditation. The Recipient of this solicitation will not be responsible for the accreditation of the Labs, but this new activity will support progress toward accreditation through the standardization process in the region of the use of the same lab tests and equipment.

- Could USAID clarify which HIV-related tests the NOFO refers to?

USAID Response: The HIV tests include first line diagnosis, confirmatory test, CD counts and viral load, TB and opportunistic diseases.

3. Page 39, indicator 1, could USAID clarify if the data for PEPFAR MER2.0 Indicator VL_SUPPRESSION_NAT will be by country or by health facility where technical assistance is provided?

USAID Response: The VL suppression data will be by health facility and by country.

4. Page 40, paragraph 1, does “the continuum of adaptations that should be made to HIV services” contemplate investments in infrastructure or equipment such as VL machines and anosopes?

USAID Response: The continuum of adaptations does not contemplate investments in infrastructure. There will not be any construction under this activity. In the past USAID has supported the procurement of equipment in special cases, including VL, CD machines and anoscopes, and equipment could be purchased under this activity in consultation with USAID, but the activity is expected to focus primarily on technical assistance rather than purchase of equipment.

5. Page 41, illustrative benchmark 3, the NOFO states: “*MoH Human resources in PEPFAR-supported sites trained on norms, protocols and/or policies related to the implementation of test and start and New Care models in four countries.*” Could USAID clarify which of the project countries is not included?

USAID Response: The specific countries will be determined during the work planning stage.

6. Page 41, objective 3, paragraph 3, Does the NOFO contemplate the purchases of Hep B and C test kits that are in short supply?

USAID Response: No.

7. Page 42, sub-objective 3.2, is it permitted to purchase STI diagnostic kits that are in short supply to support the management of co-infections?

USAID Response: USAID does not anticipate that the promotion of integration of HIV services requires the purchase of other coinfections/comorbidities test. The focus of this activity will be on promoting the comprehensive support of health services for PLVHI by providing training, mentoring and technical assistance.

8. Page 42, indicator 2, could USAID provide more clarity on what the denominator for this indicator is and what USAID wants measured with this indicator?

USAID Response: This indicator is hereby deleted from the solicitation by this Q&A amendment.

9. Page 42, illustrative benchmark 1, could USAID clarify why only three countries are included and if these countries have already been selected?

USAID Response: The 3 countries selected are Guatemala, Honduras and Nicaragua; those countries have the lowest HIV/TB co-infection detection rates, and the Governments still require improvement in care and support services.

10. Page 42, illustrative benchmark 2, could USAID clarify if this will be at facilities receiving Technical Assistance or at the national level?

USAID Response: This will be at facilities receiving technical assistance from The Recipient.

11. Page 43, paragraph 2, the NOFO states that “*patients’ information clinical evolution is entered into the HIV Information System.*” We understand that another PEPFAR partner will be responsible for developing an HIV information system for reporting 90-90-90 data. What does USAID anticipate will be the relationship between the work of that partner and the recipient of this award including the relationship with the Electronic Medical Record System?

USAID Response: Yes, another PEPFAR partner is responsible for developing the system. The Recipient for this solicitation will be responsible for ensuring that the health providers have the skills to record and analyze the medical information to ensure continuum of care and maintain updates in medical information.

12. Page 44, paragraph 4, the NOFO states “*The gender focus of this activity is not on women and girls, but rather is related to how gender concerns affect certain KPs.*” However on page 45, relevant actions 1, it mentions incorporation of females in decision making and “*equitable participation of men and women*”, but not KPs. Could USAID clarify which of these two descriptions should be used in developing the technical vision for the project?

USAID Response: This activity focuses on KPs. The solicitation describes how gender inequities affects KPs, and the focus of the application regarding gender issues should be on KPs, both men and women, particularly as part of the response to GBV.

13. For the selection of municipalities prioritized by country, is USAID expecting the implementer to use the listings in the Regional Operational Plan FY2018-FY2019?

USAID Response: Yes.

14. Is USAID considering the delivery of sub grants to local civil society organizations to strengthen support for community-based care and referral?

USAID Response: USAID is not expecting sub-grants under this activity, but is willing to consider this approach if the applicant proposes it.

Other Questions:

15. Page 54, key personnel annex, USAID asks for a list of references that must include “at least one subordinate, one peer, and one manager not associated with the applicant organization.” Would USAID consider expanding this requirement to include other types of references to accommodate staff who have been long-term employees of the applicant organization?

USAID Response: In cases where staff have been long-term employees of the applicant, USAID is willing to consider other types of references. The solicitation is hereby amended to clarify this.

16. Page 52, line item f) iv. mentions a “Past Performance Information/Summary Table.” Is this requirement in addition to the “Past Performance Information Data Sheets” that were included as Attachment 1 in the NOFO? It is stated on page 55 under section IV that “applicants must submit at least three no more than five past performance information data sheets.” Please confirm that this is the same requirement and that it will be included as an Appendix.

USAID Response: The applicant should submit three to five past performance information data sheets. As part of the appendix in which this information is included, the applicant should include a table summarizing this information. The solicitation is hereby amended to clarify this.

17. Page 52, line item f) vi. states that “charts, such as Organizational Chart” are not included in the page count. Can USAID please confirm if the logical framework is included in the 40 page limit?

USAID Response: The logical framework is included in the 40 page limit.

18. Is the “Organizational Chart” mentioned in page 52, line item f) vi. the same as the “Organigram” mentioned under page 54, item A? If so, please confirm that is to be included in the “Key Personnel” Annex mentioned on page 54.

USAID Response: Yes, the organigram is the same as the organizational chart. It should be included in the management and staffing section.

19. Page 63, Management and Staffing Plan, could USAID clarify what is meant by “includes proposed personnel whose composition endeavors gender equity and inclusion of indigenous participation in the staffing plan?”

USAID Response: The solicitation is hereby amended to remove the language referencing indigenous participation. USAID’s preference is that the applicant should make its best effort to demonstrate gender balance in its staffing plan.

20. Does the HIV/AIDS Senior Advisor have to be based in Guatemala, or would USAID permit this position to be based in one of the other named countries?

USAID Response: Both the Senior Advisor and the Chief of Party must be based in Guatemala. The solicitation is hereby amended to reflect this requirement.

21. Does USAID require the budget to be broken down by each country?

USAID Response: Yes