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**Closing Date:** November 26, 2019  
**Closing Time:** 3:00 p.m., Washington, DC Time

**Subject:** Notice of Funding Opportunity Number **7200AA20RFA00001**

**Program Title:** Country Health Information Systems and Data Use (CHISU)

**Catalog of Federal Domestic Assistance (CFDA) Number:** 98.001

Ladies/Gentlemen:

The United States Agency for International Development (USAID) is seeking applications for a cooperative agreement from qualified entities to implement the Country Health Information Systems and Data Use (CHISU) program. Eligibility for this award is not restricted.

USAID intends to make an award to the applicant(s) who best meets the objectives of this funding opportunity based on the merit review criteria described in this NOFO subject to a risk assessment. Eligible parties interested in submitting an application are encouraged to read this NOFO thoroughly to understand the type of program sought, application submission requirements and selection 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](http://www.grants.gov), and may be amended. It is the responsibility of the applicant to regularly check the website to ensure they have the latest information pertaining to this notice of funding opportunity and to ensure that the NOFO has been received from the internet in its entirety. USAID bears no responsibility for data errors resulting from transmission or conversion process. If you have difficulty registering on [www.grants.gov](http://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](mailto:support@grants.gov) for technical assistance.

USAID may not award to an applicant unless the applicant has complied with all applicable unique entity identifier and System for Award Management (SAM) requirements detailed in Section D.6.g. The registration process may take many weeks to complete. Therefore, applicants are encouraged to begin registration early in the process.

Please send any questions to the point(s) of contact identified in Section D. 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](http://www.grants.gov).

Issuance of this notice of funding opportunity does not constitute an award commitment on the part of the Government nor does it commit the Government to pay for any costs incurred in preparation or submission of comments/suggestions or an application. Applications are submitted at the risk of the applicant. All preparation and submission costs are at the applicant's expense.

Thank you for your interest in USAID programs.

Sincerely,

Patricia Bradley  
Agreement Officer

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## **SECTION A: PROGRAM DESCRIPTION**

### **COUNTRY HEALTH INFORMATION SYSTEMS AND DATA USE (CHISU)**

This funding opportunity is authorized under the Foreign Assistance Act (FAA) of 1961, as amended. The resulting award will be subject to 2 CFR 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, and USAID's supplement, 2 CFR 700, as well as the additional requirements found in Section F.

#### **1. Introduction**

Through this project entitled, Country Health Information Systems and Data Use (CHISU), USAID seeks to award a cooperative agreement to strengthen health information systems in low and middle income countries (LMIC) supported by USAID health programming. The overall goal of CHISU is to strengthen country capacity and leadership to manage and use health information systems to improve evidence-based decisions. The project will focus on enhancing host-country capacity to produce high-quality health information, to optimally manage this information and to institutionalize evidence-based decision making. It will align activities, priorities and systems with host-country strategic health objectives and contribute to a country's own development journey. This project will build upon USAID's Global Health Bureau's (GH) long-history promoting the use of data for decision making and enhancing health information systems in collaboration with host country counterparts.

#### **2. Program Background**

A country's ability to identify their own health needs and track progress is dependent on reliable and valid data, which is consistent with USAID's priority focus on promoting sustainable and self-reliant programming. As health information systems in low-and-middle- income countries (LMICs) progress toward self-reliance, host-country counterparts oversee the implementation, monitoring, governance and long-term sustainability. Strengthening host country capacity includes enhancing the enabling environment, updating policies and regulations as well as accessing systems and technology at the national and sub-national levels, with the private sector, civil society, and academia.

Over the years, USAID has encouraged the development of tools and approaches to improve the quality and use of data by health workers and managers alike, yet much remains to be done to incentivize the health workforce to access and use those data. Incorporating context-appropriate technologies to include digitization of work processes, increasing interoperability of existing information systems, will contribute to improving the availability of quality information and visualization for enhanced decision making at the country level.

### **3. Problem Statement**

A well-functioning health information system plays a transformative role in supporting strategic management decisions for the health sector in LMICs. Availability of timely and quality information is paramount for planning, managing and adapting human, logistics and financial resources as well as coordinating rules, roles, and relationships among different stakeholders. At the country level, limited capacity to collect, analyze and use health data for decision making continues to impede the efficiency, effectiveness, and sustainability of the health information system and consequently the broader health system. Health workers in developing countries struggle with the time and complexity required to work with multiple program-specific information systems. There is an ongoing need for harmonization and interoperability between systems to reduce the load on health workers, avoid the inefficient duplication of effort and data, and bring information from various systems together in a way that helps leaders make decisions based on a comprehensive view of the health system and its various programs.

The quality of data is often a limiting factor that contributes to the lack of confidence in using the data. Limited accountability of the data input into the system impedes the efficiency, effectiveness and sustainability of overarching system. In addition, systems in some developing countries have been built piecemeal and as a result are vertical, fragmented and overburdened in contexts where human resources, IT infrastructure and system capacities are limited. With a growing trend to better track, monitor and target country health priorities, many countries have a proliferation of indicators that strain the capacity of the health workforce to collect and use that information.

### **4. Technical and Strategic Areas of Emphasis**

For the past few decades, USAID has been a leader in data-driven decision making, with specific focus on strategic health information systems. The CHISU project will support health technical areas across the USAID priority health interventions and within USAID-supported countries working in the health sector. The priority health interventions and technical areas include infectious diseases, such as malaria, tuberculosis (TB), HIV/AIDS, global health security, and other public health threats, maternal and child health, which includes immunizations, newborn health, nutrition, water and sanitation, and reproductive health and voluntary family planning. The strategic areas of this project will focus primarily on host country strategic health information systems, health systems strengthening, development of new tools and innovative systems, capacity building, and analytics. The project would be required to adhere to all applicable requirements for USAID development data including those set forth in ADS 579.

### **5. Journey to Self Reliance**

Self-reliance is a country's capacity to plan, finance, and implement solutions to local development challenges, as well as the commitment to see these through effectively, inclusively, and with accountability. As such, a country's progress on the journey to self reliance in the health sector is dependant on its ability to collect, synthesize and use accurate and reliable data from within their own health system to track health trends, and make informed decisions about staff, services, priorities and resources. Local ownership of health information systems is

represented by the active engagement and leadership of host-country decision-makers in the strategic planning around the collection, analysis and use of health information. Local governance, leadership, and capacity are the cornerstones of sustainable health information systems that are responsive to country needs. As health information systems advance or mature, an emphasis on sustainability emerges. As interventions within the project are implemented, a focus on local ownership and the engagement of in-country partners should be present at every step of the way, from design, to implementation, to monitoring, follow up and change as appropriate. In addition, it is important to strengthen country capacity and support an enabling environment for the utilization of local expertise both within government entities at the national and sub-national levels and within the private sector, civil society, academia, and other key stakeholder groups. In USAID supported host-country programs, priorities and systems should be aligned with those of the host country.

## **6. Previous and Current Related USAID Health Projects**

Over the years there have been a number of Global Health (GH) projects working in related areas of data collection and health information. Recognizing the need for health data to inform decisions, USAID supported the Demographic Health Survey (DHS), and various phases of the MEASURE Evaluation project with a suite of projects focused on improving and institutionalizing the collection and utilization of data for monitoring and evaluation of host country programs and for policy decisions. Other USAID related GH-supported projects include Data Fi, Digital Square/Health, Infectious Disease Detection and Surveillance (IDDS), Integrated Health Systems, Maternal and Child Survival Program, HRH 2030, Health Policy Plus, Procurement and Supply Management (PSM) and the Census Bureau. Each engages with Mission teams, host country partners and participates in global leadership focused on aspects of health data and national information systems (See Annex 2 for the full inventory of GH related projects).

The MEASURE Evaluation project played an integral role in USAID's support for electronic and paper-based health information systems, building on the roll out of the widespread district health information systems (DHIS) platform, including the second version (DHIS2) in many countries and introducing a host of tools and approaches to assess readiness, monitor and manage health information systems. CHISU will serve as one of the GH flagship data/information systems projects and work collaboratively with existing GH projects noted above and others, including USAID Mission bilateral projects in the field that are actively working on health data and information activities at all levels. Unlike MEASURE Evaluation, CHISU will not focus on evaluation work.

## **7. Project Goal and Objectives**

The project goal is to strengthen country capacity and leadership to manage and use health information systems to improve evidence-based decisions. Integration and harmonization of systems across health areas is needed to improve data collection, analysis and use at national and sub-national levels. A cross cutting priority for the project will be the promotion of local partners including but not limited to the private sector and public health institutes and institutes

of higher education (HEI) as sustainable organizations contributing to the use of health information systems.

The project will work on multiple levels providing technical assistance, implementation support, training and capacity building to achieve the project objectives. It is anticipated that the project will work in 20 countries or more, over the course of the project, depending upon the USAID Mission health team priorities, resources and host country HIS needs. It will apply an adaptive learning approach, support technology transfer, information sharing and contribute to global leadership on related health information and data priorities. These inputs are critical to the achievement of each of the results.

The project will also focus on building the capacity and readiness of local partners such as public health institutions, the digital health industry and other non-governmental organizations working to advance country HIS that may seek USAID direct awards in the future beyond the life of this project.

The project will work to achieve this goal by concentrating on four primary objectives (see Annex 1 for the Results Framework):

1. Strengthened governance and enabling environment of the host-country health information systems;
2. Increased availability and interoperability of quality health data and information systems;
3. Increased demand and use of health data and information to address health priorities, gaps and challenges; and,
4. Strengthened organizational development of local, non-governmental partners for sustained local engagement on health data use.

***Objective 1: Strengthened governance and enabling environment of the host-country health information systems (15% level of effort (LOE) of the project<sup>1</sup>)***

***Sub-objective 1.1: Enhanced host country governance systems and organizational structures***

***Sub-objective 1.2: Improved development and use of effective tools measuring and monitoring of health information system evolution***

A strong health information system (HIS) evolves within a supportive enabling environment with appropriate policies and regulations, governance and oversight bodies, sufficient investments, and skilled health information workforce. The project will support host country efforts to strengthen the enabling environment for national health information systems. Specific outcomes relevant to this objective may include but are not limited to: improved HIS strategic planning and budget analysis processes; increased alignment of donor resources to address country HIS priorities; improved enforcement of HIS policies and procedures; improved monitoring and

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<sup>1</sup> The distribution of the level of effort (LOE) for objectives are estimates based on anticipated funding. Actual distribution of LOE may vary based on funding availability.

evaluation of HIS performance; and improved national-level coordination of HIS efforts by government, donors, the private sector, NGOs and USAID implementing partners.

Increased host country capacity for strategic planning will be achieved among governing bodies, inter-ministerial technical working groups, data councils, and others as appropriate within a given country context. Strategic planning, oversight and advocacy for health information system priorities will be at the national and/or sub-national levels resulting in better identification and targeting of geographic areas for HIS strengthening and introduction of technological and other HIS advancements.

***Sub-objective 1.1: Enhanced host country governance systems and organizational structures***

The successful applicant will develop an approach for increased HIS leadership and governance at the national and sub-national levels to oversee and support a national HIS. The approach may focus on engaging and coordinating efforts at national level and may include the following:

- improved organizational structures and their functioning, including national level coordination and review of HIS performance, to better meet the national HIS strategy;
- increased local capacity in governance of data management and HIS; and,
- improved budget planning at the national and sub-national levels resulting in increased resource mobilization and advocacy for health information systems consistent with USAID's journey to self-reliance principles.

The policy and regulatory environment through which a country manages and regulates its health information system is the foundation for existing and expansions of a system. The Project may assist host country partners in developing national HIS frameworks, including staffing, policies, and monitoring of HIS implementation. However, with a number of other international partners working in HIS planning and programming, there are significant opportunities for leveraging existing work and resources. In some countries, the project may more appropriately serve as a member of a coordinating team rather than implementing or developing national policies and programs. As such, the project would assist host country counterparts in developing or enhancing a functioning and supportive community of practice for decision making on relevant HIS policies and regulations that may require prioritization of HIS actions and resources plus involvement of different ministries that have oversight of legislative or regulatory reforms. The applicant will develop an approach to support host country partners in coordinating and/or developing HIS related policies and standards such as: HIS governance structures; terminology for services and health facilities; IT procurement; connectivity; data security; interoperability of currently siloed data systems including health management information systems (HMIS), surveillance and data from NGO or private facilities; frequent reviews of data quality and data use. Relevant regulatory policies and procedures may include but are not limited to an emphasis on the health system, services, facilities, and workforce as it relates to HIS data and information.



### *Illustrative Results*

- National HIS strategy in place and utilized for strengthening the HIS, including adequate HIS workforce, and reflecting alignment of planned donor investments.
- Communities of practice for decision making on relevant HIS policies and regulations enhanced.

#### ***Sub-objective 1.2: Improved development and use of effective tools for measuring and monitoring health information system evolution***

Part of the governing process includes the capacity to measure and monitor the information system, its progress/evolution, future needs and impact. HIS monitoring involves baseline assessments, routine data quality assessment and HIS evolution. The project must include an effective approach for measuring the various components and/or stages of HIS development in a country that is reflective of national strategic planning and HIS roadmap development, implementation and monitoring. The approach will include identifying core characteristics that can be measured and tracked by host country HIS leadership and governing bodies to determine future needs and priorities. Engaging expert international HIS groups, donors and the private sector working in this field will contribute to the adaptability of such an approach across countries. The approach will include a tool for measuring country progress (which may not be linear movement) and the project's contribution to moving countries along the continuum of HIS development. The approach will incorporate the behavioral element of using the health information system effectively, including assessing data quality and data use on a routine basis.

### *Illustrative Results*

- Standard approach and tool for measuring country progress developed/adapted and endorsed by expert international HIS groups, donors, and/or other stakeholders.
- Demonstrated national level evolution or advancement within a continuum of HIS development.

#### ***Objective 2: Increased availability and interoperability of quality health data information systems (35% LOE of the project)***

***Sub-objective 2.1 Increased availability of quality health information***

***Sub-objective 2.2 Strengthened interoperability of various HIS***

***Sub-objective 2.3 Leveraged technological advances, innovative tools and data science approaches for sustainable data platforms and analytics***

Health policy makers, managers, community leaders and civil society organizations benefit from a holistic picture of a health system's functions and performance. While much progress has been made, many countries have siloed or fragmented routine health information systems that have been developed to support specific health programs or functions. This project will increase integration of data from various information systems thereby expanding the availability of quality health information, plus reducing duplication and redundancy of multiple systems. The project will enable countries to obtain technical assistance to increase the interoperability of their

information systems. The project will describe its approach to draw upon and adapt existing tools that support improvements in interoperability of HIS data sources in line with the Digital Development Principles. Host country counterparts benefit from interoperable systems that increase availability, quality and integration of health information.

### ***Sub-objective 2.1 Increased availability of quality health information***

The project will support the implementation of common requirements and specifications for systems, guidelines and regulations to increase and/or maintain interoperability of systems, and as well as processes for data exchange and for monitoring the performance of the HIS. Examples of various HIS may include, but are not limited to, the routine health management information system, program-specific information systems, human resource information management (HRIS), logistics management (LMIS), financial management (FMIS), laboratory systems, electronic medical records (EMR), disease surveillance and community-based information systems across the health sector. The project will be responsible for advising and working with host country counterparts to promote and expand the availability of platforms that allow for the targeted exchange of data and development of key indicators from across (interoperable) data sources/systems, disaggregated as appropriate (e.g., by district, sex and age) allowing decision makers expanded access to high-quality data at national and sub-national levels.

International best practices show that decisions for planning, management and monitoring of health services and functions are strengthened when based on quality health information that is complete, accurate and timely. The project will support strategies to continuously improve the data on emerging management information needs as well as instituting mechanisms to check data quality routinely. These include data validation rules and data checks that can be done with a software platform (e.g. validation rules) and triangulation of data from multiple data streams/systems, which requires interoperability. The project's strategic approach will assist host country counterparts in the application of standards and guidelines for data reviews, adjustments and solutions. Activities related to data use at the facility staff level are in Objective 3.

### ***Illustrative Results***

- Expanded sustainable, quality, interoperable health information systems [completeness (facility coverage, data elements), timeliness, accuracy] over time, by geographic area.
- Enhanced institutionalization of key standard guidelines and operating procedures for data reviews and adaptive management.

### ***Sub-objective 2.2 Strengthened interoperability of various HIS***

The ability to support interoperability and migration of systems is key for this project. With a growing number of systems in place in host countries, the project will describe its approach to helping host governments conduct interoperability assessments and create/implement a process for identifying priorities and establishing standards and definitions for indicators and program data sets. The project will assist country counterparts in using or adapting the many existing internationally recognized tools such as, but not limited to, the Interoperability Maturity model,

the WHO SCORE or the Global Digital Health Index as appropriate to the country context. The project will also build capacity of host country partners to identify and select appropriate data platforms at national and subnational levels. Host country partners at national level versus community level may have different priorities, which the project will need to adequately recognize and address collaboratively with local partners. The project will be at the forefront of assisting host country partners in assessing how best to integrate or layer data from systems across the health sector and between specific databases. This will include helping countries articulate its guiding principles for prioritization. The project will also assist countries in developing HIS standards and guidelines to define common requirements and specifications for various HIS, including but not limited to systems focused on human resource information systems (HRIS), logistics management information systems (LMIS), financial management information systems (FMIS), master facility registrar (MFR), routine health information systems (RHIS), electronic medical records systems (EMR), electronic integrated disease surveillance and response (eIDSR) at national and sub-national levels, plus community-based systems.

The project will assist host countries to develop an approach for monitoring the implementation and outcomes of an expanded, interoperable HIS. This may include, but is not limited to, monitoring the use of new and enhanced systems at national and sub national levels and use of data for tracking health trends and programmatic impact (see also Objective 3).

#### *Illustrative Results*

- Improved interoperability among data sources by county/district, health area, and types of data systems, including community health systems.
- Sustainable solutions in place to oversee and maintain interoperable systems.
- Enhanced host country and stakeholder processes to establish interoperability standards, regulations and global goods.

#### ***Sub-objective 2.3 Leveraged technological advances, innovative tools and data science approaches for sustainable data platforms and analytics***

The project will keep current on technological advances to further interoperability of systems and data sharing; however, it will promote the use of products and approaches that are consistent with the Principles for Digital Development and the Donor Principles on Digital Health, endorsed by USAID<sup>2</sup>. The project will prioritize helping host countries adopt the use of open-source software platforms that meet the criteria for global goods and that enhance interoperability, scale and sustainability, while minimizing long-term recurrent costs. Part of this process will include engaging international and global experts on key updates and standards. The project will seek to enhance local partnerships with host governments, where possible, to build software applications locally yet consistent with best practices. Long term maintenance of technology investments along with resource planning for future systems needs must be considered with plans for local solutions, training and long-term support.

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<sup>2</sup> [www.donorprinciples.org](http://www.donorprinciples.org)

The evolving interoperable HIS architecture will also bring new data quality challenges. The project will describe how it will support countries to take advantage of technological advances to improve data quality, triangulation of data, analysis among the various data sets to support health professional queries and priorities to facilitate decision-making.

### *Illustrative Results*

- Improved host country to data analyses and visualization to facilitate decision-making.
- Enhanced local capacity for technology support and sustainable technology investments.

### ***Objective 3: Increased demand and use of health data and information to address health priorities, gaps and challenges (35% LOE for the project)***

***Sub-objective 3.1 Health workforce capacity and organizational processes strengthened to improve data use and analysis for decision making***

***Sub-objective 3.2 Improved use of health data for tracking coverage and health trends***

***Sub-objective 3.3 Enhanced data analytics, visualization and interpretation to inform decision making***

While basic health information systems are in place in many countries, countries continue to experience challenges related to data quality and use of the data generated. This project will apply a range of approaches for helping to enhance host country use of health information to strengthen the health system to achieve better health outcomes. The project will support improved host country culture of information, with a feedback system to health managers and staff of health facilities regarding the data provided, as well as its processes to enhance health staff knowledge, attitudes, and skills to collect and use data. Key aspects of enhanced data use may be the result of: (1) reinforced health workforce behaviors and organizational processes emphasizing data used for decision-making; (2) the use of data collected to increase confidence in its use for tracking coverage and health trends, and; (3) advanced health data analytics. The project will develop and implement strategic approaches to enhance both aspects, quality of the data collected and the use of the data by health professionals.

### ***Sub-objective 3.1 Health workforce capacity and organizational processes strengthened to improve data use and analysis for decision making***

The project will develop a comprehensive approach that results in improved data demand and enhanced health workforce capacity and behavioral best practices to access and use HIS data for decision making. The approach may include innovative models for interacting with HIS counterparts, strengthening health worker behaviors and attitudes towards the use of health data for decision making and the application of communities of practice that enhance health worker and manager demand for data. The approach will include exploring opportunities for increased confidence and self-efficacy, and trust in the HIS data; this may be achieved through a variety of ways including but not limited to strengthening or institutionalizing data review meetings, hands-on practicums for in-service learning, improving feedback loops within the health system, the development of job aids and other decision-support tools and technologies for health workers, including supportive supervision that can help institute a culture of data use.

The project will assist country counterparts to routinely monitor and review the use of community- or facility-based data to inform health policies and decisions. An outcome of this approach will include increased capacity and potentially domestic resources targeted to support the use of data and advocate for the availability of these resources. With the growing emphasis on data as a means for tracking health coverage, trends, including sex-disaggregated statistics, the project will, in collaboration with other stakeholders, support the placement of technical advisors at the national or district level to reinforce host-country decision making.

#### *Illustrative Results*

- Evidence of increased health management decisions based on HIS data.
- Demonstrated host country systems that enhance data use through supportive supervision and other methods.
- Health workforce demonstrated improved capacity to support and use data.

#### ***Sub-objective 3.2 Improved use of health data for tracking coverage and health trends***

The project will include country level sustainable strategies to improve health data use at the point of service. An expectation is that there will be a clear improvement in how community health workers and/or facility staff record information correctly, use it at the point of care, and transfer the information to reporting forms or in an existing HMIS software (such as DHIS2), if available, at the facility level. Routine data quality checks, supportive supervision, and feedback loops to data collectors and end point users is vital to the increased confidence in data, necessary for improving data use. Host country processes will link HIS staff and health facility staff to better inform on data entry and verification at point of care. Targeted data quality assessments (DQAs) may support health programs or disease-specific services to improve planning, coverage, and impact analysis.

With the growing emphasis on data as a means for tracking health coverage, trends, including sex-disaggregated statistics, the project may include placement of technical advisors at the national or district level to support institutionalization of host-country data analysis and use for decision making.

#### *Illustrative Results*

- Demonstrated routine implementation of data-use assessments that show improved HIS use and tracking of health program services, coverage and impact at national, district and points of care.
- Efficient, context dependent, and sustainable approaches exist that show improved data entry and use at the point of care.

***Sub-objective 3.3 Enhanced data analytics, visualization and interpretation to inform decision making***

The use of data from a HIS depends up on many factors including the types of data available in that system that contributes to a decision making process. The project will establish an approach that results in a strengthened relationship between health managers and workers, local analytical (e.g, academic) and IT specialists, and in improved identification of health management and clinical information needs from various HIS or from an interoperable system. The approach will result in improved processes for identifying the types of analyses needed for decisions, and user-friendly platforms with simple visual interpretation of health data. Interoperable systems will create opportunities for answering more complex management questions using advanced data analytics and visualization. Such partnerships may support development of curricula to train healthcare providers in analysis and data interpretation and its implications for use; improve and monitor information systems; establish pre-service and in-service training or mentorship programs or practicums with local hospitals or health facilities that will allow institutes of higher education (HEI) or other training staff to support real-time data analysis in partnership with health facility staff or to conduct secondary data analysis. Building on local solutions, the project will develop an approach to promote partnerships between governments and with local champions, such as training institutions or HEI and others, to support the host country in carrying out advanced analytics and visual data interpretation to increase tracking of health trends and evidence-based decision making by the host country, along with setting priorities at national, sub-national (and community) levels.

***Illustrative Results***

- Use of HIS dashboard information by health managers to monitor health trends and priorities.
- Improved use of health data in health policy development and decision making.
- Local solutions used to address training and data analysis needs.

***Objective 4: Strengthened organizational development of local, non-governmental partners for sustained local engagement on health data use (15% LOE of the project)***

***Sub-objective 4.1 Organizational capacity and financial management enhanced for local, non-governmental partners working in HIS***

The project will specifically seek opportunities for promoting sustained contributions of local organizations and institutions, such as, but not limited to HEI or local private sector technology organizations, by enhancing the organizational capacity of such local entities who are part of the enabling environment necessary for a sustained approach. The project will develop an approach for identifying such local partners and developing a pathway for enhancing their capacity and readiness to meet USAID requirements in the future to shift from sub-recipient under a USAID award to direct funding from USAID operating units, if the opportunity presents. The project will identify and support local partners early in the project to allow partnerships to develop, grow and reach a point at which the organization may seek direct funding from USAID, other donors or host country governments.

***Sub-objective 4.1 Organizational capacity and financial management enhanced for local partners working in HIS***

The project will develop plans and resources to strengthen the organizational, financial management and programmatic capacity of relevant local partners and institutions to enhance long term sustainability. This process will include preparing local partners and institutions to receive direct awards from USAID. The readiness process will include support and training to prepare for and pass pre-award surveys (for Non US organizations Pre-Award Surveys - NUPAS) for USAID engagement. Key elements of NUPAS training include financial management, governance, reporting, monitoring and human resource systems and planning. Local partners may also focus on partnerships with private sector technology companies to bolster the IT capacity in country. The number of sub-recipients moving to a transition award will be based on USAID Mission interest or other USAID operating units interested in advancing elements of the project through their own transition award to a local partner. With early indications of Mission interest, the project may seek to work collaboratively with institutions in 5-10 countries to support organizational and technical capacity building and prepare institutions to comply with USAID standards and requirements.

***Illustrative Results***

- Enhanced organizational, financial, managerial, and governance capacity of local partners to meet USAID readiness standards.

**8. Geographic Coverage**

USAID envisions a majority of the project work will take place in the Africa region, followed by Asia, Latin America and the Caribbean, the Middle East and Europe and Eurasia; however this will be dependant on USAID Mission funding (buy-in) and is subject to change.

**9. Collaboration with USG and Other Partners**

With the growing demands for health data and information, the project will need to collaborate with and engage other key partners at the country and global level. Two of the leading funding partners include the Global Fund for AIDS, Tuberculosis and Malaria (GFATM) and the Gates Foundation. Other partners beyond host country counterparts and USAID include multilateral organizations such as the WHO, UNICEF, the World Bank, GAVI, bilateral donors and USG counterparts such as CDC, Office of the Global AIDS Coordinator.

The GFATM is one of the key players in the field of health information systems strengthening at the country level. GFATM has supported the introduction of the DHIS, the open source software platform for reporting, analysis and dissemination of data, in many countries and works collaboratively with key partners in the global health community such as USAID, implementing partners, the World Bank, and others.

The Bill & Melinda Gates Foundation (Gates Foundation) has long been an investor in data systems and data collection including the early projects on vaccine data collection. It has

continued as a leader in the field supporting the global health financing facility and the Institute for Health Metrics and Evaluation (IHME), part of the University of Washington that produces global burden of disease data, national estimates of health spending, and development assistance for health data. In addition, the Gates Foundation is actively engaged in digital health and information systems. Recently, the Gates Foundation launched a number of Data Use Partnerships (DUP) to promote country-owned strategic investment planning to improve data and health sector performance. In Ethiopia, the DUP aimed to improve the collection and use of high-quality routine information in the health sector, contributing to improved quality, efficiency, and availability of primary health and nutrition services at all levels. In Tanzania, the DUP supports the development of strategic investment planning outlining priority investments, ranging from building capacity for using data to expanding digital platforms.

## 10. Cross-Cutting Issues

*Host-Country Commitment* - The host country commitment is one of the major implementation issues that the project will face in terms of promoting long-term, sustainable programming. Close collaboration with the host government and advocating for domestic financing along with other donors and stakeholders contributions for the health information system will be paramount as the project seeks to contribute to a country's journey to self-reliance.

*Data Security* - Data security is a critical element of any health information system. The project must consider best practices for data security and risk management planning to protect data from unauthorized access and data corruption throughout a system. It will need to assist countries in their efforts to ensure that personal data is handled securely and have considered steps to mitigate cyber threats. There are costs associated with data security and the project, host-country or related other stakeholders will need to include such considerations in the planning process. Data security may include data encryption and an emphasis on key management practices that protect data across various applications and platforms.

*Coordination, Communication and Collaboration:* Coordination, communication and collaboration among stakeholders facilitates trust and mutual understanding; reduces redundancy; increases synergy, scalability, and impact; and promotes learning and mutual accountability. The project will build and enhance constructive partnerships, as appropriate to the needs of a given country context. Countries may have competing or unaligned health information systems and digital health strategies; however, both can be aligned in support of the health sector strategy. The project will collaborate and engage at the global and national levels with health information systems, monitoring and evaluation, and digital health communities such as the Health Data Collaborative<sup>3</sup> (HDC) and its various working groups, the Routine Health Information Network<sup>4</sup> (RHINO), and regional digital health networks. Technical assistance related to digital technologies will be consistent with the Donor Principles on Digital Health that the USG endorsed in 2018 (footnote 2) and cross-cutting data initiatives. The project will support countries to develop and implement aligned strategies and policies for both health information systems and digital health.

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<sup>3</sup> <https://www.healthdatacollaborative.org/>

<sup>4</sup> <https://www.rhinonet.org/>



The project will also coordinate with a wide variety of stakeholders, including country Ministries of Health, Finance, Higher Education, and other relevant host-government entities; USG partners such as the Department of Health and Human Services/CDC; Department of State/Office of Global AIDS Coordinator (OGAC) and USG programs and initiatives such as the US President's Malaria Initiative (PMI) and the Global Health Security Agenda (GHSA); other donors and global health partnerships; bilateral and multilateral agencies; academic and research institutions; private sector; philanthropic organizations; and civil society organizations. The project is expected to identify ways to collaborate with these groups to achieve progress toward the results.

*Capacity Building* - The project is expected to build capacity among individuals (women and men), organizations and systems in partner countries. Capacity building is intended to span each of the four result areas leading to the achievement of the overall activity objective. There are a variety of approaches by which capacity can be improved, including, but not limited to, the use of Transition Awards to local institutes and organizations, and sub-agreements to local partners to implement data collection activities, data analysis, and data use activities. Capacity building activities may include in-service and pre-service training activities, skill-building workshops, and organizational development and systems-level interventions.

*Information Sharing and Global Leadership* - Information sharing and knowledge management activities will be an essential component of the project. These activities are expected to contribute directly to each of the result areas, and ultimately contribute to measurable progress in the achievement of the activity objective. The project will be expected to facilitate information sharing among key stakeholders in the global community and south-to-south country sharing of tools and approaches.

## **11. Monitoring, Evaluation and Learning:**

The monitoring, evaluation, and learning (MEL) system will apply USAID's Collaboration, Learning, and Adapting (CLA) principles (see ADS 201.3.5.19) to effectively integrate real time monitoring and learning back into the project strategy and program implementation and ensure knowledge is shared and disseminated with USAID and all key stakeholders.

**Monitoring:** The project will use performance, context and other complementary monitoring (see ADS 201.3.5.5) to show project progress towards achieving the objectives outlined in this NOFO and evolution of country HIS over time as well as develop and apply qualitative and quantitative monitoring techniques for HIS evolution at the country level. The project will use performance results as illustrated under the objectives but are not limited to them. The contextual monitoring using qualitative outcome monitoring techniques will highlight the conditions, factors affecting project progress and identify the causal pathway between project interventions and results and unintended consequences. Monitoring will build partnership with civil society and community for better dissemination of information, advocacy, planning and management of HIS. An activity monitoring, evaluation and learning plan (A-MELP) will be required as described in Section F.

**Evaluation:** The project may conduct on-going internal evaluations of implementation approaches throughout the life of the project. USAID reserves the right to commission an

external, third party midterm and/or final performance evaluation of the Project. The Project will work closely with any potential evaluators to provide context as well as access to relevant staff and information. Results of the performance evaluation may lead to changes in the implementation of the activity and will be shared in a public report. As with any knowledge products produced under this project, all evaluation documentation will be archived in USAID's Development Experience Clearinghouse and disseminated through other appropriate communication channels.

**Learning:** The project will conduct analyses from monitoring data, supervisory visits, project reports, interviews from key informants and target beneficiaries to document lessons learned, use them for continuous learning and adaptive management. The project will develop a preliminary learning agenda that identifies a limited number of questions related to their underlying theory of change and identify emerging trends in digital technologies and organization of health systems affecting evolution of HIS. The learning agenda may include identifying causal pathways of various organizational, technical and behavioral interventions affecting use of data with improved health system outcomes.

## 12. Gender

As outlined in USAID's Gender Equality and Female Empowerment Policy<sup>5</sup>, gender equality and female empowerment are core development objectives, fundamental for the realization of human rights and key to effective and sustainable development outcomes. The fields of health information systems strengthening and data analytics are critical to the realization of the outcomes noted above. The project will work to ensure that gender becomes integral to existing and newly created health information systems. The project will facilitate the collection of high-quality, sex-disaggregated and age-disaggregated data, to track whether and to what extent health information systems are able to track the common and differential health needs of females and males, across the life cycle. In addition, the project will develop a select number of gender-sensitive indicators, to track the extent to which gender norms and inequalities (e.g., agency in decision making) are being addressed. The project will develop a small number of gender sensitive indicators; and will be in a position to support the capacity building at country and global levels for the effective use of sex-disaggregated and gender-sensitive data for program management, development of innovative interventions, informed policy making, and health system strengthening. These efforts can include working jointly with communities and health systems to plan for accountability and transparency of such data. At the country level, the project will build the technical capacity of men and women equitably to allow for improved data and systems across the health sector. By integrating a gender lens into its portfolio of activities, the project will help countries to collect, analyze, and use sex-disaggregated and gender-sensitive data and build technical gender M&E capacity within organizations and national programs.

## 13. Climate Risk Management

In accordance with 22 CFR 216, a threshold determination of the environmental impact of the project received a categorical exclusion (CE). The activities covered by this CE are to be screened annually as part of the work plan review to ensure that program activities have not

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<sup>5</sup> [https://www.usaid.gov/sites/default/files/documents/1865/GenderEqualityPolicy\\_0.pdf](https://www.usaid.gov/sites/default/files/documents/1865/GenderEqualityPolicy_0.pdf)

changed, resulting in potential environmental impacts and a change of the threshold determination. Integration of compliance responsibilities will be through the prime and subrecipients. All activities must take into account the potential impact of the program on climate change and proposed strategies to mitigate any climate risks. Generally, no climate change risk is anticipated that would have an impact the project achievements relative to other basic developmental challenges given that project training and technical assistance activities will be conducted at health facilities or local institutions at the host country level, where climate change risk can be assessed periodically. Consistent with WHO climate risk approaches for information systems, the project will note that health information systems may be used to help identify, monitor and potentially serve as an early warning system to detect changes in health trends that may be potentially related to climate changes.

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## **SECTION B: FEDERAL AWARD INFORMATION**

### **1. Estimate of Funds Available and Number of Awards Contemplated**

USAID intends to award one Cooperative Agreement pursuant to this notice of funding opportunity; however, USAID reserves the right to fund additional cooperative agreements or none. Subject to funding availability and at the discretion of the Agency, USAID intends to provide up to \$200 million in total USAID funding not to exceed five (5) years as a period of performance (POP).

The project will be able to accept all forms of USAID Global Health Program (GHP) funding, both core and field support. It is expected to work in 20 countries or more beyond depending on funding, over the life of the project.

### **2. Start Date and Period of Performance for Federal Awards**

The anticipated period of performance is five (5) years. The estimated start date will be upon signature of award, on or around **February 2020**.

### **3. Substantial Involvement**

USAID's substantial involvement during the implementation of CHISU will be limited to approval by the Agreement Officer (AO) and/or Agreement Officer's Representative (AOR)--delegated to the AOR by the AO-- of the elements listed below. Any changes to the program description, the approved budget, and/or key personnel require AO approval.

#### **a. Approval of the Recipient's Annual Implementation Plans**

Implementation plans include, but are not limited to, annual work plans, including planned activities for the following year and any subsequent revisions, international travel plans, planned expenditures, event planning/management, international meeting preparation. USAID requires AOR approval of implementation plans annually to ensure alignment with stated goals, milestones and outputs. This plan will be developed by the recipient in close collaboration with the AOR.

#### **b. Designation of key positions and approval of key personnel, and any changes for the positions listed below require AOR concurrence and AO approval.**

- Project Director
- Deputy Project Director
- Senior Health Information Systems Director

#### **c. Collaboration or joint participation of USAID AOR with the recipient in accomplishing specific elements in the program description; where there are specific elements in the Program Description for which USAID's technical knowledge would benefit the recipient's successful accomplishment of stated program objectives, to include:**

- (1) Collaborative involvement in the selection of advisory committee members, if the recipient establishes an advisory committee that provides advice to the recipient. The AOR may participate as a member of this committee.
- (2) Concurrence on the substantive provisions of sub-awards.
- (3) Collaborative involvement in the selection of sub-awardees, grantees, and other partners.
- (4) USAID review and approval of monitoring, evaluation, and learning plans.
- (5) USAID will be involved in the substantive direction/re-direction of interrelationships with other projects.
- (6) USAID involvement in monitoring of progress toward achievement of the Objectives and Expected Achievements during the course of the Agreement(s) and in monitoring of financial expenditures.

d. Agency Authority to Immediately Halt a Construction Activity.

#### **4. Authorized Geographic Code**

The geographic code for the procurement of commodities and services under the program is 937 (the United States, the recipient country, and developing countries other than advanced developing countries, but excluding any country that is a prohibited source).

#### **5. Nature of the Relationship between USAID and the Recipient**

The principal purpose of the relationship with the Recipient and under the subject program is to transfer funds to accomplish a public purpose of support or stimulation of the CHISU project to enhance the capacity of country partners to manage and implement a national health information system. The successful Recipient will be responsible for ensuring the achievement of the program 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, program objectives and the terms and conditions of the Federal award. USAID will require management meetings on a routine basis which may be both face to face and virtual as deemed appropriate by the AOR.

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## **SECTION C: ELIGIBILITY INFORMATION**

### **1. Eligible Applicants**

Eligibility for this NOFO is not restricted. USAID welcomes applications from organizations which have not previously received financial assistance from USAID. The Recipient must be a responsible entity and have the necessary organizational, experience, accounting and operational controls and technical skills, or ability to obtain them in order to achieve the objectives of this project and comply with the terms and conditions of the award.

Individuals, foreign governments and foreign government-owned parastatal organizations, United States government (USG) departments and agencies (at the federal, state, or local levels), and Public International Organizations (PIOs) (as defined by ADS 303) are not eligible to apply for funding under this program.

### **2. Cost Sharing or Matching**

USAID has established a mandatory minimum recipient cost share of five (5) percent for the award. Such funds may be provided directly by the recipient; other multilateral, bilateral, and foundation donors; host governments; and local organizations, communities and private businesses that contribute financially and in-kind to implementation of activities at the country level. This may include contribution of staff level of effort, office space or other facilities or equipment which may be used for the program, provided by the recipient. For guidance on cost sharing in grants and cooperative agreements see 2 CFR 200.306.

### **3. Other**

A prime applicant may only submit one application in response to this NOFO. However, the prime applicants may also be proposed as a sub awardee as part of a consortium in another application.

Applicants may be included as sub awardees in only two (2) applications.

In accordance with ADS 303.3.10.2 Cost Sharing in RFAs and APS, applications that do not meet the minimum cost share requirement when applicable, are not eligible for award consideration.

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## **SECTION D: APPLICATION AND SUBMISSION INFORMATION**

### **1. Agency point of Contact**

For submission of Questions and Applications: [chisu@usaid.gov](mailto:chisu@usaid.gov).

### **2. Questions and Answers**

Questions regarding this NOFO should be submitted via email to [chisu@usaid.gov](mailto:chisu@usaid.gov) no later than the date and time indicated on the cover letter, as amended. Any information given to a prospective applicant concerning this NOFO will be furnished promptly to all other prospective applicants as an amendment to this NOFO, if that information is necessary in submitting applications or if the lack of it would be prejudicial to any other prospective applicant.

### **3. General Content and Form of Application**

#### *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 Business (Cost) Application. This subsection addresses general content requirements applying to the full application. Please see subsections 5 and 6, below, for information on the content specific to the Technical and Business (Cost) applications. The Technical application must address technical aspects only while the Business (Cost) Application must present the costs, and address risk and other related issues.

Both the Technical and Business (Cost) Applications must include a cover page containing the following information:

- Name of the organization(s) submitting the application;
- 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);
- Program name;
- Notice of Funding Opportunity (NOFO) number;
- Date of submission; and,
- 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).

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

Applicants may choose to submit a cover letter in addition to the cover pages, but it 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.

Applications must comply with the following:

- USAID will not review any pages in excess of the page limits noted in the subsequent sections. Please ensure that applications comply with the page limitations.
- Written in English.
- 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, charts, tables and text boxes.
- Submitted via Microsoft Word or PDF formats, except budget files which must be submitted in Microsoft Excel.
- The estimated start date identified in Section B of this NOFO must be used in the cost application.
- The technical application must be searchable and editable Word or PDF format as appropriate.
- The Cost Schedule must include an Excel spreadsheet with all cells unlocked and no hidden formulas or sheets. 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 application submission is the unlocked Excel version.

Applicants must review, understand, and comply with all aspects of this NOFO. Failure to do so may result in the application being considered non-responsive and may be evaluated accordingly. Applicants should retain a copy of the application and all enclosures for their records.

#### **4. Application Submission Procedures**

Applications in response to this NOFO must be submitted no later than the closing date and time indicated on the cover letter, as amended. Late applications will not be reviewed or considered. Applicants must retain proof of timely delivery in the form of system generated documentation of delivery receipt date and time/confirmation from the receiving office/certified mail receipt.

Applications must be submitted by email to [chisu@usaid.gov](mailto:chisu@usaid.gov). Email submissions must include the NOFO number and applicant's name in the subject line heading. In addition, for an application sent by multiple emails, the subject line must also indicate whether the email relates to the technical or cost application, and the desired sequence of emails and their attachments (e.g. "No. 1 of 4", etc.). For example, if your cost application is being sent in two emails, the first email should have a subject line that states: "[NOFO number], [organization name], Cost Application, Part 1 of 2".

USAID's preference is that the technical application and the cost application each be submitted as consolidated email attachments, e.g. that you consolidate the various parts of a technical application into a single document before sending it. 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.

After submitting an application electronically, applicants should immediately check their own email to confirm that the attachments were indeed sent. If an applicant discovers an error in transmission, please send the material again and note in the subject line of the email 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.

Applicants are reminded that email is NOT instantaneous, and 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. For this NOFO, the initial point of entry to the government infrastructure is the USAID mail server.

There may be a problem with the receipt of \*.zip files due to anti-virus software. Therefore, applicants are discouraged from sending files in this format as USAID/Washington cannot guarantee their acceptance by the internet server. File size must not exceed 10MB.

## **5. Technical Application Format**

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

The narrative for the technical application must be no more than 25 pages. Pages exceeding this limit will not be evaluated. The cover page, acronyms list, table of contents, executive summary, and required annexes are not subject to the page limitation. Any figures and tables within the technical application (not the annexes) must fit within the 25 page limit. Annexes not specifically requested in the NOFO instructions will not be evaluated.

**(a) Cover Page** (See Section D.3 above for requirements - Not included in the page limit)

**(b) Acronyms List** (not included in the page limit)

The Acronyms Page must include a list of acronyms from the technical application.

**(c) Table of Contents** (Not included in the page limit)

Include major sections and page numbering to easily cross-reference and identify merit review criteria.

**(d) Executive Summary** (One page, not included in the page limit)

The Executive Summary must provide a high-level overview of key elements of the Technical Application. This section should contain the information that the applicant believes best

represents its proposed approach, anticipated results, and how the overall Activity will be managed. It should put forth in sufficient detail the conceptual approach, methodology, and techniques for the implementation and monitoring of CHISU activities.

**(e) Technical Design (16 pages)**

The Technical Design is defined as the intervention package proposed by the applicants that combines both the technical elements within an overall approach as well as monitoring and measuring the progress towards achieving the goal and objectives of the project.

***(1) Technical Approach (up to 13 pages)***

The applicant must present a Technical Approach that describes specific interventions and how it will effectively and efficiently achieve the expected objectives and sub-objectives of the project. The applicant should describe how the approach will be applied in a global context, which includes addressing country context and the various stages of a country's HIS.

To be considered technically sound, feasible and fully addressing the goals and objectives described in the NOFO, the Technical Approach must include:

- Details on specific interventions that will be implemented and tools that will be utilized. The approach must be fully elaborated to provide USAID with adequate context to clearly assess the potential for successful achievement of the objectives; and,
- Sufficient information on the tools and approaches to support enhancing the enabling environment for HIS at the country level, interoperability of health information systems and strengthening health workers use of health information for decision-making is provided and articulates plans for working with countries at different levels of HIS evolution and capacity.

The Technical Approach must also address how it will further the journey to self-reliance and support longer term sustainability and local solutions. This should also include how it will engage local institutions and partners, including the private sector. It should describe how the applicant will support capacity building of local partners and USAID Transition readiness.

The Technical Approach must also describe how gender issues will be identified, analyzed, addressed, and tracked, including how the project may impact or be impacted by gender norms, roles, and relationships; and power dynamics of men and women.

***(2) Performance Monitoring and Measurement (up to 3 pages)***

The applicant must submit a draft Activity Monitoring, Evaluation, and Learning Plan (A-MELP) that demonstrates how the applicant will track progress, identify learning opportunities and effectively adapt programming to anticipate and respond to challenges and opportunities that arise. Include indicators and tools proposed, along with methods for collecting and analysing performance data for the project and for tracking country progress in advancing along the HIS continuum of development.

**(f) Key Personnel, Management and Staffing Structure (5 pages)**

***(1) Key Personnel (up to 2 pages)***

The Applicant shall designate three (3) Key Personnel for the positions listed below. The Key Personnel must possess the combination of leadership, managerial, and supervisory skills and experience, as well as the expertise necessary for the successful implementation of programs of this size and scope. All of the proposed Key Personnel must have the demonstrated ability to address the objectives of the program as described in this NOFO. The proposed Key Personnel positions must reflect the USAID priorities and principles laid out in the Program Description.

The Applicant must include a summary of Key Personnel (short bios) and how these individuals fit into the overall staffing and management plan. In an Annex, the Applicant must provide the following information for each Key Personnel: Name, position title, LOE, resume (no more than 3 pages), a minimum of three references, signed letters of commitment, and the date the proposed individual is available to begin work.

- ***Program Director***

The Applicant is required to specify a Program Director. The Program Director must meet or exceed the qualifications listed below. This individual will be responsible for reporting and meetings with the program AOR. The Program Director will provide vision, direction, leadership, and management to the award. The Program Director must have the following experience and qualifications:

- Minimum of a master's degree in public health, public administration, public policy, international development, information technology, or a related field;
- A minimum of 12 years' experience working in an international context;
- A minimum of 10 years' experience successfully leading international development projects of increasing scope and complexity,
- Demonstrated competency in leading geographically dispersed teams;
- Demonstrated competency in management, leadership, decision making, and diplomacy;
- Demonstrated success in leading organizations and people with diverse backgrounds and skill sets to achieve results;

- Demonstrated ability to liaise with and maintain effective working relations with senior host government personnel, international organizations, NGOs , civil society and U.S. Government Agencies; and,
- Full professional proficiency in English with excellent oral and written communication skills.

- ***Program Deputy Director***

The Applicant is required to specify a Program Deputy Director. The Deputy Director must meet or exceed the qualifications listed below. This individual will be responsible for providing technical and operational leadership of the program and supporting the Program Director with his/her responsibilities. The Program Deputy Director must have the following experience and qualifications:

- Minimum of a master's degree in public health, public administration, public policy, international development, or a related field;
- A minimum of 10 years' experience working in an international context;
- At least five years in management of international development programming;
- Demonstrated experience working with senior level representatives of developing country governments, international organizations, U.S. Government Agencies, other bilateral donors, civil society organizations, and private sector organizations;
- Demonstrated management, leadership, decision-making, and interpersonal skills;
- Demonstrated ability to organize and effectively and efficiently navigate the rules and regulations of U.S. Government awards; and
- Full professional proficiency in English, with excellent oral and written communication skills.

- ***Senior Health Information Systems Director***

The Applicant is required to propose a Senior Health Information Systems Director. The Senior HIS Director must meet or exceed the qualifications listed below. The Senior Health Information Systems Director will be responsible for leading the approach to develop an effective HIS country program in accordance with the program purpose, and for executing, monitoring, tracking, and reporting on the progress of the country programs under CHISU. The Senior Health Information Systems Director must have the following experience and qualifications:

- Minimum of a master's degree in public health, health informatics (preferred), or a related field;
- At least ten years of progressively more senior-level experience including supervision and management experience;
- At least five years of experience with health informatics or ICT/digital health work in an international context;

- At least five years managing a complex international development program component or portfolio of complex international agreements involving supervision of staff;
- Demonstrated ability to plan, manage, and implement all aspects of the enabling environment, interoperability of systems and use of systems within complex, international development agreement programs;
- Experience in establishing effective partnerships within and outside the organization.

***(2) Management and Staffing Structure (no more than 3 pages)***

The applicant must describe a management and staffing plan that is clear, efficient, feasible, suited to the Applicant's proposed technical approach, and capable of implementing in multiple countries simultaneously. The plan should be flexible in order to respond to variable USAID demands while demonstrating proven practices to support efficiency, responsiveness, and cost containment.

The management and staffing plan must also clearly describe the overall plan for managerial and administrative functions and delineate the management and reporting structure between the prime applicant and sub-recipients, both international and local. The plan must also explain the roles, responsibilities, authority, and processes for decision making within the Applicant's in-country teams and between the home office and the field. The management and staffing plan must demonstrate an appropriate mix of skills, which includes highly experienced professionals for the management and technical requirements of the project while also ensuring efficiency and cost control, including local staff and partners. The management and staffing plan should have minimum core staff, but have the flexibility to augment technical staff in response to evolving needs and change over time. The plan should include a data use and analytics staff. The management and staffing plan should also describe how the applicant will support capacity building of local partners and USAID Transition readiness.

The management and staffing plan must also specify which stakeholders and proposed consortium members (if appropriate) will be engaged in which area of program implementation. This information should specify the nature of the engagement (intended subrecipient, partner, or other), the anticipated level of effort, and the specific technical area for which the stakeholder or consortium members will be engaged. In an Annex, the Applicant must provide the following information: an organizational chart detailing the management and reporting structure, including headquarters and field staff (maximum 2 pages); a table that identifies all staff positions, the percentage of time that each staff member would work on this Activity, their areas of expertise, and their geographic regions of focus (maximum 2 pages); and if applicable, Consortium Partner Letters of Commitment describing the anticipated role in the consortium as well as any resources the partner intends to bring to the activity (maximum 2 pages per letter).

**(g) Institutional Capacity and Experience (up to 4 pages)**

***(1) Organizational and Technical Capacity (2 pages)***

The applicant should describe their organization's experience and capacities, including that of any proposed subrecipients, to plan and implement multi-country, technically-complex programming needed to support the range of activities needed to accomplish the objectives outlined in the Program Description of this NOFO; produce results and building the capacity of local organizations in developing countries in the technical areas covered in the Program Description; and manage proposed institutional relationships, subrecipients, and resources.

***(2) Experience in Managing Complex Health Information Systems and Capacity Building for Data Use (2 pages)***

The applicant must describe their organization's experience and expertise in managing complex HIS programs - both nationally and sub-nationally- and conducting capacity building of local institutions to promote data use as they relate to being able to successfully achieve the objectives described in the NOFO. Applicants must clearly specify the scope of relevant programs they managed in the past, what they achieved, and the types of systems and tools they developed in order to successfully manage such programs.

**h) Annexes (not included in the page limit)**

The annexes should include:

- Organizational chart (maximum 2 pages)
- Staffing Table (maximum 2 pages)
- Key Personnel CVs (maximum 3 pages per key personnel)
- Key Personnel Letters of Commitment (1 page per key personnel)
- If applicable, Consortium Partner Letters of Commitment describing the anticipated role in the consortium as well as any resources the partner intends to bring to the activity (maximum 2 pages per letter)

**6. Business (Cost) Application Format**

The Business (Cost) Application must be submitted separately from the Technical Application. While no page limit exists for the full cost application, applicants are encouraged to be as concise as possible while still providing the necessary details. The business (cost) application must illustrate the entire period of performance, using the budget format shown in the SF-424A.

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

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

**a) Cover Page** (See Section D.3 above for requirements)

**b) SF-424 Form(s)**

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

|                                                    |                                                                                                                                                                                       |
|----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Instructions for SF-424</b>                     | <a href="https://apply07.grants.gov/apply/forms/instructions/SF424_2_1-V2.1-Instructions.pdf">https://apply07.grants.gov/apply/forms/instructions/SF424_2_1-V2.1-Instructions.pdf</a> |
| <b>Application for Federal Assistance (SF-424)</b> | <a href="https://apply07.grants.gov/apply/forms/sample/SF424_2_1-V2.1.pdf">https://apply07.grants.gov/apply/forms/sample/SF424_2_1-V2.1.pdf</a>                                       |
| <b>Instructions for SF-424A</b>                    | <a href="https://apply07.grants.gov/apply/forms/instructions/SF424A-V1.0-Instructions.pdf">https://apply07.grants.gov/apply/forms/instructions/SF424A-V1.0-Instructions.pdf</a>       |
| <b>Budget Information (SF-424A)</b>                | <a href="https://apply07.grants.gov/apply/forms/sample/SF424A-V1.0.pdf">https://apply07.grants.gov/apply/forms/sample/SF424A-V1.0.pdf</a>                                             |
| <b>Instructions for SF-424B</b>                    | <a href="https://apply07.grants.gov/apply/forms/instructions/SF424B-V1.1-Instructions.pdf">https://apply07.grants.gov/apply/forms/instructions/SF424B-V1.1-Instructions.pdf</a>       |
| <b>Assurances (SF-424B)</b>                        | <a href="https://apply07.grants.gov/apply/forms/sample/SF424B-V1.1.pdf">https://apply07.grants.gov/apply/forms/sample/SF424B-V1.1.pdf</a>                                             |

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

**c) Required Certifications and Assurances**

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

- 1) "Certifications, Assurances, Representations, and Other Statements of the Recipient" document found at <https://www.usaid.gov/sites/default/files/documents/1868/303mav.pdf>
- 2) Assurances for Non-Construction Programs (SF-424B)
- 3) Certificate of Compliance: Please submit a copy of your Certificate of Compliance if your organization's systems have been certified by USAID/Washington's Office of Acquisition and Assistance (M/OAA).

**d) Budget and Budget Narrative**

The 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 project 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 application. The Budget Narrative must contain sufficient detail to allow USAID to understand the proposed costs. The applicant must ensure the budgeted costs address any additional requirements identified in Section F, such as Branding and Marking. The Budget Narrative must be thorough, including sources for costs to support USAID's determination that the proposed costs are fair and reasonable.

USAID envisions a majority of the project will take place in the USAID-designated Africa region, with smaller presence in Asia, Latin America and the Caribbean, the Middle East, and Europe and Eurasia; however, this will be dependant on USAID Mission funding (buy-in) and is subject to change.

An illustrative country list may include the following: 12 countries in Africa, 4 in Asia, 2 in LAC and 2 in the E&E region. Applicants may also propose regional offices and other country programs that may not require an in-country presence.

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

- Summary Budget, inclusive of all program costs (federal and non-federal), broken out by major budget category and by year for activities implemented by the applicant and any potential sub-applicants for the entire period of the program.
- Detailed Budget, including a breakdown by 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.
- Detailed Budgets for each major\* 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.

\*Major sub-recipient is defined as any entity receiving 5% or more of the total estimated budget.

A sample summary budget is shown below:

| Cost Element       | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 | Total |
|--------------------|--------|--------|--------|--------|--------|-------|
| Salaries and Wages |        |        |        |        |        |       |
| Fringe Benefits    |        |        |        |        |        |       |
| Travel             |        |        |        |        |        |       |
| Equipment          |        |        |        |        |        |       |
| Supplies           |        |        |        |        |        |       |
| Contractual        |        |        |        |        |        |       |
| Major Sub-awards   |        |        |        |        |        |       |



| Cost Element         | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 | Total |
|----------------------|--------|--------|--------|--------|--------|-------|
| Minor Sub-awards     |        |        |        |        |        |       |
| Consultants          |        |        |        |        |        |       |
| Other Direct Costs   |        |        |        |        |        |       |
| Meetings/Workshops   |        |        |        |        |        |       |
| Expat Allowances     |        |        |        |        |        |       |
| Total Direct Costs   |        |        |        |        |        |       |
| Total Indirect Costs |        |        |        |        |        |       |
| TOTAL                |        |        |        |        |        |       |

The Detailed Budget must contain the following budget categories and information, at a minimum:

- 1) **Salaries and Allowances** – Must be proposed consistent with 2 CFR 200.430 Compensation - Personal Services. The applicant’s budget must include position title, salary rate, level of effort, and salary escalation factors for each position. Allowances, when proposed, must be broken down by specific type and position. Applicants must explain all assumptions in the Budget Narrative. The Budget Narrative must demonstrate that the proposed compensation is reasonable for the services rendered and consistent with what is paid for similar work in other activities of the applicant. Applicants must provide their established written policies on personnel compensation. If the applicant’s written policies do not address a specific element of compensation that is being proposed, the Budget Narrative must describe the rationale used and supporting market research.
- 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) **Procurement or Rental of Goods (Equipment & Supplies), Services, and Real Property** – 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.

- 5) **Subawards** – Specify the budget for the portion of the program to be passed through to any subrecipients. See 2 CFR 200.330 for assistance in determining whether the sub-tier entity is a subrecipient or contractor. The subrecipient budgets must align with the same requirements as the applicant’s budget, including those related to fringe and indirect costs.
- 6) **Construction** – Construction is not envisioned for the project.
- 7) **Other Direct Costs** – This may include other costs not elsewhere specified, such as report preparation costs, passports and visa fees, medical exams and inoculations, as well as any other miscellaneous costs which directly benefit the program 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 program, along with estimates of costs. Otherwise, the narrative should be minimal.
- 8) **Indirect Costs** – Applicants must indicate whether they are proposing indirect costs or will charge all costs directly. In order to better understand indirect costs please see Subpart E of 2 CFR 200.414. The application must identify which approach they are requesting and provide the applicable supporting information. Below are the most commonly used Indirect Cost Rate methods:

Method 1 - Direct Charge Only

Eligibility: Any applicant

Initial Application Requirements: See above on direct costs

Method 2 - Negotiated Indirect Cost Rate Agreement (NICRA)

Eligibility: Any applicant with a NICRA issued by a USG Agency must use that NICRA

Initial Application Requirements: If the applicant has a current NICRA, submit your approved NICRA and the associated disclosed practices. If your NICRA was issued by an Agency other than USAID, provide the contact information for the approving Agency. Additionally, at the Agency’s discretion, a provisional rate may be set forth in the award subject to audit and finalization. See [USAID’s Indirect Cost Rate Guide for Non Profit Organizations](#) for further guidance.

Method 3 - De minimis rate of 10% of modified total direct costs (MTDC)

Eligibility: Any applicant that has never received a NICRA

Initial Application Requirements: 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 an indirect 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. See 2 CFR 200.414(f) for further information.

Method 4 - Indirect Costs Charged As A Fixed Amount

Eligibility: Non U.S. non-profit organizations without a NICRA may request, but approval is at the discretion of the AO

Initial Application Requirements: Provide the proposed fixed amount and a worksheet that includes the following:

- Total costs incurred by the organization for the previous fiscal year and estimates for the current year. *Guidance to AO: If the indirect costs are expected to be minimal or easily attributed to performance of a USAID agreement, the AO should delete this first bullet.*
- 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.

If the applicant does not have an approved NICRA and does not elect to utilize the 10% de minimis rate, the Agreement Officer will provide further instructions and may 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.

- 9) Cost Sharing** – The applicant should estimate the amount of cost-sharing resources to be provided 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 award.

**e) Prior Approvals in accordance with 2 CFR 200.407**

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.

## **f) Approval of Subawards**

The applicant must submit information for all subawards that it wishes to have approved at the time of award. For each proposed subaward the applicant must provide the following:

- Name of organization
- DUNS Number
- Confirmation that the subrecipient does not appear on the Treasury Department's Office of Foreign Assets Control (OFAC) list
- Confirmation that the subrecipient does not have active exclusions in the System for Award Management (SAM)
- Confirmation that subrecipient is not listed in the United Nations Security designation list
- Confirmation that the subrecipient is not suspended or debarred
- Confirmation that the applicant has completed a risk assessment of the subrecipient, in accordance with 2 CFR 200.331(b)
- Any negative findings as a result of the risk assessment and the applicant's plan for mitigation.

## **g) 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 exempted from 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 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 ([www.sam.gov](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 begin the process early. If an applicant has not fully complied with the requirements above by the time USAID is ready to make an award, USAID may determine that the applicant is not qualified to receive an award and use that determination as a basis for making an award to another applicant.

DUNS number: <http://fedgov.dnb.com/webform>

SAM registration: <http://www.sam.gov>

Non-U.S. applicants can find additional resources for registering in SAM, including a Quick Start Guide and a video on how to obtain an NCAGE code, on [www.sam.gov](http://www.sam.gov), navigate to Help, then to International Registrants.

## **h) History of Performance**

The applicant and **major sub-applicants** must provide the following information regarding its recent history of performance for all cost-reimbursement contracts, grants, or cooperative agreements involving similar or related programs, not to exceed three (3) years, as follows:

- Name of the Awarding Organization;
- Award Number;
- Activity Title;
- A brief description of the activity;
- Period of Performance;
- Award Amount;
- Reports and findings from any audits performed in the last 3 years; 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 numbers, 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 corrective action taken. The applicant should not provide general information on its performance. USAID reserves the right to obtain relevant information concerning an applicant's history of performance from any sources 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.

**Applicants should use the format provided in Annex 5: Past Performance Information of the NOFO to document the detailed information as requested. The completed forms should be included in the application's appendix/annex.**

## **i) Branding Strategy & Marking Plan**

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.

### **1. Branding Strategy – Assistance (June 2012)**

- 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 Agreement Officer 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 time frame specified by the Agreement Officer 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 Agreement Officer 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 brand mark, with the tagline “from the American people” as found on the USAID Web site at <http://www.usaid.gov/branding>, unless Section VI of the RFA or APS 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 announcements, 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 Agreement Officer 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 a part of the resulting grant or cooperative agreement

## **2. Marking Plan – Assistance (June 2012)**

- 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 brand mark, 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 <http://www.usaid.gov/branding>. Section VI of the RFA or APS 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 Agreement Officer 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 Agreement Officer 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 Agreement Officer 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, audiovisual 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 Agreement Officer 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 a part of the resulting grant or cooperative agreement, and will apply for the term of the award unless provided otherwise.

(END OF PRE-AWARD TERM)

#### **j) Funding Restrictions**

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.

USAID will not allow the reimbursement of pre-award costs under this award without the explicit written approval of the Agreement Officer.

Except as may be specifically approved in advance by the AO, all commodities and services that will be reimbursed by USAID under this award must be from the authorized geographic code specified in Section B.4 of this NOFO and must meet the source and nationality requirements set forth in 22 CFR 228.

#### **k) Conscience Clause**

##### **CONSCIENCE CLAUSE IMPLEMENTATION (ASSISTANCE) – SOLICITATION PROVISION (FEBRUARY 2012)**

- (a) An organization, including a faith-based organization, that is otherwise eligible to receive funds under this agreement for HIV/AIDS prevention, treatment, or care—
- 1) Shall not be required, as a condition of receiving such assistance—
    - (i) to endorse or utilize a multisectoral or comprehensive approach to combating HIV/AIDS; or
    - (ii) to endorse, utilize, make a referral to, become integrated with, or otherwise participate in any program or activity to which the organization has a religious or moral objection; and
  - 2) Shall not be discriminated against in the solicitation or issuance of grants, contracts, or cooperative agreements for refusing to meet any requirement described in paragraph (a)(1) above.

- (b) An applicant who believes that this solicitation contains provisions or requirements that would require it to endorse or use an approach or participate in an activity to which it has a religious or moral objection must so notify the cognizant Agreement Officer in accordance with the Mandatory Standard Provision titled “Notices” as soon as possible, and in any event not later than 15 calendar days before the deadline for submission of applications under this solicitation. The applicant must advise which activity(ies) it could not implement and the nature of the religious or moral objection.
- (c) In responding to the solicitation, an applicant with a religious or moral objection may compete for any funding opportunity as a prime partner, or as a leader or member of a consortium that comes together to compete for an award. Alternatively, such applicant may limit its application to those activities it can undertake and must indicate in its submission the activity(ies) it has excluded based on religious or moral objection. The offeror’s proposal will be evaluated based on the activities for which a proposal is submitted, and will not be evaluated favorably or unfavorably due to the absence of a proposal addressing the activity(ies) to which it objected and which it thus omitted. In addition to the notification in paragraph (b) above, the applicant must meet the submission date provided for in the solicitation.

(End of Provision)

#### **I) Conflict of Interest Pre-Award Term (August 2018)**

##### **a. Personal Conflict of Interest**

1. An actual or appearance of a conflict of interest exists when an applicant organization or an employee of the organization has a relationship with an Agency official involved in the competitive award decision-making process that could affect that Agency official’s impartiality. The term “conflict of interest” includes situations in which financial or other personal considerations may compromise, or have the appearance of compromising, the obligations and duties of a USAID employee or recipient employee.
2. The applicant must provide conflict of interest disclosures when it submits an SF-424. Should the applicant discover a previously undisclosed conflict of interest after submitting the application, the applicant must disclose the conflict of interest to the AO no later than ten (10) calendar days following discovery.

- b. **Organizational Conflict of Interest** The applicant must notify USAID of any actual or potential conflict of interest that they are aware of that may provide the applicant with an unfair competitive advantage in competing for this financial assistance award. Examples of an unfair competitive advantage include but are not limited to situations in which an applicant or the applicant’s employee gained access to non-public information regarding a federal assistance funding opportunity, or an applicant or applicant’s employee was substantially involved in the preparation of a federal assistance funding opportunity. USAID will promptly take appropriate action upon receiving any such notification from the applicant.

## **SECTION E: APPLICATION REVIEW INFORMATION**

### **1. Criteria**

The merit review criteria prescribed here 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 here and prescribed by the Technical Application Format. The Technical Application will be scored by a Selection Committee (SC) using the criteria described in this section.

### **2. Review and selection process for the Full Application**

#### **a) Merit Review**

USAID will conduct a merit review of all applications received that comply with the instruction in the NOFO. Applications will be reviewed and evaluated in accordance with the following criteria shown in descending order of importance. Each main merit review criteria and sub-criteria will be assigned an adjectival rating. While cost may be a determining factor in the final award decision, the technical merit of the application is substantially more important under this NOFO.

#### **A. Technical Design**

##### ***Technical Approach***

- a. The extent to which the Technical Approach is technically sound, feasible and fully addresses the requirements laid out in the NOFO. This includes the degree to which the applicant demonstrates its understanding of and ability to work with countries at different levels of HIS evolution and capacity. The degree to which the approach demonstrates an understanding of how gender constraints and norms will affect project activities.
- b. The extent to which the Technical Approach demonstrates a clear plan for how it will further the journey to self-reliance and sustainability of country HIS programs including how it will engage local institutions and partners and how it will support capacity building of local partners and USAID Transition readiness.

##### ***Monitoring and Evaluation Plan***

- c. The extent to which the application presents a clear activity monitoring, evaluation and learning plan for measuring project progress toward each result, including indicators and methods for collecting performance based data for tracking country progress in advancing along the HIS continuum of development. To the degree to which the applicant demonstrates a feasible approach to identifying learning opportunities and

effectively adapt programming to anticipate and respond to challenges and opportunities that arise.

## **B. Key Personnel, Staffing and Management Structure**

### ***Key Personnel***

- a. The extent to which the Key Personnel meet or exceed the minimum requirements stated in section D.5(f)(1) and demonstrate to have the requisite skills and experience working in management, international health context, HIS, analytics, data use and capacity building and partnering with local partner institutions for meeting all the objectives of the project.

### ***Management and Staffing Structure***

- b. The degree to which the applicant describes a management and staffing plan that clearly delineates roles of all partners, is clear, efficient, feasible, suited to the proposed technical approach, and capable of implementing in multiple countries simultaneously. The degree to which the applicant's plan addresses the staffing skills mix needed to successfully administer the project as defined in the NOFO, including capacity building expertise, and flexibility to augment technical staff in response to evolving needs.
- c. The degree to which the management plan clearly articulates managerial and administrative functions and reporting between headquarters, regional and/or in-country programs to effectively implement the project.

## **C. Institutional Capacity and Experience**

### ***Organizational and Technical Capacity***

- a. The extent to which the applicant demonstrates its ability, experience, and technical capacity, including any proposed sub partners, to plan and implement multi-country, technically-complex programming needed to support the range of activities needed to accomplish the objectives outlined in the NOFO; produce results and building the capacity of local partners working to advance HIS.

### ***Experience Managing Complex HIS and Capacity Building for Data Use Programs***

- b. The degree to which the applicant demonstrates experience and expertise managing and implementing complex HIS programs - both nationally and sub-nationally- and conducting capacity building for data use. This includes the scope of relevant programs managed in the past, what was achieved and the types of systems and tools developed for national and sub-national programs.

**b) Business Review**

The Agency will evaluate the cost application of the applicant(s) under consideration for an award with a result of the merit criteria review to determine whether the costs are allowable in accordance with the cost principles found in 2 CFR 200 subpart E.

The Agency will also consider (1) the extent of the applicant's understanding of the financial aspects of the program and the applicant's ability to perform the activities within the amount requested; (2) whether the applicant's plans will achieve the program objectives with reasonable economy and efficiency; and (3) whether any special conditions relating to costs should be included in the award.

Proposed cost share will be reviewed for compliance with the standards set forth in 2 CFR 200.306, 2 CFR 700.10, and the Standard Provision "Cost Sharing (Matching)" for U.S. entities, or the Standard Provision "Cost Share" for non-U.S. entities.

The AO will perform a risk assessment (2 CFR 200.205). The AO may determine that a pre-award survey is required to inform the risk assessment in determining whether the prospective recipient has the necessary organization, experience, accounting and operational controls, financial resources, and technical skills -- or ability to obtain them -- in order to achieve the objectives of the program and comply with the terms and conditions of the award. Depending on the result of the risk assessment, the AO will decide to execute the award, not execute the award, or award with "specific conditions" (2 CFR 200.207).

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## **SECTION F: FEDERAL AWARD ADMINISTRATION INFORMATION**

### **1. Federal Awards 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.

### **2. Administrative & National Policy Requirements**

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

- ADS 303
- 2 CFR 700
- 2 CFR 200
- [Standard Provisions for U.S. Non-governmental Organizations](#)
- [Standard Provisions for Non-U.S. Non-governmental Organizations](#)

See Annex 3 for a list of the Standard Provisions that will be applicable to any awards resulting from this NOFO.

### **3. Reporting Requirements**

The recipient will adhere to all reporting requirements listed below; further, US Non-Governmental organizations need to be in compliance with 2 CFR 200 and 2 CFR 700 (specifically 2 CFR 200.327-329). All reports will be submitted by the due date for approval from the USAID AOR.

#### **● Financial Reporting**

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. The recipient also must submit a copy of the SF-425 to the Agreement Officer (AO) and the Agreement Officer's Representative (AOR). These financial reports are due no later than 30 calendar days at the end of each quarter based on the federal fiscal calendar.

The recipient must submit the original and two copies of all final financial reports to USAID/Washington, M/CFO/CMP-LOC Unit, the AO, and the AOR. The recipient must submit an electronic version of the final financial report to the U.S. Department of Health and Human Services in accordance with the paragraph above.

- **Performance Reporting**

The recipient must submit via email a copy of semi-annual, annual, and final performance reports, in English, to the AOR in accordance with 2 CFR 200.328.

### **Semi-Annual and Annual Reports**

The recipient will submit semi-annual and annual progress reports based on the federal fiscal calendar. The semi-annual report will be due within 30 days after the end of the reporting period and will cover the first six months of the year (October 1 - March 31). The annual report will cover the entire fiscal year (October 1 - September 30) and will be due within 90 days of the end of the federal fiscal year. At a minimum, both semi-annual and annual reports will contain:

- Narrative description of activities completed and major accomplishments achieved during the reporting period in all countries and regions supported by CHISU, presented by objective
- Qualitative data on program achievements and results
- Progress on standard and agreed upon indicators, as outlined in the A-MELP, including status towards achieving targets and explanations for significant deviations
- Progress on the knowledge management and learning plans, the transition plan, the business plan, the gender action plan, and the A-MELP
- Problems encountered and whether they were solved or are still outstanding
- Proposed solutions to ongoing or new problems
- Success stories, blogs, articles, publications, press releases, and photographs, if available
- Update on expenditures for the reporting period against the pipeline
- Analysis and explanation of cost overruns or high unit costs, when applicable
- Planned activities for the next performance period

The annual report also will contain:

- Updated A-MELP, as an attachment

### **Final Report**

Within ninety (90) calendar days after the period performance date, the recipient will submit one (1) original and two (2) copies of the Final Report to the AOR and one (1) copy to the Agreement Officer. In addition, one (1) copy will be submitted to the Development Experience Clearinghouse:

1) Electronically: <https://dec.usaid.gov/dec/>

2) By U.S. Postal Service delivery to:

U.S. Agency for International Development  
Development Experience Clearinghouse  
M/CIO/ITSD/KM  
Ronald Reagan Building M. 01-010  
Washington, DC 20523-6100

The final report must include a narrative report and summary table of results, a comparison of actual accomplishments to the objectives established for the period of performance, and a gender analysis that describes how gender equality issues were tracked and addressed. It should highlight accomplishments against implementation plans; outline progress of benchmarks against targets; describe results; document lessons learned during implementation; and recommend strategies for **sustainable results**. The Final Report also must contain a three-page executive summary, an index of all reports and information products produced under the agreement, and a summary of the program's finances. More details on the format of the final report will be provided after the award.

- **Implementation Plans**

Annual overarching implementation plans serve as a guide to activity implementation and detail how the recipient will use the implementation year to achieve CHISU objectives. The implementation plan is intended to be an annual roadmap for USAID and the recipient. Upon consultation with the AOR, reasonable and justifiable modifications can be made to improve the chances of achieving the medium- and long-term results of the award. The recipient must submit the following implementation and reporting documents in English. The AOR and recipient will agree on the appropriate format and length.

*First Year Work Plan and Budget*

The recipient will submit a draft work plan for the first year within the 90 calendar days of executing the award. Depending on the start date of the agreement, the first year work plan may be less than a full year or more than a full year. The first year work plan must include a detailed budget for the first year.

*Annual Work Plan and Budget*

Starting with the second year of the award and for each subsequent year of performance thereafter, the recipient will submit annual work plans to the AOR for the next federal fiscal year within 30 calendar days prior to the end of the current federal fiscal year in a format agreed upon by the AOR and the recipient.

*Knowledge Management and Learning Plans*

With the need to support global best practices in the data and technology realm, the project will need to develop a learning plan for sharing information and lessons learned at the national and international level. Initial, draft plans will be finalized within the first 90 days of the agreement and updated annually as part of the annual implementation plan submission. The details of the



knowledge management plan and learning plan will be proposed by the project and agreed upon by the AOR; however the learning plan should propose a standardized, tiered approach to activity planning that outlines country-level and global strategies for collecting and sharing best practices.

#### *Activity Monitoring, Evaluation and Learning Plan (A-MELP)<sup>6</sup>*

The recipient will finalize a A-MELP for the life of CHISU that derives from the activities outlined in the Program Description and submit it to the AOR within 90 calendar days of the award for approval. The A-MELP will outline key program interventions, indicators of achievement, and associated annual and life-of-Activity targets. It should include measurement of HIS evolution in a country that is reflective of national strategic planning and HIS roadmap development, implementation and monitoring. The A-MELP should include a knowledge management plan and a gender action plan. The A-MELP must track gender equality issues in implementing activities. The recipient will update the A-MELP annually when needed and submit it as an attachment to the annual report.

#### *Gender Action Plan*

The project will conduct a gender analysis that assesses context and gender needs, including time constraints and participation limitations. This analysis will inform a subsequent gender action plan, which will be developed in collaboration with USAID management team and finalized within 90 calendar days of the award. The gender action plan will inform the Activity's technical approach as it relates to gender throughout the life of the Activity. It also will be used to inform the design of activities that seek to reduce opportunity gaps between men and women or address power differentials to promote gender equity. The gender action plans should be developed in conjunction with the Activity's monitoring, evaluation and learning plan, and progress should be reflected in annual work plans and performance reports.

#### *Closeout Plan*

No later than six (6) months prior to the completion date of the agreement, the recipient will submit a demobilization plan for Agreement Officer's approval. The demobilization plan shall include: 1) a draft property disposition plan, 2) a plan for the phase-out of in-country operations, 3) a staffing discharge plan, 4) a delivery schedule for all reports or other deliverables required under the agreement, and 5) a timetable for completing all required actions in the demobilization plan, including the submission date of the final property disposition plan to the Agreement Officer.

## **4. Program Income**

Program Income is not anticipated to be generated under the award. Should program income be generated during the Activity's period of performance, must be added to the total program amount and used to further eligible objectives for the Activity.

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<sup>6</sup> [https://usaidlearninglab.org/sites/default/files/resource/files/cleared\\_-\\_how-to\\_note\\_-\\_activity\\_mel\\_plan\\_sep2017.pdf](https://usaidlearninglab.org/sites/default/files/resource/files/cleared_-_how-to_note_-_activity_mel_plan_sep2017.pdf)

## **5. Environmental Compliance**

As required by the 22 CFR 216, an Initial Environmental Examination (IEE) was completed by the USAID/GH/ID Office to ensure that proposed interventions adhere to U.S. and host countries' environmental requirements, and that appropriate environmental safeguards are adopted to prevent negative environmental consequences of USAID investment. The environmental determination for this IEE was a "categorical exclusion," given the activities focus on technical assistance, training of health professionals and IT experts on data collection, and organizational capacity building.

An annual screening must be conducted to determine whether activities under the CHISU contained in the categorical exclusion justification remain within the Activity's scope. Changes to the Activity require an environmental review and possible amendment of the categorical exclusion justification to reflect the new activities.

Per ADS 204, the IEE will need to be amended and environmental determination reviewed if there is any new information or changes in interventions that might require revision of the determination.

## **6. Other Requirements**

The project will need Mission concurrence prior to working with a given USAID Mission in a given country and will refer to Mission -specific guidance on security and other safety related information.

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**SECTION G: FEDERAL AWARDING AGENCY CONTACT(S)**

For submission of Questions and Applications: [chisu@usaid.gov](mailto:chisu@usaid.gov).

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## **SECTION H: OTHER INFORMATION**

### **1. Other Information**

USAID reserves the right to fund any or none of the applications submitted. The Agreement Officer is the only individual who may legally commit the Government to the expenditure of public funds. Any award and subsequent incremental funding will be subject to the availability of funds and continued relevance to Agency programming.

#### Applications with Proprietary Data

Applicants who include 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 cover page with the following:

“This application includes data that must not be disclosed duplicated, used, or disclosed – in whole or in part – for any purpose other than to evaluate this application. If, however, an award is made as a result of – or in connection with – the submission of this data, the U.S. Government will have the right to duplicate, use, or disclose the data to the extent provided in the resulting award. This restriction does not limit the U.S. Government’s right to use the 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}.”

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.”

### **2. List of Annexes**

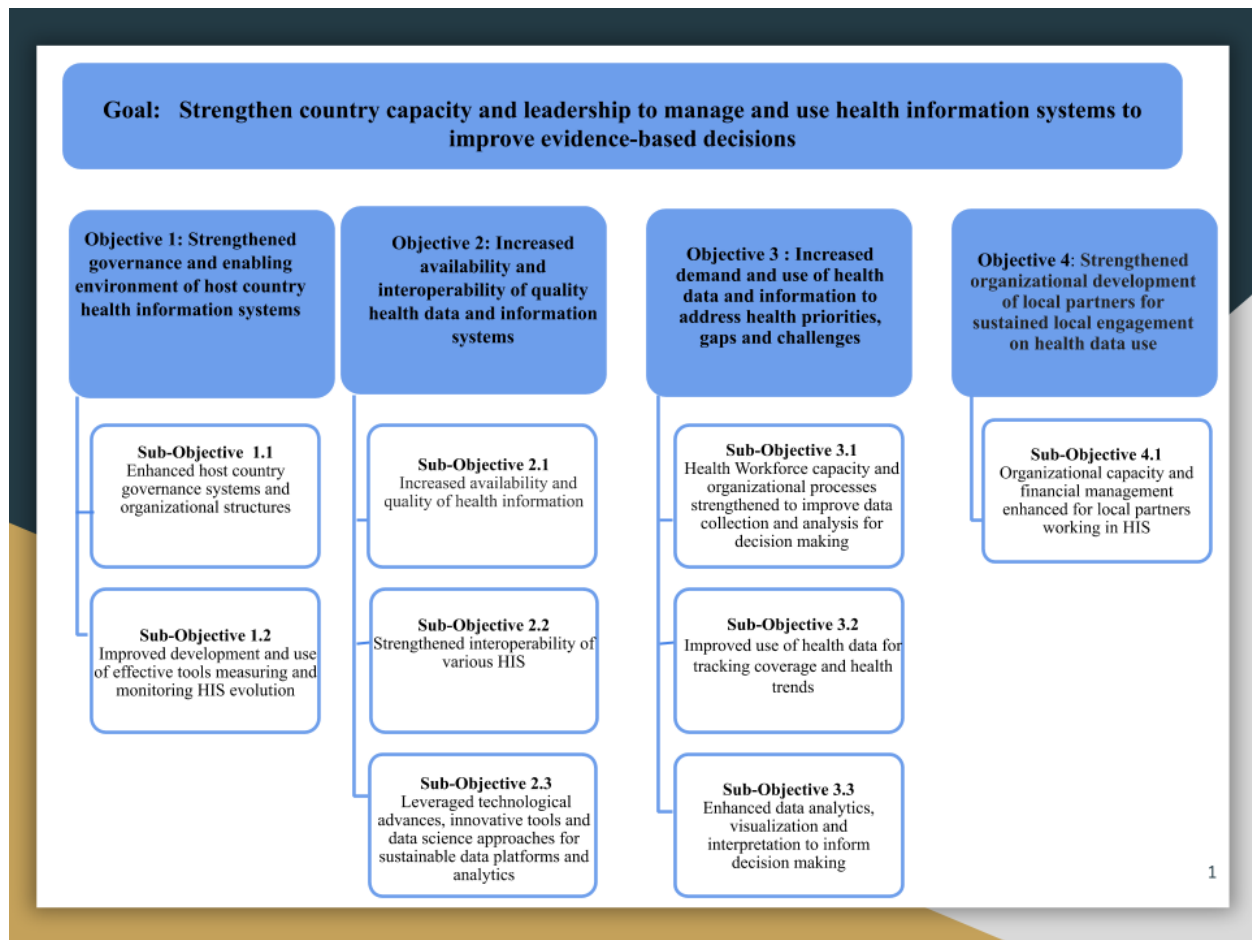
Annex 1: Results Framework  
Annex 2: Global Health Bureau Related Projects  
Annex 3: Standard Provisions  
Annex 4: Abbreviations and Acronyms  
Annex 5: Past Performance Form

### **3. Other Resources**

SAM: Quick Start Guide for New Grantee Registration  
[https://www.sam.gov/sam/transcript/Quick\\_Guide\\_for\\_Grants\\_Registrations.pdf](https://www.sam.gov/sam/transcript/Quick_Guide_for_Grants_Registrations.pdf)

SAM: Quick Start Guide for International Registrants  
[https://www.sam.gov/SAM/transcript/Quick\\_Guide\\_for\\_International\\_Entity\\_Registration.pdf](https://www.sam.gov/SAM/transcript/Quick_Guide_for_International_Entity_Registration.pdf)

## ANNEX 1 - RESULTS FRAMEWORK



## ANNEX 2 - GLOBAL HEALTH BUREAU RELATED PROJECTS

### *Global Health Bureau Related Projects (as of October 2019)*

| Activity                                             | Description                                                                                                                                                                                                                                                                                                                      | End Date |
|------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| Measure Evaluation IV                                | Strengthens health information data and reporting systems, develops tools for data systems assessments, conducts data evaluations, and contributes to global leadership on data systems and analysis. Limited Associate Awards for Malaria and TB include staff support to National programs and data collection (through 2023). | 2020     |
| Digital Health                                       | Supports globally-applicable digital health programs and provides technical assistance to countries to strengthen information use to improve program planning while building capacity in digital health.                                                                                                                         | 2021     |
| Procurement and Supply Management (PSM)              | Focuses on technologies and commercial best practices to increase the efficiency of health commodities supply chains, provides technical assistance to host countries to strengthen health planning, logistics, financing of digital systems to manage commodities using LMIS and other global platforms.                        | 2020     |
| Translating Data for Implementation (DiFI)           | HIV focused program to improve global, regional and national in-depth analyses of HIV epidemic and program data for PEPFAR target.s                                                                                                                                                                                              | 2024     |
| Infectious Disease Detection and Surveillance (IDDS) | Improving diagnostic lab networks and surveillance systems to detect priority pathogens which includes work on integration of laboratory, surveillance and routine health and animal health information systems.                                                                                                                 | 2023     |
| HRH 2030                                             | Strengthening health workforce development and human resource planning & systems at country levels.                                                                                                                                                                                                                              | 2020     |
| Demographic Health Survey (DHS) 8                    | Conducting national household and facility surveys in collaboration with national partners.                                                                                                                                                                                                                                      | 2024     |
| Advance UHC (IDIQ)                                   | Supporting expanded access to Universal Health Coverage through data.                                                                                                                                                                                                                                                            | 2024     |

| Activity                                     | Description                                                                                                                                                                                                                        | End Date           |
|----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| Maternal Child Survival Program (MCSP)       | Focused programs on reducing maternal mortality and child deaths, including data collection at community levels and analysis of health management information system MCSP data.                                                    | 2019/New Award TBD |
| Digital Reach (AFR Bur)                      | Provides technical support to the East African Community (EAC) to support the development of policies and standards for data mobility and sharing of data across borders.                                                          | 2021               |
| International Federation of Red Cross (IFRC) | Supports community based health work and community based pandemic preparedness including work with the early warning and alert information system (EWARS).                                                                         | 2022               |
| Health Policy Plus                           | Strengthens and advances health policy priorities; aims to improve enabling environment for equitable and sustainable health services; builds country capacity in sustainable health financing and domestic resource mobilization. | 2020               |

### ANNEX 3 - STANDARD PROVISIONS

(Note: the full text of these provisions may be found at: <https://www.usaid.gov/ads/policy/300/303maa> and <https://www.usaid.gov/ads/policy/300/303mab>). The actual Standard Provisions included in the award will be dependent on the organization that is selected. The award will include the latest Mandatory Provisions for either U.S. or non-U.S. Nongovernmental organizations. The award will also contain the following “required as applicable” Standard Provisions:

#### REQUIRED AS APPLICABLE STANDARD PROVISIONS FOR U.S. NONGOVERNMENTAL ORGANIZATIONS

| Required | Not Required | Standard Provision                                                                        |
|----------|--------------|-------------------------------------------------------------------------------------------|
| TBD      |              | RAA1. NEGOTIATED INDIRECT COST RATES - PREDETERMINED (DECEMBER 2014)                      |
|          |              | RAA2. NEGOTIATED INDIRECT COST RATES - PROVISIONAL (Nonprofit) (DECEMBER 2014)            |
|          |              | RAA3. NEGOTIATED INDIRECT COST RATE - PROVISIONAL (Profit) (DECEMBER 2014)                |
| X        |              | RAA4. EXCHANGE VISITORS AND PARTICIPANT TRAINING (JUNE 2012)                              |
| X        |              | RAA5. VOLUNTARY POPULATION PLANNING ACTIVITIES – SUPPLEMENTAL REQUIREMENTS (JANUARY 2009) |
|          | X            | RAA6. PROTECTION OF THE INDIVIDUAL AS A RESEARCH SUBJECT (APRIL 1998)                     |
|          | X            | RAA7. CARE OF LABORATORY ANIMALS (MARCH 2004)                                             |
|          | X            | RAA8. TITLE TO AND CARE OF PROPERTY (COOPERATING COUNTRY TITLE) (NOVEMBER 1985)           |
| X        |              | RAA9. COST SHARING (MATCHING) (FEBRUARY 2012)                                             |
| X        |              | RAA10. PROHIBITION OF ASSISTANCE TO DRUG TRAFFICKERS (JUNE 1999)                          |
|          | X            | RAA11. INVESTMENT PROMOTION (NOVEMBER 2003)                                               |
| X        |              | RAA12. REPORTING HOST GOVERNMENT TAXES (DECEMBER 2014)                                    |



| Required | Not Required | Standard Provision                                                                                                                                    |
|----------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| X        |              | RAA13. FOREIGN GOVERNMENT DELEGATIONS TO INTERNATIONAL CONFERENCES (JUNE 2012)                                                                        |
| X        |              | RAA14. CONSCIENCE CLAUSE IMPLEMENTATION (ASSISTANCE) (FEBRUARY 2012)                                                                                  |
| X        |              | RAA15. CONDOMS (ASSISTANCE) (SEPTEMBER 2014)                                                                                                          |
| X        |              | RAA16. PROHIBITION ON THE PROMOTION OR ADVOCACY OF THE LEGALIZATION OR PRACTICE OF PROSTITUTION OR SEX TRAFFICKING (ASSISTANCE) (SEPTEMBER 2014)      |
| X        |              | RAA17. USAID DISABILITY POLICY - ASSISTANCE (DECEMBER 2004)                                                                                           |
|          | X            | RAA18. STANDARDS FOR ACCESSIBILITY FOR THE DISABLED IN USAID ASSISTANCE AWARDS INVOLVING CONSTRUCTION (SEPTEMBER 2004)                                |
|          | X            | RAA19. STATEMENT FOR IMPLEMENTERS OF ANTI-TRAFFICKING ACTIVITIES ON LACK OF SUPPORT FOR PROSTITUTION (JUNE 2012)                                      |
|          | X            | RAA20. ELIGIBILITY OF SUBRECIPIENTS OF ANTI-TRAFFICKING FUNDS (JUNE 2012)                                                                             |
|          | X            | RAA21. PROHIBITION ON THE USE OF ANTI-TRAFFICKING FUNDS TO PROMOTE, SUPPORT, OR ADVOCATE FOR THE LEGALIZATION OR PRACTICE OF PROSTITUTION (JUNE 2012) |
| X        |              | RAA22. UNIVERSAL IDENTIFIER AND SYSTEM OF AWARD MANAGEMENT (July 2015)                                                                                |
| X        |              | RAA23. REPORTING SUBAWARDS AND EXECUTIVE COMPENSATION (DECEMBER 2014)                                                                                 |
| X        |              | RAA24. PATENT REPORTING PROCEDURES (DECEMBER 2014)                                                                                                    |
|          | X            | RAA25. ACCESS TO USAID FACILITIES AND USAID'S INFORMATION SYSTEMS (AUGUST 2013)                                                                       |
| X        |              | RAA26. CONTRACT PROVISION FOR DBA INSURANCE UNDER RECIPIENT PROCUREMENTS (DECEMBER 2014)                                                              |

| Required | Not Required | Standard Provision                                                                           |
|----------|--------------|----------------------------------------------------------------------------------------------|
| X        |              | RAA27. AWARD TERM AND CONDITION FOR RECIPIENT INTEGRITY AND PERFORMANCE MATTERS (April 2016) |
| X        |              | RAA28. PROTECTING LIFE IN GLOBAL HEALTH ASSISTANCE (MAY 2017)                                |

**REQUIRED AS APPLICABLE STANDARD PROVISIONS FOR NON-U.S. NONGOVERNMENTAL ORGANIZATIONS**

| Required | Not Required | Standard Provision                                                                     |
|----------|--------------|----------------------------------------------------------------------------------------|
| TBD      |              | RAA1. ADVANCE PAYMENT AND REFUNDS (DECEMBER 2014)                                      |
|          |              | RAA2. REIMBURSEMENT PAYMENT AND REFUNDS (DECEMBER 2014)                                |
| TBD      |              | RAA3. INDIRECT COSTS – NEGOTIATED INDIRECT COST RATE AGREEMENT (NICRA) (DECEMBER 2014) |
|          |              | RAA4. INDIRECT COSTS – CHARGED AS A FIXED AMOUNT (NONPROFIT) (JUNE 2012)               |
| X        |              | RAA5. UNIVERSAL IDENTIFIER AND SYSTEM OF AWARD MANAGEMENT (July 2015)                  |
| X        |              | RAA6. REPORTING SUBAWARDS AND EXECUTIVE COMPENSATION (DECEMBER 2014)                   |
| X        |              | RAA7. SUBAWARDS (DECEMBER 2014)                                                        |
| X        |              | RAA8. TRAVEL AND INTERNATIONAL AIR TRANSPORTATION (DECEMBER 2014)                      |
| X        |              | RAA9. OCEAN SHIPMENT OF GOODS (JUNE 2012)                                              |
| X        |              | RAA10. REPORTING HOST GOVERNMENT TAXES (JUNE 2012)                                     |
| X        |              | RAA11. PATENT RIGHTS (JUNE 2012)                                                       |
| X        |              | RAA12. EXCHANGE VISITORS AND PARTICIPANT TRAINING (JUNE 2012)                          |

| Required | Not Required | Standard Provision                                                                                                                                    |
|----------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| X        |              | RAA13. INVESTMENT PROMOTION (NOVEMBER 2003)                                                                                                           |
| X        |              | RAA14. COST SHARE (JUNE 2012)                                                                                                                         |
| X        |              | RAA15. PROGRAM INCOME (DECEMBER 2014)                                                                                                                 |
| X        |              | RAA16. FOREIGN GOVERNMENT DELEGATIONS TO INTERNATIONAL CONFERENCES (JUNE 2012)                                                                        |
|          | X            | RAA17. STANDARDS FOR ACCESSIBILITY FOR THE DISABLED IN USAID ASSISTANCE AWARDS INVOLVING CONSTRUCTION (SEPTEMBER 2004)                                |
|          | X            | RAA18. PROTECTION OF HUMAN RESEARCH SUBJECTS (JUNE 2012)                                                                                              |
|          | X            | RAA19. STATEMENT FOR IMPLEMENTERS OF ANTI-TRAFFICKING ACTIVITIES ON LACK OF SUPPORT FOR PROSTITUTION (JUNE 2012)                                      |
|          | X            | RAA20. ELIGIBILITY OF SUBRECIPIENTS OF ANTI-TRAFFICKING FUNDS (JUNE 2012)                                                                             |
|          | X            | RAA21. PROHIBITION ON THE USE OF ANTI-TRAFFICKING FUNDS TO PROMOTE, SUPPORT, OR ADVOCATE FOR THE LEGALIZATION OR PRACTICE OF PROSTITUTION (JUNE 2012) |
| X        |              | RAA22. VOLUNTARY POPULATION PLANNING ACTIVITIES – SUPPLEMENTAL REQUIREMENTS (JANUARY 2009)                                                            |
| X        |              | RAA23. CONSCIENCE CLAUSE IMPLEMENTATION (ASSISTANCE) (FEBRUARY 2012)                                                                                  |
| X        |              | RAA24. CONDOMS (ASSISTANCE) (SEPTEMBER 2014)                                                                                                          |
| X        |              | RAA25. PROHIBITION ON THE PROMOTION OR ADVOCACY OF THE LEGALIZATION OR PRACTICE OF PROSTITUTION OR SEX TRAFFICKING (ASSISTANCE) (SEPTEMBER 2014)      |
|          | X            | RAA26. LIMITATION ON SUBAWARDS TO NON-LOCAL ENTITIES (JULY 2014)                                                                                      |

| <b>Required</b> | <b>Not<br/>Required</b> | <b>Standard Provision</b>                                                                             |
|-----------------|-------------------------|-------------------------------------------------------------------------------------------------------|
| X               |                         | RAA27. CONTRACT PROVISION FOR DBA INSURANCE UNDER RECIPIENT PROCUREMENTS (DECEMBER 2014)              |
| X               |                         | RAA28. CONTRACT AWARD TERM AND CONDITION FOR RECIPIENT INTEGRITY AND PERFORMANCE MATTERS (April 2016) |
| X               |                         | RAA29. PROTECTING LIFE IN GLOBAL HEALTH ASSISTANCE (MAY 2017)                                         |

## **ANNEX 4 - ABBREVIATIONS AND ACRONYMS**

### **ABBREVIATIONS AND ACRONYMS**

|          |                                                                  |
|----------|------------------------------------------------------------------|
| ADS      | Automated Directives System                                      |
| AMELP    | Activity Monitoring, Evaluation, and Learning Plan               |
| AO       | Agreement Officer                                                |
| AOR      | Agreement Officer's Representative                               |
| CBO      | Community-based organization                                     |
| CHISU    | Country Health Information Systems and Data Use Project          |
| CHW      | Community Health Worker                                          |
| DHIS2    | District Health Information Systems, second version              |
| DQA      | Data Quality Assessment                                          |
| DUP      | Data Use Partnership                                             |
| EMR      | Electronic Medical Records                                       |
| FMIS     | Financial Management Information System                          |
| FP       | Family Planning                                                  |
| GH       | Global Health Bureau                                             |
| GHSA     | Global Health Security Agenda                                    |
| HDC      | Health Data Collaborative                                        |
| HEI      | Institute of Higher Education                                    |
| HIV/AIDS | Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome |
| HIS      | Health Information System                                        |
| HMIS     | Health Management Information System                             |
| HRIS     | Health Resource Information System                               |
| ID       | Infectious Disease                                               |
| IDSR     | Integrated Disease Surveillance and Response                     |
| LMIS     | Logistics Management Information System                          |
| M&E      | Monitoring and Evaluation                                        |
| MCH      | Maternal and child health                                        |
| MEL      | Monitoring, Evaluation, and Learning                             |
| MFR      | Master Facility Registry                                         |
| MOH      | Ministry of Health                                               |
| NGO      | Non-governmental organization                                    |
| NOFO     | Notice of Funding Opportunity                                    |
| NUPAS    | Non U.S. Organization Pre-Award Survey                           |
| OAA      | Office of Assistance and Acquisitions                            |
| PMI      | President's Malaria Initiative                                   |
| PMP      | Performance Monitoring Plan                                      |
| PRH      | Office of Population and Reproductive Health                     |
| RFA      | Request for Applications                                         |
| RH       | Reproductive Health                                              |
| RHIS     | Routine Health Information System                                |
| USAID    | United States Agency for International Development               |
| WHO      | World Health Organization                                        |

## ANNEX 5 - PAST PERFORMANCE INFORMATION

### Past Performance Information (PPI) (To be completed by the applicant)

|                                                                                                                                                                                                             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. Award Number:</b>                                                                                                                                                                                     |
| <b>2. Contractor/Recipient (Name and Address):</b>                                                                                                                                                          |
| <b>3. Type of Award:</b>                                                                                                                                                                                    |
| <b>4. Complexity of Work:</b> Difficult _____ Routine _____                                                                                                                                                 |
| <b>5. Description, location, and relevancy of work:</b>                                                                                                                                                     |
| <b>6. Dollar Value of Work :</b> _____ <b>Status:</b> Active/Completed _____                                                                                                                                |
| <b>7. Date of Award:</b> _____<br><b>Award Completion Date (including extensions):</b> _____                                                                                                                |
| <b>8. Type and Extent of Subawards:</b>                                                                                                                                                                     |
| <b>9. Name, Address, Telephone Number, and E-mail Address of the Awarding Contracting/Agreement Officer and/or the Contracting/Agreement Officer's Representative (and other references as applicable):</b> |

