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CSHGP FY08 RFA Questions and Clarification

CSHGP 2008 RFA Conference

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Questions and Clarification in this presentation:

- Reference only the CSHGP FY08 Final RFA (not past/future CSHGP RFAs or other USAID procurement)
- Respond to specific questions generated during the DRAFT RFA period
- Responses grouped by category based on top areas of inquiry during DRAFT
 - Applicant Eligibility
 - Tuberculosis Category
 - Eligible/Focal Countries
- Not exhaustive explanations
 - Please refer to the CSHGP FY08 Final RFA and attachments for complete descriptions, information, eligibility and evaluation criteria.



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Applicant Eligibility

Responses here include only certain aspects of applicant eligibility based on those questions asked on the DRAFT. For complete eligibility criteria, please see the Final RFA (Section B: Selection Criteria).



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Main areas of inquiry during DRAFT period

- Which types of organizations are eligible and for which application categories?
- Clarification of the financial restriction (5 million over 5 years) on USG direct funding for New Partner Category applicants.
- What is the amount of required PVO/NGO cost share and what constitutes cost share?
- What constitutes legal presence and at what point in the application process/award stage must an applicant have legal presence?
- How are applications competed—together or by category?



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Status

- U.S. PVO
 - Registered, or in the process of registration, with USAID at the time of application submission.

http://www.usaid.gov/our_work/cross-cutting_programs/private_voluntary_cooperation/conditions_us_organizations.pdf

 - **Eligible to apply in all categories**
- U.S. non-profit NGO
 - Only eligible to apply for funding under New Partner Category in this RFA.
- For-profit organizations are not eligible for funding under this RFA



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Financial Restrictions (New Partner Category **only**)

U.S. PVOs and NGOs that have been awarded no more than \$5 million in total, direct USG funding (any federal) over 5 fiscal years prior to application submission

- Excludes USG emergency and disaster assistance (domestic or international) (e.g. OFDA assistance)
 - Excludes USG domestic or international funding received by virtue of a subcontract or sub-agreement
- New Partner Category applicants are held to this restriction
 - Also applies to **any organization** with which the principal NP applicant may choose to enter into a subcontract or grant.



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Applicant Eligibility Scenarios

- U.S. PVO (meeting registration requirements), 5 yrs experience in health development, received less than USG \$5 million over 5 yrs
 - New Partner, Innovation or TB Categories
- U.S. PVO with 5+ yrs experience in health development, received more than USG \$5 million over 5 yrs
 - Innovation or TB Categories
- U.S. non-profit NGO not exceeding USG \$5 million over 5 yr restriction
 - New Partner Category



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Cost Share

- Applicants required to contribute at least a 25% cost share in **non-federal** resources.
 - Can include cash, in-kind, volunteer, etc
 - Cost share is **not** held to Standard Provisions (RFA, Section E) for federal financial resources.
- Applicant must propose to contribute at least 25% of the cost of their proposed project in non-U.S. government resources.
 - E.g. TB Category → Total proposed project cost=\$2 million
USAID contribution= \$1.5 million; Cost Share= \$500,000 (25% total proposed project cost).



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Documented legal presence

- Applicants must demonstrate that they have begun the process of established legal presence by the time of **application submission**.
 - Signed agreement with the host government included in the application.
- Before an agreement can be **awarded**, the applicant must have **proof** of documented legal presence.
 - E.g. a registered liaison office in-country is sufficient to meet the criteria of documented legal presence if registration is complete by the time of award if an applicant is recommended for funding.



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Pool of Applications

- All categories are competed separately, not against each other.
 - New Partner
 - Innovation
 - Tuberculosis

E.g. New Partner Category applications are competed only against other New Partner Category applications.



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Tuberculosis

Responses here include only certain aspects on the Tuberculosis Category based on those questions asked on the DRAFT. For complete eligibility criteria, please see the Final RFA (Section C: Grant Application Guidelines; II. Technical Application Guidelines; C: Tuberculosis).



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Main areas of inquiry during DRAFT period

- Clarification on allowed technical areas for applications
 - Innovation and its relevance in the TB Category
 - HIV/TB
 - Procurement
- Why are TB Category projects 5 years when other categories are 4-5 years?



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TB Technical areas: Innovation

- The TB category is based on the Stop TB Strategy and its interventions.
- Innovation is not a key area of focus for TB Category
- Innovative approaches in support of the Strategy will be evaluated equally as other approaches in terms of feasibility and appropriateness.



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TB Technical areas: Procurement system

Interventions that support and improve the drug procurement system can be proposed in TB project applications

- TB drug management is part of DOTS expansion and enhancement.



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TB Technical Areas: TB/HIV

- HIV prevention and control activities will not be assigned an official level of effort (LOE) in TB projects.
- TB/HIV activities can be proposed given appropriateness in intervention area
 - TB/HIV activities should consider the relative burden of TB/HIV co-infection, country context and priorities, beneficiary population, etc.



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Length of TB projects

- **TB project time frame is 5 yrs while NP and Innovation are 4-5 yrs**
- **TB projects appear to benefit from a longer (i.e. 5 yrs vs. 4 yrs) timeframe to achieve results.**
- **5 year length also allows USAID to stretch out the mortgages of all the grants so the TB category can continue every year.**



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Eligible/Focal Countries

Responses here include only certain aspects of country eligibility and evaluation criteria based on those questions asked on the DRAFT RFA. For complete information regarding country selection and eligibility, please see the Final RFA (Section A: Program Description; V: Eligible Country List & Section C: Grant Application Guidelines for Evaluation Criteria).



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Main areas of inquiry during DRAFT period

- What is the difference between an eligible country and focal (High, Medium, Low) countries?
- Rationale for country classification as H,M, or L.
- Clarification of allocation of points for those applications in an eligible country but not in H,M, or L country.
- Request for opportunities to recoup lost points due to country selection.
- Are there priority geographic areas within focal countries?
- Are there focal countries for TB and points associated with country selection?



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Country Selection: Evaluation Criteria

New Partner (NP) and Innovation Categories **only****

- Eligible countries (all those listed in Final RFA are eligible)
 - Focal Countries (2-10 points)
 - **High (10 points)**
 - **Medium (5 points)**
 - **Low (2 points)**
 - Non-Focal Countries (0 points)

**see p.11 of Final 2008 RFA for listing of eligible countries and evaluation criteria on p. 27 and p. 38



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Country Selection: Evaluation Criteria (NP, Innovation)

- Focal countries
 - Reflects an attempt to maximize CSHGP's MNCH investment and closely align with other USG and in-country MNCH efforts since coordination & complementarity are critical to program success.
 - Classified as H,M,L considering the following combination of factors:
 - Presence of high magnitude/severity of maternal, newborn & child mortality
 - Country capacity and commitment to absorb MNCH resources
 - Potential for interaction with other resources (i.e. Presidential initiatives, African initiatives, other global programs)



Country Selection: Evaluation Criteria (NP, Innovation)

- Evaluation criteria and point allocation for country selection will be strictly adhered to during application review.
- There will be no special considerations or configurations for recuperation of points.
- Country selection is just one of several criteria against which applications will be evaluated.
 - E.g.: a project proposed in a ‘high’ focal country may have a poorly designed project strategy and be devoid of innovation. Reviewers will weigh all evaluation criteria and score accordingly with the aims of awarding the highest quality proposals.



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Eligible Countries: Tuberculosis Category**

- All countries on the TB eligible country list are 'focal' countries (see page 12, Final RFA)
- There is no evaluation criteria in this RFA for TB country selection other than choosing an 'eligible' country from the list.

**see p.12 of Final 2008 RFA for listing of eligible countries



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Priority Geographic Areas Within Eligible Countries

- Eligibility in this RFA considered at the ‘Country’ level (no additional classification provided in this RFA).
- Consult USAID Mission strategy and objectives for information on priority geographic and programmatic areas at the country level.
- CSHGP applicants must propose a project that is in line with USAID Mission strategy and objectives.



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Open Question & Answer Period



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Open Question & Answer Period

- Please write each question clearly on a separate index card (provided)
- Please only one question per card as we will sort them into thematic groups
- Place index card(s) in large manila envelopes provided



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Open Question & Answer Period

- RFA Conference attendees may pose additional clarifying questions on the 2008 RFA at this time.
- Please note that all questions and answers discussed during this period are recorded. A complete transcript of questions and answers will be made publicly available along with the rest of the RFA conference materials (www.childsurvival.com)