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RFA Number: RFA-680-14-000002

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Questions due by: July 08, 2014, 1400 hrs Benin Time

Pre-Application Conference: July 10, 2014: 1400 hrs Benin Time

Application Deadline: July 31, 2014, 1400 hrs, Benin Time

SUBJECT: Request for Applications (RFA) Number: USAID/ Benin RFA-680-14-000002
Community Package of High-Impact Interventions

Dear Prospective Applicants:

The United States Agency for International Development in Benin (USAID/Benin) is seeking applications for multiple Cooperative Agreements (up to five agreements) from **qualified Benin Local Entities** to implement a project entitled “**Community Package of High Impact Interventions**” in Benin. The authority for this RFA is found in the Foreign Assistance Act of 1961, as amended.

For the convenience of the Local Organizations, a French version of the RFA (Section 1-Section VIII) is attached at Attachment IV entitled “French Version of RFA 680-14-000002, Section 1-VIII”. However, Pursuant to ADS 303.3.20, it is USAID policy that English is the official language of all award documents because a translation may not convey the full meaning of the original. If an award or any supporting documents are provided in both English and a foreign language, each document must state that the English language version is the controlling version.

The successful applicants will be responsible for ensuring achievement of the program objectives and expected results. Please refer to the Program Description in Section I of this RFA for a complete statement of goals and expected results.

USAID/Benin will hold a pre-application conference at the above mentioned date to briefly explain the requirements of this RFA and receive questions which will be answered at a later time via an amendment of solicitation. Interested applicants wish to participate in the Pre-application conference must register for the pre-application conference as specified in Section IV.

Subject to the availability of funds, USAID/Benin intends to provide five cooperative agreements under this RFA for a three-year period. Please refer to page 21 for an estimated cost for each Health Zone Budget. USAID reserves the right to fund any or none of the applications submitted. Although it is planned to make up to five Cooperative Agreements under this RFA, USAID/Benin in its discretion reserves the right to make one award to one organization or more than one award to one organization or joint venture of organizations; or no award at all to anyone.

Request for Applications (RFA) Number: USAID/ Benin RFA-680-14-000002

This RFA consists of this cover letter and the following:

1. Section I, Funding Opportunity Description;
2. Section II, Award Information;
3. Section III, Eligibility Information;
4. Section IV, Application and Submission Information;
5. Section V, Application Review Information;
6. Section VI, Award and Administration Information;
7. Section VII, Agency Contacts;
8. Section VIII, Other Information; and
9. Attachment 1, Certifications and Assurances.
10. Attachment 2, Forms SF-424, 424-A, 424-B
11. Attachment 3, National PIHI document
12. Attachment 4, French Version of RFA, Section 1-VIII.

To be eligible for an award, the applicant must provide all required information in its application (please refer to section III), including the requirements found in any attachment to this Grants.gov opportunity. Applications that are submitted late, incomplete or are non-responsive will not be considered.

Award will be made to the responsible applicant(s) whose application(s) best meet(s) the requirements of this RFA and the evaluation criteria contained herein.

Applicants under consideration for an award that have never received funding from USAID will be subject to a pre-award review to determine fiscal responsibility, ensure adequacy of financial controls and establish an indirect cost rate.

The RFA can be available either of three ways below:

1. The preferred method of distribution of USAID Requests for Application (RFA) is electronically via Grants.gov. This RFA and any future amendments can be downloaded from <http://www.grants.gov>. It is the responsibility of the prospective applicant to ensure that it has received the RFA and any future amendments from <http://www.grants.gov> in its entirety. All interested parties are encouraged to register on <http://www.grants.gov> to receive automatic notification of amendments to this RFA.
2. RFA can be downloaded from USAID/Benin website address: <http://www.usaid.gov/bj>. Please select “Solicitation number as RFA-680-14-000002 for Community Package of High-Impact Interventions from the home page left hand side to download the RFA. Please contact Mr. Cosmas Apedo at capedo@usaid.gov and Francine Agblo at fagblo@usaid.gov
3. Upon request, a complete paper copy of the RFA could be available at USAID/American Embassy. Please send an email to capedo@usaid.gov and Francine Agblo at fagblo@usaid.gov two work days in advance if RFA needs to be collected from USAID/American Embassy, Cotonou, Benin.

Applicants may upload applications to <http://www.grants.gov> ; however, USAID bears no responsibility for data errors resulting from transmission or conversion processes associated with electronic

submissions. **Additionally, USAID/Benin requires that applications be submitted both electronically (e-mailed) AND in hard copy at the time and date mentioned on the cover page.**

Issuance of this RFA 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 the preparation and submission of an application. Further, USAID reserves the right to reject any or all applications received. **In addition, final award of any resultant Cooperative Agreement(s) will not be made until funds have been fully appropriated, allocated, and committed through internal USAID procedures. While it is anticipated that these procedures will be successfully completed, potential applicants are hereby notified of these requirements and conditions for award.** All application preparation and submission costs are at the applicant's own expense.

Thank you for your interest in USAID's programs.

Sincerely,

Yves B. Kore
Supervisory Agreement Officer

LIST OF ACCRONYMS

ANC	ANTENATAL CARE
ANCRE	ADVANCING NEWBORN, CHILD AND REPRODUCTIVE HEALTH
APC	ADVANCING PARTNERS AND COMMUNITIES
	ACCELERATING THE REDUCTION OF MALARIA MORBIDITY AND
ARM3	MORTALITY
BCC	BEHAVIOR CHANGE COMMUNICATION
BEPC	BREVET D'ETUDES DU PREMIER CYCLE
CHV	COMMUNITY HEALTH VOLUNTEER
CHW	COMMUNITY HEALTH WORKER
	COMMUNITY INTEGRATED MANAGEMENT OF CHILDHOOD
C-IMCI	ILLNESS
CTA/ACT	ARTEMISININ-BASED THERAPEUTHIC COMBINATION
CTM	COTRIMOXAZOLE
DHS	DEMOGRAPHIC AND HEALTH SURVEY
DNPS	NATIONAL PUBLIC HEALTH DEPARTMENT
DSME	MATERNAL AND CHILD HEALTH DEPARTMENT
EMMP	ENVIRONMENTAL MITIGATION AND MONITORING PLAN
FP/RH	FAMILY PLANNING/REPRODUCTIVE HEALTH
GHI	GLOBAL HEALTH INITIATIVE
GOB	GOVERNMENT OF BENIN
HIV	HUMAN IMMUNODEFICIENCY VIRUS
HMIS	HEALTH MANAGEMENT AND INFORMATION SYSTEM
HSS	HEALTH SYSTEM STRENGTHENING
ICCM	INTEGRATED COMMUNITY CASE MANAGEMENT
ICT	INFORMATION COMMUNICATION TECHNOLOGIE
IEE	INITIAL ENVIRONMENT EXAMINATION
IR	INTERMEDIATE RESULT
IRA	ACUTE RESPIRATORY INFECTION
ITN	INSECTICIDE TREATED NETS
LAM	LACTATIONAL AMENORRHEA METHOD
	LONG ACTING AND PERMANENT METHODS OF FAMILY
LAPM	PLANNING
LLIN	LONG-LASTING IMPREGNATED NET
M&E	MONITORING AND EVALUATION
MCH	MATERNAL AND CHILD HEALTH
MDG	MILLENIUM DEVELOPMENT GOALS
MNCH	MATERNAL, NEWBORN, AND CHILD HEALTH
MOH	MINISTRY OF HEALTH
NGO	NON GOVERNMENTAL ORGANIZATION
OPV	ORAL POLIO VACCINE
ORT	ORAL REHYDRATION THERAPY
PHC	PRIMARY HEALTH CARE

PIHI	PACKAGE OF HIGH IMPACT INTERVENTIONS
PIHIB	BASIC PIHI
PIHIC	COMPLEMENTARY PIHI
PMTCT	PREVENTION OF MOTHER-TO-CHILD TRANSMISSION
PNC	PRENATAL CARE
PNLP	NATIONAL MALARIA CONTROL PROGRAM
RDT	RAPID DIAGNOSTIC TESTS
RFA	REQUEST FOR APPLICATIONS
STI	SEXUALLY TRANSMITTED INFECTION
TA	TECHNICAL ASSISTANCE
URI	UPPER RESPIRATORY TRACT INFECTION
USG	UNITED STATES GOVERNMENT
WASH	WATER, SANITATION AN HYGIENE
WGGE	WOMEN, GIRLS AND GENDER EQUALITY

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SECTION I – FUNDING OPPORTUNITY DESCRIPTION

1. PROGRAM DESCRIPTION

INTRODUCTION

USAID/Benin will award up to five cooperative agreements to local non-governmental organizations (NGOs) over a period of three years. The agreements will build on previous and current successes in integrated community-based service delivery to promote optimal health behaviors and quality services. The recipients also will embrace USAID Forward procurement reforms by enhancing local ownership through capacity building and working closely with the Ministry of Health (MOH), municipal or local authorities, and civil society.

In compliance with the National Guidance on PIHI and USAID/Benin health strategies, NGO projects will focus primarily on the following technical areas:

- Family Planning and Reproductive Health (FP/RH)
- Maternal, Newborn, and Child Health (MNCH)
- Malaria
- Water and sanitation
- Improved health practices and health-seeking behaviors

PIHI (Integrated Package of High Impact Actions, or *Paquet d'Interventions à Haut Impact*) includes priority health actions which credible evidence suggests have maximum impact on improving maternal-child health and the health status of populations. Working with donors and partners (including NGOs), the Benin MOH has enumerated a package of high impact interventions at various levels of the health system (tertiary health services, such as safe delivery and treatment of obstetric complications, primary health care (PHC), such as immunization, family planning, ante-natal care, etc., and community health care). Currently, the actions enumerated under the MOH PIHI strategy are numerous. Challenges exist in implementing the entire package, given weaknesses in the health system. Thus the list of PIHI actions, and the corresponding health system and programs, are in the process of evolution. In addition, the MOH is developing a health information management system (HMIS), which will link health information at all levels, going down to the community level. **Applicants should refer to Section A.2 herein and/or the PIHI document in Attachment 3 to familiarize with the PIHI package and propose an appropriate and feasible subset of PIHI interventions, consistent with the aforementioned technical areas. These interventions should address the local drivers of maternal and child mortality and morbidity.**

International evidence suggests that in addition to the community education and counseling currently provided by virtually all Community Health Workers (CHWs) in Benin, a number of other services can successfully be offered at the community level (particularly diagnosis and treatment of selected child illnesses, oral rehydration therapy, antenatal care, selected methods of family planning and referral to PHC clinics). The advantage of implementing community PIHI actions is that they greatly increase the access women and young children have to these services, thus improving health outcomes. These grants will support the development and expansion of

community PIHI linked to primary health care, the evolving HMIS and the Government of Benin's health strategy. The grants also contribute to USAID/Benin's health strategy, which supports the MOH's strategy on improving health systems, quality PIHI and increased community access and participation in health care.

NGO partners will allocate appropriate funding to each technical area to achieve the results articulated in Section A.3.

NGOs, which are awarded grants, are expected to work collaboratively with the MOH, USAID/Benin, and its technical assistance (TA) partners to identify capacity building needs. In turn, USAID/Benin will offer ongoing and as needed technical or financial/management support to strengthen the recipients' ability to design and implement community-based interventions. Specific types of technical and capacity building support that can be anticipated include technical assistance for recruitment, training, supervision, and retention of CHWs and Community Health Volunteers (CHVs); policy and regulatory assistance regarding the remuneration of CHWs and incentives for CHVs; guidance on engaging and advocating with local leaders; supply chain management; and financial and administrative operations.

SECTION A: PROJECT DESCRIPTION

The USAID/Benin Mission does not have a Country Development Cooperation Strategy (CDCS). The U.S. Government (USG) has articulated its strategy in the Global Health Initiative (GHI) Country Strategy for 2011-2015. All elements in RFA and proposed project design will be aligned with the GHI Country Strategy and USAID Forward guidance and will support the development objective (DO) of *"improved health status of Beninese families."*

Under the GHI Country Strategy, USAID/Benin health activities fit into a logical framework of three Intermediate Results (IRs): GHI/IR 1- Improved public health sector performance in delivering integrated family health services; GHI/IR 2- Improved private health sector performance in delivering integrated family health services; and, GHI/IR 3- Improved preventive and care-seeking behavior of an empowered population. There are two cross-cutting GHI principles: building sustainability through health systems strengthening (HSS), and focusing on women, girls and gender equality (WGGE).

This section describes the project activities that the Recipient will implement if awarded funds under this RFA. Any potential applicant not committed to conducting these activities as described in this section should not apply for funding under this program.

A.1 PROGRAM OBJECTIVE AND INTERMEDIATE RESULTS

Program Objective: To increase access to and utilization of Community PIHI services in each of the five targets health zones in Northern Benin Area.

The Program Objective will be supported through the four intermediate results listed below:

IR 1: Increased demand for and use of Community PIHI services by local communities

- 1.1.1 Increased ownership of community PIHI activities by local communities (civil society, municipal and local authorities, local MOH and private health facilities), including women
- 1.1.2 Tailored behavior change messages are developed and communication activities are conducted

IR 1 results in increased adoption of healthy behaviors and preventive health practices, consistent with USAID/Benin strategic results framework (GHI/IR 3).

IR 2: Increased availability of and access to Community PIHI services in target health zones

- 2.1 Improved capacity for case-management and referral systems in local communities
- 2.2 Essential community PIHI commodities are available to CHWs and CHVs (relais communautaires)

IR 3: Improved quality of Community PIHI services through a cadre of CHWs and CHVs

- 3.1 Improved technical skills of CHWs who are motivated and integrated in their communities
- 3.2 Increased capacity of zonal health staff to supervise CHWs

IR 4: Strengthened community health management and information system (HMIS) to provide data for local decision-making

IR 2, 3 and 4 results in improved public health sector performance in delivering integrated family health services, consistent with USAID/Benin strategic results framework (GHI/IR 1).

These IRs, which are described more fully in Section A.3, outline the overall approaches and results necessary to successfully implement the RFA for Community PIHI in Benin. USAID-funded grantees are expected to build on and further increase the results achieved under previous programs as measured by programs' milestones. Rapid start-up of program activities is critical to ensure that community-based services continue to improve, that there are minimal gaps in services, and that results are achieved. The Government of Benin, civil society, NGOs and donors are united in their desire to rapidly progress improved access to health services and achievement of the MDGs.

A.2. BACKGROUND AND CONTEXT FOR USAID ASSISTANCE

A. Country Context

The purpose of this RFA is to award up to five grants to local Beninese NGOs to improve the overall health and well-being of individuals (especially mothers and young children) in Beninese communities through a strong network of interdisciplinary community health programs which utilize locally-based CHWs. Projects will also support the development of local partners which provide high quality community health interventions, are close to the communities they serve, and thus achieve improvements in health status.

USAID/Benin will award up to five grants in the following health zones: Tchaorou, Banikoara, Kandi-Gogounou-Segbanan, Djougou, and Bassila. Grants will build on existing community health experiences, expanding reach and effectiveness, range and quality of services (including family planning), monitoring and evaluation and foster closer linkages with the Ministry of Health (MOH).

B. Government of Benin National PIHI Strategy

The “Paquet d’Interventions à Haut Impact” was proposed by the Government of Benin—in consensus with donors, technical partners and civil society—in 2010, as the vehicle to reach MDG targets by 2015. The PIHI focuses on low-cost interventions that have an impact on the reduction of maternal, neonatal, infant and child mortality and morbidity; thereby helping Benin to reach the MDGs. The PIHI is tailored for implementation at different levels of the health system, from the community level up to regional and national referral hospitals. It also includes specific indicators to facilitate and reinforce health systems monitoring. These interventions are based on internationally recognized and scientifically proven evidences and ascertainments.

As detailed in Attachment 3, there are two types of such interventions, namely the basic PIHI (PIHIB) and the complementary PIHI (PIHIC), excerpted from the PIHI document below.

PIHIB is a set of scientifically proven interventions which impact on maternal, neonatal, infant and child mortality and morbidity. The MOH mandates that these interventions be implemented in all health facilities and in communities on a national scale. PIHIC, on the other hand, is a set of scientifically proven interventions which also impact on maternal, neonatal, infant and child mortality and morbidity. However, these interventions have either not yet been implemented nationally, or are being implemented on only a small scale in health facilities and communities. These PIHIC interventions, depending on available resources, should be scaled up in order to achieve results.

The PIHI document specifies a) services at the household and community levels and b) services geared toward populations via health centers and hospitals. For the purpose of this RFA, details on PIHI services at the family and community level—both in terms of PIHIB and PIHIC—as well as PIHI tracer interventions are summarized below.

A. Family and community-based services

1. Preventive familial health services and water, sanitation and hygiene (WASH)

PIHIB

- Use of insecticide-treated mosquito net to protect children under 5 years of age
- Use of long-lasting insecticide treated mosquito net by pregnant women
- Drinking water equipment for households
- Use of clean water by households
- Use of latrines by households
- Hand washing with soap and clean water at critical times:
 - Before providing care
 - After using the latrines

- Before food preparation/cooking
- Before feeding children
- Tetanus vaccines for pregnant women
- Contraceptives sales
- Consumption of properly iodized salt
- Adoption of appropriate behavior for the prevention of mother to child transmission (PMTCT) of HIV
- Behavior change communication for the adoption of healthy family practices

PIHIC

- Indoor residual spraying

2. Neonatal familial care

PIHIB

- Sanitary childbirth and umbilical cord care
- Early initiation of breastfeeding within the 1st hour following birth (with colostrum)
- Newborn warming
- Case management of low-birth weights
- BCG and Oral polio vaccine (OPV)
- Recognition of danger/gravity signs and referral

PIHIC—No activities listed

3. Child and young child nutrition

PIHIB

- Promotion of exclusive breastfeeding (0-6 months) and LAM method of FP
- Promotion of prolonged breastfeeding (6-24 months)
- Introduction of solid foods—in adequate quantity, quality and variety—starting at 6 months of age
- Screening and case management of severe and moderate acute malnutrition
- Biannual supplementation in vitamin A for children of 6-59 months
- Deworming
- Recognition of danger/gravity signs in childhood illness and prompt referral
- Behavior change communication for the adoption of healthy family practices
- Orphans case management

PIHIC

- Consumption of foods fortified with iron and vitamin A

4. Integrated community case management (ICCM) of childhood illnesses

PIHIB

- Oral rehydration therapy (ORT)

- Case management of diarrhea with the new formula of Orasel-Zinc
- Case management of malaria with Artemisinin-based Therapeutic Combination (CTA) for children under 5 years of age
- Case management of acute respiratory infections (IRA) with Cotrimoxazole (CTM)
- Recognition of danger/gravity signs and referral
- Behavior change communication for the adoption of healthy family practices

PIHIC

- Recognition of adverse effects of CTA and referral

B/ Tracer interventions

1. Definition

A “tracer” is an indicator used to detect and analyze bottlenecks in health services provision. Criterion for the selection of a “tracer” is that the intervention is proven to have a high impact on mortality and morbidity. It is an internationally recommended intervention, with available data specifying five determinants: availability, accessibility, utilization, stability over time and quality.

2. List of tracer interventions

At the community level

- Protection of children of 0-5 years of age by long-lasting impregnated nets (LLINs)
- Presumptive case-management of malaria among children of 0-59 months
- Diarrhea case-management among children of 0-59 months
- Acute respiratory infections case-management among children of 0-59 months
- Screening for and case-management of mild and severe malnutrition
- Exclusive breastfeeding (0-6 months)

At the health center and/or health zone level

- Family planning counseling and services
- Prenatal visits
- Childhood immunizations (measles vaccination)
- Antibiotics for under 5 pneumonia
- Obstetrical and neonatal basic emergency care
- Normal deliveries attended by trained personnel
- Prevention of mother-to-child transmission (PMTCT): screening, counseling, ART and counseling on infant feeding
- Obstetrical and neonatal complete emergency care

Again, a full description of the Government’s PIHI strategy with related indicators is in Attachment 3.

There are important challenges in implementation of PIHI, particularly Community PIHI, which Government, NGOs and donors recognize, and which grantees under this RFA will help address. One of the biggest challenges is consistency and comparability of interventions. In the past, NGO programs have implemented different health services and used different program designs in different health zones. Involvement of local authorities and local government financing and other support for CHWs also has varied. Decisions on compensation, training and CHWs job descriptions have not been uniform. Finally, ensuring the security of essential health commodities, including contraceptives, is an ongoing challenge. Furthermore, community-level indicators are not yet included in the National Health Management Information Systems, although this is planned to happen soon. A major goal of the MOH over the next few years is to achieve greater standardization in community health programs throughout Benin, particularly regarding CHWs and their role in the health system. By working closely with the MOH and with other grantees, recipients of these grants will contribute to this goal.

A.3. DESCRIPTION OF INTERMEDIATE RESULTS, KEY INTERVENTIONS, ILLUSTRATIVE MILESTONES, AND EXPECTED RESULTS

IR 1: Increased demand for and use of Community PIHI services by local communities.

1.1. Increased ownership of community PIHI activities by local communities (civil society, municipal and local authorities, local MOH and private health facilities), including women

Effective local systems, capacity, and ownership bring about a sense of shared responsibility, which in turn catalyzes action to improve health practices. These outcomes foster sustainability. The chance of sustaining project-facilitated health improvements is greatest when local system actors have sufficient capacity and viability to carry out the key tasks needed to produce key health outcomes within an enabling environment.¹

Grants supported under this RFA will strengthen local systems and structures, and active civil society linkages with the aim of empowering them to be self-reliant to the greatest degree possible. Women's engagement, empowerment, and leadership also is critical to the success of this objective and must be improved. Inclusion of women will facilitate adoption and utilization of Community PIHI services and referral to other levels of the health system. Local capacity development approaches and interventions considered essential to the projects are described below. Additional innovative approaches may be proposed by NGOs submitting applications.

1.2 Tailored behavior change messages are developed and communication activities are conducted

In order to improve health-seeking behaviors and demand for health services across Benin, the Government of Benin is in the process of developing a National Behavior Change

¹ Eric Sarriot, Jim Ricca, Jennifer Yourkavitch, Leo Ryan, and the Sustained Health Outcomes (SHOUT) Group. (2008). *Taking the Long View: A Practical Guide to Sustainability Planning and Measurement in Community-Oriented Health Programming*. Calverton, MD: Macro International Inc., September 2008

Communication (BCC) Strategy, which will define goals on health behavior change, key communication messages and, subsequently, a package of BCC tools and materials. When this strategy and the corresponding tools are in place, grantees will have access to these resources and shared BCC objectives, definitions and materials to supplement their demand generation activities.

In the meantime, local BCC activities need to be tailored to the needs of particular health zones. Each grantee must identify specific BCC priorities in their own communities and build the capacity of local stakeholders and other change agents to effectively promote optimal key behaviors among target client audiences of most vulnerable people in their communities. Data on Benin suggest that several areas will have the highest priority; namely: family planning (knowledge and use); hygiene practices and use of ORT to treat diarrhea; treatment of common illnesses (URI, malaria) and ante and post-natal care. Grantees will work with existing programs, such as the USAID ARM3 Project and its implementing partners: MCDI, MSH and Africare, to address the use of ITNs and treatment of malaria. Women with unmet need for family planning are an especially important target of this program, given current low levels of utilization of family planning among Benin's most vulnerable groups and high maternal and neonatal mortality and morbidity. Cultural factors affecting family planning decision-making need to be addressed locally and sensitively.

The status of women in Benin is low; this impacts negatively on effectiveness of community BCC interventions. Thus all BCC activities need to have a component of increased involvement and empowerment of women clients and leaders.

Illustrative Intervention Areas:

- Define and prioritize with community leaders main health practices which need to be adopted or changed (e.g. poor hygiene practices, low use of family planning, immunization, low knowledge of ORT, etc.)
- Map existing resources and materials for behavior change
- Establish and convene community quality committees (including women leaders)
- "Host" the project at municipal or local government offices or clinics
- Conduct seminars on women's role in promoting health and welfare; organize women's groups to promote healthy behaviors (e.g. mothers' clubs)
- Organize and conduct community mobilization and behavior change communications activities to impact utilization of health services, healthy lifestyles and health seeking behaviors

Expected Results:

- Increased engagement by local stakeholders, particularly municipalities and local authorities; financial and technical contributions to CHW compensation and management
- Increased proportion of the population utilizing Community PIHI services, particularly family planning

- Improved health seeking behaviors, particularly in key areas of Community PIHI, such as family planning, ORT, sanitation, ANC, etc.
- Women's participation and leadership in local health activities and promotion improved

Illustrative Milestones:

- Hosted project launch meeting in target health zones, with key stakeholders in attendance
- Establish a plan of action for the target health zone, agreed upon by community leaders
- Coordinated and convened meetings of Community Quality Committees; participation by women documented
- Supportive supervision shows CHWs and CHVs effectively using behavior change communication

IR 2: Increased availability of and access to Community PIHI in target health zones.

Increasing availability of and access to primary health care services at the community level in Benin will contribute to greater uptake of those services and the adoption of improved health behaviors. Both need improvements if program objectives are to be reached.

2.1 Improved capacity for case-management and referral systems in local communities

Availability of PHC services in this context involves quantity and quality of services, which exist in the geographic and effective radius of the community. In Benin, often services simply are not available because of very limited numbers of MOH staff in rural areas, poor facilities, and poor provider skills. It is essential that there is an improved capacity for case-management and referrals especially at lower levels in the health system. Collaboration between MOH staff and CHW is key in making this a reality.

Access to PHC generally in this context refers to factors related to enabling clients to utilize services. This includes welcoming environments and client-friendly treatment, physical proximity and convenience of services and cultural appropriateness of approaches and explanations. Use of CHW is a necessary step to increasing access and acceptability of services because these workers relate to clients at their level and in their homes and villages. The CHW can play a strong role in referring clients during home visits to health centers for services. It is essential that there is a sustainable referral system in place and that CHW are trained on how, when to make referrals for clients. CHWs also need to maintain active linkages with PHC staff.

To increase availability of services, each recipient must identify key geographic and service gaps in their target health zone and seek opportunities to strategically provide skill-based training, coaching, and supervision to CHWs working in the zone. Grantees also will strengthen the capacity of service delivery staff at health centers to supervise CHWs to strengthen availability and access to services and linkages between the health care system and community provided services. Grantees will facilitate and leverage, to the greatest degree possible, the technical and programmatic resources of other partners and the Government of Benin.

2.1 Essential community PIHI commodities are available to CHW

Commodity security is critical to the utilization of Community PIHI services. This RFA does not provide funding for procurement of essential commodities, nor in-kind supplies. The provision of essential commodities is the responsibility of the Government of Benin. Nevertheless, recipients are expected to work closely with their local, regional and national counterparts to ensure that the right commodities are available at service delivery points/from CHWs, in the right quantities, at the right time. Grantees will need to apply a combination of advocacy, knowledge of supply chain management and Benin's supply chain system specifically, and creativity in finding alternatives (for example social marketing programs or via the private sector) when the usual commodity supply chain system fails. Such efforts should be tracked and documented. USAID and/or a technical assistance partner may assist with issues related to commodities and logistics.

Illustrative Intervention areas:

- Development of quality improvement strategies and working group
- Ensure increased information and referral for services available at the clinic level.
- Strengthen commodity security linkages and advocacy for commodity security
- Strengthen Community PIHI activities, particularly C-IMCI, immunization, family planning and care seeking for malaria
- Undertake advocacy and education for improved supply chain of essential commodities

Expected Results:

- Increased proportion of the population referred and seeking care for ANC, neonatal and obstetric emergencies, LAPMs and severe illness episodes.
- Increased linkages between CHWs and health clinics for referrals and follow-up.
- Decreased stock-outs of essential health commodities

Illustrative Milestones:

- Targeted proportion of CHWs trained and in place in target health zones
- Tracking of services, client satisfaction and referrals
- Stock-out rates of tracer drugs at CHW and PHC levels

IR 3: To improve the quality of PIHI services through a cadre of CHWs (relais communautaires)

3.1 Improved technical skills of CHWs who are motivated and integrated in their communities

The centerpiece of the Community PIHI grants will be CHWs, who are well trained, motivated and carefully supervised. Their role is expected to be crucial in effective service delivery at the community level under the PIHI program. Ideally, CHWs will live in the communities they serve, and receive basic and ongoing training to undertake their duties. They will be closely linked to local clinics and other service sites in their catchment areas.

The architecture of Benin's community health programs has been under discussion and evolving for a number of years. The MOH is determined to improve community services, and has now proposed a cadre of workers called CHWs, who will be employed, trained as *Aides Soignants*,

and subsequently receive training in community health responsibilities, including family planning services and counseling. Note that this is an existing cadre, which heretofore worked mainly on immunization and in PHC centers. They are trained at a training school in Parakou, which also is expanding its curriculum. The new CHWs will train and supervise traditional community health volunteers (CHV) known as *relais communautaires*. The Government of Benin has organized a National Forum on Community-based Services in November 2013 to further refine roles and responsibilities of CHWs and CHVs. It is expected that the profiles of CHWs will be slightly different in urban and rural areas, in terms of education, recruitment, compensation, job descriptions and role within their communities. It is further expected that over time, CHWs roles will evolve. Grantees will work closely with the MOH, USAID and other partners to define and refine CHWs roles, responsibilities, profiles and metrics for assessing their effectiveness.

Grantees will operate within the overall policies and operational definitions of CHWs and CHVs, as defined by the MOH. Grantees will recruit and train CHWs to undertake community PIHI functions effectively and efficiently, engage the communities they serve, and work closely with local health centers and health personnel. These functions will include: supervision and training of CHVs (including volunteers' provision of some Community PIHI services, such as ORT and some family planning), organizing community BCC and Quality Committees, and provision of basic community services, such as family planning (condoms, natural methods, oral contraceptives, injectable and referral for clinical methods); ORT and sanitation education; distribution of ITNs and treatment of simple malaria; treatment of URI; immunization; basic ANC and PNC and referral to clinics and other facilities. CHWs will also supervise data collection by CHVs on their activities and data transmission to the MOH, plus ongoing linkages with local health facilities.

3.2 Increased capacity of health zones staff to supervise CHWs

Ongoing, supportive supervision is a critical element to successful community-based service delivery. In their applications, grantees should carefully explain how they intend to supervise CHWs/CHVs to ensure quality services, community engagement and good record keeping and reporting. USAID/Benin defines supervision as “a regular quality improvement activity to strengthen the capacity and performance of individual CHWs undertaken by staff and/or contracted supervisors which is documented in a verifiable report”. It is essential that supervision strategically targets the strengthening of practical skills to ensure competency and quality of services. Furthermore, a key aspect of supervision is a system to measure and monitor performance and quality.

Illustrative Intervention Areas:

- Establish mechanisms to recruit, train, and supervise CHWs in the target health zones
- Conduct pre-and in-service training of CHWs covering topics such as technical proficiency, management, community mobilization and record-keeping and reporting

Expected Results:

- CHWs/CHVs functioning adequately in provision of Community PIHI, including FP counseling, service delivery, referrals and community mobilization
- CHWs/CHVs able to identify illness, treat or refer appropriately
- Engagement of local technical experts increased.
- CHVs (*relais communautaires*) motivated and supervised by CHWs

Illustrative Milestones:

- Initial CHW and CHV trainings held in target health zones
- Supervision system established to monitor CHW and CHV performance
- Local authorities affirm importance of CHWs and Community PIHI and are actively engaged in their work and supervision

IR 4: Strengthened community health management and information system (HMIS) to provide data for local decision-making

The MOH is building a data management system to collect indicators on PIHI. In the past, community-level PIHI indicators were not been systematically incorporated into the system, with the exception of a few indicators related to malaria, collected and reported by the National Malaria Control Program (PNLP). As a result, the MOH does not currently have data to demonstrate the impact of community-level interventions or to make day-to-day and strategic health program decisions. It is a high priority for the MOH to obtain this data, and they regard NGOs as critical partners to support this effort.

Key indicators for Community PIHI will be identified to be used for performance monitoring and payment of CHWs and as part of the national monitoring and evaluation (M&E) system. USAID/Benin is currently working with the MOH and partners to identify these indicators. Grantees under this RFA will be expected to utilize the MOH Community HMIS when it is finalized and/or harmonize their M&E systems with the MOH systems. This includes building strong relationships with facility-based staff to collect analyze and report community-level data up through the system, as well as to use the data to make program improvements. There is scope for grantees to experiment with the use of information communication technology (ICT) such as mobile phones for data collection and reporting.

To support their activities, particularly in Monitoring and Evaluation USAID/Benin will provide technical support to grantees via the Advancing Partners and Communities (APC) project and other activities. Additionally APC will also work with grantees on improving their M&E systems specially the areas of routine data collection, reporting, and analysis. In-service training events will be facilitated by APC (organized on a rotational basis by grantees) in order to build long-term capacity of grantees.

Illustrative Intervention areas:

- Set up (automated and manual) systems to collect program data and train relevant staff, including MOH staff to the maximum extent possible
- Routinely collect, analyze and use data for management decision-making, in collaboration with MOH staff
- Conduct semi-annual data quality assessments
- Conduct quarterly data validation and interpretation meetings and ensure that feedback on performance is shared with CHVs, CHWs, supervisors, project staff and MOH colleagues
- Participate in M&E grantee working group and in-service trainings

Expected Results:

- Improved record-keeping, analysis and reporting on community health activities in the grantee's target area
- Strengthened linkages between health facilities and CHWs regarding communication, data collection, supervision, and performance monitoring
- Documentation of results
- Increased ability of grantee and MOH staff to use data for decision-making; namely, to explain and analyze data, critically interpret results, and make relevant program improvements/adjustments based on data

Illustrative milestones:

- Trainings in Community PIHI M&E tools and database conducted for MOH M&E staff at health facilities and zone levels
- CHWs trained in Community PIHI M&E tools and processes
- Data from CHW reported with 85% completion rate for three consecutive months (one quarter)
- Community PIHI data included in facility-level monthly reports and district-level quarterly reports at least 85% of time
- Three data validation and interpretation meetings held at local level
- Local leaders participate regularly in data review meetings

A4. DESIGN ELEMENTS AND CONSIDERATIONS

A. Beneficiaries and Stakeholders:

The grants will target women of reproductive age and children under five, especially infants. Young women between 15-24 years of age are a focus with activities that assist them to delay onset of sexual debut, delay and space pregnancies, and protect themselves from STIs. Target groups should be inclusive of people with physical and mental disabilities. At the community-level, principle stakeholders include municipal and local authorities, decision-makers, MOH and private sector health staff, and civil society. Civil society includes faith-based groups, local association and clubs, schools and other prominent groups in an area. Each NGO needs to

specifically define its beneficiaries and stakeholders in designing a program in a given health zone.

B. Geographic focus:

An overarching goal of these cooperative agreements is to contribute to a sustainable model of Community PIHI and to roll it out in a number of health zones in Northern Benin. At the end of the project period, valuable lessons will be learned by NGOs, communities, the MOH and USAID. Note that these budget total are illustrative, based on factors such as population, existing infrastructure, and target populations.

Illustrative 3 Year Total Budget Per Health Zone

<u>Zones/Sites</u>		<u>Illustrative 3 year Total Budget</u>
1	Commune of Tchaourou	\$ 393,000
2	Commune of Banikoara	\$508,000
3	Communes of Kandi, Gogounou, Segbannan	\$ 355,000
4	Commune of Djougou, Ouake, Copargo	\$858,000
5	Commune of Bassila	\$264,000

Approximate percentages that might be allocated are: 25% for IR 1, 40% for IR 2, 20% for IR 3, and 15% for IR 4.

C. Sustainability:

“Sustainability is achieved when host country partners and beneficiaries are empowered to take ownership of development processes, including financing, and maintain project results and impacts beyond the life of the USAID project”². This requires a set of processes and qualities that make a system of actors more resilient and encourages more stakeholders in the system to support the desired outcomes. The chance of sustaining project-facilitated health improvements is greatest when local system actors have sufficient capacity and viability to carry out the key tasks needed to produce key health outcomes within an enabling environment.³ Elements that support sustainability including governance/leadership, human resources, information and management systems, communication and demand creation, community system strengthening, and community mobilization and communication.

Under the Government of Benin’s PIHI plans (referenced earlier) and decentralization efforts, the Government aspires to see greater involvement by municipalities and local authorities in both

² USAID Project Design Sustainability Analysis Tool

³ Eric Sarriot, Jim Ricca, Jennifer Yourkavitch, Leo Ryan, and the Sustained Health Outcomes (SHOUT) Group. (2008). *Taking the Long View: A Practical Guide to Sustainability Planning and Measurement in Community-Oriented Health Programming*. Calverton, MD: Macro International Inc., September 2008

financing and management of community health programs. This is both because locally led programs are seen to be more effective and because of budget constraints on the MOH. Municipal governments and local authorities have separate budgets, which can include line items for health. Some local governments are more advanced in self-financing thinking than others. USAID/Benin requests that grantees provide a short description of the policy situation vis-à-vis supporting CHWs in their target area, plus the actions and activities they will take to enhance sustainability of their efforts, particularly a plan for municipalities or local authorities to progressively assume responsibility for compensation of CHWs, and for local health authorities to assume the role of supportive supervision and financing of CHWs. Sustainability of local quality and community mobilization committees is also highly desirable.

USAID/Benin recognizes that sustainability is an aspirational goal and that complete sustainability may not be achieved in the grant period. However, offers will be judged on the extent to which they propose a viable plan that will make incremental progress toward sustainability throughout the life of the project.

D. Gender Balance:

USAID supports women's participation in decision-making for health, training opportunities, leadership in public health advocacy and access to information and products. The role of men in family health should not be overlooked, including father's participation in child feeding, contraception, and promoting community health and sanitation. Involving both men and women fosters sustainability and has a positive impact on women's productivity and quality of life. NGOs should be able to demonstrate that, over time, gender barriers and disparities are being addressed.

E. Inclusive development:

USAID also is committed to pursue advocacy for, outreach to, and inclusion of people with physical and mental disabilities, to the maximum extent feasible, in the design and implementation of USAID programming. USAID therefore requires that the recipient not discriminate against people with disabilities in the implementation of USAID funded programs and that it makes every effort to comply with the objectives of the USAID Disability Policy in performing the program under this grant. To that end and to the extent it can accomplish this goal within the scope of the program objectives, the recipient should demonstrate a comprehensive and consistent approach for including men, women and children with disabilities.

F. Partnerships:

The recipients will be expected to create close working relationships with other elements of the USAID Family Health program, especially those with the overall goal of improving facility and community-based PIHI. The recipients also will benefit from partnerships with other NGO grantees and partners such as local social marketing programs, the family planning association, etc. As one of the key partners in USAID's efforts to implement PIHI, recipients will be expected to coordinate with other USAID partners working on PIHI, including the APC, ANCRE and ARM3 projects. The APC project will provide organizational capacity building to

recipients as needed, and will participate in the overall monitoring of USAID's PIHI activities. ANCRE is another USAID funded activity that supports the Ministry of Health (MOH) and specifically the Direction de la Santé de la Mère et de l'Enfant (DSME) in order to nationally scale-up the PIHI at the community and health facility levels, including both public and private health providers. ANCRE (MCH) and ARM3 (malaria) will engage in national-level policy work and will coordinate with the MOH on overall direction of USAID and other PIHI activities in Benin. Additionally, they will coordinate efforts of all recipients under this RFA, with the goal of one cohesive USAID activity for PIHI, which is in-line with MOH policy for PIHI. Examples of this coordination work include regular monthly meetings among all partners nationally and at the local level; standardized tools for monitoring, standardized BCC materials, etc; and overarching work to improve commodity logistics nationally, therefore ensuring the flow of commodities to USAID PIHI implementation areas.

It is expected that over the life of the project, grantees will improve their capabilities to network and consult with other groups on their own. Grantees may find it helpful to collaborate with donors including WHO, UNICEF, UNFPA and the Global Fund.

This grant is being made by USAID/Benin, which has jurisdiction in terms of supervision, compliance, monitoring and other grant management responsibilities. Benin's MOH has overall responsibility for policy guidance and implementation of both private and public health activities in Benin. As such, they are not only a key partner/stakeholder, but can provide oversight supervision to grantee activities. Municipalities and local authorities also have jurisdiction in their respective areas. Grantees are expected to abide by national health guidance and to contribute to the national health community of practice. USAID/Benin views these grants as a step toward a stronger national community health system.

It is expected that the MOH will be the main source of MNCH/FP commodities as well as other supplies, educational materials and guidelines and manuals. Thus grantees will engage regularly with the MOH and other commodity security bodies in Benin. Grantees also have the option to source commodities from other programs, such as the social marketing program. However, no USAID or grant financing is available to purchase commodities, so individuals or municipalities need to purchase these, if commodities are sourced in this way. Nonetheless, technical assistance and coordination can be provided as needed.

G. Environmental Compliance:

The grantees are expected to have a perspective of protecting and preserving the environment, and specifically to comply with USAID's environmental guidance clauses found in Section 22CFR-216 "Environmental Compliance". USAID/Benin will supply documents on their environmental compliance requirements upon request. Environmental compliance involves planning and executing programs, which do not harm the environment, spread disease or compromise water supply, soil or other resources.

According to USAID/Benin initial Environmental Examination (IEE), projects funded through this RFA have a minimal effect on the natural or physical environment. However, Grantees should describe their environmental compliance for supplying, stocking, safeguarding, managing

(e.g., expired or unused medications), avoiding shortages and overstocks as well as appropriate and safe waste disposal needed commodities (e.g. empty syringes), especially for PIHI activities involving:

- Malaria rapid testing
- Insecticide treated mosquito net
- Tetanus, BCG and oral polio vaccines
- Contraceptives, particularly injectable
- ORT kits

In conjunction with USAID, grantees will develop an environmental mitigation and monitoring plan (EMMP) based on USAID's IEE within 90 days of award. The EMMP must be approved by USAID/Benin. Grantees should train their staff and CHWs to comply with those environmental procedures.

Applicants are advised to budget for appropriate resources for the compliance of the above requirements.

A.5 KEY PERSONNEL

As part of their application, each applicant should name and provide background information on the following Key Personnel. Other personnel can be proposed, as needed. Minimum qualifications for each are as follows:

Project Manager (Key Personnel Post)

The full time Manager is responsible for ensuring the successful and timely implementation of all project activities and the achievement of all results. He/she also will oversee the Monitoring and Evaluation Advisor.

- Demonstrated leadership, strategic thinking, and organizational skills; team-building and representational skills.
- A track record of leading community health projects and community mobilization.
- Proven ability to function effectively with multiple Beninese counterparts, including those from the MOH, and representatives from other key stakeholders such as NGOs and other donors.
- 5 years of experience in public health or community health; commitment to expanding health service utilization, especially family planning.
- Strong verbal and written French communication and presentation skills and good English communications skills.
- Skills necessary to oversee the Monitoring & Evaluation Advisor/team.
- Must hold a bachelor degree in Public Health or human science.

Manager of Finance, Operations and Information (Key Personnel Post)

This position is responsible for ensuring timely and accurate financial reporting and budgets as well as the management of all accounting, audits, procurement, and grant financial and compliance monitoring.

- A background and experience in financial and grants management, and direct work

experience managing international organization grants or contracts is preferred.

- Proven expertise in finance, accounting and auditing, including automated financial systems, as well as results-oriented grants management.
- Proven expertise in financial planning, monitoring of grant compliance and management and the establishment of internal controls.
- Demonstrated strong management, coordination, teamwork, and planning skills, with ability to function effectively with multiple counterparts in both the public and NGO sectors.
- Verbal and written French and good English communications skills.
- Must hold a bachelor degree in Accounting or Business Management/Finance.

Monitoring and Evaluation Advisor (Non-key Personnel Post)

This position is responsible for ensuring timely and accurate Health Management Information Systems, data collection, analysis and reporting, both to donors and the MOH. S/he will assess data quality and manage for results.

S/he should have the following background:

- Management Information System (MIS) skills.
- Computer skills and information management skills.
- 3-5 years of experience with M&E data collection and analysis, preferably in the health sector.
- A bachelor's degree in social or human sciences

Community Health and Health Promotion Supervisor (Non-key Personnel Post)

A Community Health and Health Promotion Supervisor is responsible for increasing the availability of and access to primary health care services in project target communes, improving the quality of services, and increasing the adoption of healthy behaviors and practices.

- Strong background in nursing (e.g., nurse, midwife) and/or public health.
- Prior experience in community health and complex, integrated public health PIHI activities. Experience in implementation of community-based PIHI.
- Proven ability to achieve results relating to availability, access, and quality of primary health care services as well as behavior change communication approaches to increase the adoption of health behaviors in challenging work environments.
- Demonstrated leadership, management, coordination, teamwork, and planning skills, with proven ability to function effectively with multiple stakeholders and counterparts in both the public and NGO sectors.
- Professional qualifications in health, social work or a related field. Counseling/behavior change skills. Experience in supportive supervision and community change a plus.

Community Health Promotion Advisor (Non-key Personnel Post)

This person should have:

- An educational background in nursing assistance (e.g., nursing aide)
- Secondary school, 1st cycle required (niveau 3ème ou BEPC)

- Ability to motivate and to work with communities and CHWs/CHVs
- Good communication skills

A.6 AUTHORIZED LEGISLATION

This is a discretionary Cooperative Agreement opportunity to be competed and awarded pursuant to the authority of the 1961 Foreign Assistance Act, as amended, and the applicable sections of USAID Standard Provisions for Non-U.S. Nongovernmental Organizations as available in the ADS 303 supplemental: <http://inside.usaid.gov/ADS/300/303mab.docx>

A.7 PROGRAM ELIGIBILITY REQUIREMENTS

Type of entities which may apply is described in Section III. Each NGO may make an offer to work in one or more health zones. Applications for multiple health zones will be accepted and encouraged. If applying for more than one health zone, applications must be tied to a specific zone or set of zones. For example, if NGO applicant wishes to submit application for zone A and zone B, it should be submitted as separate application for each of the Health Zone.

A.8 AWARD ADMINISTRATION

While [22 CFR 226](#) does not directly apply to non-U.S. applicants, the Agreement Officer will use the standards of 22 CFR 226 in the administration of the award. As a matter of policy and to the extent practicable, USAID applies these regulations to non-U.S. non-governmental organizations through Chapter 303 of USAID's Automated Directives System (ADS 303) and the Mandatory Standard Provisions for Non-U.S. Non-governmental Organizations. Please refer to Section VI of this RFA for more information on the standard provisions.

Accordingly, the Cooperative Agreement to non-U.S. non-governmental organizations will be administered in accordance with [ADS 303](#), [22 CFR 220](#) for universities (OMB Circular A-21), [2 CFR 230](#) for non-profit organizations (OMB Circular A-122), or 48 CFR 31.2 and Federal Acquisition Regulation (FAR) Part 31 (for for-profit organizations), and Standard Provisions for non-U.S. Nongovernmental Organizations.

[22 CFR 226](#) will apply to sub-awards to U.S. institutions of higher education, hospitals and other non-profit organizations, and to U.S. commercial organizations.

These policies and federal regulations are available at the hyperlinks below:

- [ADS 303: Grants and Cooperative Agreements to Non-Governmental Organizations](#)
- [2 CFR 215: Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals, and Other Nonprofit Organization \(OMB Circular A-110\)](#)
- [2 CFR 220: Cost Principles for educational Institutions \(OBM Circular A-21\)](#)
- [2 CFR 230: Cost Principles for Non-Profit Organizations \(OMB Circular A-122\)](#)

- [22 CFR 226: Administration of Assistance Awards to U.S. Nongovernmental Organizations](#)
- [Standard Provisions for U.S. Nongovernmental Recipients](#)
- [Standard Provisions for Non-U.S., Nongovernmental Recipients](#)

Or they may also be found at the following websites:

<http://www.whitehouse.gov/omb/circulars/index.html>

<http://www.usaid.gov/policy/ads/300/303.pdf>

<http://www.usaid.gov/policy/ads/300/303maa.pdf>

<http://www.usaid.gov/policy/ads/303/303mab.pdf>

Pursuant to 22 CFR 226.81, it is USAID policy not to award profit under assistance instruments. However, all reasonable, allocable, and allowable expenses, direct and indirect, which are related to the Cooperative Agreement and are in accordance with applicable cost standards, may be paid under the Award.

[End of Section I]

SECTION II – AWARD INFORMATION

1. ESTIMATED FUNDS TO BE AVAILABLE

Subject to the availability of funds, USAID intends to provide approximately \$2,000,000 to 2,400,000 in total USAID funding for the life of the activity for five Health Zones stated at page 21. USAID intends to award up to five Cooperative Agreements pursuant to this RFA. USAID reserves the right to fund any one or none of the applications submitted.

USAID may make award(s) on the basis of initial applications received, without discussions or negotiations. Therefore, each initial application should contain the applicant's best terms from a cost and technical standpoint. USAID reserves the right (but is not under obligation to do so), however, to enter into discussions with one or more applicants in order to obtain clarifications, additional detail, or to suggest refinements in the program description, budget, or other aspects of an application. Neither financial data submitted with an application nor representations concerning facilities or financing will form a part of the resulting Cooperative Agreement unless explicitly stated otherwise in the agreement.

2. START DATE AND PERIOD OF PERFORMANCE

The period of performance anticipated herein is three years, beginning on the effective date of the award of the Cooperative Agreement.

3. TYPE OF AWARD

A. Award Type

USAID intends to award up to **five Cooperative Agreements** from this Request for Application (RFA) to the responsible Benin entity/entities whose application conforms to this RFA offering the greatest value to the US Government (see also Section V of this RFA for Evaluation Criteria). The US Government may: 1) reject any and all applications; 2) accept more than one application; and/or 3) waive informalities and minor irregularities in applications received.

B. Substantial Involvement

USAID/Benin anticipates a strong and close working partnership with the recipient of this Cooperative Agreement. USAID will be involved in monitoring progress toward achievement of the objective and expected results during the course of the Cooperative Agreement. This substantial involvement will be through the Agreement Officer (AO), except to the extent that the AO delegates authority to the AOR in writing. A Cooperative Agreement allows "substantial involvement" by USAID (active involvement by USAID in certain programmatic elements during performance of the activity). The AO or AOR will exercise substantial involvement as defined in ADS 303.3.11 under this Cooperative Agreement in the following areas:

- (i) Approval of the recipient's annual Implementation/Work Plans;

- (ii) Approval of Key Personnel and any change in Key Personnel
- (iii) USAID and recipient collaboration or joint participation
 - Approval of sub-awards and subcontracts
 - Approval of M&E Plans
 - Agency monitoring to permit specified kinds of direction or redirection because of interrelationships with other activities, to include:

[End of Section II]

SECTION III – ELIGIBILITY INFORMATION

1. ELIGIBILITY OF APPLICANTS

To be eligible to receive this Cooperative Agreement, prime applicants must:

- Be organized under the laws of the recipient country;
- Have its principal place of business in the recipient country;
- Be majority owned by individuals who are citizens or lawful permanent residents of the recipient country or be managed by a governing body, the majority of whom are citizens or lawful permanent residents of a recipient country; and
- Not be controlled by a foreign entity or by an individual or individuals who are not citizens or permanent residents of the recipient country.

The term “controlled by” means a majority ownership or beneficiary interest as defined above, or the power, either directly or indirectly, whether exercised or exercisable, to control the election, appointment, or tenure of the organization’s managers or a majority of the organization’s governing body by any means, e.g., ownership, contract, or operation of law.

“Foreign entity” means an organization that fails to meet any part of the “local organization” definition as mentioned above.

Government controlled and government owned organizations in which the recipient government owns a majority interest or in which the majority of a governing body are government employees, are included in the above definition of local organization.

Applicants are reminded that US Executive Orders and US law prohibits transactions with, and the provision of resources and support to, individuals and organizations associated with terrorism. It is the legal responsibility of the recipient to ensure compliance with these Executive Orders and laws. This provision must be included in all sub-awards issued under this Cooperative Agreement.

2. POTENTIAL NEW IMPLEMENTING PARTNERS

USAID encourages applications from organizations that have never received a direct award from USAID. However, resultant awards to these organizations may be significantly delayed if USAID must undertake necessary pre-award reviews of these organizations to determine their “responsibility” (see below). Non-U.S. Organization Pre-award Survey Guidelines and Support is available in the following link: <http://transition.usaid.gov/policy/ads/300/303sam.pdf>. Organizations should take this into account and plan their implementation dates and interventions accordingly.

3. RESPONSIBILITY OF APPLICANT

In order for an award to be made, the AO must make an affirmative determination that the applicant is “responsible”, as discussed in ADS 303.3.9. This means that the applicant must possess, or have the ability to obtain, the necessary management and technical competence to conduct the proposed program. The applicant must agree to practice mutually agreed-upon methods of accountability for funds and other assets provided or funded by USAID.

In the absence of an affirmative “responsibility” determination, an award can ordinarily not be made. However, in rare cases, an award can be made with “special award conditions” (e.g., additional non-standard award requirements designed to minimize the risk presented to USAID of making an award to an NGO for which an affirmative determination of “responsibility” cannot be made), but only where it appears likely that the applicant can correct the deficiency in a reasonable period.

[End of Section III]

SECTION IV – APPLICATION AND SUBMISSION INFORMATION

1. POINT OF CONTACT

Cosmas Apedo

Acquisition and Assistance Specialist
USAID/Benin,
Email: capedo@usaid.gov

Ms. Francine Agblo

Acquisition & Assistance Specialist
USAID/Benin
Email: fagblo@usaid.gov

Any prospective applicant desiring an explanation or interpretation of this RFA must request it in writing **by the due date and time specified on the cover page of this RFA** in order to allow a reply to reach all prospective applicants before the submission of their applications. Oral explanations or instructions given before award will not be binding. Any information given to a prospective applicant concerning this RFA will be furnished promptly to all other prospective applicants as an amendment of this RFA if that information is necessary in submitting applications or if the lack of it would be prejudicial to any other prospective applicants.

USAID/Benin will hold a Pre-application conference on Thursday, July 10, 2014 at 1400 hrs. The pre-application conference will review the requirements of this RFA and will receive questions. Interested applicants must register for the pre-application conference, with the name of the organization and the name(s) of the attendee(s), by email to the point of contacts mentioned above with the following subject heading, “Pre-Application Conference” no later than 1400 hrs, Tuesday, July 8, 2014. USAID/Benin will respond with an email and or by phone confirming registration, details of the location of the meeting, and a confirmation of the date and time. A registration confirmation is necessary to be guaranteed entrance.

2. REQUIRED FORMS

All applicants must submit the application using the SF-424 series, which includes the:

- SF-424, Application for Federal Assistance;
- SF-424A, Budget Information - Nonconstruction Programs; and
- SF-424B, Assurances - Nonconstruction Programs.

The program described in Section I above includes non-construction elements. Therefore, these mandatory forms for non-construction programs must be completed. Costs to non-construction activities should be included on the SF-424A. Copies of these forms may be found in the following website:

<https://apply07.grants.gov/apply/FormsMenu?source=agency>

3. PRE-AWARD CERTIFICATIONS, ASSURANCES, AND OTHER STATEMENTS OF RECIPIENTS

In addition to the certifications that are included in the SF 424, applicants must provide the following certifications, assurances and other statements. Complete copies of these Certifications, Assurances, and Other Statements may be found as an attachment to this RFA (see attachment 1).

- a.** A signed copy of the certification and disclosure forms for “Restrictions on Lobbying” (see **22 CFR 227**);
- b.** A signed copy of the “Prohibition on Assistance to Drug Traffickers” for covered assistance in covered countries;
- c.** A signed copy of the Certification Regarding Terrorist Funding required by the Internal Mandatory Reference **AAPD 04-14**;
- d.** A signed copy of “Key Individual Certification Narcotics Offenses and Drug Trafficking”
- e.** Survey on Ensuring Equal Opportunity for Applicants; and
- f.** All applicants must provide a Data Universal Numbering System (DUNS) Number.

All U.S. Government recipients and contractors are required to secure a Data Universal Numbering System (DUNS) Number before an award can be made to them. The DUNS is a 9-digit number assigned by Dun and Bradstreet, Inc. (D&B) that uniquely identify the recipient's name and address. It can be obtained from D&B at <http://fedgov.dnb.com/webform>.

Applicants may submit applications under this RFA without DUNS numbers. However, the selected applicant will be required to submit its DUNS number before it can receive an award. Therefore, applicants are encouraged to obtain a DUNS number as early as possible so that, if selected, award will not be delayed.

- g.** All applicants must register/update your company’s profile in SAM as soon as possible. The link to access the SAM website is: <https://www.sam.gov/portal/public/SAM/>.

The **System for Award Management (SAM)** is the Official U.S. Government system that consolidated the capabilities of CCR/FedReg, ORCA, and EPLS. There is NO fee to register for this site. Entities may register at no cost directly from this page. User guides and webinars are available under the Help tab. Applicants may submit applications under this RFA without SAM Registration. However, the apparently successful applicant will be required to register and must submit evidence of registration to USAID. Therefore, applicants are encouraged to register with SAM early so that, if selected, award will not be delayed.

4. APPLICATION FORMAT

A. Preparation of Applications:

- i. Applicants are expected to review, understand, and comply with all aspects of this RFA.
- ii. Each applicant shall furnish the information required by this RFA. The applicant must sign the application form (SF 424) and print or type its name on the Cover Page of the technical and cost applications. Erasures or other changes must be initialed by the person signing the application. Applications signed by an agent shall be accompanied by evidence of that agent's authority, unless that evidence has been previously furnished to the issuing office.
- iii. 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, must:

- a. Mark the title page with the following legend:

"This application includes data that shall not be disclosed outside the U.S. Government and shall not be duplicated, used, or disclosed - in whole or in part - for any purpose other than to evaluate this application. If, however, a grant is awarded to this applicant as a result of - or in connection with - the submission of this data, the U.S. Government shall have the right to duplicate, use, or disclose the data to the extent provided in the resulting grant. This restriction does not limit the U.S. Government's right to use information contained in this data if it is obtained from another source without restriction. The data subject to this restriction are contained in sheets____". and,

- b. Mark each sheet of data it wishes to restrict with the following legend:

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

- iv. Applicants should retain for their records one copy of the application and all enclosures which accompany it.

- v. **Application shall be split into two separate parts:** (1) Technical Application; and (2) Cost Application. The formats for each of these parts of the application are set forth below.

B. Technical Application Format

Technical applications should be specific, complete and presented concisely. Applicants are invited to present a well thought-out implementation plan with sound rationale for the proposed level of effort and scheduling of work; an illustrative M&E Plan that identifies appropriate milestones, gender sensitive indicators and targets (including sex disaggregated targets), as well as plans to gather and utilize baseline data, the illustrative M&E Plan is expected to reflect concern for results and include proper impact

indicators; and an exit strategy and approach to ensure that the program results can be sustained after completion of the project.

Applications should demonstrate the applicant's capabilities and expertise with respect to achieving the goals of this program. Applications shall take into account the technical evaluation criteria found in Section V.

Technical Application shall be written in French or in English shall not to **exceed 20 single-spaced typed pages**. Page limitations include the following requirements: single-spaced text printed on one side of the page only, one-inch (1") margins, **11-point (minimum) Times New Roman font with each page numbered consecutively**. It shall include an executive summary, not to exceed 2 pages. The executive summary shall provide a clear overview of the results to be achieved, milestone or benchmark measures of progress and a brief summary of applicant's experience implementing similar activities.

A portion of technical application will become the program description incorporated into the final Cooperative Agreement, if selected for award.

Applicants should prepare their applications using the following general format:
The suggested outline for the technical application is:

- I. Cover Page
- II. Table of Contents, listing all page numbers and attachments
- III. List of Acronyms
- IV. Executive Summary
- V. Technical Approach
- IV. Management Plan and Staffing
- V. Institutional Capacity and Past Experience
- VII. Annexes:
 - a. Illustrative M&E Plan
 - b. Resumes for Key (including recommendation letters) and Letters of Commitment
 - c. Resumes for Professional Personnel including references
 - d. Memorandum of Understanding with proposed partners
 - e. Mobilization Plan
 - f. Relevant Past Performance Information (recipient and key sub-grantees)
 - g. A Check List providing information of the documents submitted with the application.

The above annexes – as well as the cover page, table of contents, list of acronyms, are excluded from the 20-page limitation. Elaborate art work, expensive paper and bindings, and expensive visual and other presentation aids are neither necessary nor wanted. Unnecessarily elaborate brochures or other presentations beyond those sufficient to present a complete and effective application in response to this RFA are not desired and may be construed as an indication of the prospective recipient's lack of cost consciousness.

- i. *Cover Page*

A single page with the names of the organization/institutions involved and the lead or primary applicant clearly identified. Any proposed sub-grantees/contractors (hereafter referred to as the “subs”) should be listed separately. In addition, the Cover Page should provide a contact person for the prime applicant, including the individual’s name (both typed and his/her signature), title or position with the organization/institution, address, telephone and fax numbers. State whether the contact person is the person with authority to contract for the applicant and, if not, that person should also be listed. The cover page should be a maximum of one page and is **excluded from the 20-page limitation**.

ii. *Executive Summary*

This should provide a clear summary of the key elements of the applicant’s strategy and approach as well as resources, methodologies and roles of contributing organizations, as appropriate. The executive summary should be a maximum of two pages and is **included in the 20-page limitation**.

iii. *Technical Approach*

The Technical Application describes how the Applicant intends to carry out the Project Description (Section I). It should be concise, specific and complete, and demonstrate a clear understanding of the work to be undertaken and the responsibilities of all parties involved. It must demonstrate the Applicant’s eligibility, as well as its capabilities and expertise. The Technical Application will be accepted in French, though English is preferred. If the application is recommended for funding, the grantee will be responsible for providing an English translation of their application at their own expense during pre-award negotiations by a certain time notified by USAID. If the successful applicant is unable to submit English version of the technical and cost application will be disqualified from award.

As part of the technical approach, the applicant shall also include **an illustrative M&E Plan** as annexes to the application. The illustrative M&E Plan must explain how the applicant proposes to monitor the activity and assess activity impact. The M&E Plan must include indicators, targets, data sources and collection methods, baseline information, and benchmarks. The applicant must discuss the ways in which the collection, analysis and reporting of performance data will be managed under the activity. Applicants are encouraged to provide an M&E Plan that they believe would best monitor the activity’s progress which includes indicators and data collection systems that will provide reliable, valid, timely, and precise information in a cost-effective manner. All data collected must be disaggregated by sex, if applicable. It is the applicant’s responsibility to ensure that all costs related to the implementation of the M&E Plan are included in the cost application and consider the required human resources for implementing the M&E Plan.

The recipient’s approach to addressing sustainability, environmental compliance, gender and disabilities will be evaluated.

- *Sustainability:* Extent to which the NGO has integrated sustainability as a cross-cutting design element in the proposed project activities and a plan for engaging municipal and local authorities in compensating CHWs in Benin.

- *Environmental Compliance:* Demonstrated understanding of how project activities will be completed in accordance with the environmental compliance requirements of USAID/Benin.
- *Gender:* Extent to which gender (both women and men) is incorporated into all project aspects and the technical approach; extent to which the NGO adequately describes how it will address unintended consequences resulting in adverse gender outcomes; and extent to which gender-based inequities in decision-making, access to resources, and empowerment through the life of the project are addressed.
- *Inclusive Development:* Extent to which people with physical and/or mental disabilities are incorporated into all project aspects; extent to which the NGO adequately describes how it will address unintended consequences resulting in adverse disability outcomes; and extent to which disability-based inequities in decision-making, access to resources, and empowerment through the life of the project are addressed.

iv. *Management Plan and Staffing:*

The applicant should propose a Management Plan and Staffing and describe how the proposed plan will contribute towards achieving the objectives and results described in the Program Description. The proposed plan should specifically state and justify the composition and organizational structure of the entire activity team. It should also describe how the technical expertise and experience of all staff members is most conducive to achieving expected results of the activity. The plan should specify the role and estimated amount of time each staff member will devote to the activity and/or specific components within the activity. Delineation of roles, responsibilities, authority, and processes for decision making within applicant's in-country team and between the home office and the field must be spelled out clearly. **An organizational chart should be included** in the technical application and clearly depict lines of authority, staff responsibility, and the role of sub-recipient organizations (if any).

The applicant should clearly identify proposed partners, explaining the roles and responsibilities of each and the proposed management operating structure. **Signed Memorandum of Understanding with proposed partners/sub-recipient should be presented in an annex** (excluded from the 20-page limitation) and will be reviewed. Services to be provided by each partner institution or organization shall be described. Applicants shall describe the process of identifying and supporting sub-grantees (if any) and specify the technical resources and expertise of proposed subcontract/sub-recipient organizations (if any). Should the applicant decide to utilize sub-agreements, detailed information on its experience in overseeing and implementing sub-agreements should be provided.

The management plan should also describe how the applicant would coordinate and synergize its interventions with other programs of USAID/Benin and other donors. The applicant should provide information on proposed field management structure and financial controls as well.

Finally, a **Mobilization Plan** should be included as a step-by-step outline that concretely demonstrates how the applicant will get the activity underway. The Mobilization Plan must cover the first six months of

activity implementation and address how the applicant can rapidly launch the activity. The Mobilization Plan shall provide information on how planned interventions might contribute to expected results within the first six months. **The mobilization plan is excluded from page limit.**

Applicants must specify the qualifications and abilities of selected personnel that are suited to successfully implement the proposed technical approach. The applicant shall also include, in an annex, **resumes** for all key personnel candidates and other professional personnel proposed for significant positions. Resumes may not exceed two (2) pages in length and shall be in chronological order starting with most recent experience. Each resume shall be accompanied by a **signed Letter of Commitment** from each candidate indicating his/her: (a) availability to serve in the stated position, in terms of days after award; (b) intention to serve for a stated term of the service; and (c) agreement to the compensation levels which correspond to the levels set forth in the cost application.

For each of the proposed key personnel, the applicants must submit three recommendation letters. For each of the proposed required professional personnel, the applicants must submit name, organization name, title, email and phone number for three references.

The applicants must provide a full list of all proposed personnel/positions with specific roles and responsibilities as listed in Section I.

v. *Institutional Capacity and Past Experience:*

Applicants must demonstrate technical and managerial expertise that would directly benefit the activity implementation and reflect comparative advantages in implementing proposed interventions. Applicants should articulate: 1) financial and administrative capacity; and 2) technical capacity related to this activity.

Information in this section should include (but is not limited to) the following:

- Brief description of organizational history/expertise
- Relevant experience with proposed interventions
- Organizational strength as represented by experience in managing successful programs of similar scope and complexity
- Information demonstrating the applicant's financial/procurement capability, such as confirmation of existing automated financial systems, personnel policies, travel policies, audit policies, and any other applicable information. Applicant must provide the copies of the policies to substantiate capability.
- Sub-awardee or subcontractor capabilities and expertise.

Applicants must provide evidence of pertinent past performance and clearly describe examples of successful development and implementation of programs similar to what is required under this RFA. Applicants must submit a list of the five most recent U.S. Government or other donor-funded contracts, grants, cooperative agreements, etc. for the past three years. This information is also required for all identified sub-recipients, as it relates to their proposed role, that represent 10% or more of the total estimated cost. Include the following for each award:

- Name of awarding organization or agency
- Address of awarding organization or agency
- Place of performance of services or program
- Award number
- Amount of award
- Period of Performance (begin and end dates of services/program)
- Name, current telephone number, current fax number, and email address (if one is available) of a responsible technical representative (activity manager or other contact person) of that organization or agency
- Brief description of the activity

C. Cost Application Format

The Cost or Business Application is to be submitted under separate cover from the technical application. Certain documents are required to be submitted by an applicant in order for the Agreement Officer to make a determination of responsibility. However, it is USAID policy not to burden applicants with undue reporting requirements if that information is readily available through other sources. There is no page limitation on the Cost Application.

The following sections describe the documentation that applicants for an assistance award must submit to USAID/Benin prior to award. While there is no page limit for this portion, applicants are encouraged to be as concise as possible, but still provide the necessary detail to address the following:

- i. The budget must have an accompanying detailed budget narrative and justification that provides in detail the total program amount for implementation of the program your organization is proposing. The budget narrative should provide information regarding the basis of estimate for each line item, including reference to sources used to substantiate the cost estimate (e.g. organization's policy, payroll document, vendor quotes, etc.).

In addition to the detailed budget, a summary of the budget must be submitted using **Standard Form 424 and 424A** which can be downloaded from the following web site:

<https://apply07.grants.gov/apply/FormsMenu?source=agency>

- ii. The cost/business application should contain the following budget categories:
 - a. Direct Labor – Direct salaries, wages and annual increases for all personnel proposed under the application shall be in accordance with the applicant's established personnel policies. To be considered adequate, the policies must be in writing, applicable to all employees of the organization, is subject to review and approval at a high enough organizational level to assure its uniform enforcement, and result in costs which are reasonable and allowable in accordance with applicable cost principles. The narrative should include a level of effort analysis specifying personnel, rate of compensation, and amount of time proposed. Anticipated salary increases

during the period of the agreement should be included. Applicants must indicate how they came up with the proposed salaries in the budget narrative for each of the positions.

- b. **Fringe Benefits** - If accounted for as a separate item of cost, fringe benefits should be based on the applicant's audited fringe benefit rate, supported by a Negotiated Indirect Cost Rate Agreement (NICRA) or historical cost data. If the latter is used, the budget narrative should include a detailed breakdown comprised of all items of fringe benefits (workers compensation, health and life insurance, Gratuity/Severance, Bones etc.) and the costs of each, expressed in dollars and as a percentage of salaries. Personnel policy should be submitted to substantiate the proposed fringe benefit rates and types.
 - c. **Supplies and Equipment** - Differentiate between expendable supplies and nonexpendable equipment (NOTE: Equipment is defined as tangible nonexpendable personal property including exempt property charged directly to the award having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit, unless the applicant's established policy establishes nonexpendable equipment anticipated to be required to implement the program, specifying quantities and unit cost.)
 - d. **Allowances**- Allowances must be broken down by specific type and by person and must be in accordance with the applicant's established policies.
 - e. **Travel and Per Diem** - The narrative should indicate number of trips, domestic and international, and the estimated unit cost of each travel in accordance with the technical application. Proposed per diem rates must be in accordance with the applicant's established policies and practices that are uniformly applied to federally-financed and other activities of the applicant.
 - f. **Other Direct Costs** - This could include any miscellaneous costs such as office rents, communications, transportations, utilities, report preparation costs, passports, visas, medical exams and inoculations, insurance (other than the applicant's normal coverage), etc. The narrative, or supporting schedule, should provide a complete breakdown and support for each item of other direct costs.
 - g. **Proposed Sub-contracts/agreements** - Applicants who intend to utilize sub-contractors or sub recipients should indicate the extent intended and a complete cost breakdown, as well as all the information required herein for the applicant. **Sub-contract/agreement cost applications should follow the same cost format as submitted by the applicant.**
- iii. A current Negotiated Indirect Cost Rate Agreement (NICRA) if your organization has such an agreement with an agency or department of the U.S. Government, if applicable.
- iv. Applicants who do not currently have a Negotiated Indirect Cost Rate Agreement (NICRA) from their cognizant agency shall submit the following information:

- a. copies of the applicant's financial reports for the previous 3-year period, which have been audited by a certified public accountant or other auditor satisfactory to USAID;
 - b. projected budget, cash flow and an organizational chart for the applicant; and
 - c. a copy of the organization's accounting manual.
 - d. when applicants will propose indirect cost rates, it should be derived based on the audited financial reports of last three years.
- v. Required assurances, certifications and representations as indicated in 424 B entitled Assurances-Non Construction Programs and the certifications identified in subsection 2 and 3 of the section.
- vi. Applicants should submit any additional evidence of responsibility deemed necessary for the Agreement Officer to make a determination of responsibility. The information submitted should substantiate that the applicant:
- a. has adequate financial resources or the ability to obtain such resources as required during the performance of the award;
 - b. has the ability to comply with the award conditions, taking into account all existing and currently prospective commitments of the applicant, nongovernmental and governmental;
 - c. has a satisfactory record of performance. Past relevant unsatisfactory performance is ordinarily sufficient to justify a finding of non-responsibility, unless there is clear evidence of subsequent satisfactory performance.
 - d. has a satisfactory record of integrity and business ethics; and
 - e. is otherwise qualified and eligible to receive a grant under applicable laws and regulations (e.g., EEO).
- vii. Applicants that have never received a grant, cooperative agreement or contract from the U.S. Government are required to submit a copy of their accounting manual. If a copy has already been submitted to the U.S. Government, the applicant should advise which Federal office has a copy.

5. FUNDING RESTRICTIONS/PRE-AWARD COSTS

There are no funding restrictions applicable to this RFA at this time. USAID in its discretion and at the request of the winning applicant may allow pre-award costs.

6. APPLICATION SUBMISSION PROCEDURES

Applications shall be due at 1400 hours Benin Local Time on July 31, 2014. USAID will determine whether an application that is not received by the Agreement Officer by one of the methods specified below by the time and date indicated will be late. Because making an award is critical to USG foreign policy goals. Time is important and late applications may be considered at the sole discretion of the Agreement Officer.

Applicants may upload applications to <http://www.grants.gov>. Additionally, a separate electronic (e-mail) **AND** a hard copy submission are still required by USAID/Benin. All applications received by the submission deadline will be reviewed for responsiveness to the specifications outlined in these guidelines and the application format. No addition or modifications will be accepted after the submission date.

Applications shall be submitted in two separate volumes: (a) technical and (b) cost or business application. Technical portions of applications should be submitted in an original and two (2) copies and cost portions of applications in an original and one (1) copy. All copies of the technical and cost/business applications must be separately placed in sealed envelopes clearly marked on the outside with the following words "USAID Benin RFA 680-14-000002 -Technical or Cost/Business (as appropriate) Application". These individual envelopes must then be bundled together to be received as one complete package. One CD with the same contents as the Technical and Cost Applications hardcopy must also be included in this package

A. Submission of Hard Copy Applications

Hard copies of applications and modifications thereof shall be submitted in **sealed envelopes or packages** (1) addressed to the person and office specified below, and (2) showing the date and time specified for receipt (i.e., the due date and time), the RFA number, and the name and address of the applicant.

BY COURIER SERVICE/HAND DELIVERY/Mail:

Mr. Cosmas Apedo
Acquisition and Assistance Specialist
U.S. Agency for International Development
C/O American Embassy
Rue Caporal Bernard Anani, O1 BP 2012,
Cotonou, Benin
Phone: 229-21-300650 x4172

Hard copies of submissions must arrive by the due date and time. Delivery to the courier representative does not constitute meeting the statutory requirement that applications are received on time at the designated office. For purposes of recording the official receipt of applications, the date/time stamp of the Office of the Acquisition and Assistance at USAID/Benin will govern.

Faxed applications are not acceptable.

B. Submission of Electronic Applications

Applications may be uploaded to <http://www.grants.gov>; however, separately submitted applications, e-mailed **AND** in hard copy, are still required by USAID/Benin. USAID/Benin bears no responsibility for data errors resulting from transmission or conversion processes associated with electronic submissions.

Applications shall be submitted with the name and address of the applicant, RFA number and Health Zone name inscribed thereon, to Cosmas Apedo at capedo@usaid.gov and Francine Agblo at fagblo@usaid.gov respectively. The applicant may make an application for one or more health Zones. If applying for more than one health zones, applications must be tied to a specific zone or set of zones. If applicant wishes to submit for Zone A or Zone B, they should submit separate applications for each of the Health Zone. **The applicants are reminded to submit a complete application for all the components of the Program Areas (see section I) covering all areas of the Program Description. A partial application will not be considered for evaluation.**

For electronic submissions, your organization must ensure that the applications are received at USAID/Benin in its entirety. No addition or modifications will be accepted after the submission date. E-mail attachments should be formatted in Microsoft Word and/or Microsoft Excel format with **5 MB limit per e-mail**. Please convert your documents to one of these formats before sending them to USAID/Benin scanned copies of pages in .pdf format (Adobe PDF) if they include signatures or forms. **USAID/Benin cannot accept zip files, as they will be blocked by USAID's firewall.**

In addition to the aforementioned guidelines, the applicant is requested to take note of the following:

- (i) Applications submitted electronically must be in either Microsoft Word (for narrative text) or Excel (for tables), unless you are providing scanned copies of pages that include signatures or forms.
- (ii) Budget shall be submitted in Microsoft Excel format with full access to all cells, formulas, spreadsheets, and workbooks. No hidden information, cells, formulas, spreadsheets will be permitted. Information referring to cells that are not accessible will not be evaluated.
- (iii) After you have sent your applications electronically, please immediately check your own email to confirm that the attachments you intended to send were indeed sent. If you discover an error in your transmission, please send the material again and note in the subject line of the email or indicate in the file name if submitted via grants.gov that it is a "corrected" submission.
- (iv) Please 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.

- (v) If you send your application by multiple emails, please indicate in the subject line of the email whether the email relates to the technical or cost application, and the desired sequence of multiple emails (if more than one is sent) and of 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 which says: "[organization name], Cost Application, Part 1 of 2".

Our preference is that the technical application and the cost application be submitted as single email attachments, e.g. that you consolidate the various parts of a technical application into a single document before sending them. If this is not possible, please provide instructions on how to collate the attachments. USAID/Benin will not be responsible for errors in compiling electronic applications if no instructions are provided or are unclear.

C. Receipt of Applications

Applications must be received at the place designated and by the date and time specified in this section of the RFA. Applications which are submitted late or are incomplete run the risk of not being considered in the review process. Late applications will be considered for award if, in the sole discretion of the Agreement Officer, it is determined that it is in the U.S. Government's interest, and if the evaluation process has not yet commenced.

The applicant must ensure that applications sent electronically are received at USAID/Benin in their entirety. Applicants shall confirm with Cosmas Apedo at Capedo@usaid.gov or Francine Agblo at fagblo@usaid.gov that their electronic submissions (either via grants.gov or via email) were successfully received at USAID/Benin by the required due date.

D. Questions & Answers

Any questions regarding this RFA should be submitted in writing to Cosmas Apedo at capedo@usaid.gov A&A Specialist and to Francine Agblo, A&A, via e-mail at fagblo@usaid.gov .

Questions regarding this RFA should be submitted **no later than 1400 hrs Benin Time on July 08, 2014** to provide sufficient time to address the questions and incorporate the questions and answers as an amendment to this solicitation. Verbal explanations or instructions given before award will not be binding. Any information given to a prospective applicant concerning this RFA will be furnished promptly to all other prospective applicants as an amendment to this RFA, if that information is necessary in submitting applications or if the lack of it would be prejudicial to any other prospective applicant.

[End of Section IV]

SECTION V – APPLICATION REVIEW INFORMATION

1. OVERVIEW OF APPLICATION REVIEW

The criteria presented below have been tailored to the requirements of this RFA. Applicants should note that these criteria serve to: (a) identify the significant matters which applicants should address in their applications and (b) set the standard against which all applications will be evaluated. USAID reserves the right to determine the resulting level of funding for the agreement award. To facilitate the review of applications, applicants are requested to organize the narrative sections of technical applications according to the technical application format (Section IV.4.B) in the Application and Submission Information and the evaluation criteria set forth below.

The technical application will be evaluated in accordance with the Technical Evaluation Criteria set forth below. The cost/business applications for all applicants submitting a technically acceptable application will be evaluated by the Agreement Officer for general reasonableness, cost realism, and allowability and allocability. Awards will be made to responsible applicants whose applications offer the greatest value, cost and other factors considered.

USAID/Benin intends to make this award without any discussion. To the extent that they are necessary, negotiations will be conducted with the applicant whose application, has or have a reasonable chance of being selected for award. The final award decision will be made by the Agreement Officer, with consideration of the Technical Evaluation Committee recommendations.

The criteria listed below are presented by major category so that applicants will know which areas require emphasis in the preparation of the technical application. The selection will be based upon the following factors. To be selected for the award, the application must contain, at a minimum, these elements. The maximum point value that can be awarded in evaluating each element is provided below. The sub-factors under each criterion are listed in order of importance.

The specific evaluation criteria are as follows:

<u>Criteria</u>	<u>Possible Points</u>
A. Technical Implementation	50
B. Management and Staffing Plan	30
C. Institutional Capacity and Past Performance	20
Total Score	100

2. TECHNICAL EVALUATION CRITERIA

A. TECHNICAL IMPLEMENTATION (50 points)

The technical approach must reflect an excellent understanding of the overall program description and its objectives described in detail in Section I. The technical approach will be evaluated based on:

- The NGO's ability to demonstrate a thorough understanding of Community PIHI, policy, and challenges related to community-based primary health care services in Benin.
- Extent to which the proposed technical approach and activities are well conceived and realistic to accomplish the project objectives.
- Extent to which NGO describes a high-quality system for monitoring and evaluation that is linked to the Ministry of Health, and includes regular data collection, analysis and documentation. In addition, extent to which NGO describes an effective and realistic CHW training, performance monitoring and supervision strategy
- The NGO's ability to demonstrate a feasible approach to ensure continuous availability of essential commodities.
- *Sustainability*: Extent to which the NGO has integrated sustainability as a cross-cutting design element in the proposed project activities and a plan for engaging municipal and local authorities in compensating CHWs in Benin.
- *Environmental Compliance, Gender and Inclusive Development*: a) Demonstrated understanding of how project activities will be completed in accordance with the environmental compliance requirements of USAID/Benin; b) extent to which gender (both women and men) and c) people with disabilities (physical and/or mental) are incorporated into all project aspects and the technical approach, and extent to which gender-based inequities in decision-making, access to resources, and empowerment through the life of the project are addressed.

B. MANAGEMENT AND STAFFING (30 points)

The Management Plan and Staffing provides details on how the applicant plans to organize the team and intends to implement the activity. The Management Plan and Staffing will be evaluated on

- The degree to which the application clearly describes how the proposed project will be managed and that demonstrates the ability to efficiently implement the proposed project activities.
- The extent to which the proposed key and non-key personnel reflect the technical breadth and professional qualifications to successfully manage and support the grant funding and achieve the proposed project objectives.
- Extent to which the NGO describes a clear rationale for the proposed management plan and organizational structure including field office(s), project team, and/or consultants.

C. INSTITUTIONAL CAPABILITIES AND PAST PERFORMNACE (20 points)

- The extent to which the Applicant demonstrates the institutional capability to manage the level of funding requested and implements the proposed project activities.
- Demonstrated organizational knowledge and capacity to develop manage and implement integrated community-based primary health care projects in Benin with activities in areas such as FP/RH, MCH, malaria, and/or water and sanitation.
- Demonstrated experience to partner with and support the development of a range of local organizations (Non-Governmental Organizations, Community-based Organizations, Municipalities, etc.) to implement complex and results-oriented primary health care projects.

3. COST EVALUATION

Evaluation points will not be awarded for cost. Cost will primarily be evaluated for realism, allowability, allocability, and the applicant's understanding of the requirements. The evaluation will consist of a review of the cost portion of the application to determine if the overall costs proposed are realistic for the work to be performed, if the costs reflect understanding of the requirements, and if the costs are consistent with the technical application.

4. REVIEW AND EVALUATION PROCESS

Application(s) which are deemed to offer the best overall value and meet USAID objectives will be selected for award. The Technical Evaluation Committee (TEC) will evaluate the technical/programmatic merit of each application as measured against the evaluation factors mentioned above. At the time of RFA issuance, all panel members are anticipated to be USAID employees. The panel may make an award recommendation based on the extent of its evaluation scope. In addition, one or more panel members may be asked to provide input to the cost effectiveness review, any substantial implementation involvement desired by USAID, and on any special provisions that may be included in the award.

Once an apparent successful applicant is identified, additional information and discussion may occur between the applicant and USAID Agreement Officer, before the Agreement Officer makes the final funding decision. The Apparently Successful applicant means the applicant recommended for an award of a component after evaluation, but who has not yet been awarded a grant, cooperative agreement or other assistance award by the Agreement Officer. Apparently successful applicant status confers no right and constitutes no USAID commitment to an award.

The recommendation or selection of an application for award does not in any way guarantee an award. The USAID Agreement Officer must be fully satisfied that the applicant has the capacity to adequately perform in accordance with standards established by USAID and the Office of Management and Budget (OMB). This issue of organizational capability is generally referred to as a pre-award "responsibility determination." The Agreement Officer must also complete any other necessary pre-award arrangements.

Details on USAID pre-award responsibility determination policy and procedure can be found on our agency website, in its automated directive system (ADS) chapter 303, section 303.3.9:

<http://www.usaid.gov/policy/ads/300/303.pdf>. The guidance on the pre-award survey guidelines and supports can be found in the following link: <http://transition.usaid.gov/policy/ads/300/303sam.pdf>

USAID/Benin intends to make this award without any discussion. To the extent that they are necessary, negotiations will be conducted with the applicant(s) whose application(s), has or have a reasonable chance of being selected for award. The final award decision will be made by the Agreement Officer, with consideration of the Technical Evaluation Committee recommendations.

Other areas of review and discussion will vary according to the circumstances pertaining to the application. The following areas commonly require discussion and agreement prior to award:

- A. Branding Strategy and Marking Plan. In accordance with ADS 303.3.6.3.f and 22 CFR 226.91, the apparently successful applicant must submit a Branding Strategy and a Marking Plan for evaluation and approval by the Agreement Officer before an award under this solicitation will be made. “Marking Plan” and “Marking of USAID-funded Assistance Awards” are contained in **AAPD 05-11** and in **22 CFR 226.91**. Please note that in contrast to “exceptions” to marking requirements, waivers based on circumstances in the host country must be approved by Mission Directors or other USAID Principal Officers, see **22 CFR 226.91(j)**. USAID approved Branding Strategy and Marking Plan is required for award execution. Additional guidance can be found at the following hyperlinks: [USAID Branding](http://www.usaid.gov/branding/) (<http://www.usaid.gov/branding/>).
- B. Final program and budget plans.
- C. Payment terms.
- D. Procedures concerning administrative reporting and logistical requirements for program including training components.
- E. Other award terms including audit, special provisions and/or special award conditions.

[End of Section V]

SECTION VI – AWARD AND ADMINISTRATION INFORMATION

1. NOTIFICATION TO APPLICANTS

The Notice of Award (ADS 303.3.7.1.a) signed by the Agreement Officer is the authorizing document that will be provided to the successful applicant to inform the applicant of its selection to be further considered to negotiate a cooperative agreement. USAID will provide this Notice electronically to the person designated to receive this information in the application.

Notification will also be made electronically to unsuccessful applicants pursuant to ADS 303.3.7.1.b.

2. AWARD NOTIFICATION

Notice of Award signed by the Agreement Officer is the authorizing document, which shall be transmitted to the recipient for countersignature to the authorized agent of the successful organization electronically.

Request for debriefings: USAID will follow the procedures included in ADS 303.3.7.2 to receive and accept requests for debriefings from unsuccessful applicants.

3. STANDARD PROVISIONS AND DEVIATIONS

No deviations are anticipated to the standard provisions for the cooperative agreement under by this RFA. All applicable standard provisions shall be incorporated into the resultant award. The standard provisions for Non-US Nongovernmental may be accessed at the following location:

- Standard Provisions for Non-U.S., Nongovernmental recipients can be accessed through the following URL: <http://www.usaid.gov/policy/ads/300/303mab.pdf>

The following Standard Provisions which are indicated below in full text should be specially noted by the prospective applicants.

A. 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 prefers to have the “USAID Identity,” comprised of the USAID logo and landmark, with the tagline “from the American people” as found on the USAID Web site at transition.usaid.gov/branding, included as part of the program or project name.
 - (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.
- (3) The intended primary and secondary audiences for this project or program, including direct beneficiaries and any special target segments.
- (4) Planned communication or program materials used to explain or market the program to beneficiaries.
 - (i) Describe the main program message.
 - (ii) Provide plans for training materials, posters, pamphlets, public service announcement, billboards, Web sites, and so forth, as appropriate.
 - (iii) Provide any plans to announce and promote publicly this program or project to host country citizens, such as media releases, press conferences, public events, and so forth.

Applicant must incorporate the USAID Identity and the message, “USAID is from the American People.”

- (iv) Provide any additional ideas to increase awareness that the American people support this project or program.
 - (5) Information on any direct involvement from host-country government or ministry, including any planned acknowledgement of the host-country government.
 - (6) Any other groups whose logo or identity the applicant will use on program materials and related materials. Indicate if they are a donor or why they will be visibly acknowledged, and if they will receive the same prominence as USAID.
- e. The Agreement Officer will consider the Branding Strategy's adequacy in the award criteria. The Branding Strategy 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.
- f. If the applicant receives an assistance award, the Branding Strategy will be included in and made part of the resulting grant or cooperative agreement

(END OF PROVISION)

B. 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 brandmark, with the tagline “from the American people.” The USAID Identity is the official marking for the Agency, and is found on the USAID Web site at <http://transition.usaid.gov/branding>.
- 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, audio-visual productions, public service announcements, Web sites/Internet activities, promotional, informational, media, or communications products funded by USAID;
 - (iii) Commodities, equipment, supplies, and other materials funded by USAID, including commodities or equipment provided under humanitarian assistance or disaster relief programs; and
 - (iv) It is acceptable to cobrand the title with the USAID Identity and the applicant's identity.
 - (v) Events financed by USAID, such as training courses, conferences, seminars, exhibitions, fairs, workshops, press conferences and other public activities. If the USAID Identity cannot be displayed, the recipient is encouraged to otherwise acknowledge USAID and the support of the American people.
- (2) A table on the program deliverables with the following details:
 - (i) The program deliverables that the applicant plans to mark with the USAID Identity;
 - (ii) The type of marking and what materials the applicant will use to mark the program deliverables;
 - (iii) When in the performance period the applicant will mark the program deliverables, and where the applicant will place the marking;
 - (iv) What program deliverables the applicant does not plan to mark with the USAID Identity , and
 - (v) The rationale for not marking program deliverables.
- (3) Any requests for an exemption from USAID marking requirements, and an explanation of why the exemption would apply. The applicant may request an exemption if USAID marking requirements would:
 - (i) Compromise the intrinsic independence or neutrality of a program or materials where independence or neutrality is an inherent aspect of the program and materials. The applicant must identify the USAID Strategic 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 in the award criteria, and will approve and disapprove any exemption requests. The Marking Plan will be reviewed to ensure the above information is adequately included and consistent with the stated objectives of the award, the applicant's cost data submissions, and the performance plan.

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

(END OF PROVISION)

C. PREVENTING TERRORIST FINANCING (JUNE 2012)

- a. The recipient must not engage in transactions with, or provide resources or support to, individuals and organizations associated with terrorism. In addition, the recipient must verify that no support or resources are provided to individuals or entities that appear on the Specially Designated

Nationals and Blocked Persons List maintained by the U.S. Treasury (online at: <http://www.treasury.gov/resource-center/sanctions/SDN-List/Pages/default.aspx>) or the United Nations Security designation list (online at: http://www.un.org/sc/committees/1267/aq_sanctions_list.shtml).

- b. This provision must be included in all subagreements, including contracts and subawards, issued under this award.

D. NON-FEDERAL AUDITS

In accordance with 22 C.F.R. Part 226.26, recipients and subrecipients are subject to the audit requirements contained in the Single Audit Act Amendments of 1996 (31 U.S.C. 7501–7507) and revised OMB Circular A–133, “Audits of States, Local Governments, and Non-Profit Organizations.” Recipients and subrecipients must use an independent, non-Federal auditor or audit organization which meets the general standards specified in generally accepted government auditing standards (GAGAS) to fulfill these requirements.

3. GENERAL INFORMATION ON REPORTING REQUIREMENTS

Reports and related requirements will be included in the Cooperative Agreement issued as a result of this RFA. Requirements for periodic performance reports are contained below and supplemented by 22 CFR 226.51. Copies of all required financial reports will be submitted to the Agreement Officer’s Representative (AOR) and Agreement Officer at USAID/Benin. Applicants are reminded to budget prudent and adequate resources for completing the required reporting. All reports shall be in the English language, unless otherwise specified by the AOR. Electronic submissions are preferred. The recipient will provide the following reports to the USAID Agreement Officer’s Representative (AOR) and the Agreement Officer, as specified below, in accordance with 22 CFR 226.51 and 226.52 and the Substantial Involvement as mentioned in the Section II of this RFA.

A. Financial Reporting

Financial reporting requirements will be in accordance with 22 CFR 226.52.

B. Performance Monitoring and Reporting

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

(i) Annual Work Plan

The recipient must submit a draft Annual Work Plan (AWP), in the format specified by USAID, within ninety (90) calendar days of the effective date of the Cooperative Agreement. The recipient will work with the AOR throughout the AWP development process prior to submittal to ensure the AWP appropriately reflects activity objectives and the program description. The AWP must detail the work to be accomplished during the upcoming year. The scope and format of the AWP will be agreed to between

the recipient and the AOR. AOR will review the work plan and provide comments within fifteen (15) calendar days of receipt; the recipient must incorporate these comments and provide a final annual work plan within seven (7) calendar days of receiving AOR's comments. The AWP will serve as a guide for activity implementation—a demonstration of links between interventions and objectives in accordance with the M&E Plan. The AWP shall outline key activities and the expected results to be accomplished for that year and will be negotiated and shared with host government partners for comments as appropriate. The AWP will also serve as a basis for budget estimates for that year of program implementation. A budget with sufficient detail to allow the AOR to judge the efficiency of the implementation plan should be included. The AWP should delineate an overall budget by line item and a budget per objective and activity. The AWP may be revised on an occasional basis in the course of implementation, as needed, to reflect changes on the ground with the concurrence of the AOR. Subsequent AWP's must be submitted in a similar fashion, and the recipient must submit the work plans for successive years forty five (30) calendar days before the beginning of each successive year.

(ii) Monitoring and Evaluation Plan

Applicants are required to:

- Propose a Monitoring and Evaluation plan that includes a Performance Monitoring Plan
- Identify key indicators, data collection method, type, and source of information to be collected for program management
- Describe how USAID reporting requirements will be met
- Describe how progress towards program objectives will be measured

The progress of the project will be monitored in accordance with the Performance Monitoring Plan. Within 60 days of award, the recipient will submit a PMP for approval to the AOR. In order to ensure standardized monitoring of all USAID PIHI activities, the applicant will be expected to coordinate with other USAID implementing partners in the development of this Plan. This will be facilitated by USAID. The recipient should develop a robust data collection system which includes adequate data quality controls and complies with all USAID data quality requirements. USAID expects that the recipient will be innovative and creative in their efforts, capture, document, and report all the outcomes of USAID assistance and comply with the reporting requirement

(iii) Performance Monitoring Report

- a) **Quarterly Performance Reports:** The recipient must submit a Performance Monitoring Report on progress toward agreed performance targets every three (3) months, based on the approved M&E Plan. Quarterly Performance Reports shall be submitted 30 calendar days after the end of the quarter pursuant to 22 CFR 226.51(b). The scope and format of the quarterly progress reports will be determined in consultation with the AOR. The quarterly report should seek to be brief yet precise description of the activities, with emphasis on issues that have arisen, impacts made, constraints encountered, and suggestions for additional actions that might be taken. One original and two copies of the report shall be submitted to the AOR. Quarterly performance reports may be in French.

- b) **Annual Progress Report:** The annual progress report shall be a review of the previous year's accomplishments relative to the M&E Plan, including challenges and success stories. Problems or issues encountered and how they were resolved shall be presented in the report. The report shall be submitted 30calendar days after the end of fourth quarter, or the end of the USG fiscal year (September 30), pursuant to 22 CFR 226.51(b). It shall be submitted in lieu of the fourth quarterly progress report. The scope and format of the annual progress report will be determined in consultation with the AOR. One original and two copies of the report shall be submitted to the AOR.

The annual report shall include a discussion, supported with quantitative and qualitative evidence, (which evidence shall remain auditable under the terms of the agreement and USAID program implementation procedures), of progress against indicators and/or impacts achieved to date. This shall include clear identification of which impacts achieved were within the manageable interests of the recipient and which were likely catalyzed by recipient-supported initiatives, leading to substantial, sustained achievement of results. This discussion will be instrumental in helping the Mission to complete mandatory reporting to Washington such as the Performance Plan Report (PPR) and the Operational Plan (OP).

c) **Final Report**

The recipient must submit the Final Report within 90 calendar days after the expiration of the award. One original and two copies of the report shall be submitted to the AOR. The final performance report should contain the following information:

- Describe accomplishments in accordance with the specific paragraphs of the project description.
- A comparison of actual activities and results with the plane established for the life of the project (presented in narrative and table format).
- Describe reasons why targets were not achieved or surpassed and why activities were delayed or not carried out, if appropriate.
- Success stories, including examples of synergy and collaboration with partners.
- A summary of progress made in achieving indicator targets during the program (based on valid data collection and analysis and credible baseline).
- Other pertinent information, including recommendations with-in depth- analysis and lessons learned, related to the overall program results.

[End of Section VI]

SECTION VII – AGENCY CONTACTS

The Agreement Officer for this Award is:

The Agreement Officer for this Award is:

Yves B. Kore
Supervisory Agreement Officer
USAID/West Africa

The A&A Specialist for this Award is:

Francine E. Agblo and Cosmas Apedo
USAID/Benin - OAA

The AOR for this Award is:

TBD
USAID/Benin - FHT

[End of Section VII]

SECTION VIII – OTHER INFORMATION

1. FUNDING APPLICANTS

Issuance of this RFA 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 the preparation and submission of an application. Further, USAID reserves the right to reject any or all applications received. All application preparation and submission costs are at the applicant's own expense.

2. AWARD

The Government may award one or more Cooperative Agreement(s) resulting from this RFA to the responsible applicant(s) whose application(s) best meet(s) the requirements of this RFA (see also Section V of this RFA for evaluation criteria). The Government may (a) reject any or all applications, (b) accept other than the lowest cost application, (c) accept more than one application, (d) accept alternate applications, and (e) waive informalities and minor irregularities in applications received.

3. AUTHORITY TO OBLIGATE THE GOVERNMENT

The Agreement Officer is the only individual authorized to commit the U.S. Government to the expenditure of public funds. No costs chargeable to the proposed Cooperative Agreement may be incurred before receipt of either a fully executed Cooperative Agreement or a specific, written authorization from the Agreement Officer.

4. AUTHORIZED GEOGRAPHIC CODE

The authorized geographic code for procurement of goods and services under this award is 937. The applicant is encouraged to specify any plans for the procurement of non-U.S. goods and/or services as part of its application.

[End of Section VIII]

SECTION IX --LIST OF Annexures and Attachments

ATTACHMENTS AND ANNEXES

Attachments

- Attachment 1, Certifications and Assurances
- Attachment 2, Forms SF-424, 424-A, 424-B
- Attachment 3, National PIHI document
- Attachment 4, French Version of RFA 680-14-000003