

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Health Resources and Services Administration**

HIV/AIDS Bureau  
Division of Training and Capacity Development  
Global Health Systems Branch

***Twinning Program Cooperative Agreement***

**Announcement Type:** New and Competing Continuation  
**Announcement Number:** HRSA-14-029

**Catalog of Federal Domestic Assistance (CFDA) No. 93.266**

**FUNDING OPPORTUNITY ANNOUNCEMENT**

Fiscal Year 2014

**Application Due Date: October 15, 2013**

*Ensure your Grants.gov registration and passwords are current immediately!  
Deadline extensions are not granted for lack of registration.  
Registration may take up to one month to complete.*

**Release Date: August 27, 2013**

**Issuance Date: August 27, 2013**

Raymond Goldstine  
Chief Global Health Systems Branch  
Division of Training and Capacity Development  
Email: [rgoldstine@hrsa.gov](mailto:rgoldstine@hrsa.gov)  
Telephone: (301) 443-9530  
Fax: (301) 443-2697

Authority: The Public Health Service Act, Sections 2692 and 307 (42 U.S.C. 300ff-111 and 2421), and under the Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization Act of 2008 (Public Law 110-293).

## EXECUTIVE SUMMARY

The Health Resources and Services Administration, HIV/AIDS Bureau, Division of Training and Capacity Development (Global Health Systems Branch) is accepting applications for fiscal year (FY) 2014 Twinning Program (TP) Cooperative Agreement.

In support to the President’s Emergency Plan for AIDS Relief (PEPFAR) *Blueprint for Creating an AIDS-free Generation* and the Agency Mission, HRSA recognizes the need to strengthen systems and capacities of in-country governments, health care organizations, health care workers (HCW) training institutions, and the civil society. Among various approaches for capacity building, supporting the institutional partnering (i.e., “twinning”) of peer institutions has proven an effective and cost-efficient model of system strengthening that can have country-wide and even regional impact.

The purpose of this cooperative agreement program is to provide facilitation, management and technical support for the continuation and/or formation, of global, HIV-AIDS-related institutional partnership activities.

Funding Opportunity Title:	Cooperative Agreement for a Twinning Program
Funding Opportunity Number:	HRSA-14-029
Due Date for Applications:	October 15, 2013
Anticipated Total Annual Available Funding:	Up to \$16,000,000
Estimated Number and Type of Awards:	One cooperative agreement
Estimated Award Amount:	Up to \$16,000,000 per year
Cost Sharing/Match Required:	No
Length of Project Period:	Five years
Project Start Date:	April 1, 2014
Eligible Applicants:	<p>Eligible organizations are U.S.-based public and non-profit private entities including schools and academic health science centers and including faith-based and community based organizations.</p> <p>[See <a href="#">Section III-1</a> of this funding opportunity announcement (FOA) for complete eligibility information.]</p>

All applicants are responsible for reading and complying with the instructions included in HRSA’s *SF-424 Application Guide*, available online at <http://www.hrsa.gov/grants/apply/applicationguide/sf424guide.pdf>, except where instructed in this funding opportunity announcement to do otherwise. A short video for applicants explaining the new *Application Guides* is available at <http://www.hrsa.gov/grants/apply/applicationguide/>.

## Table of Contents

<b>I. FUNDING OPPORTUNITY DESCRIPTION .....</b>	<b>1</b>
<b>1. PURPOSE.....</b>	<b>1</b>
<b>2. BACKGROUND.....</b>	<b>2</b>
<b>II. AWARD INFORMATION .....</b>	<b>6</b>
<b>1. TYPE OF AWARD.....</b>	<b>6</b>
<b>2. SUMMARY OF FUNDING.....</b>	<b>7</b>
<b>III. ELIGIBILITY INFORMATION.....</b>	<b>8</b>
<b>1. ELIGIBLE APPLICANTS.....</b>	<b>8</b>
<b>2. COST SHARING/MATCHING .....</b>	<b>8</b>
<b>3. OTHER.....</b>	<b>8</b>
<b>IV. APPLICATION AND SUBMISSION INFORMATION.....</b>	<b>8</b>
<b>1. ADDRESS TO REQUEST APPLICATION PACKAGE .....</b>	<b>8</b>
<b>2. CONTENT AND FORM OF APPLICATION SUBMISSION .....</b>	<b>8</b>
<i>i. Project Abstract .....</i>	<i>9</i>
<i>ii. Project Narrative .....</i>	<i>9</i>
<i>iii. Budget and Budget Justification Narrative.....</i>	<i>12</i>
<i>iv. Attachments .....</i>	<i>12</i>
<b>3. SUBMISSION DATES AND TIMES.....</b>	<b>13</b>
<b>4. INTERGOVERNMENTAL REVIEW .....</b>	<b>13</b>
<b>5. FUNDING RESTRICTIONS.....</b>	<b>13</b>
<b>V. APPLICATION REVIEW INFORMATION .....</b>	<b>13</b>
<b>1. REVIEW CRITERIA.....</b>	<b>13</b>
<b>2. REVIEW AND SELECTION PROCESS.....</b>	<b>16</b>
<b>3. ANTICIPATED ANNOUNCEMENT AND AWARD DATES .....</b>	<b>16</b>
<b>VI. AWARD ADMINISTRATION INFORMATION.....</b>	<b>16</b>
<b>1. AWARD NOTICES .....</b>	<b>16</b>
<b>2. ADMINISTRATIVE AND NATIONAL POLICY REQUIREMENTS.....</b>	<b>17</b>
<b>3. REPORTING .....</b>	<b>17</b>
<b>VII. AGENCY CONTACTS .....</b>	<b>17</b>
<b>VIII. OTHER INFORMATION.....</b>	<b>18</b>
<b>IX. TIPS FOR WRITING A STRONG APPLICATION.....</b>	<b>19</b>

# I. Funding Opportunity Description

## 1. Purpose

The purpose of this announcement is to solicit applications for the Twinning Program Cooperative Agreement. The overall goal of the Twinning Program (TP) is to provide facilitation, management and technical support for the formation of HIV-AIDS-related, voluntary, peer-to-peer institutional partnerships for capacity building in collaboration with U.S. government (USG) field offices to support the President's Emergency Plan for AIDS Relief (PEPFAR) and its strategic vision and plan as stated in the PEPFAR *Blueprint for Creating an AIDS-free Generation*.

In supporting the TP model, PEPFAR recognizes the need for diverse evidence-based cost-efficient approaches for systems and capacity building. Activities supported by the TP will need to follow PEPFAR Blueprint principles of:

1. Making strategic and scientifically sound investments to maximize impact and efficiencies,
2. Working with partner countries, civil society, Faith Based Organizations (FBOs), and the private sector,
3. Supporting activities that minimize stigma and discrimination with attention to gender equality,
4. Proactively monitoring and improving outcomes and efficiencies.

First started in 2004, the TP will continue to support partnerships between U.S.-based organizations and host-country organizations (north-south partnerships) and between in-country and regional organizations (south-south partnerships and south-south-north partnerships) to strengthen human and organizational capacity. To date, major objectives of the TP's partnerships have been to strengthen health systems in various PEPFAR countries/regions by:

- Expanding the pool of trained providers, managers, and allied health staff delivering quality HIV/AIDS services,
- Strengthening organization structures and systems,
- Supporting limited infrastructure enhancements,
- Facilitating private sector engagement through volunteerism, and
- Working in support of in-country Government strategic plans and OGAC-supported PEPFAR team priorities.

Going forward, the TP will sharpen its scope of work to directly support Country Ownership of national HIV responses. Examples of types of future partnerships that empower local partners to own and manage HIV-related activities include, but are not limited to, those that:

- Strengthen organizational, management, and advocacy capacities of professional associations;
- Facilitate integration of community-based health worker cadres into national structures and systems;
- Support institutionalization of cadres from other sectors (e.g., social workers) into the national HIV response;
- Building capacity of sub-national governmental and non-governmental organizations to improved local-level HIV planning and management.

The TP should broker, facilitate, and provide management support and technical assistance for the establishment, maintenance, and graduation of twinning partnerships in support of PEPFAR goals. Partner organizations may include, among others, governmental and non-governmental organizations (NGOs), schools and academic health-science centers, professional organizations, and civil society including community-based organizations (CBOs) and FBOs.

All TP-related human resources for health (HRH) activities should be complementary to and/or supportive of ongoing HRH initiatives currently supported by PEPFAR, including: the Medical and Nursing Partnership Initiatives, the Global Health Services Program, the Field Epidemiology (and Laboratory) Training Program, and the Public Health Education Partnership Initiative.

In addition, in support of local ownership, the awardee will need to identify and build the capacity of one or more local organizations so that before the end of this cooperative agreement this/these organization(s) will have the necessary foundations, systems, and expertise to:

1. Apply for USG or other funding,
2. Broker, facilitate, and provide management support and technical assistance for the establishment, maintenance, and graduation of twinning partnerships.

## **2. Background**

This program is authorized under the Public Health Service Act, Sections 2692 and 307 (42 U.S.C. 300ff-111 and 2421), and under the Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization Act of 2008 (Public Law 110-293).

Established in 2003, the President's Emergency Plan for AIDS Relief (PEPFAR-I) called for immediate, comprehensive and evidence-based action to turn the tide of the global HIV/AIDS Pandemic. Following reauthorization in 2008 for Federal fiscal years 2009-2013, the targets for PEPFAR-II were to treat at least four million HIV infected people with effective combination anti-retroviral therapy (ART); care for twelve million HIV infected and affected persons, including five million orphans and vulnerable children; and prevent twelve million infections worldwide. During the second phase of PEPFAR, the emphasis has been on strengthening the health systems and training 140,000 new health care workers. In the forward-looking (November 2012) PEPFAR *Blueprint Creating an AIDS-Free Generation*, a complementary goal is to "...work with partner countries, donor nations, civil society, people living with HIV, faith-based organizations, the private sector, foundations and multilateral institutions to effectively mobilize, coordinate and efficiently utilize resources to expand high-impact strategies, saving more lives sooner."

Institutional partnership (i.e. twinning) has been a key strategy that was outlined at the very start of PEPFAR for human and institutional capacity building. Since 2004, the Health Resources and Services Administration (HRSA) has funded the TP to provide technical assistance to partnering organizations (north-south, south-south, and south-south-north) in implementing specific PEPFAR-related programs. The TP was last awarded a five-year cooperative agreement in March 2009 to continue partnerships and related activities. Currently, the TP supports PEPFAR through partnerships, initiatives, limited infrastructure enhancements, and volunteer placements that assist in building critical institutional and human resource capacity to combat HIV/AIDS.

TP has made significant contributions to sustainable development of institutional, organizational, and human resource capacity, supporting national strategies for addressing HIV/AIDS and

PEPFAR objectives for strengthening health systems, health workforce, and country ownership. The twinning model is particularly well-suited to programs that build sustainable human resource capacity because of strong institutional linkages between partner organizations that are dedicated to similar missions. Working closely with Ministries of Health, USG in-country teams and other key stakeholders, most TP-supported partnerships strengthen pre- and in-service training programs at existing institutions to address healthcare workforce development goals. Partnerships that are successfully in place and are endorsed by country teams should be sustained and supported.

The TP currently manages over 40 active partnerships in 9 African countries (Botswana, Ethiopia, Kenya, Mozambique, Namibia, Nigeria, South Africa, Tanzania, and Zambia) as well as the Caribbean Region, building capacity across HIV/AIDS technical areas using evidence-based approaches, including training in a broad range of healthcare disciplines such as:

- Clinical Pharmacy
- Social Work and Para-Social Work
- Nursing
- Adult and Pediatric Emergency Medicine
- Laboratory
- Biomedical Engineering
- Mass Media
- HIV Prevention
- Mid-level medical providers (“Clinical Associates”)
- Case Management
- Palliative Care

It is expected that an applicant should be able to demonstrate the capacity to manage all partnerships presently involved in this project.

### **Twinning Model and Methodology**

For the purposes of this Notice, “Twinning” is defined as formal, substantive collaboration between two (or more) similar organizations; “formal” means there is a written agreement executed and signed by authorized representatives of the partnering organizations; and “substantive” means the interaction between the twinning partners is significant and lasts for a minimum period of time that is stated in the agreement (usually two-to-three years). The TP will be funded through PEPFAR’s Country Operational Plan (COP) /Regional Operational Plan (ROP) process.

Specific activities that the TP will support or lead in collaboration with in-country/regional PEPFAR teams include:

1. Support of existing twinning partnerships and other Health Systems Strengthening ( HSS) activities such as the set-up of skill labs and e-learning centers;
2. Development of new twinning partnership and other HS activities with increased focus on “south to south” partnership and on Country Ownership;
3. Support the life cycle of these twinning partnerships and other HSS activities including their graduations with a focus on sustainability;
4. Dissemination of lessons-learned;

5. Facilitating the spread of successful innovations; and
6. Proactively measuring the quality, cost/efficiency, outcomes, and impacts of the various twinning partnerships and other HSS activities.
7. Building the capacity of one or more local organizations so that before the end of this cooperative agreement this/these organization(s) will have the necessary foundations, systems, and expertise to:
  - a. Apply for USG or other funding,
  - b. Broker, facilitate, and provide management support and technical assistance for the establishment, maintenance, and graduation of twinning partnerships.

The TP model is designed to promote local institutional capacity, develop human resources for health, and build sustainable, country/regionally-owned professional relationships through faculty and curriculum development, pre-service and in-service training, and the development of professional licensure. One of the greatest strengths of the Twinning model is its emphasis on the careful selection of institutional partners. Each partner must exhibit a high level of dedication and commitment to the collaborative, proactive, and voluntary process that is the hallmark of TP programs. Particularly in the case of U.S. resource partners, this includes a commitment to contribute significant in-kind resources, thereby reinforcing the volunteer nature and cost-efficiency of the Twinning model. Overall, TP facilitates the optimal matching of U.S.-based and/or indigenous resource partner institutions based upon the specific needs of each in-country/region partner.

The peer-to-peer nature of twinning partnerships typically leads to relationships that are sustained well beyond the initial funding period. To directly address the issue of sustainability and country/regional ownership, the TP model requires that partners address and continuously review the issue of sustainability in their partnership work plans. The Twinning model also encourages partners to leverage and contribute resources within their communities and work closely with countries to ensure proper management of these resources

Twinning is unique among other forms of global HIV-related technical assistance in both the scope and level of interaction among partners and other stakeholders at all institutional levels. Particular features of the Twinning model include:

- Collaboration between “south to south” partners (i.e. by supporting and organizing information-sharing exchanges between similar types of partnerships)
- Building local capacity of health workforce and responding to healthcare shortages through the pre-service training of diverse and innovative cadres of health care and other HIV service workers
- Advocacy for and support of professional associations, working with local governments to promote health care worker retention and sustain institutional change
- Support of local organizational development, including business management skills
- Strengthening in-country/regional health systems by empowering financial, human resource-related, and administrative structures of local institutions-- including professional associations and those advocating on behalf of persons living with HIV/AIDS (PLWHA) and key populations at higher risk of HIV infection
- Developing and enhancing mechanisms for improved delivery of HIV health services

The TP methodology is flexible and non-prescriptive. Participating partner institutions can include universities, hospitals, professional associations, community- and faith-based

organizations (FBOs) and ministries of health. Because partnerships are institution-based, they bring the collective knowledge, expertise, and commitment of their constituent members. At the same time, individuals play a key role by forging collaborative, peer-to-peer relationships in which partners work together as equals. Together, they find mutually beneficial solutions and participate in a two-way transfer of knowledge that enhances human and organizational capacities on both sides. Typically, training is accomplished via peer-to-peer mentoring through exchanges and on-site monitoring.

In instances of “north-south” partnerships, a U.S.-based institution with a significant amount of experience in a particular focus area is partnered with an African or Caribbean institution to build capacity. Increasingly, regionally-oriented “south-south” partnerships are becoming more common, whereby African institutions work together as partners. In either case, the TP’s partnership methodology empowers host communities by giving them ownership of the programs they create jointly with their partners, thereby encouraging sustainable capacity development on individual, institutional, systemic, and policy levels. The program further promotes sustainability by strengthening institutional capacity in operational functions-- including financial management, human resources, communications, and M&E.

The Twinning program will continue to rely on the active investment from overseas partners, host governments, and a wide range of local stakeholders in order to ensure that the unique needs of each institution and the communities it serves are met. The TP goal of country/regional ownership ensures that program activities are based on national priorities.

Examples of ongoing Twinning partnership activities include:

- U.S.-African partnerships focusing on curriculum development and competency-based training in HIV-related nursing, social work, pharmacy and laboratory science
- U.S.-African partnerships to strengthen the capacity of three African schools of social work for the training of para-professional social workers to provide case management services to HIV orphans in Tanzania, Ethiopia and Nigeria
- Three U.S.-South African “Clinical Associate” partnerships for the training and licensure of physician assistants to work in rural areas of South Africa where there are shortages of health professionals
- Professional association-building and advocacy in nursing and social work in Tanzania
- A “south-south” partnership, involving a South African-based palliative care association that provides assistance to a Botswana-based organization that is also involved in the provision of palliative care

An OPTIONAL activity is an adjunct volunteer program which provides meaningful short-term in-country/region placements for highly qualified professionals, that has included physicians, nurses, pharmacists, lab technicians, social workers, health educators, as well as monitoring and evaluation (M&E) specialists. These volunteers provide critically-needed clinical, educational, and capacity-building technical assistance and support to host organizations.

## **Evaluation Activities:**

Because Twinning involves multiple partnerships that address critical HIV-related HSS needs that are aimed at resulting in sustainable, country/region-owned solutions, the ongoing evaluation to assess of the effectiveness and impact of TP programs is essential. Routinely-conducted monitoring and evaluation (M&E) processes need to be part of each country/regional work plan, addressing operational questions related to program implementation within existing and developing health systems infrastructures. The awardee will be expected to report on PEPFAR-wide indicators. In addition to process indicators (e.g., numbers of persons trained during a particular period), M&E activities must focus on outcome indicators that demonstrate impact as well as on cost effectiveness measures. Working closely with USG country/regional teams as well as the host government(s), TP will ensure that evaluation activities are carried out via appropriate protocols and that they reflect the priorities of both PEPFAR and those of host country governments. Ultimately, the information and experience gathered as a result of these evaluation activities will be used to improve future program implementation and, ultimately, transition of TP programs to country/regional ownership.

## **Transition to Local Organization(s)**

This cooperative agreement will also support PEPFAR vision of country-ownership. A major role of the awardee will be to identify one or more local organizations that have the potentials to take over all the awardee functions by the end of the cooperative agreement. The awardee will assess that/these local organization(s) capacities and, as needed, strengthen their foundation, systems, and expertize to:

- Apply for USG or other funding,
- Broker, facilitate, and provide management support and technical assistance for the establishment, maintenance, and graduation of twinning partnerships

## **II. Award Information**

### **1. Type of Award**

Funding will be provided in the form of a cooperative agreement. A cooperative agreement, as opposed to a grant, is an award instrument of financial assistance where substantial involvement is anticipated between HRSA and the recipient during the performance of the contemplated project.

In addition to the usual monitoring and technical assistance provided under the cooperative agreement, **HRSA Program responsibilities shall include:**

- a. Participating in the design, development and evaluation of partnership activities;
- b. Participating in the selection and review of evaluation mechanisms;
- c. Reviewing and editing training documents, travel plans and proposed meetings, curricula, publications, and other resources;
- d. Providing assistance in the management and technical performance of ongoing, program-implementation activities;
- e. Ensuring integration into HRSA/HAB programmatic and data reporting efforts; and

- f. Facilitating the coordination and collaboration among program partners, such as USAID, CDC, DoD, and U.S. Government country-based teams.

**The cooperative agreement recipient's responsibilities shall include:**

- a. Providing overall program management and support to ongoing twinning partnerships;
- b. Soliciting, establishing, and supporting new twinning partnerships;
- c. Providing technical assistance (TA) and support in program design, implementation, and monitoring and evaluation;
- d. Building information and communications technology to provide basic infrastructure to host country twinning sites and to help build capacity to improve utilization of healthcare information resources;
- e. Regular monitoring, evaluating and reporting on program outcomes;
- f. Implementing continuous quality improvement (CQI) activities;
- g. Ensuring ongoing, in-country/regional TP presence to ensure long-term sustainability of programs;
- h. Developing, in collaboration with HRSA, a detailed transition plan of the awardee functions to local organization(s); and
- i. Building the capacity of one or more local organization(s) to be able apply/manage US funds and to broker, facilitate, and provide management support and technical assistance for the establishment, maintenance, and graduation of twinning partnerships.

## **2. Summary of Funding**

This program will provide funding during Federal fiscal years 2014-2018. Approximately \$16,000,000 is expected to be available annually to fund one (1) awardee. Applicants may apply for a ceiling amount of up to \$ 16,000,000 per year. The project period is five (5) years.

Funding beyond the first year is dependent on the availability of appropriated funds for the Twinning Program in subsequent fiscal years, awardee satisfactory performance, and a decision that continued funding is in the best interest of the Federal Government.

Only one cooperative agreement will be made available for all country/regional activities. The level of funding is determined by, among other criteria, the country and regional-specific need for scale-up of human capacity and other HSS to meet the targets for HIV-related treatment, prevention, care, and capacity-building and support Country Ownership as determined by the OGAC COP/ROP review and approval process. The expected level of funding will be up to \$16,000,000 through the COP/ROP process.

Throughout the project period, HRSA's commitment to continuation of awards will be conditioned on the availability of funds, evidence of satisfactory progress by the recipient, and the determination that continued funding is in the best interest of the U.S. Government.

### **III. Eligibility Information**

#### **1. Eligible Applicants**

Eligible organizations are U.S.-based public and non-profit private entities including schools and academic health science centers and including faith-based and community based organizations.

Applicants should have significant experience establishing effective twinning partnerships in health programs. Specifically, applicants must have demonstrated experience in establishing, developing and monitoring an official twinning relationship anywhere in the world and providing or facilitating technical assistance and support on issues related to the prevention and treatment of HIV, including capacity building of organizations, training for health systems strengthening, community outreach and social support programs. In addition, successful applicants will have substantial and demonstrated experience with twinning of programs and institutions in the United States with counterparts overseas. Applicants must also demonstrate the ability to collect and analyze data for program monitoring and evaluation.

#### **2. Cost Sharing/Matching**

Cost Sharing/Matching is not required for this program.

#### **3. Other**

Applications that exceed the ceiling amount will be considered non-responsive and will not be considered for funding under this announcement.

Any application that fails to satisfy the deadline requirements referenced in Section IV.3 will be considered non-responsive and will not be considered for funding under this announcement.

NOTE: Multiple applications from an organization are not allowable.

### **IV. Application and Submission Information**

#### **1. Address to Request Application Package**

HRSA *requires* applicants for this funding opportunity announcement to apply electronically through Grants.gov. Applicants must download the SF424 application package associated with this funding opportunity following the directions provided at [Grants.gov](http://Grants.gov).

#### **2. Content and Form of Application Submission**

Section 4 of HRSA's [SF-424 Application Guide](#) provides instructions for the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract. You must submit the information outlined in the Application Guide in addition to the program specific information below. All applicants are responsible for reading and complying with the instructions included in HRSA's [SF-424 Application Guide](#) except where instructed in the funding opportunity announcement to do otherwise.

## **Application Page Limit**

The total size of all uploaded files may not exceed the equivalent of 80 pages when printed by HRSA. The page limit includes the abstract, project and budget narratives, attachments and letters of commitment/support required in the *Application Guide* and this FOA. Standard OMB-approved forms are NOT included in the page limit. **We strongly urge you to print your application to ensure it does not exceed the specified page limit.**

**Applications must be complete, within the specified page limit, and submitted prior to the deadline to be considered under the announcement.**

## **Program-specific Instructions**

In addition to application requirements and instructions in Section 4 of HRSA's [SF-424 Application Guide](#) (including the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract), please include the following:

### ***i. Project Abstract***

See Section 4.1.x of HRSA's [SF-424 Application Guide](#).

### ***ii. Project Narrative***

This section provides a comprehensive framework and description of all aspects of the proposed project. It should be succinct, self-explanatory and well organized so that reviewers can understand the proposed project.

Use the following section headers for the Narrative:

- ***INTRODUCTION*** –Corresponds to Section V's Review Criteria #1 & # 2

This section should briefly describe the purpose and overall objectives of the proposed Twinning Program project as well as a summary of how the project will be implemented, particularly in light of the expertise and resources of the applicant.

- ***NEEDS ASSESSMENT*** –Corresponds to Section V's Review Criterion #1

This section should demonstrate the applicant's knowledge of the typical HRH and other HSS needs of countries where PEPFAR is present. Using real data from illustrative countries, this section of the narrative will outline the needs of one or more target populations within PEPFAR populations. The target populations and their respective unmet health needs must be described and documented in this section. Demographic data should be used and cited whenever possible to support the information provided. Please discuss any relevant barriers in the service area that the project hopes to overcome. In this section, the applicant should include a proposed strategy for ensuring complementarity with the other PEPFAR-supported HRH/HSS initiatives referenced in Section I. This section should help reviewers understand the community and/or organization that will be served by the proposed project and its complementarity with other HRH/HSS activities supported by PEPFAR.

- ***METHODOLOGY*** –Corresponds to Section V's Review Criteria #2 & # 4

Propose methods that will be used to address the stated needs and meet each of the previously described program requirements and expectations in this funding opportunity announcement. Methodology and resources used to strengthen capacity of institutions should be explained. As appropriate, include development of effective tools and strategies

for ongoing staff training, outreach, collaborations, and information-sharing and dissemination. In addition, include a plan to disseminate reports, products, and/or cooperative agreement-related project outputs and outcomes so that project information is provided to key target audiences.

Applicants must also propose a plan for project sustainability both during and after the period of Federal funding ends. Specifically, the application should address sustainability of each TP partnership after the final year of the TP. Though financial solvency may be one component of a sustainability plan, other factors such as organizational and technical goals that include outputs, activities and measurable outcomes may be included. Sustainability should not solely focus on a continuation of funding, but the development and ability of each indigenous institution to function at a higher level, independent of the TP. The applicant must provide (Attachment 4) letters of agreement and/or descriptions of proposed/existing contracts (project specific) that describe working relationships between the applicant organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual agreements should clearly describe the roles of the contractors and any deliverable. These must be dated.

▪ *WORK PLAN–Corresponds to Section V’s Review Criteria #2 and #6*

The work plan should describe activities that are to be used to achieve each of the objectives proposed during the entire project period, using a timeline that includes each activity. The work plan will also include the applicant vision and proposed initial activities for the transition of this program to local organization(s). In addition, applicants must submit a logic model for designing and managing their project. A logic model is a one-page diagram that presents the conceptual framework for a proposed project and explains the links among program elements. While there are many versions of logic models, for the purposes of this announcement, the logic model should summarize the connections between the:

- Goals of the project (e.g., objectives, reasons for proposing the intervention, if applicable);
- Assumptions (e.g., beliefs about how the program will work and is supporting resources. Assumptions should be based on research, best practices, and experience.)
- Inputs (e.g., organizational profile, collaborative partners, key staff, budget, other resources);
- Target population (e.g., the individuals to be served)
- Activities (e.g., approach, listing key intervention, if applicable);
- Outputs (i.e., the direct products or deliverables of program activities); and
- Outcomes (i.e., the results of a program, typically describing a change in people or systems).

▪ *RESOLUTION OF CHALLENGES–Corresponds to Section V’s Review Criteria #2 & #5*

Discuss challenges that are likely to be encountered in designing and implementing the activities described in the work plan, and approaches that will be used to resolve such challenges.

- *EVALUATION AND TECHNICAL SUPPORT CAPACITY – SEE EVALUATION ACTIVITIES (BACKGROUND). Corresponds to Section V’s Review Criteria #3 & #4*  
Applicants must describe the plan for the program performance evaluation that will contribute to continuous quality improvement (CQI). Describe monitoring and evaluation tools to measure outcomes of both human and institutional capacity building. Program performance evaluation should monitor ongoing processes and the progress towards the goals and objectives of the project. Include descriptions of the inputs (e.g., organizational profile, collaborative partners, key staff, budget, and other resources), key processes, and expected outcomes of the funded activities.

Applicants must describe the systems and processes that will support the organization's performance management requirements through effective tracking of performance outcomes, including a description of how the organization will collect and manage data (e.g., assigned skilled staff, data management software) in a way that allows for accurate and timely reporting of performance outcomes. Describe current experience, skills, and knowledge, including individuals on staff, materials published, and previous work of a similar nature. As appropriate, describe the data collection strategy to collect, analyze and track data to measure process and impact/outcomes, with different cultural groups (e.g., race, ethnicity, language) and explain how the data will be used to inform program development and service delivery. Applicants must describe any potential obstacles for implementing the program performance evaluation and how those obstacles will be addressed.

- *ORGANIZATIONAL INFORMATION–Corresponds to Section V’s Review Criteria #2 & #5*

Specifically, applicants are requested to:

- Provide information on the applicant organization’s current mission and structure, scope of current activities, an organizational chart, and a description on how these all contribute to the ability of the organization to conduct the program requirements and meet program expectations.
- If applicable, describe how the unique, HIV/AIDS-related needs of target populations in PEPFAR countries served by the applicant organization are routinely assessed and improved.
- Provide detailed information on the applicant’s relevant programmatic expertise, resources and capabilities to support continuation of ongoing TP partnerships and the establishment of new Twinning initiatives.
- Describe the programmatic, administrative, and fiscal capabilities of the awardee to serve as the manager of the grant. Include descriptions of experience with international training and capacity development. Describe the expertise and qualifications of key staff members, including local language skills.
- Describe the overall program structure, including the awardee, contractors, and other collaborators. (Include an organization chart depicting this structure in Attachment 5.)
- Describe the proposed processes for oversight of contractors for delivery of identified activities, monitoring contractor performance, and the provision of technical assistance to ensure effective delivery.
- Describe the governing structure of the proposed program. Identify the stakeholders who will be involved in decision-making activities of the applicant. (i.e., resource allocation, training priorities, evaluation) and those who will serve in an advisory capacity to the applicant.)

- Provide information on the applicant agency's current mission and structure, scope of current activities, and an organizational chart, and describe how these all contribute to the ability of the organization to conduct the program requirements and meet program expectations.

**iii. Budget and Budget Justification Narrative**

In addition to the instructions in Section 4.1.iv and v. of HRSA's [SF-424 Application Guide](#) the Twinning Program requires the fifth year budget to be attached as *Attachment 6*.

**iv. Attachments**

Please provide the following items in the order specified below to complete the content of the application. Please note that these are supplementary in nature, and are not intended to be a continuation of the project narrative. Unless otherwise noted, attachments count toward the application page limit. **Each attachment must be clearly labeled.**

*Attachment 1: Work Plan and Logic Model*

Attach the Work Plan for the project that includes all information detailed in Section IV. Also, include the required logic model in this attachment.

*Attachment 2: Staffing Plan and Job Descriptions for Key Personnel (see section 4.1. of the HRSA's SF-424 Application Guide)*

Keep each job description to one page in length as much as is possible. Include the role, responsibilities, and qualifications of proposed project staff.

*Attachment 3: Biographical Sketches of Key Personnel*

Include biographical sketches for persons occupying the key positions described in Attachment 2, not to exceed two pages in length. In the event that a biographical sketch is included for an identified individual who is not yet hired, please include a letter of commitment from that person with the biographical sketch.

*Attachment 4: Letters of Agreement and/or Description(s) of Proposed/Existing Contracts (project specific)*

Provide any documents that describe working relationships between the applicant organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual agreements should clearly describe the roles of the contractors and any deliverable. Letters of agreement must be dated.

*Attachment 5: Project Organizational Chart*

Provide a one-page figure that depicts the organizational structure of the project.

*Attachment 6: For Multi-Year Budgets--Fifth Year Budget*

After using columns (1) through (4) of the SF-424A Section B for a five-year project period, the applicant will need to submit the budgets for year 5 as an attachment. They should use the SF-424A Section B.

*Attachments 7 – 13: Other Relevant Documents*

Include here any other documents that are relevant to the application, including letters of support. Letters of support must be dated and specifically indicate a commitment to the

project/program (in-kind services, dollars, staff, space, equipment, etc.) List all other support letters on one page.

### **3. Submission Dates and Times**

#### **Application Due Date**

The due date for applications under this funding opportunity announcement is *October 15, 2013 at 11:59 P.M. Eastern Time*.

### **4. Intergovernmental Review**

The Twinning Program Cooperative Agreement is not a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR 100.

### **5. Funding Restrictions**

Applicants responding to this announcement may request funding for a project period of up to five (5) years, at no more than \$16,000,000 per year. Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project's objectives, and a determination that continued funding would be in the best interest of the Federal Government.

Funds cannot be used for new construction. However, funds can be used for "minor renovation" or "alterations" projects only, which do not involve new construction, under certain specific and limited circumstances and with HRSA prior approval.

## **V. Application Review Information**

### **1. Review Criteria**

Procedures for assessing the technical merit of applications have been instituted to provide for an objective review of applications and to assist the applicant in understanding the standards against which each application will be judged. Critical indicators have been developed for each review criterion to assist the applicant in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation. Review criteria are outlined below with specific detail and scoring points.

Review Criteria are used to review and rank applications. The Twinning Program Project has *six* (6) review criteria:

*Criterion 1: NEED (10 points) – Corresponds to Section IV's iiA & iiB*

This includes:

- The applicant provides a clear description demonstrating an understanding of the need for HIV/AIDS related services in countries supported by the President's emergency Plan for AIDS Relief.
- Extent to which the applicant understands and provides a comprehensive description of the issues associated with meeting the needs for HIV/AIDS related services in resource

poor countries, such as the weak health care systems, the inadequate human resource for health, the impact of stigma, availability of resources to meet these needs, availability and capacity of social/health systems that impact on the ability to meet these needs, etc.

- The strength of the applicant's description and demonstrated understanding of the issues associated with human and organizational capacity development in resource constrained countries, such as brain drain within and away from the country, existence of resources to assist in the development of systems for capacity development (such as care facilities, and individuals or providers that can be trained, including potential twinning partnerships).

*Criterion 2: RESPONSE (20 points) – Corresponds to Section IV's iiA, iiC, iiD, iiE & iiG*

This includes:

- The extent to which the applicant's work plan (Attachment 1) includes goals and specific, measurable and time-framed objectives that relate to the program and its transition that delineate the steps to be taken to implement the proposed project;
- The extent to which the applicant provides a clear and specific description of the activities, outcomes and results anticipated, and program component defined by quantifiable and qualitative indicators of progress, and of achievements of outcomes of results;
- The extent to which the proposed activities and mechanisms for managing twinning of existing partnerships and new partnerships are suitable with the intent of the project and proposed outcomes;
- The extent to which the projected timeline for the work plan is achievable, for the proposed objectives and activities and previously described staff and organizational capacity;
- The extent to which the applicant provides a comprehensive description of their ability to implement and monitor official twinning programs; and
- The extent to which the applicant demonstrates understanding of the collaborative nature of this project and the need to work closely with other U.S. Government agencies and stakeholders in the focus countries to ensure a successful capacity development program.
- The extent to which the logic model (part of Attachment 1) presents the conceptual framework for a proposed project and explains the links among program elements.

*Criterion 3: EVALUATIVE MEASURES (10 points) – Corresponds to Section IV's iiF*

These measures are to include:

- Completeness of evaluation plan designed to assess achievement of program goals and objectives, outcomes and adequacy of continuous quality improvement activities to evaluate and improve the TP's performance;
- Clarity of information system and awardee capacity to collect, manage, and analyze data including outcome and cost-effectiveness data.
- Extent of knowledge of evaluation methods to assess human and organizational capacity development and progress towards country ownership of programs.
- Detailed plan for achieving and measuring sustainability of effective partnerships.

*Criterion 4: IMPACT (20 points) – Corresponds to Section IV's iiC & iiF*

This includes:

- Extent to which proposed twinning activities are fully described as sustainable within country, or that sustain local organizations (government or non-government), beyond Federal funding;
- The extent to which applicant provides a comprehensive plan for collecting measureable outcome data to assess impact of partnerships and programs.
- Extent to which proposed twinning activities demonstrates that they are replicable in resource constrained countries with weakened health systems and in other resource poor settings.
- Extent to which the proposed twinning activities contribute to the achievement of the strategic objectives indicators developed for the President's Emergency Plan for AIDS Relief.

*Criterion 5: RESOURCES/CAPABILITIES (30 points) – Corresponds to Section IV's iiE, iiF & iiG*

***Institutional Capability and Past Performance (20 points)***

- The extent to which the applicant provides a full and clear description of their past experience in achieving relevant goals in similar programs as well as a demonstrated capability and capacity to plan, rapidly implement and support complex programs and a range of activities in several countries simultaneously;
- Substantiated experience in establishing and monitoring a twinning relationship anywhere in the world and providing or facilitating technical assistance and support on issues related to the prevention and treatment of HIV, including community outreach and social support programs;
- Substantiated experience in coordinating the partnering/twinning of programs and institutions in the United States with counterparts overseas or overseas twinning programs;
- The extent to which the applicant fully describes their ability to form alliances with other organizations, including delineating clear organizational structures and descriptions of relationships, communications, roles, responsibilities, and authorities. This includes Attachment 4 (Letters of Agreement and/or Description(s) of Proposed/Existing Contracts-project specific);
- The extent to which the applicant's narrative demonstrates an ability to provide assistance to support personnel and field operations overseas, including managing travel and meeting logistics overseas;
- The extent to which the applicant provides a description of strong organizational and fiscally sound management practices;
- The extent to which the applicant provides evidence of previous experience in providing effective technical assistance in human capacity development (e.g., curriculum design, learning resource development, etc.) programs.

### ***Personnel Capability and Experience (10 points)***

- The extent to which the application provides evidence of relevant academic and professional qualifications and experience of the Project Director, Program Directors at contracted sites, and other key personnel;
- Expertise of program staff in technical and managerial skill to provide guidance and oversight to the partnerships, adequacy of description of roles and responsibilities and delineation of their functions, and adequacy of conflict of interest policies and procedures;
- The extent to which the application provides evidence of a history of practical experience in managing and facilitating viable partnership programs, supporting non-government organizations, and promoting communications and information dissemination;
- Extent to which the applicant has demonstrated the ability to train trainers and transfer knowledge;
- Extent to which applicant has demonstrated an understanding of the cooperative agreement and the collaborative role HRSA will have in this agreement.

### ***Criterion 6: SUPPORT REQUESTED (10 points) – Corresponds to Section IV's ii. D***

- Provides a comprehensive budget that is appropriate to the proposed program plan, and inclusion of a clearly presented budget narrative that justifies each line item in relation to the goals, objectives and activities of the project and explains significant changes anticipated in budget years following the first year. Note: Attachment 6 (For Multi-Year Budgets – Fifth Year Budget) must be attached;
- Applicant fully describes a reasonable allocation of resources to ensure that relevant and appropriate staff and other resources are available to provide technical assistance and logistics support; and
- Identification of qualified consultants and subcontractors, presentation of a standardized format for contract budgets, and clear identification of contract purposes, how costs were derived, payment mechanisms, and deliverables.

## **2. Review and Selection Process**

Please see section 5.3 of the HRSA's [SF-424 Application Guide](#).

## **3. Anticipated Announcement and Award Dates**

It is anticipated that awards will be announced prior to the start date of April 1, 2014.

# **VI. Award Administration Information**

## **1. Award Notices**

The Notice of Award will be sent prior to the start date of April 1, 2014. See section 5.4 of HRSA's [SF-424 Application Guide](#) for additional information.

## 2. Administrative and National Policy Requirements

See section 2 of HRSA's [SF-424 Application Guide](#).

## 3. Reporting

The successful applicant under this funding opportunity announcement must comply with Section 6 of HRSA's [SF-424 Application Guide](#) and the following reporting and review activities:

- 1) **Progress Report(s)**. The awardee must submit a progress report to HRSA on an **annual** basis. Further information will be provided in the award notice.

## VII. Agency Contacts

Applicants may obtain additional information regarding business, administrative, or fiscal issues related to this funding opportunity announcement by contacting:

Olusola Dada, Grants Management Specialist  
HRSA Division of Grants Management Operations, OFAM  
Parklawn Building, Room 11A-19  
5600 Fishers Lane  
Rockville, MD 20857  
Telephone: (301) 443-0195  
Fax: (301) 443-9810  
Email: [ODada@hrsa.gov](mailto:ODada@hrsa.gov)

Additional information related to the overall program issues and/or technical assistance regarding this funding announcement may be obtained by contacting:

Raymond Goldstine  
Chief, Global Health Systems Branch  
Division of Training and Capacity Development  
HIV/AIDS Bureau, HRSA  
Parklawn Building, Room 7-69  
5600 Fishers Lane  
Rockville, MD 20857  
Telephone: (301) 443-9530  
Fax: (301) 443-3650-  
Email: [rgoldstine@hrsa.gov](mailto:rgoldstine@hrsa.gov)

Applicants may need assistance when working online to submit their application forms electronically. Applicants should always obtain a case number when calling for support. For assistance with submitting the application in Grants.gov, contact Grants.gov 24 hours a day, seven days a week, excluding Federal holidays at:

Grants.gov Contact Center  
Telephone: 1-800-518-4726 (International Callers, please dial 606-545-5035)  
E-mail: [support@grants.gov](mailto:support@grants.gov)  
iPortal: <http://grants.gov/iportal>

Successful applicants/awardees may need assistance when working online to submit information and reports electronically through HRSA's Electronic Handbooks (EHBs). For assistance with submitting information in HRSA's EHBs, contact the HRSA Call Center, Monday-Friday, 9:00 a.m. to 5:30 p.m. ET:

HRSA Contact Center  
Telephone: (877) 464-4772  
TTY: (877) 897-9910  
E-mail: [CallCenter@HRSA.GOV](mailto:CallCenter@HRSA.GOV)

## VIII. Other Information

HIV/AIDS Bureau/Division of Training and Capacity Development/Global Programs Branch (HAB/DTCDD/Global) is sponsoring a 90 minute pre-application webinar/conference call on September 17, 2013 at 2:30 PM Eastern Time to assist potential applicants in preparing applications that address the requirements of this funding announcement. Participation in a pre-application conference call is optional. Call-in information is as follows:

Domestic:  
1-800-810-9643  
Participant passcode:159101

International:  
210 234-1570  
Participant passcode: 159101  
For more information on the conference call and to register for the webinar/call please go to:  
<http://careacttarget.org/events>

### Logic Models:

Additional information on developing logic models can be found at the following website:  
[http://www.cdc.gov/nccdphp/dnpao/hwi/programdesign/logic\\_model.htm](http://www.cdc.gov/nccdphp/dnpao/hwi/programdesign/logic_model.htm).

Below are resources on logic models:

- Kellogg Foundation  
<http://www.wkcf.org/knowledge-center/resources/2006/02/WK-Kellogg-Foundation-Logic-Model-Development-Guide.aspx>
- University of Wisconsin Cooperative Extension  
<http://www.uwex.edu/ces/pdande/evaluation/evallogicmodel.html>
- CDC Program Evaluation Resources  
<http://www.cdc.gov/healthyyouth/evaluation/pdf/brief2.pdf>

- Innovation Network

[http://www.innonet.org/client\\_docs/File/logic\\_model\\_workbook.pdf](http://www.innonet.org/client_docs/File/logic_model_workbook.pdf)

Although there are similarities, a logic model is not a work plan. A work plan is an ‘action’ guide with a timeline used during program implementation; the work plan provides the “how to” steps. Information on how to distinguish between a logic model and work plan can be found at the following website: <http://www.cdc.gov/healthyyouth/evaluation/pdf/brief5.pdf>

## **IX. Tips for Writing a Strong Application**

See section 4.7 of HRSA’s [\*SF-424 Application Guide\*](#)