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Deadline for Submission of Questions: July 9, 2012

Application Closing Date: August 8, 2012

Application Closing Time: 3:00 pm Manila local time

Subject: Request for Applications (RFA No. RFA-492-12-000030): Health Policy Development Project 2

Dear Prospective Applicant:

The United States Agency for International Development Mission in the Philippines (USAID/Philippines) is seeking applications from eligible local Philippine organizations for a cooperative agreement in support of a five-year program entitled, "Health Policy Development Project (HPDP) 2", as fully described in this Request for Applications (RFA).

The purpose of HPDP2 is to strengthen a supportive policy and financing environment for family planning (FP), maternal, neonatal, child health, and nutrition (MNCHN), and tuberculosis (TB) to enable the Philippine Government achieve its Millennium Development Goals in health as well as expand and sustain its universal health care initiative. The project will provide resources to undertake the following: (a) health policy research, advocacy and health policy formulation; (b) policy monitoring and evaluation in health; (c) capacity building to implement and expedite more vigorously health sector reforms; and (d) institutionalizing a multi-sectoral health policy institution.

This funding opportunity is posted in Grants.gov, the U.S. government-wide portal for grant and cooperative agreement opportunities. This RFA complete with the application package can be downloaded by interested applicants from www.grants.gov. It consists of this cover letter and the following:

- Section I – Funding Opportunity Description
- Section II – Award Information
- Section III – Eligibility Information
- Section IV – Application and Submission Information
- Section V – Application Review Information
- Section VI – Award and Administration Information
- Section VII – Agency Contacts
- Section VIII – Annexes

It is the Applicant's responsibility to ensure that it has downloaded the RFA in its entirety including any future amendments. USAID bears no responsibility for data errors resulting from transmission or conversion processes.

Subject to the availability of funds, USAID intends to award a cooperative agreement to the successful applicant with an estimated amount of US\$15,000,000 in total USAID funding to be allocated over the life of the program. USAID reserves the right to fund any or none of the applications received.

An applicant being considered for award who (1) has never had a USAID grant, cooperative agreement, or contract; or (2) has not received an award from any other U.S. agency within the last five years, will be subject to a pre-award survey to determine whether it has the necessary organization, experience, accounting and operational controls, and technical skills in order to achieve the objectives of the program.

All applications in English language must be received by the Regional Office of Acquisition and Assistance, USAID/Philippines, 8th Floor, PNB Financial Center, Pres. Diosdado Macapagal Boulevard, Pasay City no later than the closing date and time indicated at the top of this cover letter and in accordance to the instructions contained in this RFA.

Applicants must submit one original and three copies of the technical application, and one original and one copy of the cost application. Technical and cost applications must be separately identified, with the name and address of the applicant, and the title and number of the RFA inscribed thereon. Late or incomplete applications will not be considered in the review process.

In addition to hard copies, the applications must be submitted in electronic form via email to manilahpdp2@usaid.gov. Receipt of applications via email will be confirmed. Applications received only in electronic form will not be considered.

Any questions on the information contained in this RFA must be sent addressed to Grace M. Laspiñas, Acquisition and Assistance Specialist at manilahpdp2@usaid.gov with subject line: "Questions on HPDP2 RFA submitted by [Name of Organization]" by the specified due date above. If it is determined that the answers to any questions are of sufficient importance to warrant notification to all applicants, a Questions and Answers document, and/or if needed, an amendment to the RFA will be posted at www.grants.gov.

A pre-application conference will be held on July 12, 2012, 2:00 pm at the Main Conference Room, USAID/Philippines, 8th Floor, PNB Financial Center, Pres. Diosdado Macapagal Boulevard, Pasay City.

The issuance of this RFA does not constitute an award commitment on the part of USAID, nor does it commit USAID to pay for costs incurred in the preparation and submission of an application. In addition, final award of any resultant agreement cannot 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. Applications are submitted at the risk of the applicant. Should circumstances prevent award of a cooperative agreement, all preparation and submission costs are at the applicant's expense.

Thank you for your consideration of this USAID initiative. We look forward to your organization's participation.

Sincerely,

/s/

Sallie H. McElrath
Agreement Officer

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LIST OF ACRONYMS

ADS	Automated Directives System
AO	Agreement Officer
AOR	Agreement Officer's Representative
ADB	Asian Development Bank
AHA	Aquino Health Agenda
AMTSL	Active Management of Third Stage of Labor
ANC	Ante-natal Care
ARMM	Autonomous Region in Muslim Mindanao
AusAID	Australian Agency for International Development
BEM	Budget Expenditure Management
BIHC	Bureau for International Health Cooperation
CCT	Conditional Cash Transfer
CEMP	Capacity Enhancement for Midwives Project
CHANGE	Communication for Health Advancement through Networking and Governance Enhancement
CHD	Center for Health Development
CHO	City Health Officer
CHT	Community Health Team
CIPH	City Investment Plan for Health
CPR	Contraceptive Prevalence Rate
CSR	Contraceptive Self-Reliance
DOH	Department of Health
DOTS	Directly Observed Treatment Shortcourse
DSWD	Department of Social Welfare and Development
EBF	Exclusive Breast Feeding
EINC	Essential Intra-Partum Newborn Care
ETS	Expenditure Tracking System
EU	European Union
FP	Family Planning
GiZ	Deutsche Gesellschaft für Internationale Zusammenarbeit
GPH	Government of the Philippines
HCF	Health Care Financing
HEPO	Health Education and Promotion Officers
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
HPDP2	Health Policy Development Project – 2
HRH	Human Resources for Health
IHPP	International Health Policy Program
IRA	Internal Revenue Allotment
IT	Information Technology
IUD	Intrauterine Device
IYCF	Infant and Young Child Feeding
JICA	Japan International Cooperation Agency
KP	Kalusugang Pangkalahatan
LGU	Local government unit
MCP	Maternity Care Package

MDG	Millennium Development Goals
MDR-TB	Multi-Drug Resistant Tuberculosis
MHO	Municipal Health Officer
MIPH	Municipal Investment Plan for Health
MNCHN Scale Up	Maternal, Neonatal, Child Health and Nutrition Sustainable, Community Action and Leadership Enhancement for the Universal Health Care Program
MNCHN	Maternal, Neonatal, Child Health and Nutrition
MOP	Manual of Operations
NEDA	National Economic Development Authority
NGA	Non-government associations
NHIP	National Health Insurance Program
NHTS-PR	National Household Targeting System for Poverty Reduction
NSCB	National Statistical Coordination Board
OMB	Office of Management and Budget
OPB	Out-patient Benefit
ORS	Oral Rehydration Salts
OSec	Office of the Secretary
PCHRD	Philippine Council for Health Research and Development
PHIC/PhilHealth	Philippine Health Insurance Corporation
PHO	Provincial Health Officer
PIDS	Philippine Institute for Development Studies
PIPH	Provincial Investment Plan for Health
PMP	Performance Monitoring Plan
PopCom	Population Commission
PPP	Public Private Partnership
PRB	Population Reference Bureau
PRISM2	Private Sector Mobilization for Family Health 2
PWD	Persons with Disability
SDAH	Sector-wide Development Approach for Health
SDN	Service Delivery Network
STTA	Short Term Technical Assistance
TA	Technical Assistance
TB	Tuberculosis
UHC	University Health Care
UNFPA	United Nations Fund for Population Activities
UP-NIH	University of the Philippines – National Institute for Health
USAID	United States Agency for International Development
US-NIH	United States – National Institute for Health
WRA	Women of Reproductive Age

SECTION I – FUNDING OPPORTUNITY DESCRIPTION

1. PROGRAM DESCRIPTION FOR HEALTH POLICY DEVELOPMENT PROJECT (HPDP) 2

I. Introduction

Background

The United States Agency for International Development, Philippines (USAID/Philippines) welcomes applications from interested Philippine local nonprofit, nongovernmental organizations to assist the Department of Health (DOH), its regional Centers for Health Development (CHDs), other National Government Agencies (NGAs), and local government units (LGUs) to strengthen and institutionalize a health policy formulation, monitoring, and evaluation process that will improve health sector performance particularly in family planning (FP), maternal, neonatal, and child health and nutrition (FP/MNCHN), and tuberculosis (TB) and other infectious diseases including HIV/AIDS, as well as cross-cutting concerns in health care financing (HCF) and human resources for health (HRH). Through the Agreement, the Recipient will provide the technical assistance (TA), training, research, systematically documented demonstration activities, commodities, limited fellowships, and other local cost inputs needed to achieve program objectives.

Good policies are basic enablers of quality services and access to those services. Over the last five years, USAID/Philippines has supported DOH, NGAs, CHDs, and LGUs establish a supportive policy and financing environment for priority health programs, including FP, MNCHN, TB, and HIV/AIDS, and other infectious diseases through the formulation and/or strengthening of policies and plans that increase and sustain access to quality health information, products, and services. In all these, USAID/Philippines assisted DOH and related agencies in strengthening and institutionalizing a health policy formulation process that led to improved health sector performance towards achieving the Millennium Development Goals (MDGs) for health. Among the major policies developed and strengthened in the last five years are:

- Guidelines on the development of province-wide investment plans for health (PIPH);
- Initiating the budget expenditure management (BEM) for the FP/MNCHN DOH grants to CHDs, ARMM, and LGUs;
- Institutionalizing the expenditure tracking system (ETS) in the DOH;
- Conduct of the study on the Benefit Delivery Rate to analyze the institutional performance of the National Health Insurance Program (NHIP) being implemented by the Philippine Health Insurance Corp. (PHIC or PhilHealth);
- Providing the intellectual underpinnings of the Aquino Health Agenda, also known as the *Kalusugan Pangkalahatan* (KP) or universal health care (UHC);
- Facilitating the completion of the integrated approach to improve maternal, newborn and child health and nutrition as concretized in the MNCHN Strategy and Manual of Operations (MOP);
- Formulation of the policy on zinc supplementation and reformulated ORS in the management of diarrhea among children;
- Revised policy on micronutrient supplementation to reduce under-five and maternal deaths; and
- Plan for action for the control of tuberculosis.

These policies have set the stage for improving the environment for achieving improved outcomes for family planning, maternal and child health and tuberculosis. Building on this conducive environment, HPDP2 will focus on facilitating the operational elements of implementing the existing policies and in formulating new policies that may arise.

The project will be implemented by a local organization knowledgeable about the health policy formulation process, the key players of this process (including the Executive and Legislative arms of government), and other stakeholders involved in policy formulation and research.

The Recipient should be a credible institution, deemed by many to be objective and able to carry out the complex process of research, consultation, policy formulation, dissemination, and policy monitoring and evaluation. It should also be an institution with a long-standing interest in the sector, able to carry out a significant amount of work on a sustainable basis, to train and apprentice young individuals who will increasingly take on the task of policy work in the future, and to attract funding from multiple sources not only from USAID/Philippines.

USAID Health Strategy

USAID/Philippines's new health strategy is "Family Health Improved." This goal will be accomplished through three objectives:

1. Supply of services improved, including the availability and quality of public sector services and selective expansion of the private sector as primary care supplier;
2. Demand for primary care services strengthened through encouraging adoption of appropriate health behaviors within families; and
3. Policy and systems barriers removed to improve supply and demand for services.

HPDP2 will contribute directly to the third objective on the removal of policy and systems barriers. It will also contribute indirectly to the other two objectives, as policy research findings from its portfolio can lead to the easing of constraints and bottlenecks in the utilization and provision of health services.

Relationship to Philippine Government (GPH) Health Priorities

DOH's medium-term strategy is contained in its Kalusugan Pangkalahatan (KP) Program as laid out in AO No. 2010-0036, *The Aquino Health Agenda: Achieving Universal Health Care for all Filipinos*, the goal of which is to implement universal health care among Filipinos. The three strategic thrusts of this program are: (a) increased risk protection especially among poor households in quintiles 1 and 2 through premium subsidy in the PhilHealth social health insurance program, greater availment of benefits, and increased support value; (b) provision of greater investments in the hospital system by rationalizing the Service Delivery Networks (SDN) and public/private partnerships (PPP); and (c) strengthening the public health system for the achievement of the health MDGs.

II. Problems to be Addressed

A. Context of Health Service Provision, Financing, and Management

The following summarizes the key features of the Philippine health situation:

1. The Philippines is lagging behind in terms of reaching its commitment to health related millennium development goals. While the Philippines is on target for most of the MDGs, it lags behind in terms of reaching maternal mortality ratio (MMR). The decline in neonatal mortality has also been very slow. The MMR and infant mortality rate (IMR) were still at 95 to 163 per 100,000 live births in 2010, and 25 per 1,000 live births in 2008 (NDHS 2008) as against the MDG targets of 52 and 19, respectively. While the MDG target for TB case detection rate has been met, the disease burden remains high (the country ranked 9th worldwide in terms of composite TB burden in 2003) and the specter of multiple drug resistant (MDR) TB has increased.
2. Renewed emphasis on poverty reduction – Nationwide, 5.2 million households have been identified under the National Household Targeting System for Poverty Reduction (NHTS-PR) as poor (quintile 1) and are eligible for the conditional cash transfer (CCT) program. In addition, 5.6 million households have also been classified as near-poor (quintile 2). Poverty reduction is the centerpiece of the Aquino Administration's social program.
3. Devolution of health services – The Local Government Code of 1991 devolved public health services and hospitals to 80 provinces and some 1,600 municipalities and cities which receive a direct unconditional Internal Revenue Allotment (IRA) from the National Government. Local Government Units (LGUs) decide independently how much of their IRA goes to health services. While this has resulted in some variance in health services and health status, the National Government has taken measures to address this by providing health financing through central grants on FP and MNCHN to LGUs. However, a major constraint has been LGUs' lack of capacity to request, plan, utilize, and monitor performance on these resources.
4. Social health insurance reform – The National Health Insurance Program (NHIP) implemented by the Philippine Health Insurance Corporation (PHIC or PhilHealth) is the mandatory social health insurance program. NHIP coverage nationwide is 53 percent. Among the MDG-related benefits of the NHIP are the maternity care package (MCP), family planning (bilateral tubal ligation, vasectomy and IUD insertion), TB DOTS package and outpatient benefit package (OPB). Reforms in NHIP in recent years have focused on providing premium subsidy for poor households. Under the current Aquino Administration, this has been expanded to the poorest two quintiles of the population in a nationwide universal health care program called KP. Aside from enlisting poor households, the major problem in this program is the slow and non-universal accreditation of rural health units and other public health facilities, which effectively denies some poor households' access to care even though they hold PhilHealth membership cards.
5. Rapid population growth and high poverty – The Philippines' projected population in 2010 stood at 92 million, growing at an annual rate of 1.9 (NSCB www.nscb.gov.ph) percent. Poverty incidence is high at around 26.5 percent of the total population (NSCB, 2009). Data show that poorer families have higher unmet need for family planning, and this has been due to low use of modern contraceptive methods. While modern contraceptive prevalence rate (CPR) increased marginally from 36 percent in 2006 to around 37 percent in 2011, this is very low relative to the

East Asian Region countries which have CPRs in the range of 50-70 percent (PRB 2011). Some 23 percent of Filipino women of reproductive age (WRA) still have unmet need for FP (NDHS 2008).

6. Public/private provision of services – The Philippines has a mixed health care system consisting of public and private providers, at all levels of care. The private health system includes for-profit and non-profit providers, most of whom are located in urban areas and in places where households have the ability to pay. The private sector accounts for about 50 percent of health facilities but less than 50 percent of hospital beds. About 50 percent of households seek care in these private facilities (hospitals, clinics). Private doctors also practice, as do private midwives, some under franchising arrangements, others on an individual basis. Traditional birth attendants (TBAs or *hilots*) continue to practice especially in rural areas and informal settlements in urban areas. This remains a big challenge even as health workers are dissuading households from patronizing them and are urging pregnant mothers to go to health facilities.
7. FP and MNCHN policy frameworks – In recent years, DOH has formulated policy instruments favorable to FP and MNCHN. These include the MNCHN Strategy and Manual of Operations, the Micronutrient Supplementation Manual of Operations, multi-sectoral child health strategy and the KP strategic thrusts.
8. Sectorwide Development Approach to Health (SDAH) – Donors, including USAID, UNFPA, World Bank, ADB, JICA, AusAID, GiZ, and EU are organized under the SDAH approach; although there is no formal jointly-funded “basket financing” (Sector Wide Approach or SWAp), the procedures for planning, monitoring, and reporting on donor health projects are well established under the Bureau for International Health Cooperation (BIHC) of DOH, which convenes meetings with donors on a regular basis. The health sector has been praised by no less than the National Economic and Development Authority (NEDA) as being the best organized sector in terms of donor coordination.
9. Centers for Health Development (CHDs) – The CHDs are DOH’s regional arm, which provide technical supervision to LGUs’ health programs. A typical region is responsible for a population of 3-6 million people. The CHDs have technical resources (average staff of CHD is around 300) which have not been fully utilized. They have health education and promotion officers (HEPOs) and DOH Reps (representatives) who are liaison officers to the LGUs. However, the staff needs to be better equipped to dispense their functions and provide technical assistance to the LGUs.
10. Local elections and health administration – Local officials hold office for only three years, a term which is extremely short for health service planning and development. (The next elections are in 2013). These officials may be elected for two more 3-year terms, or could be replaced by a new set of officials. Given that local chief executives and local health boards are in control of all budgetary decisions at the local level, this built-in uncertainty in local leadership has crucial impact (ill or well) on local health service delivery, For health advocates, it means continual advocacy and technical assistance for health planning and budgeting, which need to be institutionalized at the regional and local levels.
11. The Autonomous Region in Muslim Mindanao (ARMM) – ARMM was created in 1990 as an autonomous region with the objective of providing its residents greater latitude in self-government within the sovereignty of the Philippines. ARMM covers five provinces: Lanao del Sur, Maguindanao, Sulu, Tawi-Tawi and Basilan. ARMM’s population is primarily Muslim. Also

within ARMM – and indeed, within Mindanao as a whole – are a number of indigenous people still living in traditional villages, often in geographically isolated and disadvantaged areas (GIDA). As an autonomous region, ARMM has its own Department of Health, and does not have a CHD. However, given the limitations of its health service delivery system, ARMM residents often seek care outside the region and in neighboring cities such as adjacent Cotabato, Davao in the east, Iligan and Cagayan de Oro in the north, Zamboanga in the west, and Gen. Santos in the south. This inter-jurisdictional flow of patients is a major challenge in health planning and budgeting.

B. Policy and Systems Barriers in FP, MNCHN, and TB

1. Policy and systems challenges in expanding FP services – In the last ten years, a number of national policies affecting the provision of FP services were formulated (e.g., AO No. 158 on Commodity Self Reliance, and AO No. 2008-0029 on *Implementing Health Reforms for the Rapid Reduction of Maternal and Neonatal Mortality* with corresponding MOP. Furthermore, the financing, information management, and logistics management system have also been strengthened. However, local compliance to these policies has been uneven, necessitating greater advocacy, technical assistance, and monitoring.
 - Varying levels of operationalization of FP national policies and guides – These national policies need to be contextualized to the LGU level. LGUs need further assistance in fully implementing FP commodity security measures that encompass data/information management, demand forecasting, logistics management, and using these data to apply for the central-DOH MNCHN grants and other financing measures.
 - Unsustained and weak local health systems support – Local policies and practices on services to the poor need strengthening. While the NHTS-PR has identified poor households, the list per LGU needs to be validated and the number matched with the actual households to prevent leakage of benefits to the non-poor.
 - Inadequate number of trained health workers due to high turnover and/or uneven deployment – Turnover of local health workers remains high. Many far flung and remote areas are without any trained health personnel. There is a need to increase trained providers and assist LGUs in strategically deploying them to expand services. New national and local policies need to be developed in the human resource area taking into consideration the root causes of the high turnover and uneven deployment.
2. Policy and systems challenges in expanding MNCHN services:
 - Varying levels of local adoption of MNCHN policies and guides – Local implementation of national MNCHN policies and guides have been highly uneven: Good practices in some localities have not been promoted in other areas. For example, local policies will have to adopt a unified strategic framework for MNCHN that maximizes the efficient and effective delivery of lifesaving services for mothers and children.
 - Weak integration and customization of MNCHN services – Maternal and child health services are not integrated tightly with reproductive and women’s health services, so many clients do not obtain holistic services. Services are often not customized to the needs of the locality. Personnel are inadequately trained to deliver the service packages.

Communication tools that empower women to demand the full range of services are often lacking or inappropriate.

3. Policy and systems challenges in addressing the large residual burden of TB and the rising threat of MDRTB – While the DOH has issued several national policies and guidelines in support of the NTP, there is lack of information on the extent to which these have been complied with by the LGUs and other government agencies. Monitoring compliance has been infrequent, and implementation has been selective. Moreover, the 2010-2016 NTP Medium Term Development Plan (PhilPACT), has identified the following remaining policy, regulatory and other health system challenges.
 - Inadequate and erratic TB financing, especially among LGUs – While the NTP budget for anti-TB drugs seems to be proportionate to the projected cases, the 2007 National TB Prevalence Survey (NTPS) showed that 47 percent of patients self-medicate and, therefore, a sudden change in behavior to seek consultation among these patients may lead to insufficient budget to cover the entire TB drug requirement. In addition, while LGUs allocate funds for TB control in their Province-wide Investment Plan for Health (PIPHs), it is likely that it turns into an unrealized expenditure as the budget is used to fund other competing priorities of the LGUs outside of health. Patients also incur substantial out-of-pocket expenses in availing themselves of TB services, such as transportation, meal cost, payment for x-ray services and other diagnostic tests, and purchase of other non-TB drugs.
 - Limited number of facilities accredited by PhilHealth for TB DOTS treatment – PhilHealth data indicates that only around 800 DOTS facilities have been accredited nationwide as of June 2011, representing only a third of the total number of RHUs in the country that should be implementing DOTS, excluding hospitals and private clinics. The 2007 NTPS also showed that only 50 percent of TB patients are PhilHealth members. Furthermore, estimates of TB prevalence among PhilHealth members against total PhilHealth claims show that the proportion of TB-DOTS claim is close to nil (> 1 percent).
 - Inadequate regulatory measures to control MDR/XDR TB – The rational use and prescription of anti-TB drugs is one of the reasons for the increasing incidence of MDR/XDR TB. TB drugs can be easily purchased from private drugstores. Although selling is supposed to be limited to those with prescriptions, over-the-counter sales are widespread.

The above problems indicate the continuing need to strengthen policy enforcement and to undertake new policy research and formulation in the areas of FP, MNCHN, and TB.

C. Lack of Policy Advocacy, Enforcement, Assessment, and Documentation

A major gap of the Philippine health policy process is the neglect of policy advocacy, monitoring, review, and evaluation. The sheer number of policy issuances from the DOH has been astounding – many of them supported under the current USAID/Philippines Health Policy Development Program – but there has been a noticeable scarcity of qualitative or quantitative review and evaluation of these policies, their level of compliance by LGUs and other parties, their impact on services, and whether they need to be fine-tuned, revised, or abandoned altogether.

Most evaluations are usually done as part of mid-term or end-of-project evaluation of donor-funded projects. However, even these qualitative performance evaluations based on extensive interviews are often not available in the public domain, thus severely limiting the diffusion of best practices and lessons learned. Similarly, successful interventions are often not reported, not documented, or not disseminated. This is especially true in the case of novel service delivery, financing, and regulatory innovations in FP, MNCHN, and TB, many of them may be of small size or minor and need to be scaled up.

The variance in policy enforcement, lack of documentation, policy review and evaluation need to be addressed. Among the major policies that need to be rigorously reviewed and evaluated are: (a) the overall devolution of health financing and services since the early 1990s; (b) the LGU health investment planning exercises (PIPH, CIPH, MIPH); (c) the Contraceptive Self-Reliance (CSR) and CSR+ initiative; (d) the use of LGU and other Score Cards; (e) the recentralization of FP/MNCHN grants since 2007 and the Budget Expenditure Management (BEM) initiative; (f) the Expenditure Tracking System (ETS); (g) the purchase and use of new diagnostic technologies in TB; (h) private sector experience in TB-DOTS; (i) the large-scale mobilization of Community Health Teams (CHT); (j) the drug consignment program in public hospitals and clinics; (k) PhilHealth's accreditation standards and the process of accreditation, and its impact on the provision of TB, MCP, and OPB benefits; (l) PhilHealth's role in diseases deemed uninsurable or of public health concern; (m) Kalusuguan Pangkalahatan initiative; and (n) new service delivery modalities and best practices in FP, MNCHN, and TB introduced under USAID projects.

D. Skill Deficits in the Management of Health Reform

Health policy refers to decisions, plans, and actions that are undertaken to achieve specific health care goals within a society. The health policy process involves: (a) Defining a vision for the future which in turn helps to establish targets and points of reference for the short and medium term; (b) Outlining priorities and the expected roles of different groups; and (c) Building consensus and informing people around the priorities. Based on this World Health Organization (WHO) definition, modern health policymaking should provide and/or articulate the health sector vision, set priorities, establish targets of performance, define the roles of key players in the achievement of their assigned targets, and build consensus around the policy issue to reduce variance in enforcement.

The specific functions that a modern health policymaking process requires are visioning, priority-setting, consensus-building, and performance targeting. This requires the engagement of human resource representing a wide range of skills including public health specialists, epidemiologists, demographers, health program managers, health technology experts; health economists, health financing specialists, health planners, costing and budget specialists, health insurance specialists; human resource specialists, health facility management specialists, monitoring and evaluation specialists, IT specialists; business management specialists, public administration specialists; and sociologists and behavioral science specialists, facilitators, community organizers, communicators and media practitioners;

The above skills are already in very short supply in the Philippines due to the following:

The Philippines has not invested much in the training of specialists and technicians to manage the health reform process. The Philippines does not have sufficient health human resources with the requisite skill sets to manage a health system for a burgeoning population with a double burden of disease.

As a health system matures (especially with increasing health care expenditures and more complex public-private interactions), there is a greater – not less – need for health policy analysis and understanding of sophisticated business formats, models, procedures, and transaction. With more public/private partnerships in the offing, there is a need for more transactions specialists and technicians adept at health service regulation and monitoring, and less in direct service delivery.

The Philippines should factor the net outflow of human resources in its training of health workers as well as health managers. The more competitive salaries of foreign assignments often result in voluntary migration of seasoned managers which leaves many slots unfilled for long periods of time. This points to the need to train more skilled health reform technicians and managers to address the diaspora. Failure to do so results in health policy reforms that are largely written on paper with little traction on the ground.

E. Systematizing the Health Policy Process

While major FP/MNCHN and TB policies have been crafted in the last five years, the health policy process is still not well-developed. Necessary changes are difficult to introduce due to the absence of an agreed upon national health policy agenda and the lack of broad-based mechanisms that provide the means for the consideration and crafting of health policies, regulations and legislation. Thus, there is a need to conduct thoughtful discussions that also engage the relevant publics on critical health issues (service delivery, financing, regulation) on a regular basis, preferably coordinated by a competent and credible institution that is able to attract presenters and lecturers, discussants, and a wide variety of participants and attendees.

III. Purpose and Scope

The purpose of the project is to strengthen a supportive policy and financing environment for FP, MNCHN, and TB to enable the Philippines to achieve its Millennium Development Goals in health as well as expand and sustain its universal health care initiative. Building on the important policy strides of the current USAID-supported Health Policy Development Program (HPDP), this project will provide resources for the recipient to undertake the following:

- Health policy research, advocacy and health policy formulation;
- Policy monitoring and evaluation in health;
- Capacity building to implement and expedite more vigorously health sector reforms; and
- Institutionalizing a multi-sector health policy institution.

The scope will be limited to those areas for which USAID/Philippines has a manageable interest, and which demonstrably expand and improve services in FP, MNCHN, and TB, especially in poor localities, including the Autonomous Region of Muslim Mindanao (ARMM). For these reasons, the cooperative agreement will be limited to the following:

- Policy research and formulation for the delivery of priority health services and commodities (FP, MNCHN, and TB) especially for the poor;
- Policy research and formulation in health care financing as it pertains to the financing of FP, MNCHN, and TB;

- Policy research and formulation on human resources for health to deliver the priority health programs in FP, MNCHN, and TB;
- Policy support for health service delivery and financing in ARMM;
- Support for improving systems for monitoring and evaluation of FP, MNCHN, and TB and health systems interventions; and
- Other priority policy areas that may arise.

To fully cover the country's three major island-groups, the Recipient is expected to provide one sub-award to an organization that will work in the Visayas to provide analytical and technical assistance work in the three regions there (i.e., Regions 6 – 8), and another sub-award to an organization that will work in Mindanao to provide analytical and technical assistance work in ARMM and the other five regions there (i.e., Regions 9 – 12 and CARAGA). The prime Recipient is expected to cover Luzon and supervise the work of the two sub-recipients, as well as undertake analytical work in Visayas and Mindanao in cooperation with them.

The Recipient is also expected to maintain an active and regularly updated website containing early drafts of technical reports in each of the two components of this project.

IV. Program of Work

A. Core Activities

Implementing health reforms in the Philippines has become increasingly complex especially as the Government of the Philippines (GPH) scales up its efforts to reach universal health care. The strategic, operational and transactional concerns have grown while staff capacities and time constraints continue to be limited. The DOH has received substantial (as much as 300%) increases in its budget in the last three years to support the implementation of health reforms particularly those pertaining to achieving the Philippines' commitment to the Millennium Development Goals. In order to manage the use of available resources and optimize intended gains, the Recipient will work with DOH top management in establishing an institutional platform that will help design, implement, monitor and evaluate UHC initiatives. This institution/unit/organization will be accountable to the Secretary of Health but should be able to maintain its independence and objectivity. Funding may come from various sources (government/public coffers, various partners) but this should not impair the ability to provide compensation rates that can compete in the market of professional talents. As an organization/unit/institution, it should be able to network and engage with other institutions/individuals who may contribute to its objectives.

Component 1: Establishing an Institutional Platform to help the DOH design, implement, monitor and evaluate the country's Universal Health Care agenda. This involves a discrete and time sensitive set of activities/milestones as follows:

1. Conduct of an assessment of the specific needs for technical support, how it shall relate to the DOH bureaucracy, and an inventory/analysis of what have been tried/are existing locally (e.g. PCHRD, UP-NIH, PIDS, etc.) and in other countries (e.g. US-NIH, Mexico's Funsalud, Thailand's IHPP, etc.). This should be available by December 2012.
2. Development of a concrete plan on how to establish or build capacity, integrate/relate with existing systems for technical support in the sector, and provide for long term sustainability.

The plan should take into account/address the following:

- a. The institution is accountable to the Secretary of Health, but should be able to maintain its independence and objectivity.
- b. While funding may come from various partners, it should be able to develop and pursue its own agenda.
- c. Funding may come from government/public coffers, but this should not impair the organization's/institution's ability to provide compensation rates that can compete in the market for professional talents.
- d. As an organization/institution, it should be able to network with and engage other institutions/individuals who may contribute to its objectives.

The plan should be completed by March 2013.

3. Provision of technical assistance to the DOH in managing the transactions of actual institutionalization. This will involve transactional managers and staff who shall work to meet legal, policy, financing, staffing and even physical requirements of the think tank. The organization/institution shall begin operations by June 2013.

Component 2: Support to Technical Areas to Improve Policies and Health Systems Focusing on Removing Policy and Systems Barriers to Improved Supply and Demand for FP/MNCHN and TB Services. Assistance under this component will necessarily be undertaken under two modes:

1. Interim Support – The Recipient is expected to provide interim support to the Secretary of the Department of Health while the institutional platform is being designed by engaging a team of advisers/consultants/analysts to be deployed at the DOH. This team will provide for some of the services of the institutional platform while it is still being developed and established.
2. Ongoing Support Through Life of Project – During the interim and once the institution/organization is established, the Recipient is expected to provide support in the following technical areas:

Technical Area 1: Improving Policies and Regulations on Service Delivery of Priority Interventions that Impact on FP/MNCHN and TB Outcomes. Activities under this technical area will be prioritized based on discussions with DOH, USAID and other key stakeholders. Findings of analyses/studies emanating from this component should directly inform policy formulation, strengthening and/or revocation of old policies to improve service delivery and to ensure improvements in FP/MNCHN and TB outcomes. Illustrative analytical and technical assistance activities include but are not limited to the following:

- Family Planning – (a) activities that assess and contribute to scaling up and expanding access to a comprehensive package of family planning services, especially in areas where there is high unmet need for family planning, (b) activities that contribute towards improving the quality of integrated maternal and child health and family planning services, (c) activities that enhance contraceptive security.
- MNCHN – (a) activities that assess and contribute to sustainably scaling up and expanding access to maternal, newborn, child health and nutrition in areas of high unmet need, (b)

- contribute to expanding essential emergency obstetric care and newborn care (c) assess, improve and document 'smart integration' practices of providers, e.g., FP-EPI, FP-post-partum;
- TB – (a) activities that expand access to quality DOTS services, including laboratory services; (b) activities that enhance and rationalize TB diagnostic technologies, labs and microscopy centers in collaboration with the Systems for Improved Access to Pharmaceuticals and Services (SIAPS); (d) activities that track funding for TB at the subnational level; (e) activities that improve drug availability and compliance.
 - ARMM – (a) increasing access to FP/MNCHN/TB services given the unique challenges faces by ARMM including limited access to health facilities, limited LGU funding allocated to health, and governance issues.

Technical Area 2: Ensuring Sustainable Health Care Financing Particularly for FP/MNCHN and TB. Activities under this technical area will be prioritized based on discussions with DOH, USAID and other key stakeholders. Technical assistance will consider various financing sources and mechanisms (e.g. grants from development partners, public funds from regular appropriations and/or from newly generated revenue such as proceeds from sin taxes). Illustrative analytical and technical assistance activities include but are not limited to the following:

- Continuing TA to CHDs and LGUs in improving the planning and executing budgets for health.
- Improving the absorptive capacity of the DOH and LGUs to fully expend allocated budgets.
- Providing TA to expand coverage and benefits under the Philippines Health Insurance Corporation particularly to enhance delivery of FP, MNCHN and TB services and to ensure financial risk protection of the poor.
- Assistance in enhancing the National Health Accounts to track out of pocket expenditures and other measures of financial risk protection.

Technical Area 3: Strengthening Policy and National Program Monitoring and Evaluation. Activities under this technical area will be prioritized based on discussions with DOH, USAID and other key stakeholders. These activities would be a mixture of monitoring of special concerns especially related to UHC/KP implementation for which real time information would be needed for decision making at the Office of Secretary (OSec) level, process evaluation, performance evaluation and impact evaluation (for which cause and effect relationships are quantified). Illustrative analytical and technical assistance activities include but are not limited to the following:

- Technical assistance in methods for monitoring and evaluating implementation of Universal Health Care and for developing a comprehensive framework for monitoring and evaluation activities.

- Preparation of background papers based on empirical evidence on existing good practices in the Philippines or abroad, or on proposed initiatives underpinned with solid data and/or careful interviews with recognized experts.
- Technical assistance in providing impact evaluations for DOH programs to assess quality of implementation and the impact of activities.
- Assistance in improving knowledge management and sharing on research findings.

Technical Area 4: Capacity Building for More Vigorous Implementation of Health Reforms. Activities under this technical area will be prioritized based on discussions with DOH, USAID and other key stakeholders with the aim of rebuilding the health sector's technical capacity. Capacity building efforts should cover a wide range of modalities (i.e. short term training, long term training, fellowships, mentoring arrangements, publication of evidence based technical pieces, presentation in prestigious international conferences of accepted abstracts and papers) and configured in the context of the DOH's wider human resource plan and management improvement program, including a performance management system that holds senior and mid-level staff accountable for results.

B. Issues and other Considerations

In addition to the core activities, the Recipient is advised to take the following considerations in the design and implementation of the project:

1. Local Capacity Building – Based on the Agency's "USAID Forward" initiative, USAID/Philippines needs to vigorously build local capacity and engage in a much greater degree with local institutions for the management of USAID-funded activities. Towards this end, the Recipient will be required to source, whenever feasible, any available technical assistance (long and short term) and supplies from local sources.
2. Greater Innovation – Under USAID's Global Health Initiative, USAID/Philippines desires to hasten achievement of project results through greater innovation. Towards this end, this project is expected to focus greater attention on (a) the adoption and use of proven and approved new products and processes, e.g., new biomedical applications and therapies; new diagnostics; new information technologies such as e-health, e-medicine, and mobile health; and new business formats or management processes; and (b) the scaling up of existing recent approaches from urban to rural areas or vice versa; from use at high-income households to low-income ones or vice versa; from private to public sector or vice versa; from for-profit to nonprofit sector or vice versa; and from research or academic settings to larger-scale environments.

While the innovation mandate is important, USAID/Philippines discourages cooperating agencies' tendency to avoid other CAs' products (especially products of any incumbent projects and those developed in earlier projects) and to self-promote their technical products. To mitigate this adverse practice, USAID/Philippines will exercise diligence in making sure that (a) only products or tools of known efficacy and effectiveness are adopted and scaled up; (b) CAs will not unduly multiply corporate or project brand names, acronyms, abbreviations, neologisms, buzz words, and other barriers to innovation and adoption; (c) good practices are documented and shared, a task that will be expected of this project; and (d) official approval

from DOH and other certifying authorities will be sought for proven tools, manuals, guides, processes and procedures so that they can be adopted more widely. The innovation mandate also includes sharing of demonstrated good practices that the project finds from places outside the Philippines.

The Recipient is expected to identify the most cost-effective way of introducing and scaling up innovations or new approaches. This may be through videoconferencing instead of visits; video documentation and podcasts instead of study tours; text blasts instead of leaflets; websites and social media instead of publications.

3. Partnership in Delivering Disaster Response – The Philippines is vulnerable to natural hazards. Due to its geographic location, the country is one of the world’s most disaster prone countries, particularly vulnerable to tropical cyclones and floods, earthquakes, landslides and volcanic eruptions. These disasters can easily wipe-out development gains in the country.

On a case-to-case basis, USAID/Philippines mobilizes its various implementing partners to assist in delivering humanitarian assistance. USAID/Philippines in responding to large-scale disasters may request the project to assist at the DOH at the national level with compiling and sharing data and information on disaster response needs and resources to better coordinate the response. The scope and deliverables expected from the re-alignment of project resources will be mutually agreed by USAID/Philippines and the implementing partner.

4. Gender – Gender equality and female empowerment are essential for achieving USAID’s development goals. The new USAID Gender Policy advances equality between females and males, and empowers women and girls to participate fully in and benefit from the development, through the integration of gender in the entire project cycle -- from project design and implementation to monitoring and evaluation. This integrated approach focuses on achieving three overarching outcomes: 1) Reducing gender disparities in access to, control over and benefit from resources, wealth, opportunities, and services – economic, social, political, and cultural; 2) Reducing gender based violence and mitigating its harmful effects on individuals and communities, so that all people can live healthy and productive lives; and 3) Increasing the capability of women and girls to realize their rights, determine their life outcomes, and influence decision making in households, communities, and societies.

To operationalize these overarching outcomes, the Project is expected to adopt any one of the seven output and outcome indicators, as appropriate, on gender equality, female empowerment, and gender-based violence in the USAID’s Gender Policy. The Project shall also develop a strategy for ensuring gender integration into the work plan and the M&E Plan, and for reporting on how the project benefited men and women. Progress of all related activities will be measured and verified using gender-sensitive performance indicators that will be part of the PMP/M&E. All people-level indicators must be disaggregated by sex, and included in project reports.

Project activities will be implemented in a manner that promotes fair, equitable, and meaningful inclusion of both men and women in all project activities.

To provide greater focus on gender equality and female empowerment in this project, the Project will prepare a Gender Action Plan that will include the following considerations:

Conduct of training for the project staff, partners and cooperators on gender awareness, gender analysis and gender-responsive planning.

Collection of sex-disaggregated data for baselines and monitoring of all people-level indicators and use of gender analysis tools to identify potential gender gaps and constraints, Conduct gender-responsive consultations to encourage the active participation of women and ensure that the voices of women are heard and reflected in project plans and activities.

The preparation of the Gender Plan of Action should be guided by the USAID gender policy and compliant with GPH's Harmonized Gender and Development Guidelines in <http://neda.gov.ph/hgdg/homepage.html>.

5. Environmental Compliance – This project is expected to comply with the standard USAID provisions on environmental compliance (EC). In addition to these minimum environmental requirements, the applicant is also expected to exercise due diligence in identifying project-related activities for which greater environment-friendly interventions could be practiced, especially in medical waste disposal, disposal of used condoms and other contraceptives, and infection control.

The Regulation 216 documentation for this cooperative agreement, under activity name “The Health Policy Project”, is Categorical Exclusion as documented in IEE/RCE Asia 12-32 approved by the Bureau Environmental Officer (BEO) on 13 February 2012. This indicates that no environmental impacts are expected as a result of HPDP2 project activities. However the Recipient must ensure that health training curriculum, as appropriate, covers best management practices concerning medical waste management and infection prevention that are consistent with current DOH protocols, and USAID guidelines.

6. Sustainability – USAID/Philippines is seeking national impact on health outcomes through the collective effort of all its health projects in the Philippines. Achieving national impact in a decentralized management environment is an important challenge. It is therefore necessary that the Recipient identifies activities and interventions that have high probability of sustainability and plans for the continuity of these activities.
7. Geographic Information System - Where projects or activities are implemented in particular locations, the Recipient should map and track interventions and fund use. As possible and appropriate, this could be done by barangay, municipality, province, region, and island grouping (Luzon, Visayas and Mindanao).
8. Youth - Where projects or activities have specific interventions that target or benefit the youth (defined as those within the age range of 10 to 29years old), people level indicators must be disaggregated by age.
9. Inclusive Development - USAID is committed to the inclusion of people who have physical and cognitive disabilities and to provide support to organizations that advocate and offer services for people with disabilities (PWDs). USAID focuses on improving access of PWDs to development programs and on removing barriers that cause exclusion. All its grants, cooperative agreements and contracts have provisions on the inclusion of people with disabilities. In line with the USAID Disability Policy, the Program will promote the participation and equalization of opportunities of

individuals with disabilities, increase awareness of issues of people with disabilities both within USAID programs and in host countries; foster a climate of nondiscrimination against PWDs; and support international advocacy for PWDs.

10. Outreach - As part of their response to this solicitation, the Applicant should articulate a plan for outreach, dissemination and collaborative learning about the results (outputs and outcomes) of the project/activity, performance improvements, and lessons learned. Applicant's Outreach plan should include support to USAID/Philippines in organizing or participating in VIP visits, civil-military activities, and contributing to regular reports to the Administrator.
11. Standard Property Rights Clauses - It is necessary that USAID archive activity related data to ensure that at the conclusion of the award, the Agency will still have access to the data. Data that are collected and produced by the Recipient under the Program must be stored in a database management system or other structured data file format. This data will be provided in whole to USAID for further analysis and dissemination if relevant.

V. Anticipated Results and Recommended Indicators

While this project is expected to contribute to the attainment of the higher level outcome indicators for health (Annex A), each year the USAID management team and the HPDP2 management team will decide on high priority interventions for the coming work-plan year in each of the five areas:

- Improving Policies and Regulations on Service Delivery of Priority Health Interventions
- Ensuring Sustainable Health Care Financing
- Policy Review and Impact Evaluation of Service Delivery and Financing Interventions
- Capacity Building for More Vigorous Implementation of Health Reforms
- Improving Openness through the Multi-sectoral Health Policy Forum

HPDP2 will be measured against its attainment of those high priority interventions.

VI. Relationship with Other USAID, Government, and NGO Health Projects/Activities

Diagram 1 shows how HPDP2 will inter-relate with other USAID projects. The project will work closely with USAID health projects to capitalize on their strengths, activities and networks, and so that HPDP2 can cater to their policy and system's needs. Areas for collaboration with ongoing projects include the following:

CHANGE Project – HPDP2 will work with CHANGE in the development of advocacy tools for decision-makers on the benefits of reducing unmet need for FP, MNCHN and TB.

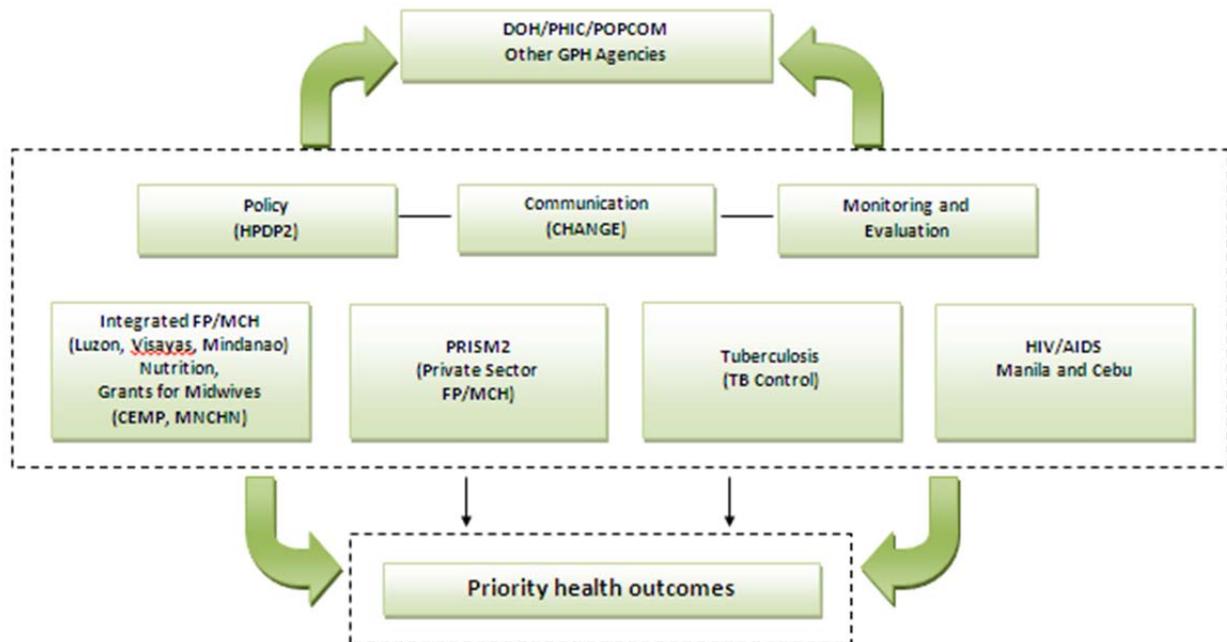
Regional Integrated FP/MNCHN Projects – HPDP2 will collaborate closely with Regional Integrated FP/MNCHN Projects in working with partner CHDs, LGUs, PHOs, CHOs and MHOs for any policy related issues on FP/MNCHN and TB that may arise in the course of policy implementation or enforcement. HPDP2 and the Regional Projects will also closely collaborate in pursuing new initiatives. Complementing each other based on a synchronized policy agenda, HPDP2 efforts will be focused at the national and

regional levels while the Regional Projects will sustain local policy advocacy in support of their service delivery agenda.

CEMP and MNCHN Scale Up Projects – These two grants are complementary, and are expected to work hand-in-hand in the training of midwives on modern midwifery practices in six common project sites. CEMP shall work closely with the MNCHN Scale Up Project recipient on the training of midwives on AMTSL, EINC, ANC, FP and IYCF/EBF counseling, training of senior/leader midwives as supervisors/mentors, establishment of referral system on high risk cases, provision of backstop support for the PhilHealth accreditation of health facilities and attendance/involvement of midwives in maternal death review (MDR) and perinatal deaths reviews. These two Recipients will work closely with HPDP2 to review and firm up the DOH policy and guidance regarding adoption of AMSTL by midwives.

PRISM2 – HPDP2 will collaborate closely with PRISM2 in clarifying policies and DOH guidance on LAPM services provision including financing of itinerant teams and SDN formation and operationalization with attention to private sector roles in these areas. HPDP2 will also work with PRISM2 to help clarify and streamline PhilHealth accreditation and DOH licensing policies for public and private providers and facilities.

TB Control Project – HPDP2 will coordinate with the TB project on any activities involving the formulation of new TB policies, strengthening of existing TB policies and the impact evaluation of the TB program.



- DOH and its centers including the Health Policy Development and Planning Bureau; the Bureau for Local Health Development; the National Center for Health Promotion, the National Epidemiology Center; and the Bureau for International Health Cooperation; and

- Centers for Health Development CHDs;
- ARMM and its Department of Health;
- Local Government Units;
- Philippine Health Insurance Corporation
- PopCom and PopCom Board
- Other institutions involved in KP/UHC;
- Department of Social Welfare and Development's Conditional Cash Transfer (CCT) Program, especially on the utilization by recipient households of health services;
- Private providers and institutions providing or financing FP, MNCHN, and TB services, especially under public/private partnership arrangements; and
- Other health research, capacity-building, advocacy, information technology (IT), educational, and event-management institutions; and
- Other development partners (donors).

USAID/Philippines will adopt a synchronized and integrated approach in working with LGUs, CHDs and other local stakeholders. To realize this objective, USAID Philippines will mandate the Integrated FP/MNCHN Regional projects to act as regional field coordination office to all cooperating agencies (CAs) which have field activities, i.e., PRISM2, HPDP2, CHANGE, the TB Control Project, and the CEMP and MNCHN Scale Up projects. This will be done through a variety of mechanisms including (a) joint planning and programming of all activities in the field; (b) joint supervision, monitoring and evaluation visits; and (c) informing in advance the field coordination office of all trips and activities to be made. This function is not intended to make the regional projects a gatekeeper of USAID projects, but to improve coordination and to lessen the transaction costs incurred by LGUs, CHDs, and other local stakeholders in having to know and to frequently deal with several staff from different cooperating agencies.

VII. Performance Monitoring Plan/Monitoring and Evaluation Plan

Effective monitoring and evaluation is an important element of USAID programs and a key area of the USAID Forward reform agenda and the Global Health Initiative (www.ghi.gov). USAID seeks data and information to improve performance and effectiveness as well as to inform planning and management decisions. Baseline data must be collected to enable USAID to determine impacts that are attributable to the program. Measurement of the quality of the interventions should be done through routine project monitoring. Accurate and timely monitoring will enable the project to adapt to changing conditions and make corrections as necessary. Routine data quality assessments are also required. HPDP2 must describe the expected outcomes in annual implementation/work plans, and report on progress according to agreed indicators. USAID/Philippines and the Recipient will conduct periodic activity reviews to monitor the progress of work and the achievement of results as based on the targets specified in the Performance Monitoring Plan.

The Recipient remains responsible for on-going monitoring and assessment that inform management decisions by assessing whether activities are being implemented as planned, reaching targeted groups, and achieving expected outputs and outcomes. See USAID Evaluation Policy and ADS 203 (<http://transition.usaid.gov/policy/ads/200/203.pdf>), as revised, for more detailed guidance.

The Recipient is expected to perform a midterm evaluation and USAID will conduct an independent end of project evaluation.

2. AUTHORIZING LEGISLATION

The authority for this Request for Applications is found in the Foreign Assistance Act of 1961, as amended and the Federal Grant and Cooperative Agreement Act.

3. PROGRAM ELIGIBILITY REQUIREMENTS

Any locally registered Philippine organization meeting the criteria in Section III.1 of this RFA is eligible to apply.

4. AWARD ADMINISTRATION

The resultant award and sub-awards will be administered in accordance with U.S. Federal regulations and USAID policy. For non-U.S. organizations, the USAID Standard Provisions for Non-U.S. Non-governmental Recipients will apply. For any sub-award(s) to U.S. organizations, the 22 CFR 226, Office of Management and Budget (OMB) circulars, and USAID Standard Provisions for U.S. Non-governmental Recipients will apply.

While for-profit firms may participate, pursuant to 22 CFR 226.81, it is USAID's policy not to award profit under assistance instruments, such as cooperative agreement agreements. However, all reasonable, allocable, and allowable expenses, both direct and indirect, which are related to the grant program and are in accordance with applicable cost standards (22 CFR 226, OMB Circular A-122 for non-profit organization, OMB Circular A-21 for universities, and the Federal Acquisition Regulation (FAR) Part 31 for profit organizations) may be paid under assistance agreements.

- Standard Provisions for Non-U.S. Non-governmental Recipients (<http://www.usaid.gov/policy/ads/300/303mab.pdf>)
- 22 CFR 226 – Administration of Assistance Awards to U.S. Non-governmental organizations (<http://www.gpo.gov/fdsys/pkg/CFR-2011-title22-vol1/xml/CFR-2011-title22-vol1-part226.xml>)
- OMB Circulars (<http://www.whitehouse.gov/omb/circulars/>)
- Standard Provisions for U.S. Non-governmental Recipients (<http://www.usaid.gov/policy/ads/300/303maa.pdf>)
- Federal Acquisition Regulation (FAR) Part 31 (<https://www.acquisition.gov/far/html/FARTOCP31.html>)

SECTION II – AWARD INFORMATION

1. ESTIMATED FUNDING AND NUMBER OF AWARDS

Subject to the availability of funds, USAID intends to provide approximately US\$15,000,000 to be allocated over the life of the project. It is also intended that only one (1) award will be issued under this RFA. USAID reserves the right to fund any or none of the applications received.

2. PERIOD OF PERFORMANCE

Activities pursuant to this RFA will be for a five (5) year period. The estimated start date is on or about October 1, 2012 through September 30, 2017.

3. AWARD TYPE

USAID anticipates award of a cooperative agreement. A cooperative agreement implies a level of “substantial involvement” by USAID in certain programmatic elements during the performance of the activity. This substantial involvement will be through the Agreement Officer, except to the extent that the he/she delegates authority to the Agreement Officer’s Representative (AOR) in writing. Anticipated substantial involvement elements for this award are as follows:

- Approval of annual implementation/work plans
- Review and approval of and any changes in key personnel
- Agency and recipient collaboration or joint participation in implementation, including, but not limited to participation in advisory committees and direction and/or redirection of activities specified in the program description due to interrelationships with other programs
- Review and approval of Monitoring and Evaluation Plan
- Appropriate review and approval of sub-awards

SECTION III – ELIGIBILITY INFORMATION

1. APPLICANTS

All eligible local organizations may apply. Applicants may be local non-governmental organizations (NGO) and private for-profit companies willing to forego profit. Potential local private for-profit applicants should note that, pursuant to 22 CFR 226.81, the payment of fee/profit to the prime recipient under grants and cooperative agreements is not allowed. Universities and colleges that fit the criteria are also eligible to apply.

To be considered eligible to apply under this RFA, the local organization must satisfy all conditions below:

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

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.

USAID will not accept applications from individuals.

2. COST SHARING

In addition to the conditions above, a cost share of at least 5% of total USAID funding is required under this RFA. Cost share is defined by USAID as contributions, both cash or in-kind and can include contributions from the applicant, local counterpart organizations, project clients, and other donors (but not other U.S. government funding sources). Cost sharing must be used for the accomplishment of program objectives and must consist of allowable costs under the applicable US Government cost principles. Cost sharing will be subject to USAID Standard Provision entitled “Cost-Sharing (Matching)” for non-U.S. non-governmental recipients and applicable OMB cost principles.

An application that does not meet the minimum cost sharing requirement is not eligible for award consideration.

3. NEW PARTNERS

In support of the Agency’s interest in fostering a larger assistance base and expanding the number and sustainability of development partners, USAID encourages applications from potential new local partners.

When considering making an award to a potential local partner with limited or no previous USAID experience, USAID will undertake necessary pre-award reviews to determine the organization’s

“responsibility” as discussed below. The resultant award to this organization may take some time. The applicant should take this into account and plan their implementation dates and activities accordingly.

“Responsibility” of Applicant

In order for an award to be made, the Agreement Officer must make an affirmative determination that the applicant is “responsible”. A positive responsibility determination means that the applicant possesses or has the ability to obtain the necessary management and technical competence to plan and carry out the program to be funded, and that the applicant will practice mutually agreed upon methods of accountability for funds and other assets provided by USAID.

SECTION IV – APPLICATION AND SUBMISSION INFORMATION

1. POINT OF CONTACT

The application package can be downloaded from www.grants.gov. Potential applicants may communicate with the POC regarding the application requirements.

Grace M. Laspiñas
Acquisition and Assistance Specialist
USAID/Philippines
8th Floor, PNB Financial Center
Pres. Diosdado Macapagal Boulevard
Pasay City, Philippines
Email: manilahpdp2@usaid.gov
Tel.: +632 5529929

2. REQUESTS FOR CLARIFICATIONS

Applicants are responsible for requesting any question/clarification on the information contained in the RFA. Requests for question/clarification shall be made in writing and send by email addressed to Grace M. Laspiñas, Acquisition and Assistance Specialist, at manilahpdp2@usaid.gov with subject line: “Questions on HPDP2 RFA submitted by [Name of Organization]”. The deadline for submission of questions/clarifications is July 9, 2012. If it is determined that the answers to any questions are of sufficient importance to warrant notification to all applicants, a Questions and Answers document, and/or if needed, an amendment to the RFA will be posted at www.grants.gov.

3. PRE-APPLICATION CONFERENCE

USAID will hold a pre-application conference on July 12, 2012, 2:00 pm at the Main Conference Room, USAID/Philippines, 8th Floor, PNB Financial Center, Pres. Diosdado Macapagal Boulevard, Pasay City. All potential applicants are welcome to attend.

The purpose of the pre-application conference is to ensure an understanding of the RFA. It will include a short presentation of the RFA’s program description which is intended for informational purposes only. At the conclusion of the presentation, attendees will have the opportunity to ask questions about the RFA. See Annex B for more details.

4. ELIGIBILITY DOCUMENTS

Subject to the conditions for eligibility provided in Section III.1 of this RFA, the applicant will submit official documentation of its organization’s formal legal status, as follows:

- a. Registration certificate from the Securities and Exchange Commission (SEC) or Philippine Council for NGO Certification (PCNC) for non-profit organizations;
- b. For government owned and government controlled organization, appropriate equivalent legal document;

- c. Business or Mayor's permit issued by the city or municipality where the principal place of business of the applicant is located;
- d. Articles of Incorporation and By-Laws

5. REQUIRED FORMS

Applicants must submit their applications using the Standard Form 424 series attached to this RFA. Refer to Annex C.

- a. SF-424, Application for Federal Assistance
(http://apply07.grants.gov/apply/forms/sample/SF424_2_1-V2.1.pdf)
- b. SF-424A, Budget Information – Non-construction Programs
(<http://apply07.grants.gov/apply/forms/sample/SF424A-V1.0.pdf>)
- c. SF-424B, Assurances – Non-construction Programs
(<http://apply07.grants.gov/apply/forms/sample/SF424B-V1.1.pdf>)

6. PRE-AWARD CERTIFICATIONS, ASSURANCES, AND OTHER STATEMENTS OF THE RECIPIENT

In addition to the certifications that are included in the Standard Form 424, applicants must submit the following certifications, assurances, and other statements as part of the application.

- a. A signed certification and assurances for the:
 - Certification regarding Lobbying
 - Prohibition on Assistance to Drug Traffickers
 - Certification Regarding Terrorist Financing
 - Key Individual Certification Narcotics Offenses and Drug Trafficking, when applicable
 - Participant Certification Narcotics Offenses and Drug Trafficking, when applicable
- b. Other statements of Recipient

Complete copies of these certifications, assurances, and other statements of the recipient can be found at <http://transition.usaid.gov/policy/ads/300/303sad.pdf> and as Annex D of this RFA.

7. DATA UNIVERSAL NUMBERING SYSTEM (DUNS) NUMBER

Applicants are encouraged to obtain a DUNS number so that award is not delayed if selected. 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 www.dnb.com. Note that applicants may submit applications under this RFA without DUNS. However, the selected applicant is required to provide the DUNS number prior to receipt of an award.

8. EVIDENCE OF CENTRAL CONTRACTOR REGISTRATION

Central Contractor Registration (CCR) is the U.S. Government repository into which an entity must provide information required for the conduct of business as a recipient. Information about registration procedures may be found at the CCR website (<http://www.ccr.gov>).

Applicants are encouraged to register with CCR so that award is not delayed if selected. Applicants may submit applications under this RFA without this; however, a CCR registration is required of the selected applicant prior to receipt of an award. An evidence of CCR registration will be submitted to USAID.

9. APPLICATION AND SUBMISSION INSTRUCTIONS

Applications in English language must be received *no* later than August 8, 2012, 3:00 pm Manila local time at the address indicated below.

Applicants must submit one original and three hard copies of the technical application and one original and one copy of the cost application. Technical and cost applications must be separately identified, with the name and address of the applicant and the RFA number "RFA-492-12-000030" inscribed thereon.

The address for hand-carried and courier-delivered applications is:

Regional Office of Acquisition and Assistance
USAID/Philippines
8/F PNB Financial Center
Pres. Diosdado Macapagal Boulevard
Pasay City, Philippines 1308
Telephone No.: +632 5529923

Applicants must take into account the expected delivery time required by their preferred application transmission and are responsible for ensuring that hard copies of their applications are received at USAID/Philippines Regional Office of Acquisition and Assistance on or before the time specified on the cover of the RFA. Late or incomplete applications will not be considered in the review process.

Applicants are encouraged to obtain confirmations of receipt of their applications. USAID will not be held responsible for incomplete or lost applications. Applicants should retain one copy of their complete application package for their records.

In addition to hard copies, applicants must submit an electronic copy of the application via email to manilahpdp2@usaid.gov. Receipt of applications by email will be confirmed. Applications received only in electronic form will not be considered.

Applications with attachments sent by email must be compatible with Adobe Acrobat (PDF) and Excel MS Office 2010. Each email must not exceed 5mb in size and all files are to be in PDF except for cost spreadsheets which are to be provided as Excel files with cell formulas unlocked. All emails containing application files should, in the address line state RFA-492-12-000030 Technical or Cost Application email no. "X".

Preparation Guidelines

The following are general instructions for what constitutes an application and how applications shall be formatted. Applicants are expected to review, understand and comply with all aspects of this RFA. Failure to do so, the applicant's application may be down-graded and may not receive full credit under the applicable evaluation factors, or, at the discretion of the Agreement Officer, be eliminated from the competition.

- A complete application will consist of a technical application and a cost application submitted in separate volumes. The technical application must not include any cost information.
- All information must be presented in English language.
- Applications must be received no later than the date and time indicated in the cover letter of this RFA, at the address indicated on the previous page.
- All applications received by the deadline will be reviewed for completeness and responsiveness to the RFA. Incomplete submissions risk not being considered in the review process.
- Under USAID regulation, submission of a Branding Strategy and a Marking Plan by the apparent successful applicant is required. The apparently successful applicant's proposed Branding Strategy and a Marking Plan must be consistent with the provisions "Branding Strategy," "Marking Plan," and "Marking of USAID-funded Assistance Awards" contained in AAPD 05-11 and in 22 CFR 226.91. Please note that the Branding Strategy and a Marking Plan will not be included in the application but will be provided only after a written request of the Agreement Officer. Failure to submit or negotiate a Branding Strategy and Marking Plan will make the apparent successful applicant ineligible for award.

A. Technical Application

1. General

USAID requests that applicants provide all required information by following the format described below. Applications must be specific, complete and concisely presented. Detailed information should be presented only when required by specific RFA instructions.

The technical applications, including the Executive Summary, must *not* exceed 30 pages using 8 ½ x 11 paper (12 point single-spaced Calibri font with a minimum of 1 inch margins all around), not including the annexes as specified below. Pages should be paginated at the bottom. Tables, charts, graphs and graphics accompanying the technical application will not count against the page limit, and may be included in the application. 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 applicant's lack of cost consciousness. Elaborate art work and other presentation aids are neither necessary nor wanted.

Technical applications should be specific, complete and presented concisely. A lengthy application may not in and of itself constitute a well thought out application. Applications shall demonstrate the

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

2. Technical Application Format

The prescribed format for the technical application is:

- a. COVER PAGE not included in page limit shall contain only the following information:
 - The RFA number: RFA-492-12-000030
 - Project Title: Health Policy Development Project (HPDP) 2
 - Applicant name
 - Applicant address
 - Tax Identification Number
 - DUNS Number, if available
 - Point of contact information for the technical and cost applications (names, titles, email addresses, mobile/telephone numbers)
 - Names of sub-awardees

- b. TABLE OF CONTENTS listing all page numbers and attachments [not included in page limit]

- c. LIST OF ACRONYMS [not included in page limit]

- d. EXECUTIVE SUMMARY [One page maximum]

This section should allow technical evaluators to quickly understand the critical elements of the application including the most salient features of the applicants' technical vision and approach, the key personnel and management plan proposed, and the capabilities of the partners to accomplish the desired results.

- e. BODY OF PROPOSAL describing the program's strategic fit and technical approach and the organization's qualifications and past experience, proposed outcomes and indicators including the management and staffing plan and key personnel [not to exceed 29 pages]

- f. ANNEXES [not included in page limit, but there are some limitations within the required annexes] should be lettered (e.g. Annex A, Annex B, etc.)

Required annexes:

- Rapid mobilization plan for the first three months of the project
- Performance Monitoring/Monitoring and Evaluation Plan
- Organizational chart
- Short- and long-term technical assistance plan
- Complete and current resume/curriculum vitae of key personnel and other named personnel (limit of three pages per resume/CV), letters of commitment
- Sustainability plan
- Past performance References (three pages)

3. Technical Application Content

The technical application in response to this solicitation should address how the Applicant intends to carry out the Program Description in this RFA. It should be organized into the following major sections.

a. Technical Approach and Performance Monitoring Plan

Technical applications should be specific, complete and presented concisely. The applications should demonstrate the applicant's capabilities and expertise with respect to achieving the goals of this program. Technical applications should take into account requirements of the program and evaluation criteria found in Section V this RFA.

The technical application must set forth the conceptual approach, methodology, and techniques — the “how” — for accomplishment of the stated objectives. It should: (1) reflect a thorough understanding of the current context and policy environment in the Philippines; (2) describe how the recipient will design, implement, and monitor interventions to help achieve Components one and two and, (3) describe a plan with benchmarks/indicators that will enable activities to continue after the cooperative agreement has ended.

Applications must detail how the applicant will achieve the cooperative agreement's expected results. Applicants should propose innovative activities to achieve desired results. The application should outline links between the proposed results, conceptual approach, performance milestones, and a realistic timeline for achieving end of project results.

The technical approach should discuss the following:

- Propose an illustrative institutional arrangement to meet the requirements of Component One of the program description. Provide a diagram with explanation of the functions and roles and responsibilities of each entity. Explain how it will be responsive to the needs of the Secretary of Health and the Department of Health and how it will be sustained. Describe how it will contribute to improving the supply of and demand for essential FP/MNCHN/TB services.
- Describe the activities to be undertaken to meet the objectives of Component 2 of the program description. This section should demonstrate the applicant's understanding of the policy environment and key contextual factors that will affect the project. It should describe how the project will enhance performance in each of the technical areas under Component 2. Describe how activities will contribute to improving supply of and demand for essential FP/MNCHN/TB services.
- Describe the extent to which gender concerns will be integrated into the project cycle and its compliance with the requirements of the USAID Gender Policy (including the adoption of appropriate gender indicators) and the checklists provided under the Harmonized Gender and Development Guidelines.

Performance Monitoring Plan/Monitoring and Evaluation Plan

The application shall contain a draft Performance Monitoring and Plan (PMP)/Monitoring and Evaluation Plan for the expected outcomes and proposed indicators. Applicants will propose other indicators which will assist in managing project performance. The PMP/M&E shall contain project objectives and results,

performance indicators, data sources and collection methods, baseline information or a timeline for collecting it and targets. Performance indicators should comply with the following criteria: direct, objective, practical, adequate, and useful in managing for results. PMEP data should be based on fiscal year calendar.

The PMP/M&E will have the following suggested structure:

- List of key project objectives, expected results and project outputs (output is a count of services delivered or items produced) as well as brief description of the linkages between the project outputs and its expected results.
- Definition and detailed description of the performance indicators to be tracked including: unit of measure and disaggregation by gender, as appropriate and feasible; justification/management utility; annual baselines/targets; schedule for data collection; individual responsibility for data collection and availability

b. Key Personnel and Staffing

In their proposals, applicants will be expected to present a sound description for the key personnel and staffing of the project including anticipated short term technical assistance (STTA). The applicant should propose an overall staffing pattern that demonstrates the breadth and depth of technical expertise and experience required to implement this broad program. The staffing plan should demonstrate a solid understanding of key technical requirements and an appropriate mix of skills, while avoiding excessive staffing. Key personnel should demonstrate state-of-the-art expertise in international standards. This section should include: (1) a detailed organizational chart; (2) a brief description of key personnel; and, (3) a skills matrix for proposed project staff, both long- and short-term. All full-time personnel should be hired locally to the extent possible, and with use of expatriate STTA, if necessary.

Complete and current resumes of proposed key personnel and other staff are to be included in an annex and should be no more than 3 pages long. All key personnel resumes should include three references with contact information. Signed letters of commitment are required for all key personnel confirming his/her present intention to serve in the stated position during the term of the Agreement period and should be included in an annex. Noting that all staff may not be available or needed at inception, dates that key personnel are available to start work full-time with the project are also required.

The following are considered as key personnel: Chief of Party, Deputy Chief of Party, Family Planning /Maternal and Child Health Advisor, and Monitoring and Research Advisor.

Chief of Party (COP) – The COP is responsible for leading the technical assistance and other deliverables of the project. S/he is responsible for project inputs, program strategy, external representation and coordination with project counterparts, USAID, DOH, other donors, and stakeholders. The COP is responsible for compliance with the Agreement provisions and the oversight of project activities to meet the stated objectives of the project. The COP is responsible for the overall technical direction of the project, technical guidance to consultants, mentoring younger associates, and direct contacts with senior government officials. S/he identifies suitable partners and sub-recipients and negotiates with them on the parameters of their sub-grants. The COP must meet the following minimum requirements:

- Advanced degree (Ph.D. level) in economics, finance, medicine (M.D.), public health, education, management, public administration, or other fields related to the concerns of the project;
- At least 10 years of experience in managing a project of similar or related nature, size, and complexity;
- Experienced in managing a policy research, capacity building, or advocacy project in health or the social sectors;
- Demonstrated understanding of the challenges and opportunities of working with policy stakeholders, researchers and consultants, and training providers; and
- Demonstrated experience working with national government counterparts, donor groups, civil society partners, and local governments.

Deputy Chief of Party (DCOP) – The DCOP is responsible for managing key technical assistance and other deliverables of the project. S/he will identify suitable consultants and researchers, take the lead in formulating scopes of work, ensure that technical deliverables are up to date and of acceptable quality, and develop a peer review process. (The peer review process is a standard requirement for the review of research outputs.) S/he will represent the COP in times when s/he cannot be present. The DCOP must meet the following minimum requirements:

- Advanced degree (at least Masters level) in social sciences, medicine (M.D.), public health, education, management, public administration, or other fields related to the concerns of the project;
- At least 7 years of experience in a project of similar or related nature, size, and complexity;
- Preferably experienced in managing a policy research, capacity building, or advocacy project in health or the social sectors;
- Demonstrated understanding of the challenges and opportunities of working with policy stakeholders, researchers and consultants, and training providers; and
- Demonstrated experience working with national government counterparts, donor groups, civil society partners, and local governments.

Family Planning/Maternal and Child Health Advisor – The FP/MCH Advisor is responsible for facilitating and coordinating FP/MCH technical assistance of all projects with NCDPC and the Regional IFP/MNCHN projects. The proposed candidate must have, at the minimum, eight years of experience in implementing national, multi-disease health projects in developing or middle income countries. S/he must have at the minimum a Master's Degree in health or social sciences or a related advanced degree relevant to the field of public health. S/he should have substantial demonstrated experience in specific clinical and non-clinical service delivery in family planning and maternal and child health as well as quality improvement. S/he should have substantial experience in at least five of the following technical areas: natural family planning, long acting and permanent FP methods, community based distributions, EINC, ANC, EPI, nutrition, EBF. Professional proficiency in English is required.

Monitoring and Research Advisor – The Monitoring and Research Advisor is responsible for coordinating the planning and implementation of the KP Monitoring and Evaluation Platform of the HPDP2 and supporting the USAID-led inter-CA M&E Health TWG. The proposed candidate must have an advanced degree in a relevant discipline, and at least five years of experience in designing and implementing monitoring and evaluation, and assessments for complex programs in developing countries. S/he must have a firm command of the monitoring, evaluation and research issues with respect to improvements in TB and FP/MNCHN programs, and have supervised monitoring efforts of health programs. The

Monitoring and Research Advisor must have demonstrable analytical skills, strong writing and organizational skills for monitoring and reporting on program and study results. Professional proficiency in English is required.

Short-Term Technical Assistance (STTA) Contractors/Consultants

The Recipient must have a roster of key short-term consultants that it can tap as needed to provide technical assistance, research, workshop facilitation, high-level and technical representation, and other requisite skills called for by the project. These skills include, but are not limited to, the following: public health specialists, epidemiologists, demographers, health program managers, health technology experts; health economists, health financing specialists, health planners, costing and budget specialists, health insurance specialists, actuaries; program managers in FP, MNCHN, and TB; HR specialists, health facility management specialists, M&E specialists, IT specialists; business management specialists, public administration specialists, PPP transactions specialists; sociologists and behavioral science specialists, facilitators, community organizers, communicators and media practitioners; and monitoring and impact evaluation specialists.

c. Management Plan

The Management plan will describe the approach to managing technical and financial reporting, logistical support, and personnel management, including anticipated management arrangements between project partners and sub-awardees, if applicable. Approach shall be consistent with the technical approach to the project. It shall include a description of how the Applicant will coordinate with partners and other organizations, including other USAID projects, international organizations, development partners, and host country organizations. The management plan should also explain approaches for sharing program experiences and lessons learned across partners, countries, and other programs, to contribute to scaling-up proven approaches and building the evidence-base for health system strengthening.

This section should include the following:

- Management Plan
- Organizational Chart
- Organizational Chart Narrative
- Knowledge Management Plan
- Demonstration of how the applicant possesses the array of skills needed to effectively implement the program.
- Demonstrate the ability of the applicant (and proposed partners or sub-awardees) to work with multiple Government of the Philippines national and line agencies, and policy makers.

The Applicant will clearly describe the general approach to management, present an operational framework, and provide technical support and necessary oversight, a description of the role of key personnel specifying whether s/he will be location or region-specific or project office-based. The Applicant shall also clearly describe the role of and contractual arrangement with each consultant and/or sub-recipients, and the approach for managing of proposed consultants and/or sub-recipients. It should identify potential challenges in the management of the project and recommend ways to overcome those challenges. The Applicant should include a proposed organizational structure, and the rationale for the structure. The plan should also outline how the COP will liaise with the AOR,

USAID/Philippines staff, and reporting and management across consultant/s, sub- recipients (if any) and other partners. Special attention should be paid on how the collaborative relationships with key stakeholders will be managed.

The plan should explain how the Applicant will ensure a rapid – start-up and cost-effective operations. Specifically, the plan should include a section on mobilization plan, which demonstrates the Applicant’s ability to establish a national presence as an institution, including completion of all the necessary registration and documentation before or immediately following the award of the cooperative agreement. The expectation is that the project will be operational within 60 days of the award.

d. Past Performance

The applicant will submit a list of up to 3 current or completed grants/cooperative agreements and/or sub-awards within the last five years that are similar in size, scope, and complexity to the program described in this RFA. The list should be included as annex to the technical application and will not count against the page limitation.

Provide for each of the awards listed above a list of contact names, job titles, mailing addresses, phone numbers, e-mail addresses and a description of the performance to include:

- Scope of the program/work or complexity/diversity of tasks
- Primary location(s) of work
- Term of performance
- Skills/expertise required
- Dollar value, and
- Award/instrument type

USAID recommends that applicants alert the contacts that their names have been submitted and that they are authorized to provide information concerning the listed contracts and agreements if and when USAID requests it.

USAID reserves the right to verify the experience and past performance record of cited projects or other recent projects by reviewing other performance reports or to interview cited references or other persons knowledgeable of the applicant’s performance on a particular project. The US Government may check any or all cited references to verify supplied information and/or to assess reference satisfaction with performance. References may be asked to comment on items such as: (1) quality of product or service, including consistency in meetings goals and targets; (2) cost control, including forecasting costs as well as accuracy in financial reporting; (3) timeliness of performance, including adherence to schedules and other time-sensitive project conditions, and effectiveness of key personnel including appropriateness of personnel for the job and prompt and satisfactory changes in personnel when problems with clients were identified.

USAID will evaluate past performance of the applicant based on reference checks and relevant past performance information submitted and may consider other past performance information.

B. Cost Application

The cost application must be submitted under separate cover from the technical application. While there is no page limit for this portion, applicants are encouraged to be as concise as possible, but still provide the necessary details.

Below describes the documentation that applicants will submit to USAID.

1. Include a budget which provides in detail the total costs for implementation of the program your organization is proposing. It must be accompanied by a budget narrative by line item that explains in detail the basis for how the individual line item costs were derived. The budget must be submitted using Standard Form 424 series. See Sub-section IV.2 of this RFA. Budget should be expressed in US Dollars using the exchange rate of P41 = \$1.

The budget will include:

- a. Summary which includes, at a minimum, the total funding requested by each year of activity and the cost share contribution (e.g. in cash, in-kind), if any, that may be contributed by the applicant from its own resources or other non-U.S. government sources.
- b. Breakdown of all costs associated with the program according to object class category (see Annex E);
- c. Breakdown of all costs associated with the program by project component (see Annex F);
- d. Breakdown of all costs according to each partner organization or subcontractor/sub-grantee involved in the program;
- e. The costs associated with external, expatriate technical assistance and those associated with local in-country technical assistance;
- f. The breakdown of the financial and in-kind contributions of all organizations involved in implementing this cooperative agreement;
- g. Potential contributions of non-USAID or private donors to this cooperative agreement. At least 5% cost share of total USAID funding is required. Information regarding the proposed cost share should be indicated in the SF 424 and the Cost Matrix as indicated on those documents. The cost share should be discussed in the Budget Notes to the extent necessary to realistically assess the feasibility and applicability to the activity. Provide also details on how the cost sharing monetary values were estimated.

Cost share budget should clearly identify the resources the Applicant will contribute for the implementation of the program. Cost sharing must be verifiable from the Recipient's records, is subject to the requirements of USAID Standard Provision for Non-U.S. Nongovernmental Recipients entitled "Cost Sharing (Matching)" and can be audited.

- h. A procurement plan for commodities to be purchased under the cooperative agreement.

Note: If the applicant proposes expending more than \$300,000 of USAID funding during a single fiscal year, the applicant must include funds within the budget to contract a formal audit.

2. Copy of latest Negotiated Indirect Cost Rate Agreement (NICRA) if your organization has such an agreement with the U.S. Government;
3. Copies of organization's Personnel, Procurement, and Travel Policies and Procedures;
4. The cost application should also address the applicant's resources and capacity in the following areas in narrative form. 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 (only a brief discussion of this issue is required in the cost application since past performance is an evaluation factor – the Applicant may wish to discuss any notable issues regarding its record of performance that were not discussed in the technical application);

Note that 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 cooperative agreement under applicable laws and regulations
5. *Signed* Certifications, Assurances, and Other statements of the Recipient
 - Certification regarding Lobbying
 - Prohibition on Assistance to Drug Traffickers
 - Certification Regarding Terrorist Financing
 - Key Individual Certification Narcotics Offense and Drug Trafficking, when applicable
 - Participant Certification Narcotics Offenses and Drug Trafficking, when applicable
 - Survey On Ensuring Equal Opportunity For Applicants (see Annex D)
(<http://www2.ed.gov/fund/grant/apply/appforms/surveyeonensuringequalopp.doc>)
Note: This survey is not applicable under this RFA.
 - Other statements of the Recipient

Complete copies of these certifications, assurances, and other statements of the recipient can be found at <http://transition.usaid.gov/policy/ads/300/303sad.pdf> and as Annex D of this RFA.

The following section provides guidance on line item costs.

Salary and Wages - Direct salaries and wages should be proposed in accordance with the applicant's personnel policies. USAID requires that salary daily rates are calculated 260 working days per year. Budget narrative should explain how daily rates are calculated and whether based on established written policies of the organization or market surveys. Proposed salaries for non-US personnel must be reflected in Philippine currency, with US Dollar equivalent using an exchange rate of \$1 = P41.

Fringe Benefits - If the Applicant has a fringe benefit rate that has been approved by an agency of the U.S. Government, such rate should be used and evidence of its approval should be provided (e.g., copy of NICRA). If a fringe benefit rate has not been so approved, the applicant may propose a rate and explain how the rate was determined. If the latter is used, the narrative must include a detailed breakdown comprised of all items of fringe benefits (e.g., social security, PhilHealth, life insurance, medical insurance, 13th month pay, Pag-ibig, sick leave, vacation leave, etc.) and the costs of each, expressed in US dollars and as a percentage of salaries.

Travel and Transportation - The application should indicate the number of trips, domestic, regional, and international, airfare, land and sea transportation and the estimated costs. Specify the origin and destination for proposed trip, duration of travel, and number of individuals traveling. Per Diem should be based on the applicant's normal travel policies and will be assessed as part of cost effectiveness.

Other Direct Costs - This includes communications, report preparation costs, equipment, supplies, office rent, etc. The narrative should provide a breakdown and support for all other direct costs;

Equipment - Justify the need, type, the number and price of the items equipment to be procured.

Supplies - Justify the need and quantities of supply items related to the activity.

Seminars and Conferences - The application should indicate the subject, venue, and duration of proposed conferences and seminars and their relationship to the objectives of the program, along with estimated costs.

Training Costs - If there are any training costs to be charged to this Agreement, they must be clearly identified.

Foreign Government Delegations to International Conferences - Funds in this agreement may not be used to finance the travel, per diem, hotel expenses, meals, conference fees or other conference costs for any member of a foreign government's delegation to an international conference sponsored by a public international organization, except as provided in ADS Mandatory Reference — Guidance on Funding Foreign Government Delegations to International Conferences or as approved by the AOR (<http://www.info.usaid.gov/pubs/ads/300/refindx3.htm>).

Indirect Costs - The Applicant must support the proposed indirect cost rate by a Negotiated Indirect Cost Agreement (NICRA) for USAID to determine the reasonableness of the rates. Organizations that do not have a NICRA letter with the U.S. Government should treat all indirect costs as direct costs and provide a fully-developed and supported rationale for allocating or estimating how much of the indirect costs should be allocated to the program.

SECTION V – APPLICATION REVIEW INFORMATION

All applications received by the deadline will be reviewed for completeness and responsiveness to the RFA. Incomplete submissions risk not being considered in the review process. All applications which meet the eligibility requirements and conform to the application preparation and submission instructions will be evaluated.

The evaluation criteria below have been tailored to the requirements of this RFA. The applicants should note that these criteria serve to identify the significant matters that should be addressed in the applications, and to set standards against which all applications will be evaluated.

Numerical weighting indicates the relative order of importance of the technical criteria, to guide applicants in determining which areas require emphasis in the preparation of applications.

To facilitate review and evaluation of applications, applicants are requested to organize the narrative sections of their technical applications in the same order as the evaluation criteria set forth below.

TECHNICAL EVALUATION CRITERIA

The technical application should address how the Applicant intends to carry out the Program Description. A Technical Evaluation Committee, comprised of panel members from USAID and the Philippine Government, will review and rate the technical applications using the criteria below.

1. Technical Approach – 25 points

The technical approach should reflect the extent of the applicant's understanding of and ability to successfully perform the activities as described in the Program Description.

- extent to which the Applicant understands the purpose of the program as well as the key issues and challenges that must be addressed to accomplish program objectives
- extent to which the application proposes a rational, effective and sustainable organizational framework for Component One of the project.
- extent to which the application demonstrates a clear, concise, effective and compelling technical approach to accomplish program purposes, objectives and expected results under Component Two of the project
- appropriateness of the technical approach and interventions to achieve the objectives and goals of the program, including gender issues in a meaningful way and sustainability
- extent to which gender concerns will be integrated into the project cycle and its compliance with the requirements of the USAID Gender Policy (including the adoption of appropriate gender indicators) and the checklists provided under the Harmonized Gender and Development Guidelines.
- soundness, clarity and appropriateness of the draft PMP/M&E. The monitoring methods are clear and resources are available to support monitoring and reporting.

2. Key Personnel and Staffing – 40 points

Proposed personnel (both key personnel and other project staff) must demonstrate relevant expertise and experience in managing and implementing similar projects. The Applicant must also demonstrate access to appropriate personnel with technical experience and expert qualifications in all the programmatic areas outlined in the Program Description. Project personnel must demonstrate sector specific experience/capability in the proposed activities and appropriate knowledge of the targeted areas and stakeholders. Other factors include:

- Qualifications/experience and favorable references of the proposed Chief of Party
- Qualifications/experience and favorable references of the other key personnel and long-term personnel
- Qualifications of Short-term Technical Assistance (STTA)

3. Management Plan – 20 points

Management Approaches will be evaluated as part of overall Technical Soundness. The evaluation will be based upon the following:

- Clarity of meaningful organizational linkages:
 - To parent organization(s);
 - Among organizations, where teaming is proposed; or
 - With Alliance partners, in the case of Global Development Alliances.
- Clear lines of responsibility and authority:
 - Of each program team member;
 - Between program members and parent organization(s); and
 - Among organizations, where teaming is proposed.
- Appropriateness of the organizational structure in relation to result to be achieved.
- Quality of knowledge management plan

4. Past Performance – 15 points

Applicant's past performance information can serve as an indicator of the quality of its future performance. USAID/Philippines may use performance information obtained from other than the sources identified by the Applicant. USAID/Philippines will also utilize existing Agency databases, as relevant. The Applicant's performance information will be evaluated according to the following criteria: (1) Quality of product or service, including consistency in meeting goals and targets; (2) Cost control, including forecasting costs as well as accuracy in financial reporting; (3) Timeliness of performance, including adherence to schedules and other time-sensitive project conditions, and effectiveness of management to make prompt decisions and ensure efficient completion of tasks; (4) Customer satisfaction with performance, including end user or beneficiary wherever possible; and (5) Effectiveness of key personnel, including appropriateness of personnel for the job and prompt and satisfactory changes in personnel when problems with clients were identified.

Total Technical Evaluation Criteria

100 Points

COST EVALUATION

Cost applications will be evaluated separately by the Agreement Officer. For the purpose of this RFA, technical considerations are more important than cost. Cost has not been assigned a weight and will not be scored. However, the applicant's proposed costs will be analyzed for cost realism, reasonableness, completeness, effectiveness, allowability, and allocability.

BRANDING STRATEGY AND MARKING PLAN

It is a Federal statutory and regulatory requirement (see Section 641, Foreign Assistance Act of 1961, as amended, and 22 CFR 226.91) that all overseas programs, projects, activities, public communications, and commodities that USAID partially or fully funds under an assistance award or sub-award must be appropriately marked with the USAID identity. Under 22 CFR 226.91, USAID requires the submission of a Branding Strategy and a Marking Plan by the "apparently successful applicant." The apparently successful applicant's proposed Marking Plan may include a request for approval of one or more exceptions to the marking requirements in 22 CFR 226.91. The Agreement Officer evaluates the apparently successful applicant's Branding Strategy and Marking Plan (including any requests for exceptions) for approval, consistent with the provisions "Branding Strategy," "Marking Plan," and "Marking of USAID-funded Assistance Awards" contained in AAPD 05-11, 22 CFR 226.91, and ADS 320.

Failure to submit or negotiate a Branding Strategy and Marking Plan will make the apparent successful applicant ineligible for award.

PRE-AWARD SURVEY RESPONSIBILITY DETERMINATION

The selection of an application for award based on the application's technical merits and cost effectiveness and realism does not guarantee the award. The Agreement Officer will make the final determination on the award, and must be fully satisfied that the selected applicant has the capacity to adequately perform on the award in accordance with the principles established by USAID and the Office of Management and Budget (OMB).

In order for the Agreement Officer to make a final determination, a pre-award survey will be performed to determine responsibility of the selected applicant. A positive responsibility determination means that the applicant possesses or has the ability to obtain the necessary management competence to plan and carry out the assistance program to be funded, and that the applicant will practice mutually agreed upon methods of accountability for funds and other assets provided by USAID.

The selected applicant may be required to submit the following information:

- Copies of audited financial statements for the last three years, which a Certified Public Accountant or other auditor satisfactory to USAID has performed;
- Projected budget, cash flow, and organization charts; and
- Copies of applicable policies and procedures (e.g., accounting, purchasing, property management, personnel).

AWARD

The Agreement Officer has the legal responsibility for the award. He/she makes the final selection and makes the award.

For this RFA, technical application merits are considered significantly more important than cost relative to deciding which applicant might best perform the work. Cost realism and reasonableness will however be important criteria and may be the determining factor in the event that the applications receiving the highest ratings are closely ranked. After the final evaluation of the application and a positive responsibility determination, the Agreement Officer will make the award to the selected applicant.

SECTION VI – AWARD AND ADMINISTRATION INFORMATION

1. NOTIFICATION TO APPLICANTS

Following the completion of the technical and cost evaluation of all applications submitted in response to this RFA and responsibility determination, USAID will make an award to the applicant who represents the best overall value to the US Government. The successful applicant will receive written notification in the form of the award document signed by the Agreement Officer. The notice will be provided electronically to the applicant's point of contact listed in the application. Notification will also be made electronically to unsuccessful applicants pursuant to ADS 303.3.7.1.b.

USAID does not intend to provide formal debriefings for unsuccessful applicants but retains the right to consider informal briefings for said applicants following award.

2. STANDARD PROVISIONS AND DEVIATIONS

Currently, USAID does not anticipate any deviations from the mandatory or applicable the standard provisions applicable for this award. The standard provisions to be used will be Standard Provisions for Non-U.S. Nongovernmental Recipients. (<http://www.usaid.gov/policy/ads/300/303mab.pdf>)

3. REPORTING REQUIREMENTS

The following reporting requirements will be included in the Cooperative Agreement to be issued as a result of this RFA: (a) Quarterly Financial Reporting, (b) Annual Implementation/Work Plan, (c) Program Monitoring Plan/Monitoring and Evaluation Plan, (d) Quarterly Progress Reports, (e) Annual Performance Reports, (f) Final Report.

1. Financial Reporting

- a. The Recipient must submit, on a quarterly basis, an original copy of the Federal Financial Report (SF-425) to the Controller (aidmnlrfsc@usaid.gov), with copy each to the Agreement Officer (aidmnlorp@usaid.gov) and to the Agreement Officer's Representative.

Electronic copies of SF-425 and instructions for using it can be found at:

http://www.whitehouse.gov/omb/grants/standard_forms/ff_report.pdf

<http://www.forms.gov/bgfPortal/docDetails.do?dId=15149>

http://www.whitehouse.gov/omb/grants/standard_forms/ffr_instructions.pdf

- b. The Recipient must submit an original copy of all final financial reports to the Controller (aidmnlrfsc@usaid.gov), with copy each to the Agreement Officer (aidmnlorp@usaid.gov) and to the Agreement Officer's Representative.
- c. The Recipient shall account for expenditures of activities carried out under this Agreement to ensure funds are used for their intended purpose.

2. Program Reporting

- a. Annual Implementation/Work Plan

The Recipient shall submit a draft Annual Implementation/Work Plan delineated by quarterly periods, of planned activities on or before 45 days from effective date of this Agreement. Subsequent annual implementation/work plans should be submitted one month prior to the start of the next Cooperative Agreement year to the AOR. USAID will review the draft Implementation/Work Plan and provide comments and/or suggestions within thirty (30) days of receipt. The Recipient shall then provide two (2) copies of the final Implementation/Work Plan to the AOR for approval not later than fifteen (15) days after receipt of USAID's comments and/or suggestions.

The Recipient shall meet with the AOR on a regular basis to brief USAID on the progress made and any changes to the program.

Annual Implementation/Work Plans and changes/revisions thereto must be within the scope of the Agreement's Program Description. Work Plans and changes/revisions thereto shall describe activities to be conducted during the period at a greater level of detail than in the Program Description, but shall not serve to change the Program Description in any way. Therefore, all Implementation/Work Plans and changes/revisions thereto shall cross-reference the applicable section(s) in the Program Description. The Program Description shall take precedence over the Work Plans and any changes/revisions thereto in the event of any conflicts or inconsistencies between the Program Description and the Implementation/Work Plan.

As stated herein and notwithstanding any other provisions of the Cooperative Agreement, the Agreement Officer shall be the only individual on behalf of USAID, authorized to modify any terms or provisions of this Cooperative Agreement.

The Recipient shall submit to the AOR of any significant changes/revisions to the Implementation/Work Plan for approval prior to implementing or undertaking such changes/revisions.

b. Performance Monitoring Plan/Monitoring and Evaluation Plan

The Recipient shall submit two (2) copies of a draft Performance Monitoring Plan/Monitoring and Evaluation (M&E) Plan to the AOR within three (3) months of the effective date of this Agreement. The PMP/M&E Plan shall cover the entire period of the Agreement. It shall include, but not necessarily be limited to, the following:

- The results to be achieved by the program;
- The indicators to be used to measure achievement of the results;
- The method of data collection to be used to obtain the indicator data; and
- The targets for each indicator by year.

USAID will review the draft PMP/M&E Plan and provide comments/suggestions within thirty (30) days of receipt. The Recipient shall then submit copies of the final PMP/M&E Plan to

the AOR for approval not later than fifteen (15) days from receipt of USAID's comments/suggestions.

The Recipient shall provide ongoing monitoring of the effectiveness of the implementation of the program and shall develop an information and reporting system tied to the Annual Implementation/Work Plan to measure progress towards attaining milestones (results) as well as to collect information on agreed-upon indicators.

c. Program Performance Reports

The Recipient shall submit quarterly program performance reports during the duration of the Agreement. The original be submitted to the AOR. These reports will be submitted within thirty (30) days following the end of the reporting period, and shall briefly present the following information:

- A comparison of actual accomplishments with the goals established for the period in the approved implementation/workplan. If the output of the program can be readily quantified, such quantitative data should be related to cost data for computation of unit costs.
- Reasons why activities were delayed or established goals were not met, if applicable.
- Information on management issues, including administrative problems or problems with collaborators or implementing partners.
- Anticipated future problems, delays, or conditions or constraints that may adversely impact implementation of the program.
- Information on security issues, especially as these affect program integrity and safety of cooperating and implementing partners.
- The status of finances and expenditures and, when appropriate, analysis and explanation of cost overruns or high unit costs.
- Information on new opportunities for program expansion.
- Other pertinent information.

The quarterly performance reports, regardless of the date that this Agreement is awarded, in order to conform with USAID's fiscal year and this award's own reporting requirements shall cover the periods: October-December, January – March, April – June. However, in lieu of a fourth quarterly performance report for the period July - September, an annual report may be submitted.

The quarterly performance reports shall be submitted within thirty (30) days following the end of the reporting period.

d. Annual Performance Reports

The Recipient shall submit an Annual Performance Report at the end of each annual performance period (ending in September) in lieu of the fourth Quarterly Performance Report. Annual Performance Reports shall be submitted within forty-five (45) days of the end of the reporting period. One original hard copy and one electronic copy of the Annual Performance report will be submitted to the AOR, one hard copy to the Agreement Officer, and one electronic copy will be submitted to:

USAID Development Experience Clearinghouse (DEC)
8403 Colesville Road, Suite 210, Silver Spring, MD 20910
E-mail: docssubmit@dec.cdie.org
Fax : (301) 558-7787
URL : <http://www.dec.org/index.cfm?fuseaction=docssubmit.home>.

Annual Performance Reports shall contain the following information:

- A comparison of actual accomplishments against goals established for the period in the Annual Implementation/Work Plan and Performance Monitoring and Evaluation Plan.
- Reasons why activities were delayed or established goals were not met, if applicable.
- Cumulative quantitative Monitoring and Evaluation data, including information on progress towards targets, and explanations of any issues related to data quality.
- Information on the status of finances, including expenditure data based on the budget, and accruals; and, when appropriate, analysis and explanation of cost overruns or high unit costs.
- Information on management issues, including administrative problems or problems with collaborators or implementing partners.
- Anticipated future problems, delays or conditions that may adversely impact implementation of the program.
- Information on security issues, especially as these affect program integrity and safety of cooperating and implementing partners.
- Information on new opportunities for program expansion.
- Lessons learned and success stories.
- Information on major challenges and constraints faced during the performance period.
- Prospects for the next year's performance.
- Other pertinent information.

e. Final Report

Within ninety (90) days following the estimated completion date of this Agreement, the Recipient must submit the original Final Report to the AOR and one (1) copy to the Agreement officer. In addition, one (1) copy shall be submitted to the Bureau for Program Policy Coordination/Center for Development Information and Evaluation (PPC/CDIE) at the following address:

Development Experience Clearinghouse (DEC)
8403 Colesville Road, Suite 210
Silver Spring, MD 20910.
E-mail: docssubmit@dec.cdie.org
Fax: (301) 558-7787
URL: <http://www.dec.org/index.cfm?fuseaction=docssubmit.home>

The Final Report shall include the information described in 22 CFR 226.51(d) covering the full period of this Cooperative Agreement.

4. BRANDING STRATEGY AND MARKING PLAN

a. Branding Strategy

Within forty-five (45) calendar days after the effective date of this award, the Recipient will submit to the Agreement Officer, through the AOR, its Branding Strategy for final approval. The Branding Strategy shall describe how the program is to be named and positioned, how it will be promoted and communicated to beneficiaries and cooperating country citizens, and shall identify all donors, if any, and how they will be acknowledged. (See <http://www.usaid.gov/policy/ads/300/320.pdf>)

b. Marking Plan

Within forty-five (45) calendar days after the effective date of this award, the Recipient will submit to the Agreement Officer, through the AOR, its Marking Plan for final approval. The plan will describe how the USAID Identity will be used in the project. Failure to submit or negotiate a Marking Plan within the time specified by the Agreement Officer is sufficient reason to terminate the award.

5. ENVIRONMENTAL COMPLIANCE

- a. The Foreign Assistance Act of 1961, as amended, Section 117, requires that the impact of USAID's activities on the environment be considered and that USAID include environmental sustainability as a central consideration in designing and carrying out its development programs. This mandate is codified in Federal Regulations (22 CFR 216) and in USAID's Automated Directives System (ADS) Parts 201.5.10g and 204 (<http://www.usaid.gov/policy/ads/200/>) which in part, require that the potential environmental impacts of USAID-financed activities are identified prior to a final decision to proceed and that appropriate environmental safeguards are adopted for all activities. Recipient's environmental compliance obligations under these

regulations and procedures are specified in the following paragraphs of this cooperative agreement.

- b. In addition, the Recipient must comply with host country environmental regulations unless otherwise directed in writing by USAID. In case of conflict between host country and USAID regulations, the latter shall govern.
- c. No activity funded under this cooperative agreement will be implemented unless an environmental threshold determination, as defined by 22 CFR 216, has been reached for that activity, as documented in a Request for Categorical Exclusion (RCE), Initial Environmental Examination (IEE), or Environmental Assessment (EA) duly signed by the Bureau Environmental Officer (BEO). (Hereinafter, such documents are described as "approved Regulation 216 environmental documentation.")
- d. Regulation 216 documentation for this cooperative agreement, under activity name The Health Policy Project, is Categorical Exclusion as documented in IEE-RCE Asia 12-32 approved by the Bureau Environmental Officer on February 13, 2012. This indicates that no environmental impacts are expected as a result of HPDP2 project activities. However, the Recipient must ensure that health training curriculum, as appropriate, covers best management practices concerning medical waste management and infection prevention that are consistent with current Department of Health protocols, and USAID guidelines.
- e. As part of its initial Implementation/Work Plan, and all Annual Implementation/Work Plans thereafter, the Recipient in collaboration with the AOR and Mission Environmental Officer, shall review all ongoing and planned activities under the cooperative agreement to determine if they are within the scope of the approved Regulation 216 environmental documentation.
- f. If the Recipient plans any new activities outside the scope of the approved Regulation 216 environmental documentation, it shall prepare an amendment to the documentation for USAID review and approval. No such new activities shall be undertaken prior to receiving written USAID approval of environmental documentation amendments.
- g. Any ongoing activities found to be outside the scope of the approved Regulation 216 environmental documentation shall be halted until an amendment to the documentation is submitted and written approval is received from USAID.

SECTION VII – AGENCY CONTACTS

The Agreement Officer for the resultant award is:

Sallie H. McElrath
Agreement Officer
USAID/Philippines
8th Floor, PNB Financial Center
Pres. Diosdado Macapagal Boulevard
Pasay City, Philippines
Email: smcelrath@usaid.gov
Tel.: +632 5529921

The Acquisition and Assistance Specialist is:

Grace M. Laspiñas
Acquisition and Assistance Specialist
USAID/Philippines
8th Floor, PNB Financial Center
Pres. Diosdado Macapagal Boulevard
Pasay City, Philippines
Email: glaspinas@usaid.gov
Tel.: +632 5529929

SECTION VIII – ANNEXES

- Annex A Results Framework
- Annex B Pre-application Conference
- Annex C Standard Form 424 series
 - SF-424, Application for Federal Assistance
 - SF-424A, Budget Information – Non-construction Programs
 - SF-424B, Assurances – Non-construction Programs
- Annex D Certifications, Assurances, and other Statements of the Recipient
- Annex E Sample Budget by Object Class Category
- Annex F Cost Breakdown by Project Component

RESULTS FRAMEWORK

Development Objective 1 – Intermediate Result 1.4 Family Health Improved 2012-2017

USAID shall contribute to the achievement of the following impact indicators of the Government of the Philippines (Source: Philippine Development Plan, 2011-2016 unless a different source is specified)

1. Reduce total fertility rate from 3.3 in 2008 to 2.4- 2.96 in 2015
2. Increase contraceptive prevalence rate from 51% in 2008 to 63 in 2015
3. Increase modern contraceptive prevalence rate from 34% in 2008 to 67% in 2016 (Source: NOH, 2011-2016)
4. Reduce pregnancy rate among adolescents from 9.9% in 2008 to 4% in 2016 (Source: NOH, 2011-2016)
5. Reduce under five mortality rate from 34 per 1,000 live births in 2008 to 25.5 in 2016
6. Reduce maternal mortality ratio from 94-163 per 100,000 live births in 2010 to 50 in 2016
7. Increase percent of births attended by skilled birth attendants from 62% in 2008 to 90% in 2016
8. Increase percent of births delivered in health facilities from 44% in 2008 to 90% in 2016
9. Increase percent of infants exclusively breastfed in the first six months from 23% in 2008 to 70% in 2016 (Source: DOH)
10. Increase percent of diarrhea cases among under-five children given ORT from 59% in 2008 to 100% in 2016 (Source: NOH: 2011-2016)
11. Reduce prevalence of underweight children 0-5 years old from 20.6% in 2008 to 12.7% in 2016
12. Increase percent of 6-59 months children given Vitamin A from 76% in 2008 to at least 90% per year from 2011-2016 (Source: NOH, 2011-2016)
13. Increase percent of fully immunized children (FIC) from 80% in 2008 to 95% in 2016.
14. Reduce TB prevalence per 100,000 population from 502 in 2010 to 375 in 2016
15. Increase TB cure rate from 82% in 2011 to 85% in 2016
16. Increase TB detection rate, all forms, from 73% in 2011 to 85% in 2016
17. Maintain HIV prevalence among MARP at <1% in 2016 (Source: NOH, 2011-2016)

The core outcome indicators of the new USAID strategy for 2012-2017

1. Increase modern CPR at national level from 37% in 2011 to 43% in 2017 (Note: NOH target is 67% by 2016)
2. Reduce unmet need for FP at national level from 19.3% in 2011 to 14% in 2017
3. Reduce unmet need for spacing at national level from 11% in 2011 to 7% in 2017
4. Reduce unmet need for limiting at national level from 9% in 2011 to 7% in 2017
5. Increase modern CPR among adolescents (15-19 years old) from 20% in 2011 to 26% in 2017 (Note: NOH indicator is to reduce pregnancy rate among adolescents from 9.9% in 2008 to 4% by 2016)
6. Increase percent of deliveries with skilled birth attendants in USG assisted programs from 72% in 2011 to 78% in 2017 (Note: NOH target is 90% by 2016)
7. Increase percent of facility-based deliveries in USG-assisted sites from 54% in 2011 to 64% in 2017 (Note: NOH target is 90% in 2016)
8. Increase percent of pregnant women receiving at least four ANC in USG-assisted sites from 77% in 2011 to 90% in 2017
9. Increase percent of infants exclusively breastfed in the first six months in USG-assisted sites from 26% in 2011 to 40% in 2017. (NOH target is 10% increase per year from a baseline of 60% in 2010 taken from the NOH Midline Survey)
10. Increase percent of fully immunized children (FIC) in USG-assisted sites from 84% in 2011 to 90% in 2017.
11. Increase percent of children age 6-59 months who receive Vitamin A supplements in the last six months in USG-assisted sites from 81% in 2011 to 90% in 2017.
12. Increase percent of under-five children with diarrhea treated with ORT in USG-assisted sites from 52% in 2011 to 70% in 2017 (Note: NOH target is 100%)
13. Increase TB cure rate in USG-assisted sites from 83% in 2010 to 90% in 2017
14. Increase TB case detection rate in USG-assisted sites, all forms, from 73% in 2010 to 85% in 2017
15. Reduce TB prevalence in USG-assisted sites from 520 per 100,000 population in 2010 to 495 in 2017
16. Increase TB case notification rate in USG-assisted sites from 98/100,000 population in 2010 to 110/100,000 population in 2017
17. Increase treatment success rate of MDRTB cases from 58% in 2010 to 70% in 2017.
18. Maintain HIV prevalence among MSMs at <10% in 2017 in USG-assisted sites
19. Maintain HIV prevalence among PWIDs at <50% in 2017 in USG-assisted sites
20. Increase condom use among MSM in USG-assisted sites from 22% in 2007 to 32% in 2017.
21. Reduce percentage of population that views gender-based violence (GBV) as acceptable after participating in or being exposed to GVB programming from 14% in 2008 to 5% in 2017.



USAID
FROM THE AMERICAN PEOPLE

PHILIPPINES

Annex B

**Pre-Application Conference
Request for Applications (RFA No. RFA-492-12-000030): Health Policy Development Project 2**

USAID will hold a pre-application conference for the above RFA. All potential applicants are welcome to attend.

The purpose of the pre-application conference is to ensure an understanding of the RFA. It will include a short presentation of the RFA's program description which is intended for informational purposes only. At the conclusion of the presentation, attendees will have the opportunity to ask questions about the RFA.

The pre-application conference will be held on July 12, 2012, 2:00 pm at the Main Conference Room, USAID/Philippines, 8th Floor, PNB Financial Center, Pres. Diosdado Macapagal Boulevard, Pasay City.

Potential applicants who are interested to attend are requested to confirm their attendance by sending an email to Grace M. Laspiñas at manilahpdp2@usaid.gov by July 10, 2012. The email should include the name of the organization and the name(s) of the person(s) who will attend. Given concerns with space availability, attendance is limited to two persons per organization.

Following the pre-application conference, USAID/Philippines will make the following publicly available on Grants.gov website (<http://www.grants.gov/>): the presentation, all questions and answers from the pre-application conference including answers to questions submitted in writing in response to the RFA, and/or if necessary, an amendment to the RFA. Oral answers from any USAID source during the pre-application conference will not be binding on the US Government.

Application for Federal Assistance SF-424	
*1. Type of Submission: <input type="checkbox"/> Preapplication <input checked="" type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application	*2. Type of Application * If Revision, select appropriate letter(s) <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation *Other (Specify) _____ <input type="checkbox"/> Revision
3. Date Received:	4. Applicant Identifier: Not Applicable
5a. Federal Entity Identifier: Not Applicable	*5b. Federal Award Identifier:
State Use Only:	
6. Date Received by State: Not Applicable	7. State Application Identifier: Not Applicable
8. APPLICANT INFORMATION:	
*a. Legal Name:	
*b. Employer/Taxpayer Identification Number (EIN/TIN):	*c. Organizational DUNS:
d. Address:	
*Street 1: _____	
Street 2: _____	
*City: _____	
County: _____	
*State: _____	
Province: _____	
*Country: _____	
*Zip / Postal Code _____	
e. Organizational Unit:	
Department Name:	Division Name:
f. Name and contact information of person to be contacted on matters involving this application:	
Prefix: _____	*First Name: _____
Middle Name: _____	
*Last Name: _____	
Suffix: _____	
Title:	
Organizational Affiliation:	
*Telephone Number:	Fax Number:
*Email:	

Application for Federal Assistance SF-424***9. Type of Applicant 1: Select Applicant Type:****Non-domestic (Non-US) entity**

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

*Other (Specify)

10 Name of Federal Agency:*United States Agency for International Development (USAID)****11. Catalog of Federal Domestic Assistance Number:****98.001**

CFDA Title:

USAID Foreign Assistance for Programs Overseas***12 Funding Opportunity Number:****RFA-492-12-000030**

*Title:

Heath Policy Development Project 2**13. Competition Identification Number:****Not Applicable**Title:
_____**14. Areas Affected by Project (Cities, Counties, States, etc.):*****15. Descriptive Title of Applicant's Project:**

Application for Federal Assistance SF-424

16. Congressional Districts Of:

*a. Applicant: **Not Applicable**

*b. Program/Project: **00-000**

17. Proposed Project:

*a. Start Date:

*b. End Date:

18. Estimated Funding (\$):

- *a. Federal _____
- *b. Applicant _____
- *c. State _____
- *d. Local _____
- *e. Other _____
- *f. Program Income _____
- *g. TOTAL _____

***19. Is Application Subject to Review By State Under Executive Order 12372 Process? Not Applicable**

- a. This application was made available to the State under the Executive Order 12372 Process for review on _____
- b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- c. Program is not covered by E. O. 12372

***20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)**

- Yes No

21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U. S. Code, Title 218, Section 1001)

** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions

Authorized Representative:

Prefix: _____ *First Name: _____
 Middle Name: _____
 *Last Name: _____
 Suffix: _____

*Title:

*Telephone Number:

Fax Number:

* Email:

*Signature of Authorized Representative:

*Date Signed:

Application for Federal Assistance SF-424

***Applicant Federal Debt Delinquency Explanation**

The following should contain an explanation if the Applicant organization is delinquent of any Federal Debt.

INSTRUCTIONS FOR THE SF-424

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This is a standard form (including the continuation sheet) required for use as a cover sheet for submission of preapplications and applications and related information under discretionary programs. Some of the items are required and some are optional at the discretion of the applicant or the Federal agency (agency). Required items are identified with an asterisk on the form and are specified in the instructions below. In addition to the instructions provided below, applicants must consult agency instructions to determine specific requirements.

Item	Entry:	Item	Entry:
1.	Type of Submission: (Required): Select one type of submission in accordance with agency instructions. <ul style="list-style-type: none"> • Preapplication • Application • Changed/Corrected Application – If requested by the agency, check if this submission is to change or correct a previously submitted application. Unless requested by the agency, applicants may not use this to submit changes after the closing date. 	10.	Name Of Federal Agency: (Required) Enter the name of the Federal agency from which assistance is being requested with this application.
		11.	Catalog Of Federal Domestic Assistance Number/Title: Enter the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested, as found in the program announcement, if applicable.
2.	Type of Application: (Required) Select one type of application in accordance with agency instructions. <ul style="list-style-type: none"> • New – An application that is being submitted to an agency for the first time. • Continuation - An extension for an additional funding/budget period for a project with a projected completion date. This can include renewals. • Revision - Any change in the Federal Government's financial obligation or contingent liability from an existing obligation. If a revision, enter the appropriate letter(s). More than one may be selected. If "Other" is selected, please specify in text box provided. <ul style="list-style-type: none"> A. Increase Award B. Decrease Award C. Increase Duration D. Decrease Duration E. Other (specify) 	12.	Funding Opportunity Number/Title: (Required) Enter the Funding Opportunity Number and title of the opportunity under which assistance is requested, as found in the program announcement.
		13.	Competition Identification Number/Title: Enter the Competition Identification Number and title of the competition under which assistance is requested, if applicable.
		14.	Areas Affected By Project: List the areas or entities using the categories (e.g., cities, counties, states, etc.) specified in agency instructions. Use the continuation sheet to enter additional areas, if needed.
3.	Date Received: Leave this field blank. This date will be assigned by the Federal agency.	15.	Descriptive Title of Applicant's Project: (Required) Enter a brief descriptive title of the project. If appropriate, attach a map showing project location (e.g., construction or real property projects). For preapplications, attach a summary description of the project.
4.	Applicant Identifier: Enter the entity identifier assigned by the Federal agency, if any, or applicant's control number, if applicable.	16.	Congressional Districts Of: (Required) 16a. Enter the applicant's Congressional District, and 16b. Enter all District(s) affected by the program or project. Enter in the format: 2 characters State Abbreviation – 3 characters District Number, e.g., CA-005 for California 5 th district, CA-012 for California 12 th district, NC-103 for North Carolina's 103 rd district. <ul style="list-style-type: none"> • If all congressional districts in a state are affected, enter "all" for the district number, e.g., MD-all for all congressional districts in Maryland. • If nationwide, i.e. all districts within all states are affected, enter US-all. • If the program/project is outside the US, enter 00-000.
5a.	Federal Entity Identifier: Enter the number assigned to your organization by the Federal Agency, if any.		
5b.	Federal Award Identifier: For new applications leave blank. For a continuation or revision to an existing award, enter the previously assigned Federal award identifier number. If a changed/corrected application, enter the Federal Identifier in accordance with agency instructions.		
6.	Date Received by State: Leave this field blank. This date will be assigned by the State, if applicable.		
7.	State Application Identifier: Leave this field blank. This identifier will be assigned by the State, if applicable.		
8.	Applicant Information: Enter the following in accordance with agency instructions: <ul style="list-style-type: none"> a. Legal Name: (Required): Enter the legal name of applicant that will undertake the assistance activity. This is the name that the organization has registered with the Central Contractor Registry. Information on registering with CCR may be obtained by visiting the Grants.gov website. b. Employer/Taxpayer Number (EIN/TIN): (Required): Enter the Employer or Taxpayer Identification Number (EIN or TIN) as assigned by the Internal Revenue Service. If your organization is not in the US, enter 44-4444444. c. Organizational DUNS: (Required) Enter the organization's DUNS or DUNS+4 number received from Dun and Bradstreet. Information on obtaining a DUNS number may be obtained by visiting the Grants.gov website. d. Address: Enter the complete address as follows: Street address (Line 1 required), City (Required), County, State (Required, if country is US), Province, Country (Required), Zip/Postal Code (Required, if country is US). e. Organizational Unit: Enter the name of the primary organizational unit (and department or division, if applicable) that will undertake the 	17.	Proposed Project Start and End Dates: (Required) Enter the proposed start date and end date of the project.
		18.	Estimated Funding: (Required) Enter the amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines, as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses.
		19.	Is Application Subject to Review by State Under Executive Order 12372 Process? Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the

	<p>assistance activity, if applicable.</p> <p>f. Name and contact information of person to be contacted on matters involving this application: Enter the name (First and last name required), organizational affiliation (if affiliated with an organization other than the applicant organization), telephone number (Required), fax number, and email address (Required) of the person to contact on matters related to this application.</p>		<p>State intergovernmental review process. Select the appropriate box. If "a." is selected, enter the date the application was submitted to the State</p>		
20.			<p>Is the Applicant Delinquent on any Federal Debt? (Required) Select the appropriate box. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes.</p> <p>If yes, include an explanation on the continuation sheet.</p>		
9.	<p>Type of Applicant: (Required) Select up to three applicant type(s) in accordance with agency instructions.</p> <table border="0" data-bbox="154 420 844 997"> <tr> <td data-bbox="154 420 503 997"> <p>A. State Government</p> <p>B. County Government</p> <p>C. City or Township Government</p> <p>D. Special District Government</p> <p>E. Regional Organization</p> <p>F. U.S. Territory or Possession</p> <p>G. Independent School District</p> <p>H. Public/State Controlled Institution of Higher Education</p> <p>I. Indian/Native American Tribal Government (Federally Recognized)</p> <p>J. Indian/Native American Tribal Government (Other than Federally Recognized)</p> <p>K. Indian/Native American Tribally Designated Organization</p> <p>L. Public/Indian Housing Authority</p> </td> <td data-bbox="503 420 844 997"> <p>M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>O. Private Institution of Higher Education</p> <p>P. Individual</p> <p>Q. For-Profit Organization (Other than Small Business)</p> <p>R. Small Business</p> <p>S. Hispanic-serving Institution</p> <p>T. Historically Black Colleges and Universities (HBCUs)</p> <p>U. Tribally Controlled Colleges and Universities (TCCUs)</p> <p>V. Alaska Native and Native Hawaiian Serving Institutions</p> <p>W. Non-domestic (non-US) Entity</p> <p>X. Other (specify)</p> </td> </tr> </table>	<p>A. State Government</p> <p>B. County Government</p> <p>C. City or Township Government</p> <p>D. Special District Government</p> <p>E. Regional Organization</p> <p>F. U.S. Territory or Possession</p> <p>G. Independent School District</p> <p>H. Public/State Controlled Institution of Higher Education</p> <p>I. Indian/Native American Tribal Government (Federally Recognized)</p> <p>J. Indian/Native American Tribal Government (Other than Federally Recognized)</p> <p>K. Indian/Native American Tribally Designated Organization</p> <p>L. Public/Indian Housing Authority</p>	<p>M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>O. Private Institution of Higher Education</p> <p>P. Individual</p> <p>Q. For-Profit Organization (Other than Small Business)</p> <p>R. Small Business</p> <p>S. Hispanic-serving Institution</p> <p>T. Historically Black Colleges and Universities (HBCUs)</p> <p>U. Tribally Controlled Colleges and Universities (TCCUs)</p> <p>V. Alaska Native and Native Hawaiian Serving Institutions</p> <p>W. Non-domestic (non-US) Entity</p> <p>X. Other (specify)</p>	21.	<p>Authorized Representative: (Required) To be signed and dated by the authorized representative of the applicant organization. Enter the name (First and last name required) title (Required), telephone number (Required), fax number, and email address (Required) of the person authorized to sign for the applicant.</p> <p>A copy of the governing body's authorization for you to sign this application as the official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)</p>
<p>A. State Government</p> <p>B. County Government</p> <p>C. City or Township Government</p> <p>D. Special District Government</p> <p>E. Regional Organization</p> <p>F. U.S. Territory or Possession</p> <p>G. Independent School District</p> <p>H. Public/State Controlled Institution of Higher Education</p> <p>I. Indian/Native American Tribal Government (Federally Recognized)</p> <p>J. Indian/Native American Tribal Government (Other than Federally Recognized)</p> <p>K. Indian/Native American Tribally Designated Organization</p> <p>L. Public/Indian Housing Authority</p>	<p>M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>O. Private Institution of Higher Education</p> <p>P. Individual</p> <p>Q. For-Profit Organization (Other than Small Business)</p> <p>R. Small Business</p> <p>S. Hispanic-serving Institution</p> <p>T. Historically Black Colleges and Universities (HBCUs)</p> <p>U. Tribally Controlled Colleges and Universities (TCCUs)</p> <p>V. Alaska Native and Native Hawaiian Serving Institutions</p> <p>W. Non-domestic (non-US) Entity</p> <p>X. Other (specify)</p>				

BUDGET INFORMATION - Non-Construction Programs

OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1.		\$	\$	\$	\$	\$
2.						
3.						
4.						
5. Totals		\$	\$	\$	\$	\$

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
a. Personnel	\$	\$	\$	\$	\$
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges (sum of 6a-6h)					
j. Indirect Charges					
k. TOTALS (sum of 6i and 6j)	\$	\$	\$	\$	\$

7. Program Income	\$	\$	\$	\$	\$
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SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8.	\$	\$	\$	\$
9.				
10.				
11.				
12. TOTAL (sum of lines 8-11)	\$	\$	\$	\$

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$	\$	\$	\$	\$
14. Non-Federal					
15. TOTAL (sum of lines 13 and 14)	\$	\$	\$	\$	\$

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program	FUTURE FUNDING PERIODS (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16.	\$	\$	\$	\$
17.				
18.				
19.				
20. TOTAL (sum of lines 16-19)	\$	\$	\$	\$

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges:	22. Indirect Charges:
23. Remarks:	

INSTRUCTIONS FOR THE SF-424A

Public reporting burden for this collection of information is estimated to average 180 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0044), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

General Instructions

This form is designed so that application can be made for funds from one or more grant programs. In preparing the budget, adhere to any existing Federal grantor agency guidelines which prescribe how and whether budgeted amounts should be separately shown for different functions or activities within the program. For some programs, grantor agencies may require budgets to be separately shown by function or activity. For other programs, grantor agencies may require a breakdown by function or activity. Sections A, B, C, and D should include budget estimates for the whole project except when applying for assistance which requires Federal authorization in annual or other funding period increments. In the latter case, Sections A, B, C, and D should provide the budget for the first budget period (usually a year) and Section E should present the need for Federal assistance in the subsequent budget periods. All applications should contain a breakdown by the object class categories shown in Lines a-k of Section B.

Section A. Budget Summary Lines 1-4 Columns (a) and (b)

For applications pertaining to a *single* Federal grant program (Federal Domestic Assistance Catalog number) and *not requiring* a functional or activity breakdown, enter on Line 1 under Column (a) the Catalog program title and the Catalog number in Column (b).

For applications pertaining to a *single* program *requiring* budget amounts by multiple functions or activities, enter the name of each activity or function on each line in Column (a), and enter the Catalog number in Column (b). For applications pertaining to multiple programs where none of the programs require a breakdown by function or activity, enter the Catalog program title on each line in *Column* (a) and the respective Catalog number on each line in Column (b).

For applications pertaining to *multiple* programs where one or more programs *require* a breakdown by function or activity, prepare a separate sheet for each program requiring the breakdown. Additional sheets should be used when one form does not provide adequate space for all breakdown of data required. However, when more than one sheet is used, the first page should provide the summary totals by programs.

Lines 1-4, Columns (c) through (g)

For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year).

For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the Federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of amounts in Columns (e) and (f).

For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of Federal funds and enter in Column (f) the amount of the increase or decrease of non-Federal funds. In Column (g) enter the new total budgeted amount (Federal and non-Federal) which includes the total previous authorized budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of amounts in Columns (e) and (f).

Line 5 - Show the totals for all columns used.

Section B Budget Categories

In the column headings (1) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1-4, Column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each program, function or activity, fill in the total requirements for funds (both Federal and non-Federal) by object class categories.

Line 6a-i - Show the totals of Lines 6a to 6h in each column.

Line 6j - Show the amount of indirect cost.

Line 6k - Enter the total of amounts on Lines 6i and 6j. For all applications for new grants and continuation grants the total amount in column (5), Line 6k, should be the same as the total amount shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5.

Line 7 - Enter the estimated amount of income, if any, expected to be generated from this project. Do not add or subtract this amount from the total project amount, Show under the program

INSTRUCTIONS FOR THE SF-424A (continued)

narrative statement the nature and source of income. The estimated amount of program income may be considered by the Federal grantor agency in determining the total amount of the grant.

Section C. Non-Federal Resources

Lines 8-11 Enter amounts of non-Federal resources that will be used on the grant. If in-kind contributions are included, provide a brief explanation on a separate sheet.

Column (a) - Enter the program titles identical to Column (a), Section A. A breakdown by function or activity is not necessary.

Column (b) - Enter the contribution to be made by the applicant.

Column (c) - Enter the amount of the State's cash and in-kind contribution if the applicant is not a State or State agency. Applicants which are a State or State agencies should leave this column blank.

Column (d) - Enter the amount of cash and in-kind contributions to be made from all other sources.

Column (e) - Enter totals of Columns (b), (c), and (d).

Line 12 - Enter the total for each of Columns (b)-(e). The amount in Column (e) should be equal to the amount on Line 5, Column (f), Section A.

Section D. Forecasted Cash Needs

Line 13 - Enter the amount of cash needed by quarter from the grantor agency during the first year.

Line 14 - Enter the amount of cash from all other sources needed by quarter during the first year.

Line 15 - Enter the totals of amounts on Lines 13 and 14.

Section E. Budget Estimates of Federal Funds Needed for Balance of the Project

Lines 16-19 - Enter in Column (a) the same grant program titles shown in Column (a), Section A. A breakdown by function or activity is not necessary. For new applications and continuation grant applications, enter in the proper columns amounts of Federal funds which will be needed to complete the program or project over the succeeding funding periods (usually in years). This section need not be completed for revisions (amendments, changes, or supplements) to funds for the current year of existing grants.

If more than four lines are needed to list the program titles, submit additional schedules as necessary.

Line 20 - Enter the total for each of the Columns (b)-(e). When additional schedules are prepared for this Section, annotate accordingly and show the overall totals on this line.

Section F. Other Budget Information

Line 21 - Use this space to explain amounts for individual direct object class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.

Line 22 - Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.

Line 23 - Provide any other explanations or comments deemed necessary.

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

<ol style="list-style-type: none"> 1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. 2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. 3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. 4. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. 5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). 6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the 	<ol style="list-style-type: none"> basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VII of the Civil Rights Act of 1968 (42 U.S.C. 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. 7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. 8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
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<p>9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. 276a to 276a-7), the Copeland Act (40 U.S.C. 276c and 18 U.S.C. 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333), regarding labor standards for federally-assisted construction subagreement.</p> <p>10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.</p> <p>11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in flood plains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. 1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).</p>		<p>12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. 1271 et seq.) Related to protecting components or potential components of the national wild and scenic rivers system.</p> <p>13. Will assist the awarding agency in assuring compliance will Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).</p> <p>14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.</p> <p>15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) Pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.</p> <p>16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4801 et seq.) Which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.</p> <p>17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."</p> <p>18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.</p>
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SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
APPLICANT ORGANIZATION	DATE SUBMITTED

Certifications, Assurances, and Other Statements of the Recipient

NOTE: When these Certifications, Assurances, and Other Statements of Recipient are used for cooperative agreements, the term "Grant" means "Cooperative Agreement."

Part I – Certifications and Assurances

1. Assurance of Compliance with Laws and Regulations Governing Non-Discrimination in Federally Assisted Programs

Note: This certification applies to Non-U.S. organizations if any part of the program will be undertaken in the United States.

(a) The recipient hereby assures that no person in the United States shall, on the bases set forth below, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under, any program or activity receiving financial assistance from USAID, and that with respect to the Cooperative Agreement for which application is being made, it will comply with the requirements of:

(1) Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352, 42 U.S.C. 2000-d), which prohibits discrimination on the basis of race, color or national origin, in programs and activities receiving Federal financial assistance;

(2) Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), which prohibits discrimination on the basis of handicap in programs and activities receiving Federal financial assistance;

(3) The Age Discrimination Act of 1975, as amended (Pub. L. 95-478), which prohibits discrimination based on age in the delivery of services and benefits supported with Federal funds;

(4) Title IX of the Education Amendments of 1972 (20 U.S.C. 1681, et seq.), which prohibits discrimination on the basis of sex in education programs and activities receiving Federal financial assistance (whether or not the programs or activities are offered or sponsored by an educational institution); and

(5) USAID regulations implementing the above nondiscrimination laws, set forth in Chapter II of Title 22 of the Code of Federal Regulations. 06/23/2011 Partial Revision

(b) If the recipient is an institution of higher education, the Assurances given herein extend to admission practices and to all other practices relating to the treatment of students or clients of the institution, or relating to the opportunity to participate in the provision of services or other benefits to such individuals, and shall be applicable to the entire institution unless the recipient establishes to the satisfaction of the USAID Administrator that the institution's

practices in designated parts or programs of the institution will in no way affect its practices in the program of the institution for which financial assistance is sought, or the beneficiaries of, or participants in, such programs.

(c) This assurance is given in consideration of and for the purpose of obtaining any and all Federal grants, loans, contracts, property, discounts, or other Federal financial assistance extended after the date hereof to the recipient by the Agency, including installment payments after such date on account of applications for Federal financial assistance which was approved before such date. The recipient recognizes and agrees that such Federal financial assistance will be extended in reliance on the representations and agreements made in this Assurance, and that the United States shall have the right to seek judicial enforcement of this Assurance. This Assurance is binding on the recipient, its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this Assurance on behalf of the recipient.

2. Certification Regarding Lobbying

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal Cooperative Agreement, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, United States Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

“The undersigned states, to the best of his or her knowledge and belief, that: If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.”

3. Prohibition on Assistance to Drug Traffickers for Covered Countries and Individuals (ADS 206)

USAID reserves the right to terminate this Agreement, to demand a refund or take other appropriate measures if the Grantee is found to have been convicted of a narcotics offense or to have been engaged in drug trafficking as defined in 22 CFR Part 140. The undersigned shall review USAID ADS 206 to determine if any certifications are required for Key Individuals or Covered Participants.

If there are COVERED PARTICIPANTS: USAID reserves the right to terminate assistance to or take other appropriate measures with respect to, any participant approved by USAID who is found to have been convicted of a narcotics offense or to have been engaged in drug trafficking as defined in 22 CFR Part 140.

4. Certification Regarding Terrorist Financing, Implementing Executive Order 13224

By signing and submitting this application, the prospective recipient provides the certification set out below:

1. The Recipient, to the best of its current knowledge, did not provide, within the previous ten years, and will take all reasonable steps to ensure that it does not and will not knowingly provide, material support or resources to any individual or entity that commits, attempts to commit, advocates, facilitates, or participates in terrorist acts, or has committed, attempted to commit, facilitated, or participated in terrorist acts, as that term is defined in paragraph 3.

2. The following steps may enable the Recipient to comply with its obligations under paragraph 1:

a. Before providing any material support or resources to an individual or entity, the Recipient will verify that the individual or entity does not (i) appear on the master list of **Specially Designated Nationals and Blocked Persons**, which is maintained by the U.S.

Treasury's Office of Foreign Assets Control (OFAC), or (ii) is not included in any supplementary information concerning prohibited individuals or entities that may be provided by USAID to the Recipient.

b. Before providing any material support or resources to an individual or entity, the Recipient also will verify that the individual or entity has not been designated by the United Nations Security (UNSC) sanctions committee established under UNSC Resolution 1267 (1999) (the "1267 Committee") [individuals and entities linked to the Taliban, Usama bin Laden, or the Al Qaida Organization]. To determine whether there has been a published designation of an individual or entity by the 1267 Committee, the Recipient should refer to the consolidated list available online at the Committee's website: <http://www.un.org/Docs/sc/committees/1267/1267ListEng.htm>.

c. Before providing any material support or resources to an individual or entity, the Recipient will consider all information about that individual or entity of which it is aware and all public information that is reasonably available to it or of which it should be aware.

d. The Recipient also will implement reasonable monitoring and oversight procedures to safeguard against assistance being diverted to support terrorist activity.

3. For purposes of this Certification-

a. "Material support and resources" means currency or monetary instruments or financial securities, financial services, lodging, training, expert advice or assistance, safehouses, false documentation or identification, communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine or religious materials."

b. "Terrorist act" means-

(i) an act prohibited pursuant to one of the 12 United Nations Conventions and Protocols related to terrorism (see UN terrorism conventions Internet site: <http://untreaty.un.org/English/Terrorism.asp>); or

(ii) an act of premeditated, politically motivated violence perpetrated against noncombatant targets by subnational groups or clandestine agents; or

(iii) any other act intended to cause death or serious bodily injury to a civilian, or to any other person not taking an active part in hostilities in a situation of armed conflict, when the purpose of such act, by its nature or context, is to intimidate a population, or to compel a government or an international organization to do or to abstain from doing any act.

c. "Entity" means a partnership, association, corporation, or other organization, group or subgroup.

d. References in this Certification to the provision of material support and resources shall not be deemed to include the furnishing of USAID funds or USAID-financed commodities to the ultimate beneficiaries of USAID assistance, such as recipients of food, medical care, micro-enterprise loans, shelter, etc., unless the Recipient has reason to believe that one or more of these beneficiaries commits, attempts to commit, advocates, facilitates, or participates in terrorist acts, or has committed, attempted to commit, facilitated or participated in terrorist acts.

e. The Recipient's obligations under paragraph 1 are not applicable to the procurement of goods and/or services by the Recipient that are acquired in the ordinary course of business through contract or purchase, e.g., utilities, rents, office supplies, gasoline, etc., unless the Recipient has reason to believe that a vendor or supplier of such goods and services commits, attempts to commit, advocates, facilitates, or participates in terrorist acts, or has committed, attempted to commit, facilitated or participated in terrorist acts.

This Certification is an express term and condition of any agreement issued as a result of this application, and any violation of it shall be grounds for unilateral termination of the agreement by USAID prior to the end of its term.

5. Certification of Recipient

By signing below the Recipient provides certifications and assurances for (1) the Assurance of Compliance with Laws and Regulations Governing Non-Discrimination in Federally Assisted Programs, if applicable (2) the Certification Regarding Lobbying, (3) the Prohibition on Assistance to Drug Traffickers for Covered Countries and Individuals (ADS 206) and (4) the Certification Regarding Terrorist Financing Implementing Executive Order 13224 above.

RFA No.: RFA-492-12-000030

Date of Application: _____

Name of Recipient: _____

Typed Name and Title: _____

Signature: _____

Date: _____

Part II – Key Individual Certification Narcotics Offenses and Drug Trafficking

I hereby certify that within the last ten years:

1. I have not been convicted of a violation of, or a conspiracy to violate, any law or regulation of the United States or any other country concerning narcotic or psychotropic drugs or other controlled substances.
2. I am not and have not been an illicit trafficker in any such drug or controlled substance.
3. I am not and have not been a knowing assistor, abettor, conspirator, or colluder with others in the illicit trafficking in any such drug or substance.

Signature: _____

Date: _____

Name: _____

Title/Position: _____

Organization: _____

Address: _____

Date of Birth: _____

NOTICE:

1. You are required to sign this Certification under the provisions of 22 CFR Part 140, Prohibition on Assistance to Drug Traffickers. These regulations were issued by the Department of State and require that certain key individuals of organizations must sign this Certification.
2. If you make a false Certification you are subject to U.S. criminal prosecution under 18 U.S.C. 1001.

Part III – Participant Certification Narcotics Offenses and Drug Trafficking

1. I hereby certify that within the last ten years:

a. I have not been convicted of a violation of, or a conspiracy to violate, any law or regulation of the United States or any other country concerning narcotic or psychotropic drugs or other controlled substances.

b. I am not and have not been an illicit trafficker in any such drug or controlled substance.

c. I am not or have not been a knowing assister, abettor, conspirator, or colluder with others in the illicit trafficking in any such drug or substance.

2. I understand that USAID may terminate my training if it is determined that I engaged in the above conduct during the last ten years or during my USAID training.

Signature: _____

Date: _____

Name: _____

Title/Position: _____

Organization: _____

Address: _____

Date of Birth: _____

NOTICE:

1. You are required to sign this Certification under the provisions of 22 CFR Part 140, Prohibition on Assistance to Drug Traffickers. These regulations were issued by the Department of State and require that certain participants must sign this Certification.

2. If you make a false Certification you are subject to U.S. criminal prosecution under 18 U.S.C. 1001.

Part IV – Survey on Ensuring Equal Opportunity for Applicants

Applicability: All RFA's must include the attached Survey on Ensuring Equal Opportunity for Applicants as an attachment to the RFA package. Applicants under unsolicited applications are also to be provided the survey. (While inclusion of the survey by Agreement Officers in RFA packages is required, the applicant's completion of the survey is voluntary, and must not be a requirement of the RFA. The absence of a completed survey in an application may not be a basis upon which the application is determined incomplete or non-responsive. Applicants who volunteer to complete and submit the survey under a competitive or non-competitive action are instructed within the text of the survey to submit it as part of the application process.)

Survey on Ensuring Equal Opportunity for Applicants

<http://www2.ed.gov/fund/grant/apply/appforms/surveyeonensuringequalopp.doc>

Note: This Survey does not apply to local organizations.

Part V – Other Statements of Recipient

1. Authorized Individuals

The recipient represents that the following persons are authorized to negotiate on its behalf with the U.S. Government and to bind the recipient in connection with this application or grant:

Name	Title	Telephone No.	Facsimile No.	Email Address
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

2. Taxpayer Identification Number (TIN)

If the recipient is a U.S. organization, or a foreign organization which has income effectively connected with the conduct of activities in the U.S. or has an office or a place of business or a fiscal paying agent in the U.S., please indicate the recipient's TIN:

TIN: _____

3. Data Universal Numbering System (DUNS) Number

Note: The successful applicant/awardee must provide the DUNS number to USAID prior to award.

(a) In the space provided at the end of this provision, the recipient should supply the Data Universal Numbering System (DUNS) number applicable to that name and address. Recipients should take care to report the number that identifies the recipient's name and address exactly as stated in the proposal.

(b) The DUNS is a 9-digit number assigned by Dun and Bradstreet Information Services. If the recipient does not have a DUNS number, the recipient should call Dun and Bradstreet directly at 1-800-333-0505. A DUNS number will be provided immediately by telephone at no charge to the recipient. The recipient should be prepared to provide the following information:

- (1) Recipient's name
- (2) Recipient's address
- (3) Recipient's telephone number
- (4) Line of business
- (5) Chief executive officer/key manager
- (6) Date the organization was started
- (7) Number of people employed by the recipient
- (8) Company affiliation

(c) Recipients located outside the United States may e-mail Dun and Bradstreet at globalinfo@dbisma.com to obtain the location and phone number of the local Dun and Bradstreet Information Services office.

The DUNS system is distinct from the Federal Taxpayer Identification Number (TIN) system.

DUNS: _____

4. Letter of Credit (LOC) Number

Note: This is not applicable to local Philippine organizations applying under this RFA.

If the recipient has an existing Letter of Credit (LOC) with USAID, please indicate the LOC number:

LOC: _____

5. Procurement Information

(a) Applicability. This applies to the procurement of goods and services planned by the recipient (i.e., contracts, purchase orders, etc.) from a supplier of goods or services for the direct use or benefit of the recipient in conducting the program supported by the grant, and not to assistance provided by the recipient (i.e., a sub-grant or sub-agreement) to a sub-grantee or sub-recipient in support of the sub-grantee's or sub-recipient's program. Provision by the recipient of the requested information does not, in and of itself, constitute USAID approval.

(b) Amount of Procurement. Please indicate the total estimated dollar amount of goods and services which the recipient plans to purchase under the grant:

\$ _____

(c) Nonexpendable Property. If the recipient plans to purchase nonexpendable equipment which would require the approval of the Agreement Officer, please indicate below (using a continuation page, as necessary) the types, quantities of each, and estimated unit costs. Nonexpendable equipment for which the Agreement Officer's approval to purchase is required is any article of nonexpendable tangible personal property charged directly to the grant, having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit.

TYPE/DESCRIPTION (Generic)	_____
QUANTITY	_____
ESTIMATED UNIT COST	_____

(d) Source, Origin, and Componentry of Goods. If the recipient plans to purchase any goods/commodities which are not of U.S. source and/or U.S. origin, and/or does not contain at

least 50% componentry, which are not at least 50% U.S. source and origin, please indicate below (using a continuation page, as necessary) the types and quantities of each, estimated unit costs of each, and probable source and/or origin, to include the probable source and/or origin of the components if less than 50% U.S. components will be contained in the commodity. "Source" means the country from which a commodity is shipped to the cooperating country or the cooperating country itself if the commodity is located therein at the time of purchase. However, where a commodity is shipped from a free port or bonded warehouse in the form in which received therein, "source" means the country from which the commodity was shipped to the free port or bonded warehouse. Any commodity whose source is a non-Free World country is ineligible for USAID financing. The "origin" of a commodity is the country or area in which a commodity is mined, grown, or produced. A commodity is produced when, through manufacturing, processing, or substantial and major assembling of components, a commercially recognized new commodity results, which is substantially different in basic characteristics or in purpose or utility from its components. Merely packaging various items together for a particular procurement or relabeling items do not constitute production of a commodity. Any commodity whose origin is a non-Free World country is ineligible for USAID financing. "Components" are the goods, which go directly into the production of a produced commodity. Any component from a non-Free World country makes the commodity ineligible for USAID financing.

TYPE/DESCRIPTION	_____
QUANTITY	_____
ESTIMATED GOODS	_____
PROBABLE GOODS	_____
PROBABLE (Generic)	_____
UNIT COST	_____
COMPONENTS	_____
SOURCE	_____
COMPONENTS	_____
ORIGIN	_____

(e) Restricted Goods. If the recipient plans to purchase any restricted goods, please indicate below (using a continuation page, as necessary) the types and quantities of each, estimated unit costs of each, intended use, and probable source and/or origin. Restricted goods are Agricultural Commodities, Motor Vehicles, Pharmaceuticals, Pesticides, Rubber Compounding Chemicals and Plasticizers, Used Equipment, U.S. Government-Owned Excess Property, and Fertilizer.

TYPE/DESCRIPTION	_____
QUANTITY	_____
ESTIMATED	_____
PROBABLE	_____
INTENDED USE (Generic)	_____
UNIT COST	_____

SOURCE _____
ORIGIN _____

(f) Supplier Nationality. If the recipient plans to purchase any goods or services from suppliers of goods and services whose nationality is not in the U.S., please indicate below (using a continuation page, as necessary) the types and quantities of each good or service, estimated costs of each, probable nationality of each non-U.S. supplier of each good or service, and the rationale for purchasing from a non-U.S. supplier. Any supplier whose nationality is a non-Free World country is ineligible for USAID financing.

TYPE/DESCRIPTION _____
QUANTITY _____
ESTIMATED _____
PROBABLE SUPPLIER _____
NATIONALITY _____
RATIONALE (Generic) _____
UNIT COST (Non-US Only) _____
FOR NON-US _____

(g) Proposed Disposition. If the recipient plans to purchase any nonexpendable equipment with a unit acquisition cost of \$5,000 or more, please indicate below (using a continuation page, as necessary) the proposed disposition of each such item. Generally, the recipient may either retain the property for other uses and make compensation to USAID (computed by applying the percentage of federal participation in the cost of the original program to the current fair market value of the property), or sell the property and reimburse USAID an amount computed by applying to the sales proceeds the percentage of federal participation in the cost of the original program (except that the recipient may deduct from the federal share \$500 or 10% of the proceeds, whichever is greater, for selling and handling expenses), or donate the property to a host country institution, or otherwise dispose of the property as instructed by USAID.

TYPE/DESCRIPTION (Generic) _____
QUANTITY _____
ESTIMATED UNIT COST _____
PROPOSED DISPOSITION _____

6. Past Performance References

On a continuation page, please provide past performance information requested in the RFA.

7. Type of Organization

The recipient, by checking the applicable box, represents that -

(a) If the recipient is a U.S. entity, it operates as a corporation incorporated under the laws of the State of, an individual, a partnership, a nongovernmental nonprofit organization, a state or local governmental organization, a private college or university, a public college or university, an international organization, or a joint venture; or

(b) If the recipient is a non-U.S. entity, it operates as a corporation organized under the laws of _____ (country), an individual, a partnership, a nongovernmental nonprofit organization, a nongovernmental educational institution, a governmental organization, an international organization, or a joint venture.

8. Estimated Costs of Communications Products

The following are the estimate(s) of the cost of each separate communications product (i.e., any printed material [other than non-color photocopy material], photographic services, or video production services) which is anticipated under the grant. Each estimate must include all the costs associated with preparation and execution of the product. Use a continuation page as necessary.

SAMPLE BUDGET

The following object class categories are those required on USAID SF-424A Section B - Budget Categories.

a. Personnel

The category includes the salary of each long-term and short-term, paid position for the total estimated life-of-project, except consultants, and the projected cost-of-living or bonus/merit increase for each position.

b. Fringe Benefits

This category includes the amount and percentage of fringe benefits for each personnel identified above. List all items of fringe benefits (e.g., social security, PhilHealth, life insurance, medical insurance, 13th month pay, Pag-ibig, sick leave, vacation leave, etc.,).

c. Travel

This category includes all projected travel, per diem and other related costs for personnel **except** consultants. Include the method by which airfare costs were determined; i.e. quotes for coach and if per-diems are based on established policies.

d. Equipment

In accordance with 22 CFR 226, 'equipment' means tangible non-expendable 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. Information should be included in the application on how pricing was determined for each piece of the equipment.

There are statutory constraints relating to the purchase of agricultural commodities, motor vehicles, pharmaceuticals, pesticides, rubber compounding chemicals and plasticizers, used equipment and fertilizer with USAID project funds. PVOs may obtain specific information on these regulations at <http://www.usaid.gov/policy/ads/300/312.pdf>

e. Supplies

In accordance with 22 CFR 226, 'supplies' means all personal property excluding equipment, intangible property, debt instruments and interventions.

There are statutory constraints relating to the purchase of agricultural commodities, motor vehicles, pharmaceuticals, pesticides, rubber compounding chemicals and plasticizers, used equipment and fertilizer with USAID project funds. PVOs can obtain specific information on these regulations at <http://www.usaid.gov/policy/ads/300/312.pdf>.

f. Contractual Services

This category is for all subcontracts with organizations, which will provide services to the project and any short- or long-term consultant cost including fees, travel and per diem. This category is not to be used for sub-s, which should be included in other.

g. Construction

Applicants should include all labor and material and supplies for construction projects, if applicable.

h. Other

Applicants are to identify all costs associated with training of project personnel.

Applicants planning to use USAID funds to send project staff or local counterparts for training in the U.S. or a country other than the host country, will be required to follow the guidance on USAID Participant Training Regulations, which may be found at <http://www.usaid.gov/policy/ads/200/253.pdf>

The applicant should provide information on any costs attributed to the project not associated above; i.e. communications, facilities, fuel vehicles, repair, maintenance and insurance.

i. Indirect Charges

Include a copy of the Applicant's most recent negotiated indirect cost rate agreement (NICRA) from the cognizant audit agency showing the overhead and/or general administrative rate, if any.

Standard Form 424A, Section C should reflect the Applicant's and other sources' cash and in-kind contributions to this program. A cash match means that funds are used to support the budget elements discussed above. This does not include host country sources. The cash value of donated equipment or supplies must be documented, etc.

Cost Breakdown by Project Component

Development focused Budget line items Development Objective 1 – Intermediate Result 1.4 Family Health Improved	Period of Performance: October 1, 2012 – September 30, 2017 Budget (in US\$)		
	USAID Share	Cost Share	Total
Component 1: Establishing an Institutional Platform for Universal Health Care			
Component 2: Support to Technical Areas			
Indirect Costs			
Total USAID Amount			
Cost Share (Non-Federal)			
Total Program Amount			