



HEALTH REFORM SUPPORT

**"EXPANDING THE DUTIES/POWERS OF NURSES AT THE PRIMARY
HEALTHCARE LEVEL IN THE FOCAL REGIONS OF UKRAINE"**

RFA # 31

October 2022

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USAID Health Reform Support

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I SUMMARY

I.1. USAID Health Reform Support

The purpose of USAID's Health Reform Support Project (HRS Project) is to support a transparent, accountable, and effective health care system that is capable of meeting the health needs of the Ukrainian people. Advancing health sector reforms, enhancing transparency, and tackling corruption will reduce out-of-pocket payments and improve access and availability of high quality, evidence-based health care services for Ukrainians. Elimination of corruption is a cross-cutting theme across all objectives to be achieved by this activity, which include:

1. Improve health sector governance.
2. Support the transformation of the healthcare financing model.
3. Strengthen the health workforce.
4. Enhance transparency, accountability and responsiveness of the health care system.
5. Improve service delivery system at all levels.

I.2. Request for Applications (RFA) Summary

Scope of Work: This solicitation requests applications from eligible USAID Health Reform Support partners to expand the duties/powers of nurses at the primary healthcare level in the PHC facility in focal regions of Ukraine.

Applications should include a technical approach, with corresponding activities that will be undertaken to achieve the goals of the activities described in the detailed scope of work (SOW) specified in Section 3 of the RFA.

Period of Performance: The period of performance for the grants is approximately ten (10) months, from December 2022 to September 30, 2023. The application work plan and budget should reflect the period of performance.

Proposal Selection: All applications will be reviewed to check for eligibility and completeness of the submission. All eligible and complete applications will be reviewed by a Technical Evaluation Committee against the review criteria described in Section 6 Selection.

The minimum score to be considered for grant funding is 70 points out of the total 100 points. Applicants not selected for award will be notified by the project in writing.

Funding Range: Subject to the availability of funds, USAID Health Reform Support intends to award **three (3) grants up to 2 700 000 UAH** (equivalent of 75 000 USD each). Funding for these grants will be subject to donor approval and availability of funds. Funding will be disbursed to the grantees in Ukrainian local currency (UAH).

Submission Deadlines: All applications must be submitted no later than 23:59 Ukraine local time (UTC + 02:00) on November 11, 2022. Questions should be received by close of business (COB) Ukraine local time on October 28, 2022, and responses to questions will be provided by November 1, 2022.

The RFA has three Attachments that are relevant to the application development:

Attachment 1: Grant Application Form and Guidelines with attachments

Attachment 2: Budget Template

Attachment 3: Grant Applicants Handbook (including Grant Award template)

2. INSTRUCTIONS FOR APPLICANTS

2.1. General

- Entities invited to submit an application are under no obligation to do so.
- Applicants will not be reimbursed by USAID Health Reform Support Project for any costs incurred in connection with the preparation and submission of their applications.
- Applicants may submit only one application under RFA# 31.
- For the purposes of interpretation of these instructions to applicants, the periods named herein shall be consecutive calendar days.
- USAID Health Reform Support Project reserves the right to conduct discussions once a successful application is identified, or to make an award without conducting discussions based solely on the written applications if it decides it is in its best interest to do so.
- USAID Health Reform Support Project reserves the right not to make any award.
- These instructions to applicants will not form part of the offer or grant award. They are intended solely to aid applicants in the preparation of their applications.

2.2. RFA Contact Information

USAID Health Reform Support Project Office

Attention: Olena Korduban

Email: grant@hrs.net.ua

Address: 52A, B. Khmelnytskogo Str., 5th floor, 01030 Kyiv, Ukraine

2.3. Questions and Clarifications

- **Method:** Only written questions and requests for clarification will receive a response. Send questions about this RFA by email to the RFA Contact noted above.
- **Date for receipt:** All questions and requests for clarification must be received by close of business (COB) on October 28, 2022 to the email address noted above. Only questions received by this date will receive a response.
- **Responses:** By November 1, 2022, we anticipate providing responses to the requests for clarifications. All responses will be emailed to all applicants and published via Deloitte Grants Portal (<https://dgrants.fluxx.io>).
- An informational webinar will be held on **October 26, 2022 at 14:00 local time** to clarify grant procedures and grant objectives. Registration can be requested via e-mail at grant@hrs.net.ua by **11:00 Ukraine local time, October 26, 2022.**

2.4. Applications Due Date and Time

Closing Date: November 11, 2022

Closing Time: 18:00 Ukraine local time (UTC + 02:00)

2.5. Application Delivery Address

The proposal package should be submitted through the Grants Portal (<https://usaid-hrs.fluxx.io>).

First time applicants will be required to register for an account and, upon approval, will receive an email notification with the necessary log-in credentials to access the portal.

The portal details submission instructions for completing a web-based application form and contains all required document and budget attachments to be included with the application.

All electronic file names should include the organization's name and the title of the document. Applicants should retain copies for their records, as all applications and attachments received will not be returned.

2.6. Type of Award

The USAID Health Reform Support anticipates the award of up to three (3) Fixed Amount Awards in response to RFA# 31 with the ceiling amount of **up to 2 700 000 UAH** each.

2.7. Submission Requirements

- **Language:** The application and all associated correspondence must be in English. However, applications submitted in Ukrainian will also be considered and reviewed. Any award document resulting from this request will be in English.
- **Currency:** The cost must be presented in UAH.
- **Method:** Electronic copy.
- **Marking:** USAID Health Reform Support Project, RFA # 31.
- **Authorized Signer:** Application must be signed by a person duly authorized to submit an application on behalf of the applicant and to bind the applicant to the application.
- **Authorized Personnel.** Provide name, title, email, and telephone number of the person or persons in the entity who are authorized to discuss and accept a grant, if awarded.

2.8. Eligibility

To be eligible to apply an Applicant:

Should be registered in SAM.gov and have a Unique Entity Identifier (UEI) - a Unique Entity ID;

Should be a Primary healthcare facilities in Zhytomyr, Chernihiv, and Kyiv oblasts, legally registered in Ukraine as communal non-commercial enterprises are eligible for grant awards.

Additional eligibility criteria:

- The applicant is a primary health care facility (Primary Health Care Center or other HCF providing primary health care services) of communal property from one of the following oblasts – Zhytomyr, Chernihiv, and Kyiv oblasts;
- The applicant has been officially contracted by the National Health Service of Ukraine (NHSU);
- The applicant is a PHC facility serving all age groups and all categories of the population;
- The applicant has a functional financial system;
- The applicant has adequate resources and staff to expand duties/powers of nurses at the primary healthcare facility;
- The applicant declares undertaking the obligation to train the nurse staff of the facility, contribute to its development and support; to create separate working places for the autonomous nursing practice, and to introduce the recommended nursing vertical, together with the model of the on-site doctors' mentoring nurses; to acknowledge the corrections in the nurse's job description and collective agreement if necessary.

- The applicant declares undertaking the obligation to organize in a relevant manner the venue of events, logistics, accommodation, and meals for a one 2-day exchange training session, hosting the teams from the other healthcare facilities selected by the projects (4-5 team members from each of three medical facilities, up to 10 visiting persons) on their capacities.
- The applicant's other relationships, associations, activities, and interests do not create a conflict of interest that could prevent full impartiality in implementation of the grant activities.

Ineligible are:

- Individuals, political organizations, foreign owned organization and government institutions and religious groups

2.9. Application Conditions Precedent

All applications must be submitted in the specified format (see Section 4 Technical Application Contents). Any application submitted in any other format will not be considered. The applicant must also include all other supporting documentation (board resolution, articles of incorporation, etc.) as may be necessary to clearly demonstrate that it meets the following conditions precedent to application selection:

- That the applicant organization is an eligible organization legally constituted under Ukrainian law at least three (3) years;
- That the applicant organization has the managerial commitment, as evidenced by written board of directors, resolutions, strategic plans (overall long-range plan for applicant's organization) or other documentation, indicating that it is, or will be, implementing the objectives referred above;
- That the applicant organization has no advances from USAID or a USAID contractor which have been outstanding and unliquidated for longer than 90 days, and that the applicant organization has no grant completion report required under a grant from USAID or a USAID contractor which is more than 30 days past due;
- That at the time of application there exists no condition within the applicant organization or with respect to the applicant organization's management which renders the organization ineligible for a grant directly or indirectly funded by USAID.

2.10. Late Applications

Applicants are wholly responsible for ensuring that their applications are received in accordance with the instructions stated herein. A late application will not be eligible for consideration and will be rejected without selection, even if it was late as a result of circumstances beyond the applicant's control. A late application will be considered only if the sole cause of its becoming late was attributable to USAID Health Reform Support, Deloitte, its employees or agents.

2.11. Modification/Withdrawal of Applications

Any applicant has the right to withdraw, modify or correct its offer after such time as it has been delivered to USAID Health Reform Support provided that the request is made before the offer closing date.

2.12. Disposition of Applications

Applications submitted in response to this RFA will not be returned.

3. STATEMENT OF WORK

3.1. Background of Grant

Understanding the medical workforce as the backbone of the healthcare system indicates the necessity of elaborating efficient mechanisms to maintain a full functioning health cadres' system, even facing emergencies. The outflow of the health workforce from the regions directly affected by the war and the influx of IDP health workers in directly unaffected regions, exacerbated pre-existent uneven distribution of the health workforce, resulting in shortages at the range of the HCFs. Therefore, identification of the gaps with the subsequent redistribution and task-shifting of the medical practitioners are brought to the table.

Although the list of medical services delivered by nurses in primary medical care in Ukraine seems to be long, indeed, their potential is underutilized. It results not only in inefficient operation of health care staff but also leads to the loss of all the benefits of the nurse training, due to their involvement on the primary medical care level predominantly in administrative work, rather than in patients' care as screening, prevention, or management of the common diseases.

A bulk of evidence testifies that internationally nurses play a key role both in providing primary health care and in coordinating and organizing the delivery of health care as it is. Through training and practice, they provide effective and safe care, prevention, diagnosis, treatment, and rehabilitation. There is no global challenge in healthcare that can be resolved without coordinated and systematic efforts to maximumly realize the potential of the nursing staff and enhance their role within the interdisciplinary medical teams. This requires creating conditions in which the employees of nursing services will achieve peak efficiency and effectiveness, by optimizing the range of duties of nursing staff, increasing the importance of their functions, as well as maximizing the number of resources invested in their training, professional development, and introduction of the relevant working conditions. As nurses in Ukraine are the most numerous components of the health care system, giving them greater independence and expanding their roles will significantly increase the availability and quality of the delivered medical care.

Ukraine Health Reform Support Project (HRS), financed by USAID/UKaid and administered by Deloitte Consulting LLC, is looking to engage up to three primary healthcare facilities in Zhytomyr, Chernihiv, and Kyiv oblasts, legally registered in Ukraine as communal non-commercial enterprises, to provide recommendations and technical assistance to expand the duties/powers of nurses at the primary healthcare level in the focal regions of Ukraine.

The outcome of these grants would be rethinking the employment relations between nurses and primary healthcare facility medical doctors in the aforementioned regions to enhance their role within the medical teams of the selected healthcare facilities through the specific training and mentorship of the healthcare staff. As soon as the acquired skills and redistributed tasks become a routine practice optimal availability and quality of the delivered medical care might be reached in the selected regions.

3.2. Grant Objective

These grants will contribute to the achievement of HRS Objective 3 – Strengthen the health workforce the health system. The grants will support the Project's activity 3.2 Provide recommendations and technical assistance to expand the duties/powers of nurses at the PHC level in the focal regions.

Under these grants, HRS will provide the recommendations and technical assistance to expand the duties/powers of nurses at the primary healthcare level in the focal regions: Zhytomyr, Chernihiv, and Kyiv oblasts. In cooperation with the grantees, HRS will organize and support teams of doctors and nurses within the PHC facilities to build their capacity to provide medical services of better quality.

3.3. Specific Statement of Work

Upon consultations and in collaboration with HRS, the grantees should be able to:

- undergo an assessment as a component of the selection of the primary healthcare facility to be contracted for the project.
- propose at lists of 4-5 teams of physicians and nurses enrolled in the nurse empowerment activities in the healthcare facilities;
- ensure the involvement of the selected teams into the training;
- organize and hold in their capacities one 2-day training session with the attendants, consisting of the team of its facility and 2 visiting teams from the other facilities (4-5 team members from each of three medical facilities, up to 10 visiting persons);
- build the nursing vertical in the medical facility, foreseeing persons, responsible for nursery;
- ensure the participation of the selected medical doctors in the ToT on mentoring;
- ensure the introduction of the model of the on-site doctors' mentoring nurses;
- support the selected nurses in introducing and implementing individual development plans;
- promote the autonomy of the nurses in selected healthcare facilities through transferring them educational instruments and the general idea of a nurse as not just a doctor assistant, but a discreet specialty with its duties and responsibilities;
- to ensure sustainability of the project through the elaboration of relevant corrections in the nurse's job description and collective agreement if necessary.

3.4. Grant Activities and Deliverables

Under this Scope of Work (grant), each Grantee shall perform, but will not be limited to, the tasks specified under the following categories and receive the outlined deliverables.

The Grantees shall use their experience and knowledge in expanding the duties/powers of nurses at the PHC level in the focal regions and additional understanding gleaned from the background and objectives specified above to complete and submit the below listed deliverables by the end of this grant. The deliverables should be submitted by each Grantee in Ukrainian:

Deliverable 1. Finalize the Action Plan with timelines for the implementation of the grant together with HRS experts.

Activity 1. Develop and finalize the Action Plan of the grant activity with the relevant timelines.

Deliverable 2. Pass an assessment regarding the existing division of duties between a nurse and a doctor in the facility and develop a plan of extending the duties of nurses in the facility.

Activity 2.1. Pass an assessment regarding the existing division of duties between a nurse and a doctor in the facility according to the procedure proposed by the project

Activity 2.2. Together with HRS and local experts, prepare the plan of expanding the duties/powers of nurses at the PHC level, based on the results of the assessment.

Deliverable 3. Introduce individual development plans for the selected nurses and organize trainings to expand their duties/powers in the PHC facility.

Activity 3.1. Introducing individual development plans of the selected nurses.

Activity 3.2. Organize relevant trainings for selected specialists of the teams based on the prepared plan.

Activity 3.3. Organize and hold an exchange training session with the visiting teams from the other primary healthcare facilities.

Activity 3.4. Organize training for selected medical doctors on mentoring nurses in the facility.

Deliverable 4. Organize trainings to expand their duties/powers in the PHC facility.

Activity 4.1. Organize relevant trainings for selected specialists of the teams based on the prepared plan.

Activity 4.2. Organize training for selected medical doctors on mentoring nurses in the facility.

Deliverable 5. Develop the nursing vertical, and present the exhaustive and appropriate job description for the primary care nursery.

Activity 5.1. Elaborate relevant corrections in the nurse’s job description and collective agreement if necessary.

Activity 5.2. Introduce separate working places for the autonomous nursing practice.

Activity 5.3. Provide the on-site doctors’ mentoring nurses at the primary healthcare facilities.

Activity 5.4. Organize relevant trainings for selected specialists of the teams based on the prepared plan.

Deliverable 6. Further improve the practice in expanding the duties/powers of nurses at the PHC level in facility.

Activity 6.1. Organize relevant trainings for selected specialists of the teams based on the prepared plan if necessary.

Activity 6.2. Provide the on-site doctors’ mentoring nurses at the PHC.

Activity 6.3. Review the nurses’ individual development plans and make changes to them.

Deliverable 7. Summarize the results of the conducted activities and analyze lessons learned in expanding the duties/powers of nurses at the PHC level in the facility.

Activity 7.1. Develop Grant Implementation Report.

3.5. General Milestones and associated timelines

The below is the table format to describe milestones for planning and implementation of the patients’ rights awareness campaign:

Milestone # and Name	Recommended Duration	Grant activity	Milestone Verification	Expected date of completion
1. Initiate the grant and finalize the Action Plan with timelines	3 weeks	<ul style="list-style-type: none"> Based on the prepared plan develop and finalize the Action Plan of the activity with the relevant timelines. 	<ul style="list-style-type: none"> Final Work Plan with timelines agreed with HRS 	20 days after signing the Agreement
2. Pass an assessment regarding the existing division of duties between a nurse and a doctor in the facility according to the	8 weeks	<ul style="list-style-type: none"> Pass an assessment regarding the existing division of duties between a nurse and a doctor in the facility according to the 	<ul style="list-style-type: none"> Report on the assessment on existing division of duties between a nurse and a doctor 	TBD

procedure proposed by the project.		<p>procedure proposed by the project.</p> <ul style="list-style-type: none"> • Together with HRS and local experts, prepare the plan of expanding the duties/powers of nurses at the PHC level, based on the results of the assessment. 	<ul style="list-style-type: none"> - Plan of expanding the duties/powers of nurses in the facility, based on the results of the assessment. 	
3. Introduce individual development plans for the selected nurses and organize trainings to expand their duties/powers in the PHC facility.	8 weeks	<ul style="list-style-type: none"> • Introducing individual development plans of the selected nurses. • Organize relevant trainings for selected specialists of the teams based on the prepared plan. • Organize and hold an exchange training session with the visiting teams from the other primary healthcare facilities. • Organize training for selected medical doctors on mentoring nurses in the facility. 	<ul style="list-style-type: none"> - Individual development plans of selected nurses - Lists of trainees by category or specialty - Report on conducted trainings for nurses - Report on exchange training session with the visiting teams from the other primary healthcare facilities - Report on held trainings on medical doctors mentoring nurses. 	TBD
4. Organize trainings to expand their duties/powers in the PHC facility.	8 weeks	<ul style="list-style-type: none"> • Organize relevant trainings for selected specialists of the teams based on the prepared plan. • Organize training for selected medical doctors on mentoring nurses in the facility. 	<ul style="list-style-type: none"> - Report on conducted trainings for nurses - Report on held trainings on medical doctors mentoring nurses. 	TBD
5. Develop the nursing vertical, present the exhaustive and appropriate job description for the primary care nursery.	8 weeks	<ul style="list-style-type: none"> • Elaborate relevant corrections in the nurse's job description and collective agreement if necessary. • Introduce separate working places for the autonomous nursing practice. • Provide of the on-site doctors' mentoring 	<ul style="list-style-type: none"> - Lists of trainees by category or specialty; - Draft corrections in the nurse's job description and collective agreement to be approved by the primary 	TBD

		<p>nurses at the primary healthcare facilities.</p> <ul style="list-style-type: none"> Organize relevant trainings for selected specialists of the teams based on the prepared plan. 	<p>healthcare facilities.</p> <ul style="list-style-type: none"> Report on the introducing the separate working place for the autonomous nursing practice. Feedback from the members of the teams concerning the mentoring sessions. 	
6. Further improve the practice in expanding the duties/powers of nurses at the PHC level in facility.	8 weeks	<ul style="list-style-type: none"> Organize relevant trainings for selected specialists of the teams based on the prepared plan if necessary. Provide the on-site doctors' mentoring nurses at the PHC. Review the nurses' individual development plans and make changes to them. 	<ul style="list-style-type: none"> Lists of trainees by category or specialty; Feedback from the members of the teams concerning the mentoring sessions. Draft individual development plans for the primary healthcare level nurses. 	TBD
7. Summarize the results of the conducted activities and analyze lessons learned in expanding the duties/powers of nurses at the PHC level in the facility.	5 weeks	<ul style="list-style-type: none"> Develop Grant Implementation Report. 	<ul style="list-style-type: none"> Final grant implementation report 	Not later than September 30, 2023

Expected Results

1. Teams of nurses and doctors are selected and trained.
2. Exhaustive and appropriate job description for the primary care nursery is presented.
3. Model of the on-site doctors' mentoring nurses at the selected primary healthcare facilities is developed.
4. Individual development plans for the primary healthcare level nurses are elaborated.
5. Corrections in the nurse's job description and collective agreement are approved by the primary healthcare facilities.
6. Summarized results of the conducted activities and analyzed lessons learned in expanding the duties/powers of nurses at the PHC level in the facility are presented.

Expected Outcomes

1. Optimal availability and quality of the delivered primary medical care through expanding nurse duties are reached in the selected facilities.
2. The selected facilities acquire the trained primary medical care nurses with the expanded duties/powers.

3.6. Additional conditions

The day-to-day activities of the grant recipient will be monitored by the USAID HRS representatives. Written communication between the selected grantee and HRS is confidential.

4 TECHNICAL APPLICATION CONTENTS

All complete applications received by the deadline will be reviewed for responsiveness to the specifications outlined in the guidelines. USAID Health Reform Support may reject applications that are:

- Incomplete;
- Do not respond to the scope of work in the solicitation;
- Do not comply with the format requirements; or
- Are submitted after the deadline.

The application in response to this solicitation should be organized as follows:

A. Cover Page

Include all of the following information:

- Name, address, phone/fax number, and email of the organization
- Title of proposed project
- Name of contact person
- Duration of project
- Date submitted

B. Applicant Data (see Grant Application Form and Guidelines)

C. Technical Proposal (8 pages maximum)

Sections of the Attachment I Technical Proposal of the Grant Application Form and Guidelines should use the headings italicized below, in the following order:

- BACKGROUND/STATEMENT OF NEED *[maximum 1 page]*

- Provide brief information about your facility concerning the duties of the medical staff. Indicate if there were any efforts in expanding nurse duties/powers in the past. Declare whether separate working places for the autonomous nursing practice may be created on the capacities of the facility. Identify key areas for the introduction of the expanded duties of nurses and current key gaps.

- VISION OF IMPROVING/ GOALS, OBJECTIVES *[maximum 1 page]*

- Describe your vision of expanding nurse duties/powers for the delivery of the quality and timely primary medical care to the healthcare services consumers.
- Based on the analysis and outlined areas for the introduction of the expanded duties of nurses and current key gaps, indicate the scarce resources the facility experiences or support and technical assistance requires that challenge an achievement of set goals.

- IMPLEMENTATION PLAN/ACTIVITIES *[maximum 2 pages]*

- Give specific practical steps that will help the facility achieve its goals on expanding nurse duties/powers. Justify the choice of such measures and their prioritization.
- Provide a detailed grant implementation plan (see the template in Annex A - PROJECT IMPLEMENTATION PLAN).

- COORDINATION AND COLLABORATION *[maximum 0,5 pages]*

- Describe the roles and participation of the team of 4-5 healthcare providers (2-3 nurses and 2-3 primary medical care doctors) to be involved in the implementation of the activities targeted at expanding nurse duties/powers in the facility and explain why they are assigned these roles.

- MANAGEMENT PLAN *[maximum 1 page]*

- Indicate persons responsible for the activities targeted at expanding nurse duties/powers in the facility, and grant management daily.
- Describe how the project will be managed within the grant.
- Indicate whether you have experience of cooperation with international organizations and charitable foundations.
- Indicate contacts who will liaise with the HRS Project.

- ORGANIZATIONAL CAPACITY *[maximum 1 page]*

- Describe the team that will implement the grant, indicating their positions, roles and contact details) as Annex B. Provide CVs for core/implementation team (as an ANNEX B – PROJECT IMPLEMENTATION TEAM).

Annexes (number of pages not limited)

ANNEX A – GRANT ACTIVITY IMPLEMENTATION PLAN

ANNEX B – PROJECT IMPLEMENTATION TEAM

5 BUDGET CONTENTS

5.1. BUDGET AND PAYMENT TERMS

The approximate budget for each grantee amounts shall not exceed 2 700 000 UAH. The budget items and associated payment terms and dates according to the proposed milestones list will be finally defined based on the applicant's proposal and fixed in the grant award document.

5.2. COST SHARE

Cost sharing is not a requirement for grants issued in response to RFA #31.

Sub-awards will not be allowed under the Grants Program.

5.3. BUDGET CONTENT

The Applicant must:

- Include a detailed and realistic budget using the Excel template provided (see Attachment 2: Budget and Budget Notes). The budgets must be prepared in local currency (UAH) and should be based on activities described in the Attachment 1: Technical Proposal. Budget should not include costs that cannot be directly attributed to the activities proposed.
- Include detailed budget notes/clarification of calculation for each budget line item by milestones following the format of the template provided (see Attachment 2: Budget and Budget Notes). Supporting documentation to support cost data will be required prior to award of grants. However, these documents will not be required at the time of application submission.
- **Grant award funds can't be used for:**
 - Construction works
 - Major/small repairs
 - Other items not related to the grant implementation

All applicants must have the financial and administrative systems to adequately account for the grant funds as detailed in the extensive attachments and referenced U.S. Government websites.

5.4. TAXES

No taxes, fees, charges, tariffs, duties or levies will be paid under any Grants awarded from this RFA.

6 SELECTION

USAID Health Reform Support intends to award grants resulting from this solicitation to the responsible Grantees whose Application conforms to the solicitation and represents best value solutions after selection in accordance with the criteria/factors listed here.

The review criteria below are presented by major category so that Applicants will know which areas require emphasis in the preparation of Applications.

Application Selection Criteria	Points
Background/Statement of Need	10
Vision of Improving/ Goals, Objectives	15
Implementation Plan/Project Activities	25
Coordination and Collaboration	10
Management Plan	10
Organizational Capacity	15
Budget, Budget Notes and Cost Reasonableness	15
Total points	100

Technical Proposal

USAID Health Reform Support Project will evaluate each technical approach quantitatively based upon the review criteria set forth above. A technical proposal can be categorized as unacceptable when it is incomplete, does not respond to the scope, does not comply with the format requirements or is submitted after the deadline.

Budget

The proposed budget will be analyzed as part of the application selection process. Applicants should note that Budgets must be sufficiently detailed to demonstrate reasonableness and completeness, and that applications including budget information determined to be unreasonable, incomplete, or based on a methodology that is not adequately supported may be judged unacceptable.

- 1) Reasonableness.** USAID Health Reform Support Project will make a determination of reasonableness based on USAID HRS's experience for similar items or services, what is available in the marketplace, and/or other competitive offers.
- 2) Completeness.** A detailed line item budget, budget notes, assumptions, and schedules that clearly explain how the estimated amounts were derived must adequately support the applicant's budget. USAID Health Reform Support may request additional supporting information to the extent necessary to determine whether the costs are fair and reasonable.

7 REFERENCES, TERMS & CONDITIONS

7.1. References (choose from the list below as applicable)

- The U.S. Government regulations that govern this grant as found at the following websites:
<http://www.usaid.gov/sites/default/files/documents/1868/303.pdf>
<https://www.acquisition.gov/far/html/FARTOCP31.html>
https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl
- Required provisions for Simplified and Standard Grants to Non-U.S. Non-Governmental Organizations: <http://www.usaid.gov/ads/policy/300/303mab>.
- Required Standard Provisions for U.S. Non-governmental organizations: <http://www.usaid.gov/ads/policy/300/303maa>
- Required Provisions for a Fixed Amount Awards to Non-Governmental Organizations:
(1) Mandatory Provisions from: <https://www.usaid.gov/ads/policy/300/303mat>.
(2) Include ONLY the applicable "Required, As Applicable" provisions from: <https://www.usaid.gov/ads/policy/300/303mat>.

7.2. Terms and Conditions

- Issuing this RFA is not a guarantee that a grant will be awarded.
- Deloitte reserves the right to issue a grant based on the initial selection of offers without discussion.
- Deloitte may choose to award a grant for part of the activities in the RFA.
- Deloitte may choose to award a grant to more than one recipient for specific parts of the activities in the RFA.
- Deloitte may request from short-listed grant applicants a second or third round of either oral presentations or written responses to a more specific and detailed scope of work that is based on a general scope of work in the original RFA.
- Deloitte has the right to rescind an RFA, or rescind an award prior to the signing of a contract due to any unforeseen changes in the direction of Deloitte's client (the U.S. Government), be it funding or programmatic.
- Deloitte reserves the right to waive any deviations by organizations from the requirements of this solicitation that in Deloitte's opinion are considered not to be material defects requiring rejection or disqualification, or where such a waiver will promote increased competition.

Grant Agreement

A grant agreement will include the approved project description, approved budget, payment terms, reporting requirements and relevant provisions. Once executed, it is a legally binding agreement between Deloitte (on behalf of the USAID Health Reform Support) and the recipient organization. Once the grant agreement is signed, it cannot be modified without prior written approval from Deloitte (on behalf of the USAID Health Reform Support).

Grant Disbursement and Financial Management

Recipients of grant funds will need to open a separate bank account before any funds are transferred from Deloitte. The grants will be disbursed in local currency and transferred only through bank transactions.

Reporting

The grant agreement will detail the reporting requirements. Recipients must be willing to adhere to the reporting schedule and requirements for both programming activities and financial monitoring.

Monitoring

USAID Health Reform Support staff will monitor programmatic performance. Deloitte and USAID reserve the right to review finances, expenditures and any relevant documents at any time during the project period and for three years after the completion of the project and closeout. All original receipts must be kept for three years after the formal closeout has been completed.

Late Submissions, Modifications and Withdrawals of Applications

At the discretion of Deloitte, any application received after the exact date and time specified for the receipt may not be considered unless it is received before award is made and it was determined by Deloitte that the late receipt was due solely to mishandling by Deloitte after receipt at its offices.

Applications may be withdrawn by written notice via email received at any time before award. Applications may be withdrawn in person by a vendor or his authorized representative, if the representative's identity is made known and the representative signs a receipt for the application before award.

False Statements in Offer

Vendors must provide full, accurate and complete information as required by this solicitation and its attachments.

Certification of Independent Price Determination

(a) The offeror certifies that--

(1) The prices in this offer have been arrived at independently, without, for the purpose of restricting competition, any consultation, communication, or agreement with any other offeror, including but not limited to subsidiaries or other entities in which offeror has any ownership or other interests, or any competitor relating to (i) those prices, (ii) the intention to submit an offer, or (iii) the methods or factors used to calculate the prices offered;

(2) The prices in this offer have not been and will not be knowingly disclosed by the offeror, directly or indirectly, to any other offeror, including but not limited to subsidiaries or other entities in which offeror has any ownership or other interests, or any competitor before bid opening (in the case of a sealed bid solicitation) or contract award (in the case of a negotiated or competitive solicitation) unless otherwise required by law; and

(3) No attempt has been made or will be made by the offeror to induce any other concern or individual to submit or not to submit an offer for the purpose of restricting competition or influencing the competitive environment.

(b) Each signature on the offer is considered to be a certification by the signatory that the signatory--

(1) Is the person in the offeror's organization responsible for determining the prices being offered in this bid or application, and that the signatory has not participated and will not participate in any action contrary to subparagraphs (a)(1) through (a)(3) above; or

(2) (i) Has been authorized, in writing, to act as agent for the principals of the offeror in certifying that those principals have not participated, and will not participate in any action contrary to subparagraphs (a)(1) through (a)(3) above; (ii) As an authorized agent, does certify that the principals of the offeror have not participated, and will not participate, in any action contrary to subparagraphs (a)(1) through (a)(3) above; and (iii) As an agent, has not personally participated, and will not participate, in any action contrary to subparagraphs (a)(1) through (a)(3) above.

(c) Offeror understands and agrees that --

(1) violation of this certification will result in immediate disqualification from this solicitation without recourse and may result in disqualification from future solicitations; and

(2) discovery of any violation after award to the offeror will result in the termination of the award for default.

Standard Provisions

Deloitte is required to respect the provisions of the United States Foreign Assistance Act and other United States laws and regulations. The [NAME OF PROJECT] Grant Program will be administered according to Deloitte's policies and procedures as well as USAID's regulations for Non-U.S. Governmental Recipients or USAID's regulations for U.S. Non-Governmental Recipients. These include:

1. Implementing Partner Notices (IPN) registration

Applicant acknowledges the requirement to register with the IPN portal if awarded a grant resulting from this solicitation and receive universal bilateral amendments to this award and general notices via the IPN portal. The IPN Portal is located at <https://sites.google.com/site/usaidipnforassistance/> Detailed steps are given under the article M9 of the Mandatory Standard Provisions for Fixed Amount Awards to Non-Governmental Organizations from ADS 303mat, which is annexed to this RFA.

2. Indirect rates

Indirect rates such as fringe, overhead, and general and administrative (G&A) that have not been approved by a U.S. Government agency in a NICRA (Negotiated Indirect Cost Rate Agreement) may not be charged to this award. All costs charged to the project shall be directly related to the project's implementation.

3. Activities that will not be considered for funding

In keeping with the conditions above, programs that fall within the following categories or indicate they might participate in any one of the following shall be automatically disqualified:

- Activities related to the promotion of specific political parties.
- Construction.
- Distribution of emergency/humanitarian assistance or funds.
- Religious events or activities that promote a particular faith.
- For-profit business activities that benefit a small select group, rather than providing increased opportunities to the larger community.
- Unrelated operational expenses.

4. Prohibited Goods and Services

Under no circumstances shall the Recipient procure any of the following under this award, as these items are excluded by the Foreign Assistance Act and other legislation which govern USAID funding. Programs which are found to transact in any of these shall be disqualified:

- Military equipment;
- Surveillance equipment;
- Commodities and services for support of police or other law enforcement activities;
- Abortion equipment and services;
- Luxury goods and gambling equipment; and
- Weather modification equipment.

5. Restricted Goods

The following costs are restricted by USAID and require prior approval from Deloitte and USAID:

- Agricultural commodities;
- Motor vehicles;
- Pharmaceuticals;
- Pesticides;
- Fertilizer;
- Used equipment; and
- U.S. Government-owned excess property.

6. Certifications for Non-US Non-Governmental Recipients

The following Standard Grant & Subcontractor Certifications are required by Deloitte and USAI

- Assurance of Compliance with Laws and Regulations Governing nondiscrimination in Federally Assisted Programs (This assurance applies to Non-U.S. Governmental Organizations, if any part of the program will be undertaken in the U.S.);
- Certification Regarding Lobbying (22 CFR 227);
- Prohibition on Assistance to Drug Traffickers for Covered Countries and Individuals (ADS 206, Prohibition of Assistance to Drug Traffickers);
- Certification Regarding Terrorist Financing;
- Certification of Recipient;
- Compliance with Anticorruption Laws.
- A completed copy of Representation by Organization Regarding a Delinquent Tax Liability or a Felony Criminal Conviction; and
- Certification Regarding Trafficking in Persons