



HEALTH REFORM SUPPORT

REQUEST FOR GRANT APPLICATIONS (RFA): FINANCIAL MANAGEMENT TRAININGS FOR LAS AND HCFS

RFA 201

A USAID/U.S.A. FUNDED PROJECT

November, 2023

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I SUMMARY

I.1. USAID Health Reform Support (HRS) Project

The purpose of USAID's Health Reform Support Project (HRS Project) is to support a transparent, accountable, and effective healthcare 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 healthcare 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.

HRS understands that managerial teams of healthcare facilities (HCFs) and local authorities (owners of HCFs) need to be equipped with guidance to improve their understanding of the restoration and recovery efforts and how to operate successfully with financial sustainability during the war and post-war periods. For this purpose, HRS announces the Grant to conduct capacity-building activities for local authorities and managerial teams of HCFs focused on legal and financial issues of recovery and restoration.

I.2. USAID HRS Request for Applications (RFA) Summary

Scope of Work: This solicitation requests an application from eligible USAID Health Reform Support partners with the relevant experience and expertise to conduct capacity-building activities. Applicants must be able to demonstrate “additionality” of the proposed program. Additionality is defined as a rapid scale-up or expansion of an existing program that will require minimal overhead and operational costs.

Period of Performance: The period of performance for the Grant is approximately nine and a half (9.5) months, from December 20, 2023 to September 30, 2024. The application work plan and budget should reflect the 9.5 months period of performance.

Applicants who propose to reach higher targets and demonstrate in their proposals the ability to do so may receive a higher score in the selection process.

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

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

Funding Range: Subject to the availability of funds, USAID Health Reform Support intends to award **one (1) grant up to 8,600,000 UAH**. Funding for this Grant will be subject to donor approval and the availability of funds. Funding will be disbursed to the grantees in local Ukrainian currency (UAH).

Submission Deadlines: All applications must be submitted no later than 23:59 Ukraine local time (UTC + 02:00) on November 29, 2023. Questions should be received by close of business (COB) Ukraine local time on November 9, 2023, and responses to questions will be provided by November 10, 2023.

This RFA contains the Grant Application Form and Guidelines with the following attachments:

Attachment 1: Technical Proposal

- Annex A. Grant Activity Implementation Plan
- Annex B. Information of Previous Assistance Awards/Contracts

Attachment 2: Budget and Budget Notes

- Annex C. Supporting Data for Cost Estimates

Attachment 3: Information about Applicant

Attachment 4: Certifications and Assurances from Applicant

- Annex D. Documents Demonstrating Applicant's Eligibility and Capabilities
- Annex E. Environmental Self-Assessment Form
- Annex F. Survey on Ensuring Equal Opportunities to Applicants (optional, upon Applicant's Request)

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# 201.
- 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 November 9, 2023 to the email address noted above. Only questions received by this date will receive a response.
- **Responses:** By November 10, 2023, 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 **November 7, 2023, at 16:00 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, November 7, 2023**.

2.4. Applications Due Date and Time

Closing Date: November 29, 2023

Closing Time: 23:59 Ukraine local time (UTC + 02:00)

2.5. Application Delivery Address

The proposal package should be submitted through the Deloitte Grants Portal (<https://dgrants.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 one (1) Fixed Amount Awards in response to RFA# 201 with a ceiling amount of **up to 8,600,000 UAH**.

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 # 201.
- **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 a potential Applicant:

- Should be Non-U.S. non-governmental organizations, for profit or nonprofit, registered in Ukraine (e.g. NGOs, Professional Associations, Research/ Educational Institutions, Commercial Organizations) for no less than 3 years;
- Should not appear on the "List of Parties Excluded from Federal Procurement and Non-Procurement Programs";
- Should not be individual, political party, any governmental entity(organization) or official whether at national or municipal level;

- Should not be affiliated with HRS or any of its directors, officers or employees;
- Organizations whose objectives are not consistent with the broad objectives of the HRS Project are also ineligible.
- In accordance with 2 CFR 25, recipients of grant awards, foreign or domestic, of \$25,000 or more are required to obtain a Unique Entity Identifier Number and register themselves through the SAM.gov website.

Additional eligibility criteria

- The organization must have demonstrated experience in technical areas relevant to the scope of work or grant focus.
- The organization must currently be implementing activities in the geographic area or technical area for which it is submitting an application.
- The organization has minimum absorptive capacity and demonstrates the potential to acquire sufficient capacity to manage programs in a sustainable manner.
- The organization has a functional financial system.
- The organization'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.

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 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 and Specific Challenges to be Addressed by this Grant

Ongoing healthcare reform in Ukraine transformed health financing approaches – most notably, the transition from health subvention to payments via Program of Medical Guarantees (PMGs) contracts signed with Ukraine’s single purchaser, the National Health Service of Ukraine (NHSU). To be eligible to sign such contracts, communal healthcare facilities (HCFs) had to transform from budget institutions to not-for-profit enterprises. This transformation brings more autonomy to the decision-making process at the HCF level, making HCF managerial teams core decision-makers. These critical changes require managerial teams to develop new knowledge and skills in operating as an enterprise in new financing conditions under the reform.

At the same time, the relationship between not-for-profit HCFs and local authorities (owners and governing bodies of such facilities) has also changed. It requires local authorities to develop new skills and knowledge to effectively maintain their HCF’s network. As a result of decentralization, the financial resources of local governments are becoming an important part of healthcare financing and even more critical during the war and post-war periods.

The full-scale invasion of war in Ukraine since February 2022 damaged the nation’s health network – some HCFs are completely destroyed, while others have differing levels of damage. The war also caused gaps in service provision, destroyed pathways for patients, created a shortage of health workforce, and created an environment filled with uncertainty and vulnerability.

As a result, managerial teams of HCFs and local authorities (owners of HCFs) needed to be equipped with guidance to improve their understanding of the restoration and recovery efforts and how to operate successfully with financial sustainability during the war and post-war periods.

3.2. Grant Objective

The Grantee will support HRS Objective 2: Support the transformation of the health care financing model. As a result of this Grant, the Grantee will:

- (1) develop and conduct capacity-building activities on legal and financial issues for managerial teams of HCFs;
- (2) develop and conduct capacity-building activities on legal and financial issues for local authorities (owners of HCFs);
- (3) develop and conduct capacity-building activities on legal and financial issues for both – local authorities (owners of HCFs) and managerial teams of HCFs;
- (4) support updating HRS-developed electronic tools (InSight and Pay&Care) and packages supporting developed training materials.

The geographical coverage should include five priority oblasts (Kyiv, Chernihiv, Dnipropetrovsk, Kharkiv, and Kherson regions) and three oblasts with high health-related demands (Zaporizhzhia, Sumy, and Mykolayiv oblast).

Capacity-building activities should cover up to 100% of primary HCFs in each region and up to 100% cluster and above-cluster hospitals.

The HRS technical team will provide specific technical direction throughout the grant implementation. The USAID HRS representatives will monitor the day-to-day activities of the grant recipient.

3.3. Indicators

- a. 1,200 representatives of local authorities - owners of HCFs and managerial teams of HCFs increased their capacity (by at least 35% according to pre- and post- training questionnaires) on legal and financial issues related to recovery by the end of August 2024 participating in 40 training courses
- b. At least 50% of training participants use the obtained knowledge and skills to improve their work activities performance (according to the assessment after six months after the completion of the training)
- c. At least 50% of surveyed HCFs use HRS' 3 electronic tools – InSight, Pay&Care, and a new tool to assess HCF financial sustainability (accessed via the MOH website) – to improve HCF financial stability by the end of September 2024

3.4. Specific Statement of Work

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

Component 1. Develop a detailed work plan with responsible team members and deadlines for each task.

Component 2. Conduct an online survey among local authorities and HCFs to identify the critical training needs.

Develop and test online questionnaires for collecting critical training needs on financial and legal topics for the target audience: local authorities and managerial teams of HCFs. Test the developed questionnaires with at least two respondents (one – from HCFs and one – from local authorities). Finalized the developed questionnaires based on test results. The online survey should cover all HCFs and local authorities in eight identified regions. All available communication channels and networks of the Grantee should be used to collect this data. As a result, the report with the survey results should be developed and presented to the HRS team. The identified topics should supplement the HRS-developed training materials and should be used for conducting other Grant components.

Component 3. Develop and conduct capacity-building activities issues for managerial teams of HCFs on legal and financial issues.

The training course should include both financial and legal components of healthcare financing reform, including issues related to war-related circumstances, recovery efforts, actual legislation of state and regional policies, the role of HCFs in reform implementation and recovery, international aids, cross-municipal funding, guidance on attracting investments, effective procurements, introduction of paid services, financial planning, best recovery practices, accounting, HRS-developed electronic tools InSight and Pay&Care, etc. The trainings should be accompanied by HRS-developed materials, reports, manuals, and updated electronic instruments. The Grantee should develop a concept, agenda, schedule, list of trainers, questionnaires, hand-out materials, home tasks, etc. The total number of trainings to be

conducted – minimum 16 trainings. Focus regions are Kyiv, Chernihiv, Dnipropetrovsk, Kharkiv, Kherson, Zaporizhzhia, Sumy, and Mykolayiv. Number of HCFs to participate in one training – minimum 10 HCFs (TBD) and up to 30 participants at each training. The duration of the training – up to 2 days. The Grantee should conduct a series of Q&A sessions after each training topic. The preferred training format is offline with compliance with security measures. Each training should contain before- and after-assessment of participants' knowledge. Training and post-training materials should also be packaged for dissemination and transfer to MOH / NHSU and/or other stakeholders. The Grantee should ensure the follow-up support and consultations for the training participants. Provide technical support to updating electronic tools InSight and Pay&Care and packages of supporting materials (HRS-developed), support them within all communication channels, and include them in the training materials under Grant Components 3-5.

Component 4. Develop and conduct capacity-building activities for local authorities (owners of HCFs) on legal and financial issues.

The training course should include both financial and legal components of healthcare financing reform, including issues related to war-related circumstances, recovery efforts, actual legislation of state and regional policies, the role of owners (local authorities) in reform implementation and recovery, international aids, cross-municipal funding, guidance on attracting investments, effective procurements, introduction of paid services, financial planning, best recovery practices, regional budgeting (development, implementation and assessment of regional programs) focused on health, HRS-developed electronic tool for financial and program analyses for owners, etc. The trainings should be accompanied by HRS-developed materials, reports, manuals, and updated electronic instruments. The Grantee should develop a concept, agenda, schedule, list of trainers, questionnaires, hand-out materials, home tasks, etc. The total number of trainings to be conducted – minimum 16 trainings. Focus regions are Kyiv, Chernihiv, Dnipropetrovsk, Kharkiv, Kherson, Zaporizhzhia, Sumy, and Mykolayiv. Number of local authorities to participate in one training – minimum 10 local authorities (TBD) and up to 30 participants at each training. The duration of the training – up to 2 days. The Grantee should conduct a series of Q&A sessions after each training topic. The preferred training format is offline with compliance with security measures. Each training should contain before- and after-assessment of participants' knowledge. Training and post-training materials should also be packaged for dissemination and transfer to MOH / NHSU and/or other stakeholders. The Grantee should ensure the follow-up support and consultations for the training participants.

Component 5. Develop and conduct capacity-building activities for local authorities (owners of HCFs) and managerial teams of HCFs on legal and financial issues.

The training course should include financial and legal components in the common interests of both target groups – local authorities (owners of HCFs) and managerial teams of HCFs (i.e., regional support programs focused on health areas, financial and strategic planning, cooperation with HCFs with different owners, attracting and usage of humanitarian aid, attracting and usage of international technical assistance, regional budgeting focused on health, financial planning of hospital network, introduction of paid services as additional funding, etc.). The trainings should be accompanied by HRS-developed materials, reports, manuals, and updated electronic instruments. The Grantee should develop a concept, agenda, schedule, list of trainers, questionnaires, hand-out materials, home tasks, etc. The total number of trainings to be conducted – minimum 8 trainings (1 per region). Focus regions are Kyiv, Chernihiv, Dnipropetrovsk, Kharkiv, Kherson, Zaporizhzhia, Sumy, and Mykolayiv. Number of participants in one training – up to 30 participants at each training. The duration of the training – up to 2 days. The Grantee should conduct a series of Q&A sessions after each training topic. The preferred training format is offline with compliance with security measures. Each training should contain before- and after-assessment of participants' knowledge. Training and post-training materials should also be packaged for dissemination and transfer to

MOH / NHSU and/or other stakeholders. The Grantee should ensure the follow-up support and consultations for the training participants.

Component 6. Disseminate the updated electronic tools InSight and Pay&Care and packages of supporting materials (HRS-developed).

Provide technical support to updating electronic tools InSight and Pay&Care and packages of supporting materials (HRS-developed), support them within all communication channels, and include them in the training materials under Grant Components 3-5.

Component 7. Support engagement of the selected HCFs in HRS activity focused on developing and implementing temporary duty assignments.

Provide as-needed support to the HRS team while developing legal and financial recommendations for HCFs to implement temporary duty assignments (TDAs) to address emerging war-related health needs in regions with active hostilities and/or liberated/de-occupied regions. The support might include but not be limited to establishing and maintaining the working relationships with the HCFs from the five priority regions (as well as support their selections). Support the working communication and data collection to be done by the HRS team.

Component 8. Develop Grant Final Report.

Develop and approve the Grant Final Report, including results under all components according to HRS requirements with the HRS team.

3.5. Deliverables and Activities

Deliverable 1. Developed a detailed work plan with responsible team members and deadlines for each task

Quantity: 1

Due Date: *Due within two weeks after award*

Format: *Word document*

Deliverable 2. Conducted an online survey among local authorities and HCFs to identify the critical training needs

Quantity: 1

Due Date: January 12, 2024

Format: PowerPoint, Word, Excel documents, questionnaire links, etc.

Deliverable 3. Developed and conducted capacity-building activities issues for managerial teams of HCFs on legal and financial

Quantity: 16 trainings

Due Date: July 31, 2024

Format: Word, Excel, PowerPoint documents, online forms, etc. All reporting documents due to HRS requirements (submit to HRS within 2 working days after the training event)

Deliverable 4. Developed and conducted capacity-building activities for local authorities (owners of HCFs) on legal and financial issues

Quantity: 16 trainings

Due Date: July 31, 2024

Format: Word, Excel, PowerPoint documents, online forms, etc. All reporting documents due to HRS requirements (submit to HRS within 2 working days after the training event)

Deliverable 5. Developed and conducted capacity-building activities for local authorities (owners of HCFs) and managerial teams of HCFs on legal and financial issues

Quantity: 8 trainings

Due Date: July 31, 2024

Format: Word, Excel, PowerPoint documents, online forms, etc. All reporting documents due to HRS requirements (submit to HRS within 2 working days after the training event)

Deliverable 6. Disseminated the updated electronic tools InSight and Pay&Care and packages of supporting materials (HRS-developed)

Quantity: 2 tools and 2 packages

Due Date: August 30, 2024

Format: PowerPoint, Word, Excel documents, questionnaire links, etc.

Deliverable 7. Support engagement of the selected HCFs in HRS activity focused on developing and implementing temporary duty assignments

Quantity: at least 5 HCFs

Due Date: September 13, 2024

Format: PowerPoint, Word, Excel documents, questionnaire links, etc.

Deliverable 8. Developed Grant Final Report

Quantity: 1

Due Date: September 30, 2024

Format: PowerPoint, Word, Excel documents, questionnaire links, etc.

All deliverables under Grant components should be developed by the Grantee and approved by the HRS team.

3.6. General Milestones and Associated Timelines

For this type of Grant, fund disbursement is made based on verification of milestone completion. Grant activities will be monitored and evaluated against these milestones:

#	Milestone	Milestone Verification	Expected Date of Completion
1	Detailed work plan	- Approved work plan	Due within two weeks after awarding
2	Conducted an online survey among local authorities and HCFs to identify the critical training needs	- Online questionnaires - Results of conducted survey due to HRS requirements - Report with results	January 12, 2024
3	Developed and conducted capacity-building activities issues for managerial teams of HCFs on legal and financial	- Approved packages for trainings - Approved reporting packages due to HRS requirements	July 31, 2024

#	Milestone	Milestone Verification	Expected Date of Completion
4	Developed and conducted capacity-building activities for local authorities (owners of HCFs) on legal and financial issues	<ul style="list-style-type: none"> - Approved packages for trainings - Approved reporting packages due to HRS requirements 	July 31, 2024
5	Developed and conducted capacity-building activities for local authorities (owners of HCFs) and managerial teams of HCFs on legal and financial issues	<ul style="list-style-type: none"> - Approved packages for trainings - Approved reporting packages due to HRS requirements 	July 31, 2024
6	Disseminated the updated electronic tools InSight and Pay&Care and packages of supporting materials (HRS-developed)	<ul style="list-style-type: none"> - Approved packages of documents - Approved reporting packages due to HRS requirements 	August 30, 2024
7	Support engagement of the selected HCFs in HRS activity focused on developing and implementing temporary duty assignments	<ul style="list-style-type: none"> - List of HCFs with contacts of responsible staff - Supporting technical documents 	September 13, 2024
8	Developed Grant Final Report	<ul style="list-style-type: none"> - Approved report due to HRS requirements 	September 30, 2024

3.7. Key Personnel

Key personnel must have relevant education and experience (reflected in CVs) and provide the workload information. The key personnel shall not be changed throughout the project execution without justification.

The Grantee must demonstrate various expertise to cover different activities under the Grant – staff and/or consultants ready to be contracted with proficiency in:

- Health financing management,
- Legal management of HCFs and local authorities;
- Interaction with and engaging HCF management and local authorities;
- Local governance, planning in social and economic spheres.

The Grantee’s team should include highly professional international consultants with appropriate practical experience under the activities described below.

3.8. Grant Program Expected Results

Outputs:

16 capacity-building activities (training courses) conducted for managerial teams of HCFs

16 capacity-building activities (training courses) conducted for local authorities (owners of HCFs)

8 capacity-building activities (training courses) conducted for HCFs and local authorities (owners of HCFs) jointly

at least 35% average increase in participants' knowledge after participation in capacity-building events (according to pre- and post-training evaluations)

Updated electronic tools InSight and Pay&Care and packages of supporting materials (HRS-developed) disseminated among training participants and eight regions

Short-term outcomes:

Up to 1,000 people (representatives of HCFs and local authorities) trained (received practical knowledge and skills) on legal and financial issues related to health reform implementation and recovery during and after the war, equipped and guidance to improve their understanding of the restoration and recovery efforts and how to operate successfully with financial sustainability during the war and post-war periods

Long-term outcomes:

Managerial teams of HCFs and local authorities improve their sustainability to operate under challenging conditions within the health sector and Ukraine, and the population receives broader access to high-quality medical services (due to HRS conducted in November 2024 online and phone survey among the training participants)

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 information about existing training needs for HCFs and local authorities.
- Please, define the target audience and respective problems exists.

- GOALS, OBJECTIVES, AND GEOGRAPHIC FOCUS OF GRANT ACTIVITY [maximum 1 page]

- Describe final goal and objectives, and planned coverages (separately for HCFs and local authorities).

- EXPECTED RESULTS AND TECHNICAL STRATEGIES [maximum 2 pages]

- Give specific approaches to conducted the described grant components.
- Identify best practices and evidence base/rationale that have informed the project interventions.
- The organization must demonstrate its ability to effectively implement grant objectives (e.g. it is already working in that area or has strong relationships and can quickly expand to that area).

- IMPLEMENTATION PLAN/ACTIVITIES [maximum 2 pages]

- Provide a detailed grant implementation plan (see the template in Annex A - PROJECT IMPLEMENTATION PLAN).
- Based on a developed implementation plan, please, provide the list of grant activity milestones using the table from Section 3.5. For Fixed Amount Awards, the budget is aligned to specific milestones, and fund disbursement is made based on verification of milestone completion (see Section 5 for more details). Grant activities will be monitored and evaluated against these milestones.
- The work plan must deliver the milestones and ensure the requirements of its expected time of completion.

- COORDINATION AND COLLABORATION [maximum 1 page]

- Describe how you will collaborate and coordinate grant activities with other stakeholders, including cooperation with communal healthcare facilities and local authorities, and explain the selection of respondents and facility data collection approach.

- MANAGEMENT PLAN [maximum 1 page]

- Indicate the number of staff you are planning to launch to the activity's implementation.
- Describe how you will coordinate and monitor the implementation plan.
- Describe how the project will be managed within the Grant.
- Indicate whether you have experience in cooperation with international organizations and charitable foundations with health care facilities.

- 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).
- Indicate contacts who will liaise with the HRS Project.
- Provide additional information about the experience of your organization in the implementation of the socioeconomic studies.
- Provide information about the past performance of your organization as an ANNEX C - INFORMATION ON PREVIOUS ASSISTANCE AWARDS OR CONTRACTS.

Annexes (number of pages not limited)

ANNEX A – GRANT ACTIVITY IMPLEMENTATION PLAN

ANNEX B – PROJECT IMPLEMENTATION TEAM (CVs)

ANNEX C - INFORMATION ON PREVIOUS ASSISTANCE AWARDS OR CONTRACTS

4 BUDGET CONTENTS

5.1. BUDGET AND PAYMENT TERMS

The approximate budget amount shall not exceed 8,600,000 UAH. The budget should be produced by milestones. The budget items, 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.

Suggested milestones can be found in section 3.6, Grant Milestones and Associated Timelines.

5.2. COST SHARE

Cost sharing is not a requirement for RFA #201

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.

5 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
1. Statement of Need	5
2. Project Goal, Objectives, and Geographic Focus	5
3. Technical Strategies	20
4. Implementation Plan / Project Activities	20
5. Coordination and Collaboration	10
6. Management Plan	10
7. Organizational Capacity	20
8. Budget, Budget Notes and Cost Reasonableness	10
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.

6 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 an grant award/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 grant award /contract (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 USAID Health Reform Support 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 USAID:

- 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

