



HEALTH REFORM SUPPORT

REQUEST FOR APPLICATIONS: “PROVIDE TECHNICAL SUPPORT FOR THE NATIONAL HEALTH SERVICE OF UKRAINE’S OUTREACH CAMPAIGN, FOCUSED ON THE CURRENT STAGE OF HEALTH CARE FACILITY REFORMS.”

RFA #103

A USAID/UKRAINE FUNDED PROJECT

March 2024

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Table of contents

I	SUMMARY	4
1.1.	USAID Health Reform Support (HRS) Project	4
1.2.	USAID HRS Request for Applications (RFA) Summary	4
2.	INSTRUCTIONS FOR APPLICANTS	6
2.1.	General	6
2.2.	RFA Contact Information	6
2.3.	Questions and Clarifications	6
2.4.	Applications Due Date and Time	7
2.5.	Application Delivery Address	7
2.6.	Type of Award	7
2.7.	Submission Requirements	7
2.8.	Eligibility	7
2.9.	Application Conditions Precedent	8
2.10.	Late Applications	8
2.11.	Modification/Withdrawal of Applications	9
2.12.	Disposition of Applications	9
3.	STATEMENT OF WORK	10
3.1.	Background and Specific Challenges to be Addressed by this Grant	10
3.2.	Grant Objective	10
3.3.	Indicators	11
3.4.	Specific Tasks Under this Statement of Work	12
3.5.	Deliverables and Activities	13
3.6.	General Milestones and Associated Timelines	15
3.7.	Key Personnel	22
3.8.	Grant Program Expected Results	22
4.	TECHNICAL APPLICATION CONTENTS	24
5.	BUDGET CONTENTS	27
6.	SELECTION	28
7.	REFERENCES, TERMS & CONDITIONS	29
7.1.	References (choose from the list below as applicable)	29
7.2.	Terms and Conditions	29

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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 the servicedelivery system at all levels.

HRS understands that effective communication between national stakeholders and local and regional authorities, facility owners and patients is crucial for successful health reform implementation securing access to effective medical care for Ukrainians. The Program of Medical Guarantees launched in 2024 raised many questions and created a demand for knowledge with facility owners, medical staff and public on new rules, requirements, and benefits of health care system. To help the National Health Service of Ukraine (NHSU) to meet this demand HRS announces the Grant provide logistics and event organization services for media events, round tables in 18 selected regions and capital Kyiv and create publications to strengthen the communication of current health reforms to regional and local authorities and public.

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 to organize and conduct regional outreach events for different audiences. These events will secure constant communications on current health reforms to regions and help to prioritize health providers' accountability to both local communities and patients under their PMG contracts. This activity will improve knowledges of Ukrainians how to get to free medical care guaranteed by the state and create an ongoing stream of positive stories of health transformation in national, regional mass media and with the general public.

Period of Performance: The period of performance for the Grant is approximately eight (8) months, from April 15, 2024, to December 31, 2024. The application work plan and budget should reflect the 8-month 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 15 400 000 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 April 9, 2024. Questions should be received by close of business (COB) Ukraine local time on March 20, 2024, and responses to questions will be provided by March 22, 2024.

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. PROJECT IMPLEMENTATION TEAM (CVs)
- Annex C. Information of Previous Assistance Awards/Contracts

Attachment 2: Budget and Budget Notes

- Annex D. Supporting Data for Cost Estimates

Attachment 3: Information about Applicant

Attachment 4: Certifications and Assurances from Applicant

- Annex E. Documents Demonstrating Applicant's Eligibility and Capabilities
- Annex F. Environmental Self-Assessment Form
- Annex G. 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# 103.
- 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 March 20, 2024 to the email address noted above. Only questions received by this date will receive a response.
- **Responses:** By March 22, 2024, 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 **March 19, 2024, at 15:00 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, March 19, 2024.**

2.4. Applications Due Date and Time

Closing Date: April 9, 2024

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 project anticipates awarding one (1) Fixed Amount Award in response to RFA# 103 with a ceiling amount of **up to 15 400 000 UAH**.

2.7. Submission Requirements

- **Language:** The application and all associated correspondence must be in English. 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 # 103.
- **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 Applicant is an institution officially registered in Ukraine for not less than 3 years;
- The Applicant has strong experience working with government agencies responsible for health sector.
- The Applicant has experience of at least 10 years in organizing and conducting logistics for regional outreach events and events itself and demonstrate results of such a type of campaigns and, in particular has experience of organizing and conducting awareness events during war time in Ukraine. And also has experience of at least 10 years of working with local and regional media and present up-to-date data base.
- The Applicant has adequate staff members to implement regional events with high intensity – 2-3 events per week covering 3-4 regions of Ukraine or can demonstrate the approach to promptly mobilize or outsource the required professionals.
- The Applicant must present previous achievements such as results of conducted regional awareness activities – social media posts, articles and other proven results.

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

The current situation in Ukraine – war with Russia since February 2022 - exhausts the National Health Service of Ukraine (NHSU) staff and financial resources, limiting their internal capacity to arrange and implement regional outreach events to communicate the current health reforms. These reforms include: state-funded Program of Medical Guarantees, introduction of a robust monitoring of providers' compliance with terms of PMG contracts, enhancement of public accountability at health care facilities (HCF) by introduction of Supervisory Boards, etc.

National stakeholders' inability to visit regions, work with local authorities, owners of health care facilities, medical community and the public in an in-person format creates an adverse, at times inaccurate, perception of current reform efforts and achievements. Some local authorities worry facilities outside the network will close, facility administrators raise concerns about future PMG contracting and managing financial flows, and patients fear they cannot receive care in locations they used to. Furthermore, local media outlets do not have clear and effective access to first-hand information from national authorities, risking the spread of misinformation and jeopardizing the reform's success.

To address this issue, HRS started providing technical support to the NHSU in August 2023, including logistics and event organization, video clip production, video release, photos and publications. HRS and the NHSU jointly conducted 55 events for local authorities, media, and patients' organizations, covering over 1,800 participants in 18 oblasts of Ukraine, including the city of Kyiv. 95% of participants who provided feedback reported the events improved their understanding of current health reforms, and they will use their new knowledge in their work.

However, the attendants of the events – HCFs owners, media, patients' organizations expressed their demand in further regular communications with national stakeholders to resolve issues arising with the PMG implementation and to promote health reforms and increase awareness and access of patients for free medical care. Pending questions that remained are as follows: further implementation of the PMG 2024, providers' performance monitoring and introduction of Supervisory Boards that will guide HCFs work under PMG securing free medical services for patients and how patients' needs in medical care are addressed. The National Health Service of Ukraine addressed the USAID HRS with an inquiry to continue support outreach events and awareness campaign of the PMG 2024 for patients and support outreach campaign in health care facilities.

In terms of new technical support, HRS is seeking a partner to continue provide logistics and event organization services for media events, round tables in 18 selected regions and capital of Kyiv and develop and distribute posters and brochures on services available under the PMG 2024 with detailed patients' route to access it, and secure publications to strengthen the communication of current health reforms to regional and local authorities and public.

3.2. Grant Objective

This grant will contribute to the achievement of HRS Objective I – Strengthen the health system governance. The Grant “Provide technical support for the National Health Service of Ukraine's outreach campaign, focused on the current stage of health care facility reforms” will support activity 1.9 Support

GOU communication and outreach campaigns to HCF owners, administrators, health workers and health care consumers to foster reform buy-in.

This grant will create an informational discussion platform between all interested target audiences – stakeholders, medical community and patients to increase awareness on the ongoing health care reforms and benefits that it suggests to Ukrainians improving access to free and effective medical care across the country from a small village to a big city.

3.3. Indicators

Output indicator:

- 77 in-person communication events conducted by NHSU for local authorities, and health facilities' administrators in selected regions;
- At least 400 HCF owners and managers reported upon the completion of events that they now have greater knowledge and communication tools to improve medical care access and delivery to local patients and communities;
- 3,000 HCFs equipped with PMG informational materials and roadmap on formation of Supervisory Boards that will help facilities to promote services delivered for patients and make it easier for patients to find these services;
- 90 media representatives covered with NHSU press-facing events to increase awareness of Ukrainians in selected regions and improve access to health services;
- 200 representatives of patient rights' organizations covered by two-way dialog with national authorities to improve access to health services.

Data source: Agenda, lists of participants, information messages/press releases, shared information materials, protocols/resolutions/minutes (if any), post events' survey questionnaires and summarized feedback reports developed by Grantee for/ based on questionnaire conducted after each awareness event for the particular target audience (media, HCFs' managers, HCFs' owner's, patient rights' organizations).

Jointly with the NHSU' regional departments, Grantee will gather photo reports upon the distribution informational materials with HCFs. **Outcome indicators:**

Short-term outcomes:

- 70% of regions (19 in total) covered with NHSU communication activities at the local level to improve PMG implementation.
- 400 publications developed and released in regional and local media upon events.
- At least 20 patient rights' organizations empowered with knowledge about the current stage of health reform and opportunities within it to increase awareness of patients.

Grantee will also report on Number of views of released communication materials by target audience to assess the communication reach within the grant activities.

Data source: Agenda, lists of participants, post even questionnaires and summarized feedback reports. Grantee will conduct a media monitoring after each visit to the region to gather data on produced informational materials and reached audience (number of views,) by HCF, media and patient organization to evaluate how informed the regional community is about current reforms in health care sector.

Long-term outcomes:

- 92% of paid contracts out of all signed contracts between providers and NHSU (2024).

- The population of 19 selected regions gained broader access to health services due to increased awareness on how to receive free-of-charge services because of shared information by local and regional media and patient rights' organizations.

Data source: NHSU data on signed and paid contracts, state statistics on population in selected regions.

3.4. Specific Tasks Under this Statement of Work

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

Specific task 1. Organizing the logistic for two-days business trips for 8 experts from Kyiv to 18 capitals of the regions:

- Transfer from Kyiv to the capital of the region and back
- Car transfer cross the city for two days
- Accommodation for 8 persons (separate rooms) for two days with breakfasts

Specific task 2. Organizing and conducting 19 press conferences for regional media in 18 regions of Ukraine and the capital of Kyiv to provide regions with knowledge on first results of provider's service delivery monitoring.

- Develop and distribute a full informational package to support each press event – press announcement before press events and press release, printing and sharing of press kits, social media posts, video and photo releases for media upon press events;
- Secure the inviting and presence of the media at each press event – minimum 10 Media representatives;
- Secure the placement of press releases, video, and photo releases within national and regional media upon media events;
- Secure the follow-up interviews in Media upon the event.
- Media monitoring
- Event reporting

Specific task 3. Organizing and conducting 58 round tables for medical community, regional authorities, hromadas, NGOs in 18 regions of Ukraine and in the capital of Kyiv on further implementation of the PMG 2024, providers' performance monitoring and introduction of Supervisory Boards.

- Secure the organizational and technical support of the events: facility for event conduction, speaker's microphones, plates, laptops for presentation materials broadcasting, big demonstration screens for presentation materials broadcasting, folders with materials for participants of the events and online zoom broadcasting.
- Securing invitation and presence of participants at the events
- Securing photo of the event
- Event reporting

Specific task 4. Production and Distribution of 30,000 informational materials on the PMG 2024 and on formation of the Supervisory Boards for the 3,000 HCFs. These materials will

explain to patients what type of medical service under the PMG 2024 they can receive in the health care facility and the route to do it:

- a) Secure the design of information materials.
- b) Secure printing of information materials.
- c) Conduct negotiations with interregional departments of the NHSU on the distribution of the informational materials on the PMG 2024 and on the Supervisory Boards in the HCFs.
- d) Secure the distribution of the informational materials on the PMG 2024 in the HCFs and reporting on it.

Specific task 5. Reporting. The grantee should conduct the final report outlining its major achievements of technical support provided to these outreach events.

3.5. Deliverables and Activities

The Grantee shall use their existing network of experts and partners, their experience, knowledge of national and international best practices, 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 the Grantee in Ukrainian:

Activity 1. Develop work plan and timeline and Approval of implementation plans for events.

Sub activity 1.1 Develop and finalize grant work plan/implementation plan of the activities with timelines.

Deliverables 1.1: Description of actions, including separation of three distinct implementation stages

Sub activity 1.2 Develop events planning and design.

Deliverables 1.2: Approval of design and implementation plan for press conferences, round tables etc.

Activity 2. Implementation Stage I

Sub activity 2.1. Press Conferences conducted.

Deliverables 2.1: Full support package on press conferences cycle – preparation and implementation: invitation and accreditation of media preparing and disseminating press announcement, press release, post release –post for social media upon press conference and media monitoring publications after each press conference and reporting after each event being conducted.

Sub activity 2.2 Round tables for healthcare stakeholders conducted.

Deliverables 2.2: Full support on round tables cycle – preparation and implementation that includes rent/provision of a venue, invitation of speakers, preparing and disseminating announcement, short articles and social media posts upon each event and media monitoring publications after the event and reporting after each event.

Sub activity 2.3 2.3 Informational materials developed, designed.

Deliverables 2.3 Developed materials and designed on the PMG 2024 and on roadmap on introduction of Supervisory Boards approved and delivered.

Sub activity 2.4 Informational materials distributed within HCFs.

Deliverables 2.4 A report on distribution of informational materials on the PMG 2024 and on roadmap on introduction of Supervisory Boards with HCFs received.

Activity 3. Implementation Stage 2

Sub activity 3.1. Press Conferences conducted.

Deliverables 3.1: Full support package on press conferences cycle – preparation and implementation: invitation and accreditation of media preparing and disseminating press announcement, press release, post release –post for social media upon press conference and media monitoring publications after each press conference and reporting after each event being conducted.

Sub activity 3.2 Round tables for healthcare stakeholders conducted.

Deliverables 3.2: Full support on round tables cycle – preparation and implementation that includes rent/provision of a venue, invitation of speakers, preparing and disseminating announcement, short articles and social media posts upon each event and media monitoring publications after the event and reporting after each event.

Sub activity 3.3 Informational materials developed, designed.

Deliverables 3.3 Developed materials and designed on the PMG 2024 and on roadmap on introduction of Supervisory Boards approved and delivered.

Sub activity 3.4 Informational materials distributed within HCFs.

Deliverables 3.4 A report on distribution of informational materials on the PMG 2024 and on roadmap on introduction of Supervisory Boards with HCFs received.

Activity 4. Implementation Stage 3

Sub activity 4.1. Press Conferences conducted.

Deliverables 4.1: Full support package on press conferences cycle – preparation and implementation: invitation and accreditation of media preparing and disseminating press announcement, press release, post release –post for social media upon press conference and media monitoring publications after each press conference and reporting after each event being conducted.

Sub activity 4.2 Round tables for healthcare stakeholders conducted.

Deliverables 4.2: Full support on round tables cycle – preparation and implementation that includes rent/provision of a venue, invitation of speakers, preparing and disseminating announcement, short articles and social media posts upon each event and media monitoring publications after the event and reporting after each event.

Sub activity 4.3 Informational materials developed, designed.

Deliverables 4.3 Developed materials and designed on the PMG 2024 and on roadmap on introduction of Supervisory Boards approved and delivered.

Sub activity 4.4 Informational materials distributed within HCFs.

Deliverables 4.4 A report on distribution of informational materials on the PMG 2024 and on roadmap on introduction of Supervisory Boards with HCFs received.

Activity 5. Implementation Stage 4

Sub activity 5.1. Press Conferences conducted.

Deliverables 5.1: Full support package on press conferences cycle – preparation and implementation: invitation and accreditation of media preparing and disseminating press announcement, press release, post release –post for social media upon press conference and media monitoring publications after each press conference and reporting after each event being conducted.

Sub activity 5.2 Round tables for healthcare stakeholders conducted.

Deliverables 5.2: Full support on round tables cycle – preparation and implementation that includes rent/provision of a venue, invitation of speakers, preparing and disseminating announcement, short articles and social media posts upon each event and media monitoring publications after the event and reporting after each event.

Sub activity 5.3 Informational materials developed, designed.

Deliverables 5.3 Developed materials and designed on the PMG 2024 and on roadmap on introduction of Supervisory Boards approved and delivered.

Sub activity 5.4 Informational materials distributed within HCFs.

Deliverables 5.4 A report on distribution of informational materials on the PMG 2024 and on roadmap on introduction of Supervisory Boards with HCFs received.

Activity 6. Prepare the Program report outlining its major achievements.

Deliverables 6 Final report received and approved by HRS.

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 Number and Name	Grant Activity	Milestone Verification	Recommended Duration	Expected Date of Completion
I. Grant work plan and timeline and Approval of	I.I. Develop and finalize grant work plan/implementation	I.I. HRS reviews and approves the grant	1 week	Due within 1 week after awarding

Milestone Number and Name	Grant Activity	Milestone Verification	Recommended Duration	Expected Date of Completion
implementation plans for events	<p>on plan of the activities with timelines.</p> <p>1.2. Events planning and design</p>	<p>work plan/implementation on plan of the activities with timelines and resources.</p> <p>1.2. HRS reviews and approves design and implementation plan for press conferences, round tables etc.</p>		
2. Implementation Stage I	<p>2.1 Press Conferences</p> <p>2.2 Round tables for healthcare stakeholders.</p> <p>2.3 Informational materials developed, designed.</p> <p>2.4 Informational materials distributed within HCFs</p>	<p>2.1 HRS receives from grantee full support on press conferences cycle – preparation and implementation: invitation and accreditation of media, preparing and disseminating press announcement, press release, post release –post for social media upon press conference and media monitoring publications after each press conference and reporting after each event being conducted.</p> <p>2.2. HRS receives from grantee full support on round tables cycle – preparation and implementation</p>	7 week	Due within 7 weeks after awarding

Milestone Number and Name	Grant Activity	Milestone Verification	Recommended Duration	Expected Date of Completion
		<p>that includes rent/provision of a venue, invitation of speakers, preparing and disseminating announcement, short articles and social media posts upon each event and media monitoring publications after the event and reporting after each event</p> <p>2.3. HRS receives from grantee developed materials on the PMG 2024 and on roadmap on introduction of Supervisory Boards.</p> <p>2.4. HRS receives from grantee a report on distribution of informational materials on the PMG 2024 and on roadmap on introduction of Supervisory Boards with HCFs.</p>		
3. Implementation Stage 2	<p>3.1 Press Conferences</p> <p>3.2 Round tables for healthcare stakeholders.</p> <p>3.3 Informational materials developed, designed.</p> <p>3.4 Informational materials distributed within HCFs</p>	3.1 HRS receives from grantee full support on press conferences cycle – preparation and implementation: invitation and accreditation of media,	14 week	Due within 14 weeks after awarding

Milestone Number and Name	Grant Activity	Milestone Verification	Recommended Duration	Expected Date of Completion
		<p>preparing and disseminating press announcement, press release, post release –post for social media upon press conference and media monitoring publications after each press conference and reporting after each event being conducted.</p> <p>3.2. HRS receives from grantee full support on round tables cycle – preparation and implementation that includes rent/provision of a venue, invitation of speakers, preparing and disseminating announcement, short articles and social media posts upon each event and media monitoring publications after the event and reporting after each event</p> <p>3.3. HRS receives from grantee developed materials on the PMG 2024 and on roadmap on introduction of Supervisory Boards.</p>		

Milestone Number and Name	Grant Activity	Milestone Verification	Recommended Duration	Expected Date of Completion
		3.4. HRS receives from grantee a report on distribution of informational materials on the PMG 2024 and on roadmap on introduction of Supervisory Boards with HCFs.		
4. Implementation Stage 3	4.1 Press Conferences 4.2 Round tables for healthcare stakeholders. 4.3 Informational materials developed, designed. 4.4 Informational materials distributed within HCFs	4.1 HRS receives from grantee full support on press conferences cycle – preparation and implementation: invitation and accreditation of media, preparing and disseminating press announcement, press release, post release –post for social media upon press conference and media monitoring publications after each press conference and reporting after each event being conducted. 4.2. HRS receives from grantee full support on round tables cycle – preparation and implementation that includes rent/provision of a venue, invitation of speakers,	21 week	Due within 21 weeks after awarding

Milestone Number and Name	Grant Activity	Milestone Verification	Recommended Duration	Expected Date of Completion
		<p>preparing and disseminating announcement, short articles and social media posts upon each event and media monitoring publications after the event and reporting after each event</p> <p>4.3. HRS receives from grantee developed materials on the PMG 2024 and on roadmap on introduction of Supervisory Boards.</p> <p>4.4. HRS receives from grantee a report on distribution of informational materials on the PMG 2024 and on roadmap on introduction of Supervisory Boards with HCFs.</p>		
5. Implementation Stage 4	<p>5.1 Press Conferences</p> <p>5.2 Round tables for healthcare stakeholders.</p> <p>5.3 Informational materials developed, designed.</p> <p>5.4 Informational materials distributed within HCFs</p>	<p>5.1 HRS receives from grantee full support on press conferences cycle – preparation and implementation: invitation and accreditation of media, preparing and disseminating press announcement, press release, post release –post for</p>	29 week	Due within 29 weeks after awarding

Milestone Number and Name	Grant Activity	Milestone Verification	Recommended Duration	Expected Date of Completion
		<p>social media upon press conference and media monitoring publications after each press conference and reporting after each event being conducted.</p> <p>5.2. HRS receives from grantee full support on round tables cycle – preparation and implementation that includes rent/provision of a venue, invitation of speakers, preparing and disseminating announcement, short articles and social media posts upon each event and media monitoring publications after the event and reporting after each event</p> <p>5.3. HRS receives from grantee developed materials on the PMG 2024 and on roadmap on introduction of Supervisory Boards.</p> <p>5.4. HRS receives from grantee a report on distribution of informational materials on the</p>		

Milestone Number and Name	Grant Activity	Milestone Verification	Recommended Duration	Expected Date of Completion
		PMG 2024 and on roadmap on introduction of Supervisory Boards with HCFs.		
6. Reporting stage	6.1 Prepare the Program report outlining its major achievements and Grant Final Report	The Grant Final report approved by HRS.	31-32 week	TBD but not later than 31-32 week after awarding

3.7. Key Personnel

Key personnel must have relevant education and experience (reflected in CVs). The Grantee must demonstrate various expertise to cover different activities under the Grant – staff and/or consultants ready to be contracted with proficiency in:

- Regional coordination
- Media relations
- Copywriting
- Design

3.8. Grant Program Expected Results

Outputs:

- 77 in-person communication events conducted by NHSU for local authorities, and health facilities’ administrators in selected regions.
- At least 400 (minimum) HCF owners and managers reported upon the completion of events that they now have greater knowledge and communication tools to improve medical care access and delivery to local patients and communities.
- 3000 HCFs equipped with PMG informational materials and roadmap on formation of Supervisory Boards that will help facilities to promote services delivered for patients by specific HFC and make it easier for patients to find these services.
- 90 media representatives covered with NHSU press-facing events to increase awareness of Ukrainians in selected regions and improve access to health services.
- 200 representatives of patient rights’ organizations covered by two-way dialog with national authorities to improve access to health services.

Short-term outcomes:

- This grant will create an informational discussion platform between all interested target audiences – stakeholders, medical community and patients to increase awareness on the ongoing reforms in the health care sectors and benefits that it suggests to Ukrainians improving access to free and effective medical care across the country from a small village to a big city. Short-term outcomes will be the following:
- 70% (19) of regions (19 in total) covered with NHSU communication activities at the local level to improve PMG implementation.
- 400 publications in regional and local media developed and released in regional and local media upon events⁹⁰ representatives of the media attended press-facing events.
- At least 20 patient rights' organizations empowered with knowledge about the current stage of health reform and opportunities within it to increase awareness of patients.

Long-term outcomes:

In the long term, the final beneficiaries of this project will be patients and medical communities.

Patients should have a positive image of current health reforms and trust in the Ukrainian health care system that is accessible in all regions of Ukraine, from small villages to big cities, that is effective, free, and that secures treatment, recovery, and saves lives. Patients should see that, despite the war, the Ukrainian health care system works effectively, and the central government has a plan for its development and ensuring quality services.

Medical communities, owners and managers of health care facilities should have a full understanding that only their joint work will help them work effectively on the best adaptation of their HCF and improving the provision of medical services.

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 (9 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:

- **GOALS, OBJECTIVES, AND GEOGRAPHIC FOCUS OF GRANT ACTIVITY – 20 pts**
[maximum 2 page]

- Provide information about existing training needs for HCFs in the area of effective communications.

- Please, define the target audience and respective problems exists.
- Describe final goal and objectives, and planned regional coverages

- EXPECTED RESULTS AND TECHNICAL STRATEGIES & COORDINATION AND COLLABORATION – 25 pts [maximum 3 pages]

- Give specific approaches to conduct 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).
- Describe how you will collaborate and coordinate grant activities with other stakeholders, including cooperation with communal healthcare facilities, and explain the criteria for selection of participating CHF's

- IMPLEMENTATION & MANAGEMENT PLANS/ACTIVITIES – 25 pts [maximum 3 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.
- 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 – 15 pts [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

5. BUDGET CONTENTS

5.1. BUDGET AND PAYMENT TERMS

The approximate budget amount shall not exceed **15 400 000 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 #103

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
1. Project Goal, Objectives, and Geographic Focus	20
2. Technical Strategies & Coordination and Collaboration	25
3. Implementation & Management Plans / Project Activities	25
4. Organizational Capacity	15
5. 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 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

