



HEALTH REFORM SUPPORT

**REQUEST FOR GRANT APPLICATIONS (RFA):
ADVANCING CAPACITY OF PRIMARY HEALTHCARE
PROFESSIONALS TO IMPROVE ACCESS
AND QUALITY OF SERVICES**

RFA #502

A USAID/U.S.A. FUNDED PROJECT

April 2024

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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.

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

Scope of Work: This solicitation seeks applications from eligible organizations with relevant experience and expertise to collaborate with HRS on the implementation of training activities under the Reconnecting People to Care (RPC) Program. The RPC Program operates at the oblast-level with four grantees in Chernihiv, Kharkiv, Dnipropetrovsk, and Zaporizhzhia. These grantees are focusing on local delivery of activities related to scaling up of the multidisciplinary approach, implementation of autonomous nursing, and expanding in the quality of services at primary health care facilities. This grant will support those partners by conducting the foundational trainings and events to the RPC program that will subsequently be cascaded to local communities as part of the oblast-level delivery. This SOW includes refinement/development of training materials, recruitment of trainers, coordinating logistics for activities/events, and collaborating with the other grantees on participant selection/recruitment. The selected grantee is expected to work in close partnership with HRS and the other four RPC grantees to deliver this training program.

The training program itself will focus on mitigating gaps in healthcare professionals' knowledge to enhance the availability of services. By addressing the specific challenges faced by healthcare professionals in conflict-affected regions and directly supporting the educational components of the RPC Program, this grant aims to strengthen the overall impact of RPC initiatives through the training it provides. These contribute to the dissemination of HRS knowledge and maintain high-quality standards in education of health professionals and communities' members.

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

Period of Performance: The period of performance for the Grant is approximately seven (7) months, from June 2024 to December 2024. The application work plan and budget should reflect the 7 month period of performance.

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** the UAH equivalent of \$800,000.00 USD. 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 May 1, 2024. Questions should be received by close of business (COB) Ukraine local time on April 18, 2024, and responses to questions will be provided by April 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. Grant Activity Monitoring and Evaluation Plan
- 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 #502.
- 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: Caroline Grimm

Email: grant@hrs.net.ua

Address: 52A, B. Khmelnytskogo Str., 5th floor, 01054 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 April 18, 2024 to the email address noted above. Only questions received by this date will receive a response.
- **Responses:** By April 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 workshop (webinar) will be held on **April 16, 2024 at 15:30 local time** to clarify grant procedures and grant objectives. Registration can be requested via e-mail at grant@hrs.net.ua by **10:00 local time, April 16, 2024**.

2.4. Applications Due Date and Time

Closing Date: May 1, 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 anticipates the award of up to one (1) Standard Grant Award in response to RFA #502 with a ceiling amount of **up to** the UAH equivalent of \$800,000.00 USD.

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 #502.
- **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);
- Shouldn't appear on the "List of Parties Excluded from Federal Procurement and Non-Procurement Programs";
- Shouldn't be individual, political party, any governmental entity(organization) or official whether at national or municipal level;
- Shouldn't 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.
- 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.
- US Nongovernmental organizations are eligible only for funding up to \$250,000.

2.9. Application Conditions Precedent

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

- That the Applicant organization is an eligible organization legally constituted in the U.S. or under Ukrainian law or is in the process of obtaining such legal status through formal registration;
- 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 grant under this RFA is a vital component of the Reconnecting People to Care (RPC) Program, a strategic initiative implemented by USAID Health Reform Support (HRS). The RPC Program has a far-reaching goal: to strengthen the capacity of local health systems, restore essential services, and address the healthcare needs of communities in Ukraine.

Under the RPC Program, two specific objectives guide its activities:

- **Expand Access to Quality Services:** The program seeks to achieve this objective by increasing the number of Primary Health Centers (PHCs) supported under the HRS grant program. The aim is to enhance the capacity of Health Care Facilities (HCFs) in targeted hromadas to provide readily accessible and essential healthcare services are readily accessible.
- **Target Vulnerable Groups:** A core focus is on increasing access to information, medical services, social support, and psychological services for vulnerable groups. This includes populations facing unique healthcare challenges.

The RPC Program is expecting to operate in the following focus regions of Ukraine: Chernihiv, Kharkiv, Dnipropetrovsk, and Zaporizhzhia oblasts. These regions represent areas where RPC Oblast Grantees are actively engaged in implementing their grant projects, reinforcing the local healthcare systems, reinstating vital services, and ensuring the long-term stability of healthcare.

RPC Oblast Grantees play a central role in realizing the program's objectives within their respective regions, executing grant projects tailored to address specific healthcare needs within their proposed coverage areas. These projects are designed to be community-centric, directly addressing the unique healthcare requirements of the communities they serve.

The program focuses on mitigating gaps in healthcare professionals' knowledge, particularly in regions impacted by war, to enhance availability of services. By addressing the specific challenges faced by healthcare professionals in conflict-affected regions and supporting the educational components of the RPC Program, this grant aims to strengthen the overall impact of RPC initiatives. This includes contributing to the effective dissemination of HRS knowledge to ensure high quality standards in educational events.

3.2. Objective

The overarching objective of the grant under this RFA is to support the implementation of activities of the RPC Program, which is expected to be carried out by 4 grantees in Chernihiv, Kharkiv, Dnipropetrovsk and Zaporizhzhia oblasts. This grant aims to contribute to the effective dissemination of HRS knowledge while ensuring the highest quality standards. Within the framework of this grant, in coordination with HRS, the Grant Recipient is expected to achieve the following grant objectives:

I. Facilitating the Multidisciplinary Approach Scale-Up

The Multidisciplinary Approach (MDA) in healthcare is a collaborative strategy that involves specialists from diverse fields working together to offer comprehensive services – medical, social, and psychological – to individuals or groups based on their specific needs. This approach transcends the boundaries of a single facility, fostering cooperation between various medical and social service

providers. MDA is particularly effective in early identification of needs, attracting and retaining individuals in the healthcare system, especially those from vulnerable groups. By ensuring constant communication and collaboration within the team, a MDA enhances the strength and effectiveness of healthcare delivery.

The Grant Recipient, in collaboration with RPC Grantees, will conduct a series of events aimed at promoting and implementing the MDA at targeted HCFs, with a focus on enhancing collaborative practices among healthcare professionals.

2. Support the Implementation of Autonomous Nursing

Autonomous nursing practices are essential in modern healthcare systems, enabling nurses to provide comprehensive care that extends beyond basic medical care. The initiative will help in improving patient outcomes by ensuring more immediate and holistic care, thereby fostering patient retention within the healthcare system. It also aims to alleviate the workload on doctors, creating a more balanced and collaborative workforce within HCFs.

The Grant Recipient will conduct a series of events, including training of trainers (ToT), training for HCF management, and training for healthcare professionals (doctors and nurses) to facilitate the implementation of autonomous nursing practices at targeted HCFs.

3. Expand the Quality Services through a Comprehensive Training Program

The Grant Recipient will play a crucial role in conducting training programs based on international standards in healthcare delivery to equip healthcare professionals with the knowledge necessary to become effective trainers and educators, as well as supporting the successful implementation of a comprehensive healthcare training program. The goal is to enhance the overall capacity of the healthcare workforce to provide high quality of care by providing trainings through lecture-based sessions.

Throughout the grant implementation, the HRS team will provide specific technical guidance and closely monitor the day-to-day activities of the Grant Recipient to ensure the successful achievement of these grant objectives.

3.3. Indicators

The Indicators section outlines the performance indicators that will be used to measure the success of the grant activities. Performance indicators are essential tools for assessing the progress and impact of individual activities within the grant program. These indicators provide a quantitative and qualitative basis for evaluating the achievement of outputs and outcomes.

The selection of appropriate indicators is crucial for effective monitoring and evaluation. Quantitative indicators, expressed as numbers or percentages, offer clear and measurable targets to strive for. They allow for objective assessments of progress toward program objectives.

The final set of indicators will be determined by the Grant Recipient in the Monitoring, Evaluation, and Learning (MEL) plan within the grant application and approved by HRS. The selected indicators should reflect the priorities and expected outcomes of the grant, facilitating effective monitoring and demonstrating the program's impact.

3.4. Activities and Deliverables

This section outlines the specific events and activities that the Grant Recipient would be expected to undertake to achieve the grant's objectives.

The events would be organized into three key objectives: MDA (Multidisciplinary Approach) Scale-up, Autonomous Nursing Implementation, and a Comprehensive Training Program on the Expansion of Quality Services.

The following table contains a list of events the grantee would be expected to deliver with estimated details describing the format, location, recurrences, duration, and the number of participants involved. These details should assist with the preparation of the proposal M&E plan and budget.

Activity title	Periods (of 2024 year)	Format	Location	Recurrences	Duration (days per recurrence)	Number of participants (per recurrence)	Number of participants (total)
MDA Scale-up							
1. MDA Kick-Off Conference	May-June	Offline	Kyiv	1	1	100	100
2. MDA Training of RPC Oblast Grantees	May-June	Offline	Kyiv	1	3	10	10
3. Training of MDA Leaders (HCFs/hromadas)	July-August	Offline	Kyiv	5	2	30	150
Autonomous Nursing Implementation							
4. Training of HCF Management	May-June	Offline	RPC oblasts	5	1	20	100
5. Training of Doctors (initial wave)	June-July	Offline	RPC oblasts	5	1	20	100
6. Training of Nurses	July-October	Offline	RPC oblasts	15	1	20	300
7. Training of Doctors (second wave)	October- November	Offline	RPC oblasts	5	1	20	100
Comprehensive Training Program on the Expansion of Quality Services							
8. ToT on Expanding Diagnostic Services (Otoscopy, Peak flowmetry, Spirometry)	June	Offline	Kyiv	1	5	15	15
9. ToT on Cancer Prevention and Early Detection (incl. Dermatoscopy)	July	Offline	Kyiv	1	5	15	15
10. ToT on Strategic Planning (HCFs Management)	June	Offline	Kyiv	1	3	15	15
11. Training on Expanding Diagnostic Services (Otoscopy, Peak flowmetry, Spirometry)	July- August	Offline	Kyiv	10	2	20	200
12. Training on Cancer Prevention and Early Detection (incl. Dermatoscopy)	August- September	Offline	Kyiv	10	3	20	200
13. Training on Basics of Palliative Care	August- September	Offline	Kyiv	10	2	20	200
14. Training on Schools for Patients with NCDs	September- October	Offline	Kyiv	10	2	20	200
15. Training on Strategic Planning (HCFs Management)	July-August	Offline	Kyiv	10	2	20	200
16. Training on Management of HIV & TB Cases	May-	Online	-	1	2	500+	500+
17. Training on Pregnancy Management	November	Online	-	1	2	500+	500+
18. Training on Implementing International Clinical Guidelines		Online	-	1	2	500+	500+

Notes:

HRS has identified the preferred location for training delivery for each proposed activity; however, the grantee is ultimately responsible for making determinations about the event location based on their own assessment of the security situation. HRS recognizes the actual location may differ due to context-specific factors that may influence the grantee’s decision-making closer to activities. The grantee should take into consideration the safety and security of participant travel and the means for doing so when making these determinations. Based on recent experiences, HRS believes railway travel is the most likely mode of transportation for inter-city travel, particularly to Kyiv. Please note that international travel will not be supported under this grant. For online events, the number of participants provided is the minimum estimate. The final number of attendees will be determined prior to the event based on registration and participation confirmations.

Within each event, the grantee would be expected to provide all aspects of event logistics, including identifying **event space, equipment needs, participant accommodation, meal and coffee breaks, transportation reimbursement, trainers/consultants services** and continuing professional development (CPD) points’ issue for the health professionals as trainings’ participants. As these activities involve other RPC Oblast grantees and HRS staff, resources may be strategically leveraged for some activities. The below table identifies specific cost planning and cost components for activities that would be the responsibility of this grantee in blue cells below.

Activity title	Event space	Equipment	Accommodation	Meal and coffee breaks	Transportation reimbursement	Trainers/consultants services
1. MDA Kick-Off Conference						
2. MDA Training of RPC Oblast Grantees						
3. Training of MDA Leaders (HCFs/hromadas)						
4. Training of HCF management						
5. Training of Doctors (initial wave)						
6. Training of Nurses						
7. Training of Doctors (second wave)						
8. ToT on Expanding Diagnostic Services (Otoscopy, Peak flowmetry, Spirometry)						
9. ToT on Cancer Prevention and Early Detection (incl. Dermatoscopy)						
10. ToT on Strategic Planning (HCFs Management)						
11. Training on Expanding Diagnostic Services (Otoscopy, Peak flowmetry, Spirometry)						
12. Training on Cancer Prevention and Early Detection (incl. Dermatoscopy)						
13. Training on Basics of Palliative Care						
14. Training on Schools for Patients with NCDs						
15. Training on Strategic Planning (HCFs Management)						
16. Training on Management of HIV & TB Cases						
17. Training on Pregnancy Management						
18. Training on Implementing International Clinical Guidelines						

Event coordination

This category includes the overall scheduling, preparation, and logistics for events. This planning should include participant registration, logistics/equipment set-up, onsite/virtual management, collaboration with partners, development of training materials, certificates for participation, IT support for online events and recruiting.

Event space

This category covers tasks related to selecting and setting up event venues to ensure participant comfort, safety, and effective presentations.

Event equipment

This category encompasses tasks related to preparing and managing event equipment to ensure the smooth execution of the events, including equipment necessary for training.

Accommodation

This group of tasks focuses on managing accommodation arrangements for event participants and coaches. The objective is to ensure comfortable and suitable lodging options, taking into account gender of participants.

Key tasks and responsibilities:

- Arrange hotel accommodation for participants (double rooms, offer the possibility of accommodation on the eve of the event, with availability for up to 30% of participants)
- Arrange hotel accommodation for trainers (single rooms, offer the possibility of accommodation on the eve of the event)

Dining and coffee breaks

This category involves planning and organizing meals, including breakfasts, lunches, and dinners, for event participants. It also includes coordinating coffee breaks during event sessions.

Transportation reimbursement

The Grant Recipient is responsible for reimbursing participants' travel expenses based on their travel documents, including return tickets. Only travel tickets to the event venue and return tickets (railway and bus) are eligible for reimbursement. Fuel costs should not be covered.

Trainers/consultants services

This category includes activities related to selecting and contracting qualified trainers and consultants to update training materials and facilitate various training sessions and events. These experts play a crucial role in delivering high-quality training content to participants and monitoring the implementation of services in hromadas following the completion of the training program.

The Grant Recipient is responsible for managing the selection process, including identifying suitable trainers and consultants, finalizing contracts with trainers and consultants, and supervising their work. To ensure adequate design of the SOW, HRS will provide consultations with the Grantee on the learning outcomes from each training/activity. At a minimum, the SOW will cover the development or updating of training materials, delivery of trainings, and post-training follow-up activities. This will allow the Grantee to recruit and select appropriate candidates for trainings. All trainers and consultants should have extensive experience in the training area and hold all appropriate credentials or have demonstrated knowledge of international best

practices and standards. The Grantee’s proposal should demonstrate its ability to adequately evaluate the qualifications of proposed trainers.

The following table contains the expected number of trainers/consultants for each event, along with the target Level of Effort (LOE). Please note that the rates and LOE may vary based on the specific trainers/consultants selected for each event.

Activity title	Number of trainers/consultants	LOE (days, total for all trainers/consultants)
MDA Scale-up	3	70
Autonomous Nursing Implementation	8	220
ToT on Expanding Diagnostic Services (Otoscopy, Peak flowmetry, Spirometry)	4	32
ToT on Cancer Prevention and Early Detection (incl. Dermatoscopy)	3	24
ToT on Strategic planning (HCFs Management)	3	18
Training on Expanding Diagnostic Services (Otoscopy, Peak flowmetry, Spirometry)	9	45
Training on Cancer Prevention and Early Detection (incl. Dermatoscopy)	8	48
Training on Basics of Palliative Care	8	40
Training on Schools for Patients with NCDs	8	40
Training on Strategic Planning (HCFs Management)	8	40
Training on Management of HIV & TB Cases	2	10
Training on Pregnancy Management	2	10
Training on Implementing International Clinical Guidelines	2	10
Total	68	607

The following list of supporting documentation that is required by HRS to document all training expenses for grants:

1. **Agenda**

A detailed agenda for the event, including session topics, speakers, and schedules.

2. **Event Report**

A comprehensive event report prepared according to the requirements specified by HRS. This report should include information about the event's objectives, activities, outcomes, challenges faced, and recommendations for future improvements etc.

3. **Completed Pre/Post Training Questionnaires**

Pre-training and post-training questionnaires completed by participants. These questionnaires should capture participants' knowledge and skills levels before and after the training.

4. **Analysis of Pre/Post Training Questionnaires**

Report with an analysis of the results of the pre and post-training questionnaires. This analysis should highlight changes in participants' knowledge and skills as a result of the training.

5. **List of Participants with Original Signatures**

A list of event participants, including their signatures, to verify attendance.

6. **List of Participants in Digital Form**

A digital version of the list of event participants.

7. **Training Materials**

All training materials used during the event, including presentations, handouts, reference materials, and any other documents provided to participants.

8. **Photos**

High-quality photos documenting key moments and activities during the event, including photos of participants and trainers. These photos should help capture the essence and impact of the event.

9. **Other Documents upon HRS Request**

Any additional documents or reports required by the monitoring and evaluation plan to document progress toward achieving program objectives.

In addition to these deliverables, the Grant Recipient is also responsible for providing a final report summarizing the overall progress and outcomes of the grant.

3.5. Expected Results and Outcomes

The success of this grant project will be measured by the achievement of specific outputs and outcomes that align with the grant objective. These results will reflect the impact of the grant on improving healthcare practices and strengthening local healthcare systems.

Outputs

100 leaders of HCFs equipped with knowledge on autonomous nursing and its implementation.

100 health and community workers equipped with knowledge on multidisciplinary approach and its implementation.

45 trainers prepared at 3 ToT sessions for further capacity building of health workers to improve health service provision.

2650 health and community workers trained to provide specific health services related to recovery efforts, including:

150 health and community workers trained to implement a multidisciplinary approach

200 health workers (100 nurses, 100 doctors) trained to enhance the nurse's role

200 health workers trained in expanding diagnostic services

200 health workers trained in cancer prevention and early detection

200 health workers trained in basics of palliative care

200 health workers trained in establishing schools for patients with NCDs

500 health workers trained in management of HIV & TB cases

500 health workers trained in pregnancy management

500 health workers trained in implementing international clinical guidelines.

200 managers of HCFs trained in strategic planning.

Short-term Outcomes

60 PHC facilities in 67 hromadas restored/expanded health services as a result of grant implementation:

- 60 PHC facilities expanded services as a result of USAID support
- 60 health facilities implemented new screening or diagnostic methods.

A minimum 20% of increased capacity of health and community workers in health care provision using modern approaches (measured by the results of pre- and post-training questionnaires).

At least 50% of the trainers prepared through the ToT sessions have contributed to capacity-building among healthcare professionals by serving as trainers in a Training Program on the Expansion of Quality Services.

Long-term Outcomes

1,426,772 people (population of target communities) gained broader access to high-quality medical services in USAID-supported facilities (benefitted from USAID support provided for HCFs in their communities on service restoration/ extension/ optimization).

3.6. Key Personnel

The Grant Recipient should adopt a comprehensive and systematic approach to effectively manage the grant project. This approach should encompass the following key principles:

Strategic Planning

Develop a detailed project plan that outlines the project's objectives, activities, timelines, and milestones. This plan should serve as a roadmap for the entire project duration.

Collaborative Coordination

Foster close collaboration with HRS, RPC Oblast Grantees, HCFs, trainers/consultants, and other stakeholders. Effective communication and coordination are essential for project success.

Adaptive Management

Embrace adaptive management practices to respond to changing circumstances, challenges, and opportunities. Regularly assess project progress and adjust strategies as needed to achieve desired outcomes.

Quality Assurance

Maintain a strong focus on the quality of training sessions, events, and deliverables. Implement robust monitoring and evaluation mechanisms to ensure that project activities meet established standards.

Compliance

Adhere to all relevant regulations, including those outlined in the RFA, grant agreement, and HRS requirements. Ensure that all activities are conducted in compliance with legal and ethical standards.

Capacity Building

Invest in the capacity building of project staff to enhance their skills and knowledge.

Data Management

Establish effective data management systems to collect, analyze, and report on project data. Timely and accurate data are crucial for decision-making and reporting.

Reporting and Documentation

Prepare regular progress reports, financial reports, and other required documentation in accordance with HRS guidelines. Maintain comprehensive records of all project activities.

Staffing and Key Positions

The grantee should propose a robust staffing model to support delivery of the proposed activities. To successfully implement the grant project, the following **minimum** key positions are required:

1. **Project Manager** (1 staff member)
Responsible for overall project management, including planning, coordination, and monitoring. The proposed individual should have broad expertise and knowledge about the Ukrainian healthcare system with specialized knowledge in some of the areas covered under this grant's training program. Additionally, the individual should have demonstrated experience managing large USAID-funded grants in Ukraine. The proposed individual should have at least five years of management experience.
2. **Trainer/Consultant Manager** (1 staff member)
Oversees the selection, contracting, and coordination of trainers and consultants for various training sessions.
3. **Financial Manager** (1 staff member)
Manages project finances, budgeting, and financial reporting in compliance with grant requirements. The proposed individual should have substantial experience managing internal financial systems, including establishing effective internal controls and segregation of duties for payment processes. The individual should have at least 5 years of experience with financial reporting for USAID-funded projects, including demonstrate knowledge of applicable regulations.
4. **Monitoring and Evaluation Specialist** (1 staff member)
Designs and implements monitoring and evaluation systems to track project progress and outcomes.

The grantee should thoroughly review the RFA to determine the specific roles that are necessary to implement this project and propose a staffing model based on those needs. HRS expects the grantee to have robust M&E and reporting functions, logistics/planning, strong collaboration with HRS and its grantees, and recruitment function to identify needed trainers.

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 (12 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:

1. BACKGROUND/STATEMENT OF NEED [maximum 1 page]

- Provide a detailed presentation and analysis of the problems and their interrelation at all levels.
- Provide a detailed description of the target groups and final beneficiaries, and their estimated number.
- Clearly identify the specific problems to be addressed by the grant activity, as well as the perceived needs and constraints of the target group(s).
- Demonstrate the relevance of the grant activity to the needs and constraints of the target areas in general and to the target groups/final beneficiaries in particular, and how the grant activity will provide the desired solutions, in particular for the target beneficiaries. Use evidence and data to support your justification.
- Demonstrate the relevance of the grant activity to the objectives and priorities of the USAID [name of project].

2. GOALS, OBJECTIVES AND GEOGRAPHIC FOCUS OF GRANT ACTIVITY [max 1 page]

- Describe the overall objective(s) to which the proposed grant activity aims to contribute.

- Describe the specific objective(s) that the proposed grant activity aims to achieve. Specific objectives should be “SMART” (specific, measurable, achievable, realistic and time-bound).
- State where the grant activity will be implemented (identify geographic areas, location/s, municipalities/cities). Organization must demonstrate its ability to effectively implement services in that target area (e.g. is already working in that area or has strong relationships and can quickly expand services in that area). Applicant must be able to demonstrate “additionality” of the proposed grant activity, which is defined as a rapid scale-up or expansion of an existing program that will require minimal overhead and operational costs.

3. EXPECTED RESULTS AND TECHNICAL STRATEGIES *[max 3 pages]*

3.1. Expected Results

- Indicate how the proposed grant activity will improve the situation of target groups/beneficiaries and technical and management capabilities of target groups and/or local partners, where applicable. Provide link to goals and objectives defined under section 2 above.
- Provide the list of measurable, specific program indicators, that will measure the results of the grant activities. What methods or tools will be used to collect data for the program indicators?
- For each indicator provide specific target values that will demonstrate successful outcomes.
- 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).
- Indicators must align with Annex B Monitoring and Evaluation Plan

3.2. Methodology

- Describe the methods of implementation of the proposed activities and reasons for the proposed methodology.
- If the grant activity is the prolongation of a previous action, explain how it is intended to build on results from the previous action.
- If the grant activity is part of a larger program, explain how it fits or is coordinated with this program. Identify potential synergies with any other current or planned future initiatives, in particular those funded by the USAID.
- Describe the stakeholders’ attitude to the proposed grant activity in general, and to the specific activities in particular.
- If the grant activity will involve investing in new technologies, describe the type of technology and explain how this will benefit the sector as a whole.
- Explain what environmental impacts (if any) will the proposed grant activity have and how will this impact be monitored and addressed.
- If the grant activity is expected to create market distortion, explain how this distortion will be mitigated and provide the relevant market distortion mitigation activities in Implementation Plan.
- Explain how the women and youth will directly benefit from the grant activity (if so) and what impact (if any) will the grant activity have on gender equity and equality and the position of youth.

3.3. Beneficiaries

- Indicate who will be the final beneficiaries of grant activity and provide their estimated number(s), if possible by year of implementation of grant activity.
- Where applicable, provide the gender disaggregated data on beneficiaries, and indicate the number(s) of youth that will benefit from the grant activity, if possible by year of implementation of grant activity.

3.4. Sustainability

- Describe the main preconditions and assumptions for grant activity, during and after the implementation stage.
- Identify the main risks associated with proposed grant activity, mitigation strategy and possible contingency plans. A sound risk analysis should address a range of relevant risk types, such as physical, environmental, political, economic and social risks.
- Explain how sustainability will be established after completion of grant activity, i.e. how the benefits will be produced by grant activity after external funding has ended. This may include specific measures and strategies built into the grant activity, such as institutionalization of activity results, policy support, follow-up activities, ownership by target groups/beneficiaries etc. The following types of sustainability may be addressed:
 - *Economic/financial* sustainability (ensuring acceptable level of financial and economic return; ensuring financing for follow-up activities and future operating and/or maintenance costs etc.);
 - *Institutional-level* sustainability (ensuring institutional and management support to activities and operations after external funding has ended, “local ownership” of outputs and results etc.);
 - *Policy-level* sustainability (institutionalization of policy initiatives and outcomes);
 - *Environmental* sustainability (what environmental implications will the grant activity have and how will potential negative impacts on the environment be avoided or mitigated).

4. IMPLEMENTATION PLAN [maximum 2 page]

- State when the grant activity will be implemented (provide the anticipated start and finish dates).
- Describe in details specific activities that will be undertaken to produce the expected results, also describing activities to be implemented by target population or project partners, justifying the choice of activities, indicating their sequence and interrelation, and specifying where applicable the roles of each partner.
- Provide the detailed Implementation Plan using the provided format and guidelines in Annex A.

5. MONITORING AND EVALUATION [maximum 2 page]

- Provide a narrative description of how the Organization will use monitoring data to guide programming decisions and interventions.
- Provide the detailed information about activities’ performance monitoring in Annex B, using the provided format and guidelines.

6. COORDINATION AND COLLABORATION [maximum 1 page]

- Describe roles and involvement of various actors and stakeholders in grant activity, including local authorities, target groups and partners, and explain why these roles have been assigned to them.
- Indicate how the grant activity will be coordinated with other relevant projects in the target area.
- Describe how the grant activity will be integrated into other projects/services your Organization already offers.

7. MANAGEMENT PLAN [maximum 1 page]

- Describe how the project will be managed. Describe systems that exist or will be put in place to enable Organization to effectively manage the grant activity.

- Describe the composition and organizational structure of the proposed project team, and titles, roles and responsibilities of key personnel. Provide the CVs of up to three key personnel in annex, including the Project Manager. CVs should not exceed one page each.
- Include information on technical and managerial experience of the proposed project manager as well as any other technical personnel. Experienced, qualified personnel in relevant disciplines and areas should be provided for project management and staff.
- Indicate who will liaise with USAID [name of project].

8. ORGANIZATIONAL CAPACITY *[maximum 1 page]*

- Provide a statement of your corporate capabilities. This should be a one-paragraph summary of your organization's key qualifications and capabilities, along with a value proposition for the proposed grant activity. It should indicate who your organization is and what it does, and what a client can expect from your organization.
- Provide a brief description of your present and ongoing actions/projects that have a direct relationship to the proposed grant activity and the actions/projects that demonstrate past experience in implementing similar programs. Describe your Organization's relationship with the target population and demonstrate commitment to working closely with the target population. If applicable, describe relevant collaborative efforts your organization has undertaken jointly or in coordination with other institutions.
- If your organization is a new one, describe the past experience and efforts that resulted in its formation. Please also provide a concise summary of the positive impact that resulted from this past experience.
- Applicants may also provide a list/brief description of any publications or reports that demonstrate any special qualification and experience that your organization has, related directly to the proposed activities (do not attach the publications or reports).
- Provide brief information on up to three (preferably similar) actions/projects managed by your organization for which your organization has received assistance awards or contracts over the past three years in Annex B.

Annexes (number of pages not limited)

Annex A. Grant Activity Implementation Plan

Annex B. Grant Activity Monitoring and Evaluation Plan

Annex C. Information of Previous Assistance Awards/Contracts

Annex D. Supporting Data for Cost Estimates

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)

5 BUDGET CONTENTS

5.1. BUDGET AND PAYMENT TERMS

The approximate budget amount shall not exceed the UAH equivalent of \$800,000.00 USD. The budget should be produced as line items with rates and units, and payment will be remitted as reimbursement for actual costs upon the receipt and successful acceptance of invoice packages. The budget items, associated payment terms, and dates according to the proposed detailed cost estimate will be officially defined based on the applicant's proposal and fixed in the grant award document.

5.2. COST SHARE

Cost sharing is not a requirement for RFA #502.

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 line item 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. Expected Results and Technical Strategies / Anticipated Results	15
2. Implementation Plan and Timeline/Activities	15
3. Coordination and Collaboration/Consultants	20
4. Organizational Capacity	30
5. Budget, Budget Notes, and Cost Reasonableness	20
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

- 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>

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