



Request for Proposals

For

Sub-award

in support of

Challenge TB East Africa Region

Cross Border TB initiative

USAID Cooperative Agreement No. AID-OAA-A-14-00029

Submit Questions to: esther.mungai@kncvtbc.org

Submit Proposals to: Dennis.Chaling@kncvtbc.org

Closing Date for Submission of requests for proposals: 16th February 2017

Managed by: KNCV Tuberculosis Foundation

Funded by: United States Agency for International Development (USAID)

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Abbreviations

ATS	American Thoracic Society
CTB	Challenge TB
CBO	Community based organization
DR-TB	Drug resistant tuberculosis
ECSA-HC	East, Central and Southern Africa Health Community
FHI 360	Family Health International
HIV	Human immunodeficiency virus
IRD	Interactive Research & Development
JATA	Japanese Anti Tuberculosis Foundation
MDR-TB	Multi-drug-resistant tuberculosis
MSH	Management Sciences for Health
NGO	Non- governmental organization
NTP	National Tuberculosis Control Program
PATH	Program for Appropriate Technology in Health
RFP	Request for proposal
TB	Tuberculosis
The Union	The International Union Against Tuberculosis and Lung Disease
USAID	United States Agency for International Development
WHO	World Health Organization

Introduction

KNCV Tuberculosis Foundation

KNCV Tuberculosis Foundation (KNCV) is an international non-profit organization dedicated to the fight against tuberculosis (TB), which is still the second deadliest infectious disease in the world. KNCV is an international center of expertise for TB control that promotes effective, efficient, innovative and sustainable TB control strategies in a national and international context. We are an organization of passionate TB professionals, including doctors, researchers, training experts, nurses and epidemiologists. We aim to stop the spread of the worldwide epidemic of TB and to prevent the further spread of drug-resistant TB (DR-TB).

Over the past century we have built up a wealth of knowledge and expertise, initially by successfully controlling TB in the Netherlands. Since the 1970s, we have also shared our knowledge and expertise with the rest of the world. We operate from a central office in The Hague in the Netherlands, a regional office in Central Asia and country offices worldwide including Kenya where the Challenge East Africa regional project is managed from. KNCV raises funds from private, institutional, corporate, and government donors.

Challenge TB

KNCV is the lead partner in Challenge TB (CTB) project, the current United States Agency for International Development (USAID)-funded five-year (2014-2019) global project to decrease TB mortality and morbidity in high TB burdened countries. We lead an international consortium with eight partner organizations: American Thoracic Society (ATS), Family Health International (FHI 360), Interactive Research & Development (IRD), Japanese Anti Tuberculosis Foundation (JATA), Management Sciences for Health (MSH), Program for Appropriate Technology in Health (PATH), The International Union Against Tuberculosis and Lung Disease (The Union), and the World Health Organization (WHO).

The overarching strategic objectives of CTB are to improve access to quality patients centered care for TB, TB/HIV, and MDR-TB services; to prevent transmission and disease progression; and to strengthen TB platforms. CTB project includes TB control activities in 23 countries and several overarching core projects in multiple countries. For more information, see www.challengetb.org. The CTB East Africa Region project is one of the projects under the CTB program.

Challenge TB in East Africa Regional Project

The CTB East Africa Regional Project (EAR) project focuses its activities in seven countries i.e. Ethiopia, Kenya, Rwanda, Somalia, South Sudan, Tanzania and Uganda. It covers activities that are beyond individual countries and develops demonstration/learning sites

through which best practices can be generated and shared for adoption. For example, this region experiences a lot of cross-border movements within, as well as to and from the region. It also faces unique migration challenges due to the presence of nomadic and semi-nomadic pastoralists in Ethiopia, Kenya, Somalia, South Sudan, Tanzania and Uganda. These regional dynamics are compounded by a general weakness of border and migration management, which is characterized by porous borders. The Cross Border TB Initiative (CBI) seeks to address this and is a partnership between border health operational units (district/county health office) to identify and address the TB issues of border population, transit routes and hubs, and population movement between borders which impact on cross border TB control¹.

The CBI followed KNCV's collaboration with the East, Central and South Africa Health Community (ECSA-HC) to do a situational analysis on cross border TB control in the EA Region. This analysis identified gaps that led to the development of a strategic framework for the CBI (under the EAR project). The objectives of the CBI include:

1. Improve equity in access to TB prevention and care services in the ECSA-HC region irrespective of migration and financial status of the patients;
2. Promote bilateral and multilateral cooperation in TB control for mobile populations across international borders in the EA Region;
3. Promote cross-country collaboration and coordination for improved TB care and prevention across national borders;
4. Improve TB treatment outcomes for mobile populations to match those of local population in member states;
5. Effectively monitor and evaluate the burden of TB among mobile populations such as nomadic, pastoralists etc.

To date, a CBI guide has been developed, a number of border demonstration sites (districts) have been engaged (Garissa/Lower Juba, Marsabit, Turkana/Moroto and Kajiado/Longido), cross-border committees formed, border facilities identified and sensitized, action plans with key activities for cross border collaboration developed in the engaged districts and joint

¹ The main EAR project activities include:

1. Establishing demonstration sites for cross border TB control activities
2. Establishing a patient referral and transfer system among countries
3. Streamlining TB capacity building activities in EAR
4. Establishing a regional digital platform to facilitate exchange of TB medicines
5. Establishing a demonstration site for M/XDR TB management including palliative care
6. Strengthening childhood TB interventions

planning undertaken in some borders. However, identified activities need to be implemented and continued meetings to track implementation held.

The CBI focuses on the following border areas;

Kenya – Ethiopia at Moyale

Kenya – Uganda at Turkana

Kenya – South Sudan at Turkana

Kenya - Tanzania at Namanga.

Kenya – Somalia at Garissa

Purpose of Request for Proposals

This request for proposals (RFP) is intended to identify well established local partner non-governmental organizations (NGOs) / community based organizations (CBOs) or other organizations registered and based in the respective EAR countries with the capacity to support CBI planning and implementation.

The local partners identified will take up and work in these respective border areas to support the day to day operations of the CBI and implementation of the agreed action plans.

Scope of work

Objective:

To operationalize the cross border TB initiative in the respective border areas.

Expected Outcomes/Deliverables

Key tasks that the selected partners will be expected to perform include but are not limited to:

Planning

- a. Supporting the development of micro plans at the facility level and joint action plans for the cross border committee
- b. Preparing a directory of the catchment areas and capture all the relevant data

Implementation

- c. Supervision of border health facilities
- d. Attending and facilitating the cross border health committee meetings
- e. Supporting the cross border health committee in conducting a health situation assessment
- f. Tracking of mobile populations such as pastoralists, nomadic etc
- g. Supporting TB diagnosis in mobile populations
- h. Coordinating with counterpart partners across the border for case finding and case holding
- i. Reaching out to mobile populations and mapping their contact details, migration routes and level of access to TB services. This mapping must also identify an engagement strategy around key opinion and decision makers essential to the project's objectives.
- j. Ensuring the integration of TB issues in the cross border health committee
- k. Supporting TB defaulter tracing
- l. Building the capacity of county TB staff as necessary

Reporting and Follow up

- m. Data collection and reporting based on project indicators
- n. Assisting in the routine reporting of TB cases at a District/ county level
- o. Submitting monthly reports to the CTB EAR team

Sustainability

- p. Design approaches and support the implementation of those approaches as a means to ensure sustainability of the CBI in these areas.

Timeframe:

The timeframe for this RFP is March 2017 to June 2019. The contract will be renewed annually (October 1 to September 30) depending on performance and availability of funding.

Application process

The proposal must be prepared in accordance with the instructions provided in the below section. Each organization shall submit only one proposal per border area.

Issuance of this RFP does not in any way constitute an award or commitment on the part of the CTB nor does it commit to pay for costs incurred in the preparation and submission of the proposal.

To ensure you receive modifications to the RFP, send an email to Dennis.Chaling@kncvtbc.org requesting that your organization be put on the distribution list.

General guidelines for developing requests for proposals

Applicants shall consider the following guidelines for developing the proposal:

- The proposal should address all activities under section 'Scope of Work'.
- Proposed activities described in the proposal should be for the proposed geographic area, e.g. Moyale-Kenya or Moroto-Uganda etc.
- Applicants can receive funding for similar activities from other donors. However, proposed activities must not be duplication of activities that are covered or planned under the other funding source, and the organization must make clear how the different funding sources will be used for distinct objectives or distinct geographic areas.

Eligibility criteria

The organization submitting the proposal should meet the following eligibility criteria:

- Is a reputable local organization legally registered in the respective country/countries.
- Have demonstrated collaborative interactions with the local health office.
- Have demonstrated capability for TB field work.
- Have demonstrated data management capacity.
- Have demonstrated capacity to manage sub-award and/or contract funds
- Have demonstrated presence and activities of similar nature in the proposed geographic area.
- The CBO/NGO should be eligible for USAID funding.
- The organization is allowed to receive funds from foreign accounts.
- The CBO/NGO has audited financial statements of the last 2 fiscal years in English.

Budget and funding period

A budget should be added in the attached format. The budget should specify all staff levels and numbers needed full-time/part-time (FTE) %, equipment, maintenance, consumables, communication, transport, database set-up and maintenance. The following categories of cost should be used: salary and wages, fringe benefits, travel and transportation,

equipment, supplies, contractual, other direct costs, indirect costs. All items should be specified and justified.

Subject to the availability of funds and technical evaluation outcomes, KNCV intends to award one or more sub-awards to local partners under the CTB EAR project. Funding amount for the sub-award will be up to a maximum of USD 26,000 per each side of the border for the first year of the award.

Funding will depend on USAID funding for this project and therefore funding commitments can only be given for the project year 2016/2017, with the intention to fund the complete period.

Questions and answers

Questions can be submitted to the following email address until (9th February 2017) a week before the application deadline: esther.mungai@kncvtbc.org . Responses will be provided within three working days to all organizations that have shown interest to apply.

Request for proposals format

The proposal should be prepared in English. Applicants are requested to use A4 size paper, with single space, 10-point font Verdana. The proposal should not exceed twelve pages excluding the cover page. The plans should be broken down by year.

The organization will develop a proposal which describes:

1. Applicant information (name of applicant's institute/ organization, name and title of contact person, mailing address, telephone (including mobile number), email address)
2. How you meet the eligibility criteria above
3. Number and names of staff to -be -involved in this EAR project, including their CVs
4. Experience in TB/Health work, including:
 - a. experience in working with districts and counties
 - b. experience in data management
5. Experience in working with the local medical office
6. Specific proposal on (Minimum 8 pages):
 - a. The Scope of work above
 - b. Sustainability of the approach

- c. Collaboration with institutions on the other border

Evaluation criteria

KNCV will establish a Technical Evaluation Panel (TEP) to review and evaluate all proposal papers received before the deadline. As a first step, all proposals will be reviewed based on the eligibility criteria. *Only proposals that meet the eligibility criteria will be considered.* The TEP will evaluate the proposal using the following criteria and scoring as described below. The TEP will assign maximum 100 points. Behind each item is the maximum number of points that can be obtained:

1. TB/Health work experience, as specified above (35 points)
2. Suitability of specific proposal, as specified above (45 points)
3. Budget (20 points)

The organization that has been selected to collaborate for developing a full proposal and budget based on their proposal will be notified within 6 weeks after the closing date for submission.