

Questions and Answers – 9/15/2014

Funding Opportunity Announcement CDC-RFA-GH15-1611

Monitoring and Evaluation Technical Support (METS) to Strengthen Monitoring and Evaluation, Disease Surveillance and the Capabilities of District Health Teams in the Republic of Uganda under the President's Emergency Plan for AIDS Relief (PEPFAR)

Questions and Answers from workshop

Q:

Can you be specific on what you mean in the FOA by 1-2 awards or 4 awards?

R:

The approximate number of awards for this FOA is 4. There is no reference to 1-2 awards in this FOA.

Q:

What should we do when the process of applying for the SAM and DUNS Numbers can take up to a month and we have only 45 days to apply?

R:

All potential applicants for federal assistance from the US Government should always make the necessary registrations before applying.

Q:

Is the budget ceiling meant for one year or 5 years?

R:

The budget ceiling is for the first twelve months of award.

Q:

What does the FOAs mean by stating that it's fully competitive and how does PEPFAR define a local partner.

R:

This is a fully competitive FOA, meaning all eligible applicants can apply. The PEOFAR local partner definition is on pages 25-26 of the FOA.

Q:

When will the awards be made?

R:

The Anticipated Award date is April 1, 2015 as stated on pages 24 and 46.

Q:

Is partnership a requirement when applying?

R:

No, a partnership is not a requirement of application.

Q:
What does CDC consider to be the source of most updated data?

R:
National documents are considered to be the source of the most up to date data by CDC Uganda

Q:
Can one IP apply for both since they seem to have overlapping activities in them?

R:
Yes, the same implementing partner can apply to more than one program area. Separate applications are required as detailed on page 13 of the FOA.

Q:
Where the FOA states that it's a local entity supposed to apply, can an international NGO work with the local NGO as a sub-grantee?

R:
This FOA is not limited to local partners. International NGOs may apply to this FOA alone, as prime with sub-grantees or as a sub-grantee.

Q:
What is the preferred source of disease burden data?

R:
CDC Uganda prefers National publications to be the sources if disease burden data.

Q:
Under component D-HMIS- Will the awardee be required to upgrade DHIS2 or this role will be performed by another party.

R:
There is already a Technical Team working with Ministry of Health to upgrade DHIS-2, however, the awardee will be required to support this upgrade through conducting training workshops for data records personnel, District HMIS Focal persons/District Biostatisticians.

Q:
On page 13, under component D-health management information system, the document talks of "provision of critical HMIS tools at service delivery points in all the 112 Districts to ensure data collection and utilization" Yet on the same page it talks of training staff from 53 Districts. Need clarification on the number of Districts to be served by the project. Is the list of the District available to us?

R:
Yes the awardee shall print and deliver approved HMIS tools to all USG supported 112 districts but the training activities will target only the 53 CDC districts. The list of the 53 CDC districts can be made available upon request.

Q:

Please clarify the discrepancy on the requirements for key personnel.

On page 35 (10 d) the RFA indicates that “Applicants must submit CVs/Resumes of Principal Investigator, Finance and Administrative officer, and Monitoring and Evaluation (M&E) Lead;” whereas, on page 61 (H) key positions are listed to include” Principal Investigator, Business Official, Project Manager.

R:

The full list of key personnel that applicant must submit CV/Resumes is: Principal Investigator, Finance and Administrative officer, and Monitoring and Evaluation (M&E) Lead, Business Official, and Project Manager.

Q:

Please clarify the lead Applicant responsible for the fingerprint technology and related processes. Activities and outcomes related to the fingerprint technology are specified both in Program area C and D.

R:

If C and D are awarded to two different applicants then the awardee for C: Population Case-Based Surveillance will be the lead for the fingerprint technology because it is under Program Area C that we are trying to pilot that technology in a few selected districts. However, we expect that awardees will work closely together with the MoH Resource Center and other awardees working in this technical area.
