The Child Blindness and Eye Health Grants Fund

An activity of the USAID-funded
A2Z: Micronutrient and Child Blindness Program

Request for Proposals (RFP)

Proposals Due: July 8th, 2010

Global Knowledge Base Grants will focus on contributions to the global knowledge base of program experience for child blindness interventions and large-scale child eye health programs. Global Knowledge Base Grants may not exceed $100,000 and are limited to a 9 month period of activity.
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Global Knowledge Base Grant Proposal Guidelines
Global Knowledge Base Grant Proposal Guidelines

This document contains instructions and guidance for preparing Cycle VI global knowledge base proposals to the A2Z Child Blindness Program. **Cycle VI is made for proposals only; no Letters of Interest (LOIs) are being requested during this cycle. Please note, only one proposal is allowed per organization and not all applicants who submit proposals will receive funding.** It is estimated that the Child Blindness Program may be able to award five to seven grants in Cycle VI.

I. BACKGROUND

The goal of the USAID-funded A2Z Child Blindness Program is to contribute to reductions in childhood blindness and improve eye health. Managed by AED, the Child Blindness and Eye Health Grants Fund is the central activity of the A2Z Child Blindness Program. The Grants Fund was created to deliver high-impact and cost-effective eye care services to populations in need through NGOs.

The priorities of the A2Z Child Blindness Program are:
- Expanding delivery of high-impact direct services (including screening, treatment, and rehabilitation)
- Scaling up innovative approaches to service provision and program implementation
- Contributing to the global knowledge base on effective approaches to large-scale child eye health programs

II. CYCLE VI PRIORITIES

This latest grants cycle (‘Cycle VI’) represents the sixth round of competitive grant awards under the A2Z Child Blindness Program. Cycle VI awards will focus on the third priority of the Child Blindness Program, contributing to the global knowledge base on effective approaches to large-scale child eye health programs. Based on previous program experiences with organizational development, direct service delivery, as well as stakeholder input, the A2Z Child Blindness Program has identified ‘Operations Research’ as the Cycle VI priority. Initiatives under this Cycle should seek to serve the Child Blindness Program community, including participating grant organizations, practitioners, researchers, educators, children and families.

**Operations Research** – initiatives should address barriers and constraints that limit the effectiveness and impact of pediatric eye care interventions and services, and should advance the evidence base of quality programming models and approaches. Operations research initiatives can apply various analytical methods, depending on what is most appropriate to the question. Operations Research initiatives should contribute to one of the following categories:

1. **Monitoring and evaluation**
   Illustrative examples include: testing approaches for effective use of data for decision-making, or exploring how available data can be used for policy and advocacy purposes; testing of quality of indicators for measuring impact of eye care services and/or education services for visually impaired children; evaluation of follow-up techniques to reach the target population for comprehensive services.

2. **Implementation**
   Illustrative examples include: analytic case studies documenting innovative approaches to service delivery and new tools developed for improving quality of services; testing strategies to overcome transportation barriers to regular follow-up of many pediatric visual disorders; evaluation of the effectiveness of mass screening.

3. **Capacity building**
   Illustrative examples include: assessing methodologies and materials to strengthen eye health knowledge and skills of local eye and health care staff, teachers or family decision makers working and living with visually impaired children; strategies to improve laws and policies within respective countries to better incorporate the inclusion of and care for children with eye health conditions.

4. **Integration**
   Illustrative examples include: assessing approaches to integrate outreach screening with nutrition
and other health activities; testing solutions to challenges faced by the school-based approach to identify children with visual disabilities who do not attend school and help them return to school.

Activities proposed can be linked to previous or existing A2Z/USAID Child Blindness grant projects. Applicants must demonstrate that they will be able to implement proposed activities in a timely and efficient manner and in compliance with USAID rules and regulations. Applicants must be in a position to accept funds and begin implementation by October 1, 2010.

III. TYPE OF GRANT

Cycle VI is exclusively for the Global Knowledge Base Grant category. ‘Service Delivery,’ Refugee Service Delivery,’ and ‘Organizational Development’ grants are not being issued at this time. Global Knowledge Base grants focus on contributing to the development of effective approaches to large-scale child eye health programs and expanding existing global eye health knowledge base, based on eye health program experiences of each applicant. Global Knowledge Base grants may not exceed $100,000 and will be implemented within a 9 month period of activity. Funding is contingent upon satisfactory progress towards accomplishing the objectives by the recipient and upon availability of funds.

IV. GRANT ELIGIBILITY

A. Geographic Focus

Organizations may submit proposals with either a single country or regional focus. Proposals for grant activities in the countries listed below are ineligible for Cycle VI funding and will not be reviewed.

<table>
<thead>
<tr>
<th>A2Z Child Blindness Program: List of Countries Not Eligible for Implementation of Cycle VI Funding Grants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ecuador</td>
</tr>
<tr>
<td>Egypt</td>
</tr>
<tr>
<td>El Salvador</td>
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<tr>
<td>Ghana</td>
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<tr>
<td>Kenya</td>
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<tr>
<td>Madagascar</td>
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<tr>
<td>Sudan</td>
</tr>
</tbody>
</table>

B. Who may apply for a grant?

Grants will be awarded to non-governmental organizations (NGOs) to contribute to global eye health knowledge base. NGOs are welcome to propose collaborative efforts, but must identify one organization that will be the prime recipient of funding and responsive to Program requirements. That organization will also be responsible for coordinating efforts with the other partner(s). All collaborative efforts must be clearly identified in the Cycle VI application to the Child Blindness Program. All recipients must have prior experience conducting relevant eye health activities, and must demonstrate prior experience in efficient and effective fiscal management. Past experience managing large international donor funding is also preferred. Applicants must be registered in the country/countries where the proposed project will be implemented. There can only be one grant application submitted per organization.

C. Who may not apply for a grant?

The following groups are not eligible to receive grants:
- Government entities including Ministries, public educational institutions, government clinics, and government hospitals;
- NGOs that subaward/subcontract to governmental or quasi-governmental entities;
- Firms operated as commercial companies or other organizations (including nonprofit and nongovernmental organizations) which are wholly or partially owned by foreign governments or agencies thereof.

D. What activities are NOT eligible for funding?

- Direct implementation of service delivery, refugee service delivery, organizational development, and/or eye care promotion activities.
- Global knowledge base materials on the prevention of xerophthalmia (vitamin A deficiency), onchocerciasis, and trachoma.
- Global knowledge base materials on Retinopathy of Prematurity (ROP). ROP can be integrated into global knowledge base materials; however, materials that focus a majority of effort on ROP are not eligible for funding.

E. What types of costs are covered by grant funds?

Grant activities should support the goals and priorities of the A2Z Child Blindness Program’s global knowledge base activities and monies may be used to pay for the following types of costs:

- Operational costs related to the development of global eye care knowledge base activities
- Operational costs for activities related to the dissemination or distribution of global eye care knowledge base activity results, including trainings, workshops, and communication initiatives
- Materials development, production and distribution
- Indirect costs are allowable for organizations with an audited and certified indirect rate. Due to changes in USAID regulations, we may no longer accept indirect rates from organizations which do not have an external annual audit.
- Allowable subcontracts/subagreements with AED and/or USAID prior approval (must identify subcontracted activity in application).

F. What types of costs are not covered by grant funds?

Grant monies will follow regulations such as 22CFR226 and in addition, may not be used to cover certain types of costs, such as:

- Salaries of personnel, supplies, facilities rental, financial administration, and other costs that are not directly related to implementing the project activities
- Subcontracts or subagreements to governments or quasi-governmental entities
- Purchase of motor vehicles, furniture, or office equipment
- Construction or physical improvement of offices/facilities
- Government personnel (either full or partial salaries)

G. Disclaimer

Issuance of this Request for Proposals does not constitute an award commitment on the part of AED nor does it commit AED to pay for the costs incurred in the submission of a proposal. AED reserves the right to make an award based on initial submissions; hence, applications should be submitted on the most favorable terms, from a technical and cost perspective. Furthermore, AED reserves the right to reject any or all submissions received, and to negotiate separately with an applicant, if such action is considered to be in the best interest of AED’s client organization - USAID.
V. PROPOSAL SELECTION TIMELINE

The review and award process under Cycle VI will follow the general timeline detailed below.

A2Z Child Blindness Program: Cycle VI General Timeline
(Note: Except for the July 8, 2010 proposal submission deadline, all other dates are subject to change)

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>June 8, 2010</td>
<td>· Disseminate Request for Proposals announcement and guidelines</td>
</tr>
<tr>
<td>July 8, 2010</td>
<td>· Cycle VI proposals due to A2Z in Washington, DC</td>
</tr>
<tr>
<td>July 9 - August 1, 2010</td>
<td>· A2Z and USAID evaluate submitted proposals</td>
</tr>
<tr>
<td>August 2, 2010</td>
<td>· Cycle VI selected grantees notified – note: there is no second round of proposals as there has been in other cycles</td>
</tr>
<tr>
<td>August 2 - September 1, 2010</td>
<td>· Finalize grant award paperwork and submit to AED Contracts dept for review and feedback. Approximately 2 weeks.</td>
</tr>
<tr>
<td></td>
<td>· Submit grant award package to USAID AO for approval. Approximately 2 weeks.</td>
</tr>
<tr>
<td></td>
<td>· Send finalized grant award packages to grantees for signature.</td>
</tr>
<tr>
<td>October 1, 2010</td>
<td>· Cycle VI Global Knowledge Base implementation begins</td>
</tr>
<tr>
<td>October 1, 2010 - June 30, 2011</td>
<td>· Cycle VI period of performance October 1, 2010 - June 30, 2011 (9 months)</td>
</tr>
</tbody>
</table>

VI. EVALUATION PROCEDURE

Proposals will be evaluated by a panel of USAID, A2Z Child Blindness Program staff, and a technical expert. The scoring for each section is noted to the right of each section title.

To be eligible for review, all submissions must:

- Comply with the application guidelines
- Include the provision of global eye care knowledge base services which meet the priorities of the A2Z Child Blindness Program
- Consist of outcomes which directly contribute to the existing eye care knowledge base and improving children’s eye health needs

VII. GENERAL PROPOSAL FORMAT

Please follow all instructions carefully. Proposals which do not follow these guidelines will not be reviewed. If you have questions about the guidelines, please email childblindness@aed.org if you have any questions or difficulty with these files. All questions must be submitted in writing.
A. **Page Limits**

Page limits have been set so applicants will have sufficient room to provide a concise yet informative explanation of their proposed activities. The indicated limits reflect the maximum number of pages allowed for each section; there is no penalty for submitting fewer pages than indicated. Any information provided in excess of these limits will not be taken into consideration in the review. Please do not send materials which are not specifically requested. **The proposal narrative section is limited to five pages, exclusive of cover sheet.** Specific page limitations are listed below.

B. **Proposal Narrative Section (5 page limit)**
   - Cover Sheet (see sample in Attachment 1)
   - Project Narrative (3 page limit)
   - Detailed Workplan (1 page)
   - Detailed M&E plan (1 page)

C. **Proposal Budget Section**
   - Budget (Excel template provided in Attachment 2)
   - Budget Narrative (1 page limit)

D. **Administrative Package Attachments**
   - Administrative Package (**past grant recipients only need to submit their most recent audit and do not need to submit a new Administrative Package**):
     - Partner Contact Sheet (1 page limit) – Attachment 3a
     - Past Performance Information Request (1 page limit) – Attachment 3b
     - Accounting Questionnaire (format provided) – Attachment 3c
     - Certificates and Assurances (format provided) – Attachment 3d
     - Form 1420 (format provided, one per staff person meeting criteria) – Attachment 3e

E. **Basic Formatting Requirements**
   - All proposals must be submitted in 11 point Arial or Times New Roman font. Tables and references may be in 10 point font.
   - Please include only those references most relevant to your specific project
   - Proposals must have 2.5 centimeter or one inch margins on all sides of the paper and be printed on A4 or 8½ x 11 inch paper
   - Proposals must be in English
   - Submitted proposals should present all sections in the order as they appear in Section VII. Proposal Section Details are below. If possible, please submit the proposal in one single package and avoid separate submissions.

VIII. **PROPOSAL SECTION DETAILS**

A. **Proposal Cover Sheet**
   - 0 points
     - Please complete the Proposal Cover Sheet found in Attachment 1 and insert as the first page of the proposal package submission.

B. **Proposal Narrative Section (5 page limit)**

   - **INFORMATION ABOUT THE APPLICANT (20 points)**
     - To receive a full score of 20 points the organization will have:
       1. Extensive involvement in eye care or will be an eye care organization.
       2. Previous experience in direct delivery of eye care services.
3. A mission, objectives and orientation that is in line with proposed activities.

- **CONTRIBUTION TO A2Z CHILD BLINDNESS PROGRAM ACTIVITIES (20 points)**

To receive a full score of 20 points the organization will:

1. Discuss how the organization’s experience in eye care programming has shaped the design and evaluation methodology of the proposed operations research question.

2. Demonstrate a felt need to address the particular knowledge gap and show how the proposed global knowledge base activities will contribute to the future of the eye care programming.

3. Clearly define who will benefit from the project efforts.

- **PROJECT DESCRIPTION [45 points]**

To receive a full score of 45 points the project must:

1. Show a clear link between the described knowledge gap and the proposed operations research design.

2. Provide a workplan with activity schedule that is well-defined and realistic (not to exceed 9 months). **Describe the activities to be implemented and the proposed timeline for each major objective.** Be sure the timeline is reasonable given local conditions. You may use the format of the example below.

3. Provide a clear monitoring and evaluation plan that incorporates appropriate indicators for the operations research exercise. The plan should include the indicators that will be reported on and data collection approach/methodology. The **indicators should reflect the context of Operations Research.** If proposing capacity building Operations Research, please use standard capacity building indicators as feasible.

**Example: Activity schedule for October 2010 – June 2011**

<table>
<thead>
<tr>
<th>OBJECTIVES &amp; ACTIVITIES</th>
<th>Oct’10</th>
<th>Nov’10</th>
<th>Dec’10</th>
<th>Jan’11</th>
<th>Feb’11</th>
<th>Mar’11</th>
<th>Apr’11</th>
<th>May’11</th>
<th>Jun’11</th>
</tr>
</thead>
<tbody>
<tr>
<td>OBJECTIVE ONE: To strengthen the capacity of teachers working with children with eye health conditions</td>
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<td></td>
</tr>
<tr>
<td>Proposed Activity</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>1. Develop and distribute a community eye health journal for teachers</td>
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</tbody>
</table>
C. Budget Section

1. Detailed Project Budget 15 points

Please use the Budget Template and Example (Attachment 2) to develop a detailed budget reflecting all expenses for the project. Expenses should be divided between items charged to the A2Z Child Blindness and Eye Health Grants Fund and to other sources.

2. Budget Narrative (1 page) Score combined with Detailed Project Budget

The budget narrative should include:

- A description of the expense and why each is necessary to carry out project activities
- How the unit cost was determined (estimate, purchasing history, quote, etc.)
- Each revenue source for non-Grant funded portion of the budget (items or salaries in kind, revenues from cost recovery, and revenues from other donors)

For all salaries of $50/day or greater (equivalent to $13,000 per year), please complete a 1420 form (Attachment 3e). Further budget guidance will be provided once proposal selection is completed.

D. Administrative Section (current grant recipients only need to submit their most recent audit):

The following sections are found in the Administrative Package attached (Attachment 3) and not scored by the review panel. However, this information is required for issuance of a subgrant agreement.

1. Partner Contact Sheet

Please fill out the information and submit with your proposal package. Attachment 3a.

2. Past Performance Information Request

Please fill out the information and submit with your proposal. Attachment 3b.

3. Accounting Questionnaire

Please fill out the information, sign and submit with your proposal. You may submit the signed Accounting Questionnaire via email/scan, fax or mail. U.S. Based Non-Governmental Organizations with an A133 audit DO NOT need to submit the Accounting Questionnaire. These organizations should mail a copy of their A133 audit and indicate this in their proposal package. Audits may arrive up to 2 weeks after the deadline for submission, all other items, including the signed Questionnaire are due with the proposal. Attachment 3c.

4. Certificates and Assurances

Please read carefully, sign and submit with your proposal package. Faxed, scanned, or mailed copies are acceptable. Attachment 3d.

5. Form 1420

Please fill in this form for every staff person who has a salary of $50/day or greater. Each form should be signed. Faxed, scanned, or mailed copies are acceptable. Attachment 3e.
IX. Attachments
## Cover Sheet

**A2Z Child Blindness Program**  
**Child Blindness and Eye Health Grants Fund**  
**Cycle VI - Global Knowledge Base Grants**  
**Proposal Cover Sheet**

<table>
<thead>
<tr>
<th>Date of submission:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Full name of Organization submitting proposal</td>
<td></td>
</tr>
<tr>
<td>Primary &amp; secondary contact person:</td>
<td></td>
</tr>
<tr>
<td>Title of primary contact person:</td>
<td></td>
</tr>
<tr>
<td>Physical mailing address:</td>
<td></td>
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<tr>
<td>Telephone:</td>
<td></td>
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<tr>
<td>Email:</td>
<td></td>
</tr>
<tr>
<td>Fax:</td>
<td></td>
</tr>
<tr>
<td>Title of proposed project:</td>
<td></td>
</tr>
<tr>
<td>Country and area where project will be implemented:</td>
<td></td>
</tr>
</tbody>
</table>

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**Please insert this form as the first page of your organization's submitted proposal file:**  
A2Z: The USAID Micronutrient and Child Blindness Project  
Academy for Educational Development (AED)  
1825 Connecticut Avenue, NW, Washington, D.C. 20009-5721  
Email: childblindness@aed.org / fax: (202) 464-3998  
www.a2zproject.org
Attachment 2. Detailed Project Budget Template (Excel file attached)

Attachment 3. Administrative Package (Word document)
   a. Partner Contact Sheet
   b. Past Performance Information Request
   c. Accounting Questionnaire
   d. Certificates and Assurances
   e. Form 1420

   For your reference, the A2Z Child Blindness Reporting Requirements are attached. Please note, these requirements may change by the time subgrant agreements are finalized. A revised reporting requirements guide will be included with the final subgrant agreement.

Attachment 5. Sample AED Subgrant Template
   For your reference, an AED Subgrant Template is attached. Please note, this template is purely illustrative and is subject to change.