Issue Date: July 19, 2019
Deadline for Question: July 26, 2019
Closing Date: August 19, 2019 10.00 AM Local Kampala Time
Closing Time: 

Subject: Notice of Funding Opportunity Number: 72061719RFA00002
Program Title: USAID Uganda Health Care Waste Management Activity
Catalog of Federal Domestic Assistance (CFDA) Number: 98.001-- USAID Foreign Assistance for Programs Overseas

Ladies/Gentlemen:

The United States Agency for International Development (USAID) is seeking applications for a Fixed Amount Award from qualified entities to implement the USAID Uganda Health Care Waste Management Activity. Eligibility for this award is any local Ugandan organization meeting the criteria in Section C-- Eligibility Information.

USAID intends to make an award to the applicant(s) who best meets the objectives of this funding opportunity based on the merit review criteria described in this NOFO subject to a risk assessment. Eligible parties interested in submitting an application are encouraged to read this NOFO thoroughly to understand the type of program sought, application submission requirements and selection process.

To be eligible for award, the applicant must provide all information as required in this NOFO and meet eligibility standards in Section C of this NOFO. This funding opportunity is posted on www.grants.gov, and may be amended. It is the responsibility of the applicant to regularly check the website to ensure they have the latest information pertaining to this notice of funding opportunity and to ensure that the NOFO has been received from the internet in its entirety. USAID bears no responsibility for data errors resulting from transmission or conversion process. If you have difficulty registering on www.grants.gov or accessing the NOFO, please contact the Grants.gov Helpdesk at 1-800-518-4726 or via email at support@grants.gov for technical assistance.

USAID may not award to an applicant unless the applicant has complied with all applicable unique entity identifier and System for Award Management (SAM) requirements detailed in Section D.6.f. The registration process may take many weeks to complete. Therefore, applicants are encouraged to begin registration early in the process.

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Please send any questions to the point(s) of contact identified in Section D. The deadline for questions is shown above. Responses to questions received prior to the deadline will be furnished to all potential applicants through an amendment to this notice posted to www.grants.gov.

Issuance of this notice of funding opportunity does not constitute an award commitment on the part of the Government nor does it commit the Government to pay for any costs incurred in preparation or submission of comments/suggestions or an application. Applications are submitted at the risk of the applicant. All preparation and submission costs are at the applicant’s expense.

Thank you for your interest in USAID programs.

Sincerely,

[Signature]

Jennifer L. Crow Yang
Supervisory Agreement Officer
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SECTION A: PROGRAM DESCRIPTION

A.1 AUTHORITY

This funding opportunity is authorized under the Foreign Assistance Act (FAA) of 1961, as amended. The resulting award will be subject to 2 CFR 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, and USAID’s supplement, 2 CFR 700, as well as the additional requirements found in Section F.

A.2 TERMINOLOGY

Note: The term “program” as used in 2 CFR 200 and this NOFO is typically considered by USAID to be an Activity supporting one or more Project(s) pursuant to specific Development Objectives. Please see 2 CFR 700 for the USAID specific definitions of the terms “Activity” and “Project” as used in the USAID context for purposes of planning, design, and implementation of USAID development assistance.

A.3 PROGRAM DESCRIPTION

Through this NOFO, USAID/Uganda is inviting Applicants to apply for the Health Care Waste Management Activity (HCWMA). The principal purpose of the HCWMA is to remediate the potential human health and environmental impacts of Voluntary Medical Male Circumcision (VMMC), Maternal, Newborn and Child Care (MNCH) and Family Planning (FP)-related hazardous health care waste (HCW) through safe and proper segregation, collection, storage, transportation, treatment, and disposal. The HCWM Activity will be implemented at 378 health facilities that provide PEPFAR-funded VMMC services in 95 districts throughout Uganda. The Recipient will collect, weigh, package, label, transport, treat and dispose of at least the minimum quantity of hazardous HCW that the Recipient will propose in their application specified for each month, which shall exceed 400,000kgs over one year. The HCWM Activity will also implement an innovation program in 12 selected high volume health facilities to improve HCWM practices at facility level in accordance with Ministry of Health (MoH), National Environmental Management Authority (NEMA) and World Health Organization (WHO) regulations and guidance. The innovation program will support the 12 selected health facilities listed under Section 4(4) of this Program Description for year 1, to become models of excellence for HCWM practices, which shall be emulated by the rest of the health facilities during the life of the project. In the 12 model health facilities, the Recipient will will propose specific activities in furtherance of this objective. The HCWM activities in the innovation health facilities will include proper HCW segregation (non-hazardous HCW from hazardous HCW, and segregation of hazardous HCW by category), use and maintenance of personal protection equipment (PPE) and training of staff in safe HCW handling. It will also prepare health facilities to purchase private sector transport, treatment, and disposal services for their total HCW burdens once the HCWM Activity is completed.
A.3.1 Background

Since March 2017, USAID supported HCW collection and disposal activities in conjunction with PEPFAR-funded VMMC procedures through a USAID Washington, DC field mechanism, Strengthening High Impact Interventions for an AIDS-Free Generation (AIDSFree), a cooperative agreement led by JSI Research & Training Institute (JSI).

PEPFAR supports VMMC throughout Uganda as an HIV/AIDS biomedical prevention measure. PEPFAR-supported VMMC services are provided through USAID, the U.S. Centers for Disease Control (CDC), and the U.S. Department of Defense (DOD). VMMC interventions generate hazardous HCW, which, in accordance with USAID’s environmental documentation, “to the greatest extent practicable, …USAID Implementing Partners and/or the medical facilities and operations involved, as appropriate, must have adequate procedures and capacities in place to properly manage and dispose of such commodities.” The “adequate procedures” referred to in the USAID environmental documentation are U.S. Government, internationally accepted, and/or Government of Uganda standards.

With support from PEPFAR, the MoH produced National Guidelines for Managing Health Care Waste Generated from Safe Male Circumcision Procedures (August 2013). These guidelines provide detailed procedures for waste segregation, storage, transport, treatment, and final disposal of each type of waste generated from VMMC procedures. This HCWM Activity will be implemented in accordance with MoH, NEMA and WHO regulations and guidance.

In conjunction with PEPFAR-funded VMMC procedures, USAID’s Environmental Procedures specifically require the collection, treatment, and safe disposal of VMMC waste. Health facilities also generate waste through activities other than VMMC procedures and typically, health facilities do not segregate VMMC waste from non-VMMC waste but follow the standard (and GoU requirement) to segregate HCW by waste category and sub-category, as described above.

Broadly, HCW generated by health facilities falls into the following categories and sub-categories:

- Non-hazardous (75%-90%): waste that has not been infected or contaminated by blood or body fluids. It is similar to normal household or municipal waste and should be managed by municipal waste services (e.g., uncontaminated packaging materials and plastic containers, food scraps, soft drink cans, and paper).
- Hazardous 10%-25%): includes sharps, infectious waste, pathological waste, anatomical waste, pharmaceutical waste, and radioactive waste. To protect the people who handle it, the public, and the environment, hazardous waste must be safely collected, packaged, stored, transferred, treated, and disposed.

Hazardous waste generated at health facilities entail health risks and these include:
- Sharps waste: materials that can puncture skin, such as needles, blades, and broken glass.
- Infectious waste: contains agents that are infectious to humans and animals.
● Pathological waste: includes body organs that are removed from the body because they are diseased, and tissue as well as blood and other body fluids that are removed from the body for lab tests to determine the underlying cause of disease.
● Anatomical waste: comprises recognizable body parts such as limbs (e.g., legs, fingers) that have been cut off for a medical reason.
● Pharmaceutical waste: includes all active agents and chemicals meant for prevention, treatment, and diagnosis of diseases among humans and other animals. Examples include expired medicines, condoms, lab reagents, and banned medicines.
● Radioactive waste: includes all liquids, gases, and solids contaminated with ionizing radiation, which can affect human genes.
● Effluents: fluids generated from medical services, such as washing equipment used on patients, or waste water from washing linens used during labor.
● Heavy metals: mercury, silver, and other metals used in the health sector; these metals can be toxic, corrosive, flammable, reactive, explosive, shock sensitive, or even damaging to human genes.
● Metal scrap: includes all metals that are deemed to be of no further use to the health facility, such as surgical forceps, scissors, needle holders, and scalpels.

The hazardous HCW of particular concern for this activity is from VMMC procedures, MNCH and FP activities and the main focus of this activity are sharps, infectious waste, highly infectious waste, pharmaceuticals, metals, plastics, anatomical and glass (AIDSFree Progress Reports). Based on the PEPFAR target for 2019-2020 of 800,000 VMMC procedures/year and the assumption that each VMMC procedure produces 0.5 kg of hazardous HCW \(^1\), the amount of waste generated by PEPFAR-supported VMMC procedures is estimated at 400,000 kg/year. This is only a small portion (<5%) of the total HCW generated at health facilities. Weekly average non-VMMC HCW generation rates\(^2\) (per facility) are:

- Hospital – 1500 kg
- HC VI – 550 kg
- HC III – 90 kg
- Weighted average per HC III and above – 278 kg/week

Poor segregation (non-hazardous from hazardous HCW) increases the amount of HCW that has to be treated as hazardous, thus increasing the cost of HCW handling. At the point of generation, HCW (both VMMC and HCW generated by other medical procedures) should be segregated by the categories of HCW mentioned above. However, due to poor segregation practices about 80% of the waste generated is considered and treated as hazardous due to co-mingling of non-hazardous waste with hazardous waste that results in the entire stream being treated as hazardous. With improved segregation the amount of hazardous HCW could be decreased to 10 to 25% of the total HCW generated at health facilities. USAID, 2019).

Despite the significant progress made in HCWM in Uganda, health facilities continue to face challenges to ensure HCWM is a key component of infection prevention and control in health

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\(^2\) GLSL, “GLSL PRESENTATION TO DALBERG ADVISORS_ shared with Dalberg 18_2_2019”, p.8
facilities. This can be attributed to: limited health facility budgets, in which HCWM is often a low priority relative to other activities that more directly contribute to health service delivery; limited incentive of health facility leadership to seek improved methods for HCWM, as the ‘polluter pays’ principle does not apply; and the prevalence of open burning and other environmentally damaging techniques as facilities are not pushed to consider externalities, e.g., health impacts on surrounding communities (USAID, 2019), and therefore, they appear less costly than they actually are.

**HCWM Institutional Framework**

Three GoU entities oversee HCWM and therefore, are integral to the implementation of the HCWM Activity:

- NEMA licenses and monitors all HCWM companies in the market. Specifically, NEMA’s role in HCWM is to collaborate with lead agencies to enforce standards; conduct independent audits of transportation, final disposal sites, and employee training and use of personal protection equipment (PPE); and issue licenses to and monitor transporters and treatment and disposal facilities.
- The MoH is the lead agency working with NEMA on HCW, playing an enforcement role, as well as setting HCW strategy and policies.
- Local Councils provide trading licenses to HCW companies and set and enforce the requirement that all health facilities have waste management contracts.

In addition, the National Drug Authority (NDA) and the Uganda National Bureau of Standards (UNBOS) register HCWM service providers.

**A.3.2 Program Goals And Objectives**

The overall goal of the proposed HCWM Activity is to remediate the potential impacts on human health and the environment of HCW generated in conjunction with PEPFAR-funded VMMC procedures and MNCH and FP activities. To accomplish this goal, this HCWM Activity will promote improved HCWM practices at the facility level and will support VMMC, MNCH and FP related hazardous HCW collection, transport, storage, treatment, and disposal service provision at 378 health facilities that carry out PEPFAR supported VMMC in 95 districts and up to 50 additional facilities that may be accredited over the course of the three year implementation period to provide VMMC services.

The recipient will also implement an innovation program in 12 high volume health facilities listed in this solicitation for the first project year, which will build them to become models of excellence in good HCWM practices.

Ultimately, USAID envisions that by supporting the HCWM Activity, health facilities will adopt a more sustainable and environmentally sound HCWM practices, plan and budget for HCWM, and will be prepared to purchase HCWM services that cover the full HCW spectrum once the HCWM Activity ends.
A.3.3 Activities and Timelines

Activities that support the HCWM Activity goal are the following:

(1) Finalize a Three-Year Implementation Plan. Based on the Draft Implementation Plan submitted as part of the application, develop the final Three-Year Implementation Plan, in consultation with USAID. The Three-Year Implementation Plan will be updated annually to produce the Year 2 and Year 3 Work Plans. The Final Implementation Plan shall compose of the following elements:

   (a) The HCW Collection Schedule will be finalized, in consultation with USAID, as part of the Final Three-Year Implementation Plan. The Applicant shall propose a realistic schedule that covers hazardous HCW collection, transport, storage, treatment, and disposal from the 378 PEPFAR-supported health facilities in the 95 target districts where PEPFAR supports VMMC procedures. (See attached list of districts and facilities and the anticipated monthly number of VMMC procedures/facility). In addition, the Plan should include a schedule of activities to be conducted under the innovation program in the 12 model sites during the first year.

   (b) The Communication and Coordination Plan developed for the application will be finalized, in consultation with USAID, as part of the Final Three-Year Implementation Plan. The plan will clearly describe a procedure for coordinating with district focal persons and health facilities on the VMMC, MNCH and FP HCW collection schedule in advance and on schedule changes and for communicating through monthly calls to each district to confirm that waste has been collected in accordance with the agreed routing and schedule. The plan will also include measures for communicating and coordinating with USAID when HCWM concerns require immediate attention.

(2) Develop the Environmental Mitigation & Monitoring Plan (EMMP). Based on the USAID Mission Environmental Officer’s orientation at the post-award conference, an EMMP will be developed that describes environmental mitigation measures including measures related to risks from climate change, a schedule for site visits to monitor implementation of mitigation measures, and responsible parties for implementing, monitoring, and reporting on mitigation measures. The Recipient is responsible for implementing and monitoring mitigation measures and for ensuring that all conditions of the USAID Initial Environmental Examination are implemented.

(3) Services for the management of VMMC, MNCH and FP-Related Hazardous HCW, including collection, transport, storage, treatment, and disposal. The Recipient will collect, transport, store, treat, and dispose of VMMC, MNCH and FP-related hazardous HCW based on the collection schedule developed in the application and finalized upon award:

   (a) As part of the management of hazardous HCW, the Recipient will collect, package, label, and weigh VMMC, MNCH and FP-related HCW at the source for transport to a storage, treatment, and/or disposal facility. At the source, VMMC, MNCH and FP-related hazardous
HCW will be weighed using a calibrated weighing scale, in the presence of a health facility representative, and the weights will be recorded, by category of HCW, on a standard waste transfer note. Staff involved in HCW handling are required to use PPE and must be adequately trained in use and maintenance of PPE and minimizing risks to human health and the environment.

The minimum amount of VMMC-related hazardous HCW that the Recipient must collect (collection includes packaging, labeling, and weighing) from the 378 health facilities is 400,000 kg/year (based on the 2019 PEPFAR COP target of 800,000 procedures/year producing 0.5 kg of VMMC-related hazardous HCW waste/procedure). Given that VMMC-related HCW is a small portion of the total HCW burden at health facilities, the Recipient will collect, store, treat, and dispose of significantly higher amounts of hazardous HCW, especially MNCH and FP waste therefore the recipient shall propose in their application a minimum annual hazardous HCW amount that they propose to collect, store, treat, and dispose of, as well as a collection schedule of the proposed amount broken down by months and the frequency of pickup for each facility. The recipient shall pick up waste from facilities at least three times a month. In facilities producing high volume of VMMC and MNCH and FP-related HC waste, weekly waste collection is encouraged.

The Recipient will encourage good segregation and storage practices and will monitor segregation and storage at the facilities being served. The Recipient will record non-compliance and the reasons thereof and report it to USAID on a monthly basis. The recipient may use a “scorecard” to rate facilities in proper handling and segregation of medical waste, especially hazardous waste, or other methods.

(b) Transport, store, treat, and dispose of VMMC, MNCH and FP-related hazardous HCW. Only trucks licensed for transporting hazardous waste will be used to transport HCW. Storage (of consolidated HCW awaiting treatment and disposal), treatment, and disposal shall be undertaken in accordance with MOH, NEMA and WHO Guidelines based on the category of waste. Staff involved in HCW treatment, transport, and disposal are required to use PPE and be adequately trained in use and maintenance of PPE and minimizing risks to human health and the environment. Method of treatment and final disposal locations will be recorded by volume for each category of hazardous HCW.

(4) Setting up models of excellence in HCWM practices at innovation program selected facilities. The Recipient will implement an innovation program during the first year of the project aimed at making the following 12 high volume health facilities models of excellence in HCWM.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Average amount of hazardous waste generated by facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>USAID:</td>
<td></td>
</tr>
<tr>
<td>Lalogi HCIV</td>
<td>5,427 kg</td>
</tr>
<tr>
<td>Hospital/Department</td>
<td>Weight (kg)</td>
</tr>
<tr>
<td>---------------------</td>
<td>------------</td>
</tr>
<tr>
<td>Tororo Hospital</td>
<td>7,744 kg</td>
</tr>
<tr>
<td>Kamuli Hospital</td>
<td>6,563 kg</td>
</tr>
<tr>
<td>Kibihi HC IV</td>
<td>3,491 kg</td>
</tr>
<tr>
<td>Anyeke HC IV</td>
<td>3,776 kg</td>
</tr>
<tr>
<td>Sembabule HC IV</td>
<td>3,796 kg</td>
</tr>
<tr>
<td>Rukunyu HC IV</td>
<td>3,494 kg</td>
</tr>
<tr>
<td>Wakiso HC IV</td>
<td>5,495 kg</td>
</tr>
<tr>
<td>Mubende Hospital</td>
<td>7,470 kg</td>
</tr>
<tr>
<td>Toroma HC4</td>
<td>7,470 kg</td>
</tr>
<tr>
<td>Kayunga Hospital</td>
<td>4,820 kg</td>
</tr>
<tr>
<td>Bombo General Military Hospital</td>
<td>not known military information hard to get</td>
</tr>
</tbody>
</table>

Key issues of poor health care waste management at these facilities are:

- Poor infection prevention and control (IPC) in the health facilities.
- Poor disposing of infectious waste health care waste due to a lack of functioning technology and inadequate HCWM planning.

The Recipient will work with selected facilities to improve facility-level HCWM practices to the level that can be exemplified in meeting MOH, NEMA and WHO environmental, health, and safety standards. The recipient will provide a comprehensive report on the results of the innovation program at the end of year 1 to inform USAID’s further programming. Such report shall describe the initial issues experienced and addressed with each facility, actions taken, impact and outcome of the interventions, results achieved, obstacles encountered, lessons learned, remaining shortcomings at the end of the program, recommendations for the future and any pertinent observations that helps USAID’s programming to make HCWM more effective. The proof of concept will be designed to address the following challenges among others:

- Improper HCW segregation at health facilities (hazardous from non-hazardous waste and further, into categories of hazardous waste)
- Lack of adequate hazardous waste storage space at health facilities
- Absence of bin liners and other commodities needed for sound HCWM at health facilities
- Open burning or dumping of hazardous HCW co-mingled with non-hazardous waste
- Insufficiently trained staff at health facilities, in particular, janitorial staff
- Lack of awareness at management/decision-maker levels of the need for safe HCWM
Lack of awareness at management/decision-maker levels of the need to budget for HCWM
Lack of local authority oversight of HCWM practices
Inadequate, inaccessible personal protection equipment (PPE) and any other issues recorded during implementation.

The innovation program will require close collaboration with USAID to:

- Identify approaches to monitor during implementation at each facility type in coordination with District Authorities.
- Finalize the monitoring methodology to be used to evaluate successes and shortcomings.

Illustrative approaches are:

- Environmental Audit (or rapid environmental review): Conduct an Environmental Audit and use this to engage with health facility management to raise awareness of the environmental risks of inappropriate, unsafe HCWM practices.
- Cost-Benefit Analysis: Engage with health facilities to highlight the economic benefits of sound HCWM (properly segregating hazardous from non-hazardous HCW and further segregating into hazardous waste categories).
- Raise Awareness of Full Program Cost and Prepare the Health Facility to Budget and Pay for HCWM: Provide health facilities with a full costing of HCWM, illustrating the reduced cost the facility would pay with proper segregation of hazardous from non-hazardous HCW and ensure the facility is aware that HCWM will be their responsibility when this USAID HCWM Activity is completed.
- Facilitate Provision of Commodities: Identify constraints to safe, proper HCWM related to lack of key commodities, e.g., PPE, bin liners, waste bins, sharps containers (safety boxes), disinfectants, temporary secure storage space at health facilities, and identify measures to obtain the commodities.
- Waste minimization: Provide support for improved purchasing policies and stock management practices.
- Display of written guidelines and job aids for health facility staff and train on the guidelines.
- Advocacy with District Councils

The recipient will receive a bonus payment at each pilot facility on the cost of interventions at a given facility for successfully reducing the average hazardous HCW stream by 40-70% of that facility by the end of year 2 of the Activity based on the baseline of hazardous and non-hazardous HCW amounts at innovation facilities at the following rates:

<table>
<thead>
<tr>
<th>Rate of reduction to the amount (weight) of hazardous HCW</th>
<th>Percentage of Bonus over annual service cost of the facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>&gt;40%</td>
<td>5%</td>
</tr>
<tr>
<td>&gt;50%</td>
<td>10%</td>
</tr>
</tbody>
</table>
The following milestone schedule shall govern activity implementation. USAID will pay the pre-determined price for completion of each milestone after the grantee has presented the deliverables set forth herein. [The milestones below are illustrative. Applicants may propose changes in the interest of efficient implementation within the framework of this Program Description]

Table 1. Illustrative Milestones for HCWM Activity

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Description of Main Activities</th>
<th>Deliverables/ Verification Method</th>
<th>Estimated Time to Complete Deliverables</th>
<th>Amount (TBD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Three-Year Implementation Plan Finalized</td>
<td>Recipient will finalize the Three-Year Implementation Plan, based on the draft developed for the grant application. The Final Implementation Plan will contain the elements described in the Instructions section of the RFA, and will be finalized in consultation with USAID.</td>
<td>Final Three-Year Implementation Plan, including the Communication &amp; Coordination Plan and the Collection Schedule approved by AOR.</td>
<td>30 days after award</td>
<td></td>
</tr>
<tr>
<td>2) Environmental Mitigation &amp; Monitoring Plan Developed</td>
<td>Based on the USAID Mission Environmental Officer's orientation at the post-award conference and the pertinent instructions in the RFA, the Recipient will develop an EMMP that describes environmental mitigation measures, a schedule for site visits to monitor implementation of mitigation measures, and responsible parties for implementing, monitoring, and reporting on mitigation measures.</td>
<td>Final EMMP approved by AOR and Mission Environmental Officer</td>
<td>60 days after award</td>
<td></td>
</tr>
<tr>
<td>3) VMMC, MNCH and FP–related Hazardous HCW Collection, Transport, Storage Treatment &amp; Disposal</td>
<td>The Recipient will collect VMMC-related hazardous HCW (and any MNCH and FP waste in excess of the minimum monthly hazardous HCW amount that the recipient will propose) based on the collection schedule developed in the application and finalized 30 days after award. The Recipient will: ● Collect, package, label, and weigh VMMC-related hazardous HCW (and any MNCH and FP waste that at least at the minimum monthly hazardous HCW amount that the recipient will propose) at least three times/month from each of the 378 health facilities in 95 districts. ● Transport, store, treat, and dispose of VMMC, MNH and FP-related HCW in accordance with NEMA,</td>
<td>Monthly report with the following information: ● Compiled and completed standard waste transfer notes with recorded weights by category of HCW per district and by waste category, certified by health facilities and the respective district health officers of the satisfactory collection of hazardous HCW to the satisfaction of the AOR; ● Any changes from the approved collection schedule; ● Type of treatment/category of HCW; ● Final disposal</td>
<td>Monthly over the three-year period</td>
<td></td>
</tr>
</tbody>
</table>
| MOH and WHO guidelines based on the category of waste.  
- Monitor and report on segregation practices at health facilities.  
- Provide report on the actual monthly cost of the waste management services provided to each facility. | locations/category of HCW; and  
- A “scorecard” that evaluates segregation practices at each target health facility so that USAID can act on non-compliance.  
- Report on the actual monthly cost of the waste management services provided to each facility. |
|---|---|
| **4) Interventions for improving HCWM at Innovation Facilities** | **The Recipient will**  
Finalize the innovative approaches (developed for the grant application) that will be implemented at target facilities listed under 4(4) of this Program Description to improve HCWM practices; and  
- Finalize the monitoring methodology (developed for the grant application) to be used to evaluate successes and shortcomings, including a baseline of hazardous and non-hazardous HCW amounts at innovation facilities  

The Recipient will conduct the innovation program in close coordination with innovation health facilities and district officials and will:  
- Based on the monitoring methodology, evaluate successes and shortcomings in improving HCWM practices at innovation facilities (see above, Activity Description for expected results);  
- Determine the reduction (amount of kg) in hazardous HCW handled at the facility that can be attributed to the innovation program (from the established baseline of hazardous and non-hazardous HCW generated/innovation facility)  

Periodic reports on completed innovation activities at each facility as verified by the cognizant manager of a facility. | **Upon completion of each proposed milestone** |
| **5) Results in improving HCWM at Innovation Facilities** | **Report on the Innovation Program in HCWM**  

The recipient will provide a comprehensive report on the results of the innovation program to inform USAID’s further programming. Such report shall provide a summary of innovation program implementation and results and a detailed report to describe the initial issues experienced. | **Within 90 days of the end of Year 1**  

**Bonus payment on the cost of the innovation program at each** |
and addressed with each facility, actions taken at each facility, impact and outcome of the interventions, and the results achieved, obstacles encountered lessons learned, remaining shortcomings at the end of the program, recommendations for the future of what worked and what did not, innovative approaches in waste management or to incentivize health facilities to adopt sound HCWM practices, and any pertinent observations that helps USAID’s programming to make HCWM more effective.

| 6) Conduct Performance & Environmental Monitoring | The Recipient will implement the EMMP. | Annual Report to USAID will include:  
- Aggregate data of the amount of HCW collected, stored, transported, treated, and disposed during the year  
- Annual cost of waste management services provided to each facility  
- Annual EMMP reporting  
- Annual compliance report (including a compilation of data from monthly “scorecards”)  
- Highlights of implementation successes and challenges | 30 days after completion of Year 1 |
| Year 2 | | |
| 7) Year 2 Work Plan Developed | Based on the Final Three-Year Implementation Plan, lessons learned from Year 1, and expectations for Year 2 hazardous HCW collection; and in consultation with USAID, the Recipient will develop the Year 2 Work Plan. | Year 2 Work Plan, including an updated Collection Schedule | 30 days after completion of Year 1 |
| 8) Conduct Performance & Environmental Monitoring | The Recipient will implement the M & E Program and the EMMP. | Annual Report to USAID will include:  
- Aggregate data of the amount of HCW collected, stored, | 30 days after completion of Year 2 |
<table>
<thead>
<tr>
<th>Year 3 Work Plan Developed</th>
<th>Year 3 Work Plan, including an updated Collection Schedule</th>
<th>30 days after completion of Year 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>9) Based on the Final Three-Year Implementation Plan, lessons learned from Year 2, and expectations for Year 3 hazardous HCW collection; and in coordination with USAID, the Recipient will develop the Year 3 Work Plan.</td>
<td>Annual Report to USAID will include:</td>
<td>At the completion of the HCWM Activity (end of Year 3)</td>
</tr>
<tr>
<td>10) The Recipient will implement the M &amp; E Program and the EMMP.</td>
<td>• Aggregate data of the amount of HCW collected, stored, transported, treated, and disposed during the year</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Annual EMMP reporting</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Annual M &amp; E report (including a compilation of data from monthly “scorecards”)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Highlights of implementation successes and challenges</td>
<td></td>
</tr>
</tbody>
</table>

In accordance with the requirements of completing milestones of activity implementation set forth in the Milestone Table, the Grantee will submit the following reports:

1) Submit monthly reports to USAID pertinent to Milestone 3, HCWM Services. The Recipient will submit monthly reports to USAID with the following information:
   - Compiled and completed standard waste transfer notes with recorded weights by category of HCW per district and by waste category, certified by health facilities and the respective district health officers of the satisfactory collection of hazardous HCW;
● Any changes from the approved collection schedule;
● Type of treatment/category of HCW;
● Final disposal locations/category of waste; and
● A report on issues encountered and proposed solutions within or outside the scope of the project relative to the chain of HCW management so that USAID can act on non-compliance.
● Report on the actual monthly cost of the waste management services provided to each facility.

(2) Submit Annual Reports to USAID. The Recipient will submit Annual Reports to USAID at the end of Years 1, 2, and 3, which will include:

a) Status of VMMC-related hazardous HCW collection, transport, storage, treatment, and disposal. Status of MNCH and FP waste collected, transported, stored, treated and disposed of.
   ● Aggregate data of the amount of HCW collected, stored, transported, treated, and disposed during the year
   ● Annual cost of waste management services provided to each facility
   ● Annual EMMP reporting
   ● Issues encountered
   ● Highlights of implementation successes and challenges

b) Status of the innovation program (Milestone 4)
   ● A summary of innovation program milestone implementation with locations of innovation facilities and approaches implemented as verified by the responsible manager of the partner facility;
   ● Results (testing and evaluation) of approaches to improve HCWM practices at facilities; and
   ● Lessons learned and recommendations

The final report on the innovation program is to be submitted as specified in Milestone 5 above.

A.3.4 Personnel

The Grantee shall have qualified personnel to implement the program. The involvement of the following personnel of adequate qualifications are required to ensure successful activity implementation.

1. HCWM Activity Manager
2. Financial Manager
3. Health Care Waste Management Specialist

A.3.5 Gender Considerations

Gender and in particular women are crucial for an effective and efficient waste management system. Including a gender perspective is the best possible way to solve operational problems of the waste collection services. Including a gender perspective will enhance equality in access to,
control over and benefits from (waste) resources and reduce poverty of the vulnerable groups (and notably the women and youth) in society. The Grantee shall treat employees of both gender equally without discrimination in hiring preferences, pay, and benefits.

A.3.6 Expected Outcomes

1) The proposed minimum amount of VMMC-related HCW in excess of 400,000 kg/year at 378 PEPFAR-funded health facilities to provide VMMC services, properly, safely, and timely collected, packaged, labelled, and weighed in accordance with NEMA and MoH standards
2) The proposed minimum amount of VMMC-related HCW in excess of 400,000 kg/year from 378 PEPFAR-funded health facilities to provide VMMC services, safely transported, stored, treated, and disposed of in accordance with NEMA and MoH standards
3) Hazardous and non-hazardous waste properly segregated, stored, treated, and disposed of appropriate to their waste category and in accordance with NEMA and MoH standards
4) An overall decrease in the amount of hazardous HCW picked up from innovation facilities.
5) Promising approaches for improved (risks to human health and the environment minimized) and sustainable HCWM identified.

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SECTION B: FEDERAL AWARD INFORMATION

1. Estimate of Funds Available and Number of Awards Contemplated

USAID intends to award a Fixed Amount Award (FAA) pursuant to this notice of funding opportunity for the completion of milestones of work set forth in the FAA. Payment to the Recipient will be subject to certifying completion of each milestone by the Recipient. Subject to funding availability and at the discretion of the Agency, USAID intends to provide $4.5 million in total USAID funding over a 3-year period.

2. Start Date and Period of Performance for Federal Awards

The anticipated period of performance is three years. The estimated start date will be October 2019.

4. Authorized Geographic Code

The geographic code for the procurement of commodities and services under this program is 937 (the United States, the cooperating country and developing countries, other than advance developing countries).

5. Nature of the Relationship between USAID and the Recipient

The principal purpose of the relationship with the Recipient and under the subject program is to transfer funds to upon completion of milestones by the Recipient in implementing the Health Care Waste Management Activity which is authorized by Federal statute. The successful Recipient will be responsible for ensuring the achievement of the program objectives and the efficient and effective administration of the award through the application of sound management practices. The Recipient will assume responsibility for administering Federal funds in a manner consistent with underlying agreements, program objectives, and the terms and conditions of the Federal award.

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SECTION C: ELIGIBILITY INFORMATION

1. Eligible Applicants

Eligibility for this award is restricted to any local Ugandan organization meeting the criteria under paragraph (1), or (2) below:

(1) An individual must be a citizen or lawfully admitted permanent resident of and have his/her principal place of business in the country served by the PEPFAR program with which the individual is or may become involved, and a sole proprietorship must be owned by such an individual; or
(2) An entity (e.g., a corporation or partnership):
   a) must be incorporated or legally organized under the laws of, and have its principal place of business in, the country served by the PEPFAR program with which the entity is or may become involved;
   b) must be at 75% for FY 2018 beneficially owned by individuals who are citizens or lawfully admitted permanent residents of that same country, per sub-paragraph (2)(a), or by other corporations, partnerships or other arrangements that are local partners under this paragraph or paragraph (3);
   c) at least 75% for FY 2018 of the entity’s staff (senior, mid-level, support) must be citizens or lawfully admitted permanent residents of that same country, per sub-paragraph (2)(a), and at least 75% for FY 2018 of the entity’s senior staff (i.e., managerial and professional personnel) must be citizens or lawfully admitted permanent residents of such country; and
   d) where an entity has a Board of Directors, at least 51% of the members of the Board must also be citizens or lawfully admitted permanent residents of such country.
(3) Partner government ministries (e.g., Ministry of Health), sub-units of government ministries, and parastatal organizations in the country served by the PEPFAR program are considered local partners. A parastatal organization is defined as a fully or partially government-owned or government-funded organization. Such enterprises may function through a board of directors, similar to private corporations. However, ultimate control over the organization rests with the government.

Note: To be considered a local organization/firm, the organization/firm must submit supporting documentation demonstrating their organization meets at least one of the three criteria listed above.

USAID welcomes applications from organizations that have not previously received financial assistance from USAID.

2. Other

a) An applicant must have sound practices of financial and procurement management evidenced in the company’s policies to be eligible to receive an Award.
b) Dun and Bradstreet and SAM Requirements

USAID may not award to an applicant unless the applicant has complied with all applicable unique entity identifier (DUNS number) and System for Award Management (SAM) requirements. Each applicant (unless the applicant is an individual or Federal awarding agency that is exempted from requirements under 2 CFR 25.110(b) or (c), or has an exception approved by the Federal awarding agency under 2 CFR 25.110(d)) is required to:

1. Provide a valid DUNS number for the applicant and all proposed sub-recipients;
2. Be registered in SAM before submitting its application. SAM is streamlining processes, eliminating the need to enter the same data multiple times, and consolidating hosting to make the process of doing business with the government more efficient (www.sam.gov).
3. Continue to maintain an active SAM registration with current information at all times during which it has an active Federal award or an application or plan under consideration by a Federal awarding agency.

The registration process may take many weeks to complete. Therefore, applicants are encouraged to begin the process early. If an applicant has not fully complied with the requirements above by the time USAID is ready to make an award, USAID may determine that the applicant is not qualified to receive an award and use that determination as a basis for making an award to another applicant.

DUNS number: http://fedgov.dnb.com/webform
SAM registration: http://www.sam.gov

Non-U.S. applicants can find additional resources for registering in SAM, including a Quick Start Guide and a video on how to obtain an NCAGE code, on www.sam.gov, navigate to Help, then to International Registrants.

3. Cost Sharing or Matching

While there is no mandatory cost sharing requirement, USAID encourages recipient cost share for activity implementation. Such contributions may be provided directly by the recipient; other multilateral, bilateral, and foundation donors; host governments; and local organizations, communities and private businesses that contribute financially and in-kind to implementation of activities at the country level. This may include collection of healthcare waste in excess of the agreed upon minimum quantities, contribution of staff level of effort, office space or other facilities, equipment or supplies which may be used for the program, provided by the recipient. For guidance on cost sharing in grants and cooperative agreements see 2 CFR 200.306.
SECTION D: APPLICATION AND SUBMISSION INFORMATION

1. Agency Point of Contact

   Name: Janepher Nabitosi  
   Title: Acquisition & Assistance Specialist  
   Email: kampalaUSAIDsolicita@usaid.gov

2. Questions and Answers

   Questions regarding this NOFO should be submitted via email to kampalausaidsolicita@usaid.gov showing the solicitation number in the subject line no later than the date and time indicated on the cover letter, as amended. Any information given to a prospective applicant concerning this NOFO will be furnished promptly to all other prospective applicants as an amendment to this NOFO, if that information is necessary in submitting applications or if the lack of it would be prejudicial to any other prospective applicant.

3. General Content and Form of Application

   Preparation of Applications:
   Each applicant must furnish the information required by this NOFO. Applications must be submitted in two separate parts: the Technical Application and the Business (Cost) Application. This subsection addresses general content requirements applying to the full application. Please see subsections 5 and 6, below, for information on the content specific to the Technical and Business (Cost) applications. The Technical application must address technical aspects only while the Business (Cost) Application must present the costs, and address risk and other related issues.

   Both the Technical and Business (Cost) Applications must include a cover page containing the following information:
   - Name of the organization(s) submitting the application;
   - Identification and signature of the primary contact person (by name, title, organization, mailing address, telephone number and email address) and the identification of the alternate contact person (by name, title, organization, mailing address, telephone number and email address);
   - Program name
   - Notice of Funding Opportunity number
   - Name of any proposed sub-recipients or partnerships (identify if the organizations are U.S., third country or local organizations, per USAID’s definition of ‘local entity’ under ADS 303.)

   Any erasures or other changes to the application must be initialed by the person signing the application. Applications signed by an agent on behalf of the applicant must be accompanied by evidence of that agent’s authority, unless that evidence has been previously furnished to the issuing office.
Applicants may choose to submit a cover letter in addition to the cover pages, but it will serve only as a transmittal letter to the Agreement Officer. The cover letter will not be reviewed as part of the merit review criteria.

Applications must comply with the following:

- USAID will not review any pages in excess of the page limits noted in the subsequent sections. Please ensure that applications comply with the page limitations.
- Written in English.
- Use standard 8 ½” x 11” or A4, single sided, single-spaced, 12 point Times New Roman font, 1” margins, left justification and headers and/or footers on each page including consecutive page numbers, date of submission, and applicant’s name.
- 10 point font can be used for graphs and charts. Tables however, must comply with the 12 point Times New Roman requirement.
- Submitted via Microsoft Word or PDF formats, except budget files which must be submitted in Microsoft Excel.
- The estimated start date identified in Section B of this NOFO must be used in the cost application.
- The technical application must be a searchable and editable Word or PDF format as appropriate.
- The Cost Schedule must include an Excel spreadsheet with all cells unlocked and no hidden formulas or sheets. A PDF version of the Excel spreadsheet may be submitted in addition to the Excel version at the applicant’s discretion, however, the official cost application submission is the unlocked Excel version.

Applicants must review, understand, and comply with all aspects of this NOFO. Failure to do so may be considered as being non-responsive and may be evaluated accordingly. Applicants should retain a copy of the application and all enclosures for their records.

4. Application Submission Procedures

Applications in response to this NOFO must be submitted no later than the closing date and time indicated on the cover letter, as amended. Late applications may be considered at the discretion of the Agreement Officer. Applicants must retain proof of timely delivery in the form of confirmation from the receiving office/certified mail receipt.

Applications must be submitted by email to kampalausaidsolicitaita@usaid.gov. Email submissions must include the NOFO number and applicant’s name in the subject line heading. In addition, for an application sent by multiple emails, the subject line must also indicate whether the email relates to the technical or cost application, and the desired sequence of the emails and their attachments (e.g. "No. 1 of 4", etc.). For example, if your cost application is being sent in two emails, the first email should have a subject line that states: "[NOFO number], [organization name], Cost Application, Part 1 of 2".

USAID’s preference is that the technical application and the cost application each be submitted as consolidated email attachments, e.g. that you consolidate the various parts of a technical
application into a single document before sending it. If this is not possible, please provide instructions on how to collate the attachments. USAID will not be responsible for errors in compiling electronic applications if no instructions are provided or are unclear.

After submitting an application electronically, applicants should immediately check their own email to confirm that the attachments were indeed sent. If an applicant discovers an error in transmission, please send the material again and note in the subject line of the email or indicate in the file name if submitted via grants.gov that it is a "corrected" submission. Do not send the same email more than once unless there has been a change, and if so, please note that it is a "corrected" email.

Applicants are reminded that email is NOT instantaneous, and in some cases delays of several hours occur from transmission to receipt. Therefore, applicants are requested to send the application in sufficient time ahead of the deadline. For this NOFO, the initial point of entry to the government infrastructure is the USAID mail server.

There may be a problem with the receipt of *.zip files due to anti-virus software. Therefore, applicants are discouraged from sending files in this format as USAID/Uganda Office of Acquisition and Assistance cannot guarantee their acceptance by the internet server. File size must not exceed 5 Mbs.

5. Technical Application Format

The technical application should be specific, complete, and presented concisely. The application must demonstrate the applicant's capabilities and expertise with respect to achieving the goals of this program. The application should take into account the requirements of the program and merit review criteria found in this NOFO.

a) Cover Page (See Section D.3 above for requirements)

b) Table of Contents

c) Executive Summary (One page)

The Executive Summary must provide a high-level overview of key elements of the Technical Application.

d) Draft Implementation Plan for the life of the activity shall not exceed 25 pages and shall include:

(1) A plan and schedule for collection, transport, storage, treatment, and disposal of hazardous HCW (HCW management services)

The Applicant shall propose a realistic schedule that covers hazardous HCW collection, transport, storage, treatment, and disposal from the 378 PEPFAR-supported health facilities in the 95 target districts where PEPFAR supports VMMC procedures. (See attached list of
districts and facilities and the anticipated monthly number of VMMC procedures/facility). The Applicant is expected to maximize the amount of HCW collected and managed in their Application based on their capacity and within the available total budget funding and the known need of health facilities included in the program. Such plan shall present the frequency of pickup of HCW, the vehicles used and their schedule, staff involved, and proposed monthly minimum quantities to be picked up from each facility. The plan shall also present where each kind of HCW will be transported, how it will be stored until treatment or disposal and how the treatment and disposal are in conformity with required environmental standards, and how the Applicant will manage and mitigate environmental hazards and risks. The plan shall propose the methods and schedule of treating and disposing of each kind of HCW.

In addition to the plan submitted in a narrative format, the Applicant shall submit a milestone plan including the activities described in the schedule of HCW management services in case the Applicant suggests changes to fine tune the milestone plan in the Program Description. Such milestone plan as part of the Technical Application, shall not contain the proposed fixed price associated with the milestone.

(2) A plan for the interventions aimed to make selected facilities models of excellence in healthcare waste management practices.

The plan shall describe in detail the activities to be implemented and how they will improve waste management by the selected facilities to the desirable standards, and how they will reduce the hazardous HCW output of these facilities.

The plan shall also describe the proposed monitoring methodology during implementation at each facility type in coordination with District Authorities to evaluate successes and shortcomings.

In addition to the plan submitted in a narrative format, the Applicant shall submit a milestone plan as part of the overall proposed milestone plan for completion of proposed activities aimed to make selected facilities models of excellence in healthcare waste management practices. Such unpriced milestone plan is an annex to the Technical Application and is not included in the page limit.

(3) Management Plan

The Management Plan shall present the Applicant’s management and organizational structure including names of managerial staff, and demonstrate their qualifications and experience (Resume). USAID requires that the key personnel specified in the Program Description will devote the major share of their time to the project if not their full time. The plan shall include the number and type of employees to perform the proposed activity and indicate if the staff are employees or to be hired for the purpose of the USAID activity. The Applicant shall present personnel policies as an annex to their application (not included in the 25 pages limit) The plan shall present major considerations of the company’s financial management, structure of the Financial Management Section and describe measures for high level
accountability and prevention of waste, fraud and abuse. Applicants are reminded that addition of staff responsible for accountability, monitoring and compliance might be needed to ensure compliance with USAID and GOU requirements during implementation. The plan shall also describe procurement policies and procedures. (The Applicant shall provide financial management and procurement policies upon request by the Agreement Officer, but not as part of the original application).

(4) A Communication and Coordination Plan

The Communication and Coordination Plan will clearly describe a procedure for coordinating with district focal persons and health facilities on the VMMC, MNCH and FP HCW collection schedule in advance and on schedule changes and for communicating through monthly calls to each district to confirm that waste has been collected in accordance with the agreed routing and schedule. The plan will also include measures for communicating and coordinating with USAID when HCWM concerns require immediate attention.

e) A Milestone Plan for completion of all activities proposed for each year.

The Milestone Plan must be an amendment of the Milestone Plan included in the Program Description, in that the Applicant may fine tune the monthly milestones for HCW management services (Milestone 3) if justified, and shall proposed verifiable milestones of completion for the activities aiming at making facilities centers of excellence in HCW management, i.e. Milestone 4. The Milestones for implementation plans (Milestones 1,2,7,9) are to remain unchanged. Milestone plans for monitoring and reporting (Milestones 6,8,10) are to be further specified by the applicant. The Milestone plan as part of the Technical Application shall not include prices and is not included in the page limit.

6. Business (Cost) Application Format

The Business (Cost) Application must be submitted separately from the Technical Application. While no page limit exists for the full cost application, applicants are encouraged to be as concise as possible while still providing the necessary details. The business (cost) application must illustrate the entire period of performance, using the budget format shown in the SF-424A, and provide the milestone schedule for payment, i.e. the milestone plan submitted as part of the Technical Application to include the price payable upon completion of each milestone as a MS Word document. Applicants shall also submit the milestone budget in MS Excel containing formulas for a better presentation of how costs were allocated to each milestone.

Prior to award, applicants may be required to submit additional documentation deemed necessary for the Agreement Officer to assess the applicant’s risk in accordance with 2 CFR 200.205. Applicants should not submit any additional information with their initial application.

The Cost Application must contain the following sections (which are further elaborated below this listing with the letters for each requirement):

a) Cover Page (See Section D.3 above for requirements)
b) SF 424 Form(s)

The applicant must sign and submit the cost application using the SF-424 series. Standard Forms can be accessed electronically at www.grants.gov or using the following links:

|------------------------|--------------------------------------------------------------------------|

Failure to accurately complete these forms could result in the rejection of the application.

c) Required Certifications and Assurances

The applicant must complete the following documents and submit a signed copy upon request by the AO (shall not be part of the original application):

(2) Assurances for Non-Construction Programs (SF-424B)
(3) Certificate of Compliance: Please submit a copy of your Certificate of Compliance if your organization's systems have been certified by USAID/Washington's Office of Acquisition and Assistance (M/OAA).

d) Budget and Budget Narrative

The Budget shall only present all allocable and allowable expenses in accordance with the cost principles found in 2 CFR 200 Subpart E at reasonable rates that are directly required for accomplishing the milestones set forth in the Applicant’s Technical Proposal. In addition to the mandatory SF-424-A, which also provides for a summary budget, the Applicant must present a complete and detailed budget by cost categories, detailed by year as described below. In addition, Applicants must submit a budget broken down by the milestones included in the milestone plan submitted as part of the Technical Proposal, showing the cost payable by USAID upon completion of each milestone. The milestone budget and separate budget narrative to that effect shall present the basis of allocating costs of the total budget to each milestone, most importantly quantities, and other details as applicable.
The budget must be in U.S. dollars. Applicants shall indicate the exchange rate used to Ugandan Shillings.

Applicants shall use the Budget Template in Annex 1 and submit it as one unprotected Excel file (MS Office 2000 or later versions) with visible formulas and references. Files must not contain any hidden or otherwise inaccessible cells. Applicants shall complete the separate budget tabs as applicable. The Budget Narrative must contain sufficient detail to allow USAID to understand the proposed costs. The applicant must ensure the budgeted costs address any additional requirements identified in Section F, such as Branding and Marking. The Budget Narrative must be thorough, including sources for costs to support USAID’s determination that the proposed costs are fair and reasonable.

The Detailed Budget must contain the following budget categories and information, at a minimum:

1) Salaries and Allowances – Must be proposed consistent with 2 CFR 200.430 Compensation - Personal Services. The applicant’s budget must include position title, name if known, salary rate, level of effort for each position. The applicant must indicate if the staff in the budget is an employee or to be hired. Allowances, when proposed, must be broken down by specific type and by position. Applicants must explain all assumptions in the Budget Narrative. The Budget Narrative must demonstrate that the proposed compensation is reasonable for the services rendered, does not include any increment over existing staff salaries other than the annual merit increases based on the Applicant’s policies, is consistent with what is paid for similar work in other activities of the applicant. Annual salary escalation is allowed within a reasonable margin and shall not exceed the limitations in the Applicant’s policies. Applicants must provide their established written policies on personnel compensation. If the applicant’s written policies do not address a specific element of compensation that is being proposed, the Budget Narrative must describe the rationale used as well as supporting market research.

2) Fringe Benefits – (if applicable) If the applicant has a fringe benefit rate approved by an agency of the U.S. Government, the applicant must use such rate and provide evidence of its approval. If an applicant does not have a fringe benefit rate approved, the applicant must propose a rate and explain how the applicant determined the rate. In this case, the Budget Narrative must include a detailed breakdown comprised of all items of fringe benefits (e.g., superannuation, gratuity, etc.) and the costs of each, expressed in U.S. dollars and as a percentage of salaries.

3) Travel and Transportation – Provide details to explain the purpose of the trips, the frequency/number of trips, the origin and destination, the number of individuals traveling, and the length/duration of the trips. Per Diem and associated travel costs must be based on the applicant’s normal travel policies. When travel is budgeted, please provide supporting documentation as an attachment, such as company travel policy, and explain assumptions in the Budget Narrative. For the transport of HCW, describe the routes, the length of the routes and individuals traveling.
4) Procurement or Rental of Goods (Equipment & Supplies), Services, and Real Property – The Recipient is expected to have the necessary infrastructure or equipment, or have access to it. The applicant must not include procurement cost of Equipment in their budget. Only the depreciation allocable to the period of the activity (3 years) is an eligible cost to be budgeted. For approval of depreciation, the budget must include information on types of equipment, models, the cost per unit, quantity and proposed base of allocation. The Budget Narrative must include the purpose of the equipment and supplies. The Budget Narrative must support the necessity of any rental costs and reasonableness in light of such factors as: rental costs of comparable property, if any; market conditions in the area; alternatives available; and the type, life expectancy, condition, and value of the property leased.

5) Subcontracts – Specify the budget for the portion of the program to be passed through to any subcontractor. The subcontractor budgets must align with the same requirements as the applicant’s budget, including those related to fringe and indirect costs.

6) Construction – No construction cost shall be included in the budget for USAID financing.

7) Other Direct Costs – This may include other costs not elsewhere specified attributable to the work proposed by the applicant.

8) Indirect Costs are common costs that benefit the day-to-day operations of the organization, including categories such as salaries and expenses of executive officers, personnel administration, and accounting, or that benefit and are identifiable to more than one program or activity, such as depreciation, rental costs, operations and maintenance of facilities, and telephone expenses. Costs must be consistently charged as either indirect or direct costs, but may not be double charged or inconsistently charged as both. The applicant must describe which cost elements it charges indirectly vs. directly. Indirect costs must not exceed 10% of total direct costs. See 2 CFR 200.414(f) for further information.

Initial Application Requirements: Provide the proposed fixed amount and a worksheet that includes the following:

● Total costs incurred by the organization for the previous fiscal year and estimates for the current year.
● Indirect costs for the previous fiscal year and estimates for the current year
● Proposed method for prorating the indirect costs equitably and consistently across all programs and activities of using a base that measures the benefits of that particular cost to each program or activity to which the cost applies.

9) Cost Sharing – The applicant should estimate the amount of cost-sharing resources to be provided over the life of the agreement and specify the sources of such resources, and the basis of calculation in the budget narrative. Applicants should also provide a breakdown of the cost share (financial and in-kind contributions) of all organizations involved in implementing the resulting award.
e) **History of Performance**

The applicant must provide information regarding its recent history of performance for all its contracts, grants, or cooperative agreements involving similar or related programs, not to exceed 7 during the past five years, as follows:

- Name of the Contracting/Awarding Organization;
- Contract/Award Number;
- Activity Title;
- A brief description of the activity;
- Period of Performance;
- Award Amount;
- Reports and findings from any audits performed in the last five years; and
- Name of at least two (2) updated professional contacts who most directly observed the work at the organization for which the service was performed with complete current contact information including telephone number, and e-mail address for each proposed individual.

If the applicant encountered problems on any of the referenced contracts/grants, it may provide a short explanation and corrective action taken. The applicant should not provide general information on its performance. USAID reserves the right to obtain relevant information concerning an applicant’s history of performance from any sources and may consider such information in its review of the applicant’s risk. The Agency may request additional information and conduct a pre-award survey if it determines that it is necessary to inform the risk assessment.

f) **Branding Strategy and Marking Plan**

The apparently successful applicant will be asked to provide a Branding Strategy and Marking Plan to be evaluated and approved by the Agreement Officer and incorporated into any resulting award (Branding Strategy and Marking Plan shall not be part of the initial application.)

1. **Branding Strategy – Assistance (June 2012)**

a. Applicants recommended for an assistance award must submit and negotiate a "Branding Strategy," describing how the program, project, or activity is named and positioned, and how it is promoted and communicated to beneficiaries and host country citizens.

b. The request for a Branding Strategy, by the Agreement Officer from the applicant, confers no rights to the applicant and constitutes no USAID commitment to an award.

c. Failure to submit and negotiate a Branding Strategy within the time frame specified by the Agreement Officer will make the applicant ineligible for an award.

d. The applicant must include all estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth, in the budget portion of the application. These costs are subject to the revision and negotiation with the Agreement Officer and will be incorporated into the Total Estimated Amount of the grant, cooperative agreement or other assistance instrument.
e. The Branding Strategy must include, at a minimum, all of the following:

1. All estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth.

2. The intended name of the program, project, or activity.
   (i) USAID requires the applicant to use the “USAID Identity,” comprised of the USAID logo and brandmark, with the tagline “from the American people” as found on the USAID Web site at http://www.usaid.gov/branding, unless Section VI of the RFA or APS states that the USAID Administrator has approved the use of an additional or substitute logo, seal, or tagline.
   (ii) USAID prefers local language translations of the phrase “made possible by (or with) the generous support of the American People” next to the USAID Identity when acknowledging contributions.
   (iii) It is acceptable to cobrand the title with the USAID Identity and the applicant's identity.
   (iv) If branding in the above manner is inappropriate or not possible, the applicant must explain how USAID's involvement will be showcased during publicity for the program or project.
   (v) USAID prefers to fund projects that do not have a separate logo or identity that competes with the USAID Identity. If there is a plan to develop a separate logo to consistently identify this program, the applicant must attach a copy of the proposed logos. Section VI of the RFA or APS will state if an Administrator approved the use of an additional or substitute logo, seal, or tagline.

3. The intended primary and secondary audiences for this project or program, including direct beneficiaries and any special target segments.

4. Planned communication or program materials used to explain or market the program to beneficiaries.
   (i) Describe the main program message.
   (ii) Provide plans for training materials, posters, pamphlets, public service announcement, billboards, Web sites, and so forth, as appropriate.
   (iii) Provide any plans to announce and promote publicly this program or project to host country citizens, such as media releases, press conferences, public events, and so forth. Applicant must incorporate the USAID Identity and the message, “USAID is from the American People.”
   (iv) Provide any additional ideas to increase awareness that the American people support this project or program.

5. Information on any direct involvement from host-country government or ministry, including any planned acknowledgement of the host-country government.

6. Any other groups whose logo or identity the applicant will use on program materials and related materials. Indicate if they are a donor or why they will be visibly acknowledged, and if they will receive the same prominence as USAID.

f. The Agreement Officer will review the Branding Strategy to ensure the above information is adequately included and consistent with the stated objectives of the award, the applicant's cost data submissions, and the performance plan.
g. If the applicant receives an assistance award, the Branding Strategy will be included in and made a part of the resulting grant or cooperative agreement (END OF PRE-AWARD TERM)

2. Marking Plan – Assistance (June 2012)

a. Applicants recommended for an assistance award must submit and negotiate a “Marking Plan,” detailing the public communications, commodities, and program materials, and other items that will visibly bear the “USAID Identity,” which comprises of the USAID logo and brandmark, with the tagline “from the American people.” The USAID Identity is the official marking for the Agency, and is found on the USAID Web site at http://www.usaid.gov/branding. Section VI of the RFA or APS will state if an Administrator approved the use of an additional or substitute logo, seal, or tagline.

b. The request for a Marking Plan, by the Agreement Officer from the applicant, confers no rights to the applicant and constitutes no USAID commitment to an award.

c. Failure to submit and negotiate a Marking Plan within the time frame specified by the Agreement Officer will make the applicant ineligible for an award.

d. The applicant must include all estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth, in the budget portion of the application. These costs are subject to the revision and negotiation with the Agreement Officer and will be incorporated into the Total Estimated Amount of the grant, cooperative agreement or other assistance instrument.

e. The Marking Plan must include all of the following:

(1) A description of the public communications, commodities, and program materials that the applicant plans to produce and which will bear the USAID Identity as part of the award, including:
   (i) Program, project, or activity sites funded by USAID, including visible infrastructure projects or other sites physical in nature;
   (ii) Technical assistance, studies, reports, papers, publications, audiovisual productions, public service announcements, Web sites/Internet activities, promotional, informational, media, or communications products funded by USAID;
   (iii) Commodities, equipment, supplies, and other materials funded by USAID, including commodities or equipment provided under humanitarian assistance or disaster relief programs; and
   (iv) It is acceptable to cobrand the title with the USAID Identity and the applicant's identity.
   (v) Events financed by USAID, such as training courses, conferences, seminars, exhibitions, fairs, workshops, press conferences and other public activities. If the USAID Identity cannot be displayed, the recipient is encouraged to otherwise acknowledge USAID and the support of the American people.

(2) A table on the program deliverables with the following details:
(i) The program deliverables that the applicant plans to mark with the USAID Identity;
(ii) The type of marking and what materials the applicant will use to mark the program deliverables;
(iii) When in the performance period the applicant will mark the program deliverables, and where the applicant will place the marking;
(iv) What program deliverables the applicant does not plan to mark with the USAID Identity, and (v) The rationale for not marking program deliverables.

(3) Any requests for an exemption from USAID marking requirements, and an explanation of why the exemption would apply. The applicant may request an exemption if USAID marking requirements would:
(i) Compromise the intrinsic independence or neutrality of a program or materials where independence or neutrality is an inherent aspect of the program and materials. The applicant must identify the USAID Development Objective, Interim Result, or program goal furthered by an appearance of neutrality, or state why an aspect of the award is presumptively neutral. Identify by category or deliverable item, examples of material for which an exemption is sought.
(ii) Diminish the credibility of audits, reports, analyses, studies, or policy recommendations whose data or findings must be seen as independent. The applicant must explain why each particular deliverable must be seen as credible.
(iii) Undercut host-country government “ownership” of constitutions, laws, regulations, policies, studies, assessments, reports, publications, surveys or audits, public service announcements, or other communications. The applicant must explain why each particular item or product is better positioned as host-country government item or product.
(iv) Impair the functionality of an item. The applicant must explain how marking the item or commodity would impair its functionality.
(v) Incur substantial costs or be impractical. The applicant must explain why marking would not be cost beneficial or practical.
(vi) Offend local cultural or social norms, or be considered inappropriate. The applicant must identify the relevant norm, and explain why marking would violate that norm or otherwise be inappropriate.
(vii) Conflict with international law. The applicant must identify the applicable international law violated by the marking.

f. The Agreement Officer will consider the Marking Plan's adequacy and reasonableness and will approve or disapprove any exemption requests. The Marking Plan will be reviewed to ensure the above information is adequately included and consistent with the stated objectives of the award, the applicant's cost data submissions, and the performance plan. g. If the applicant receives an assistance award, the Marking Plan, including any approved exemptions, will be included in and made part of the resulting grant or cooperative agreement, and will apply for the term of the award unless provided otherwise. (END OF PRE-AWARD TERM)
g) Funding Restrictions

Profit is not allowable for recipients or subrecipients under this award. See 2 CFR 200.330 for assistance in determining whether a sub-tier entity is a subrecipient or contractor.

USAID will not allow the reimbursement of pre-award costs under this award without the explicit written approval of the Agreement Officer.

Except as may be specifically approved in advance by the AO, all commodities and services that will be reimbursed by USAID under this award as distinct milestones must be from the authorized geographic code specified in Section B.4 of this NOFO and must meet the source and nationality requirements set forth in 22 CFR 228.

h) CONSCIENCE CLAUSE IMPLEMENTATION - Pre-Award Term (February 2012)

(a) An organization, including a faith-based organization, that is otherwise eligible to receive funds under this agreement for HIV/AIDS prevention, treatment, or care—

1) Shall not be required, as a condition of receiving such assistance—
   (i) to endorse or utilize a multisectoral or comprehensive approach to combating HIV/AIDS; or
   (ii) to endorse, utilize, make a referral to, become integrated with, or otherwise participate in any program or activity to which the organization has a religious or moral objection; and

2) Shall not be discriminated against in the solicitation or issuance of grants, contracts, or cooperative agreements for refusing to meet any requirement described in paragraph (a)(1) above.

(b) An applicant who believes that this solicitation contains provisions or requirements that would require it to endorse or use an approach or participate in an activity to which it has a religious or moral objection must so notify the cognizant Agreement Officer in accordance with the Mandatory Standard Provision titled “Notices” as soon as possible, and in any event not later than 15 calendar days before the deadline for submission of applications under this solicitation. The applicant must advise which activity(ies) it could not implement and the nature of the religious or moral objection.

(c) In responding to the solicitation, an applicant with a religious or moral objection may compete for any funding opportunity as a prime partner, or as a leader or member of a consortium that comes together to compete for an award. Alternatively, such applicant may limit its application to those activities it can undertake and must indicate in its submission the activity(ies) it has excluded based on religious or moral objection. The application will be evaluated based on the activities for which an application is submitted, and will not be evaluated favorably or unfavorably due to the absence of a proposal addressing the activity(ies) to which it objected and which it thus omitted. In addition to the notification in paragraph (b) above, the applicant must meet the submission date provided for in the solicitation. (END OF PRE-AWARD TERM)
i) CONFLICT OF INTEREST - Pre-Award Term (August 2018)

(a) Personal Conflict of Interest

1) An actual or appearance of a conflict of interest exists when an applicant organization or an employee of the organization has a relationship with an Agency official involved in the competitive award decision-making process that could affect that Agency official’s impartiality. The term “conflict of interest” includes situations in which financial or other personal considerations may compromise, or have the appearance of compromising, the obligations and duties of a USAID employee or recipient employee.

2) The applicant must provide conflict of interest disclosures when it submits an SF-424. Should the applicant discover a previously undisclosed conflict of interest after submitting the application, the applicant must disclose the conflict of interest to the AO no later than ten (10) calendar days following discovery.

(b) Organizational Conflict of Interest

The applicant must notify USAID of any actual or potential conflict of interest that they are aware of that may provide the applicant with an unfair competitive advantage in competing for this financial assistance award. Examples of an unfair competitive advantage include but are not limited to situations in which an applicant or the applicant’s employee gained access to non-public information regarding a federal assistance funding opportunity, or an applicant or applicant’s employee was substantially involved in the preparation of a federal assistance funding opportunity. USAID will promptly take appropriate action upon receiving any such notification from the applicant. (END OF PRE-AWARD TERM)
SECTION E: APPLICATION REVIEW INFORMATION

1. Criteria

The merit review criteria prescribed here are tailored to the requirements of this particular NOFO. Applicants should note that these criteria serve to: (a) identify the significant matters which the applicants should address in their applications, and (b) set the standard against which all applications will be evaluated.

Technical and other factors will be evaluated relative to each other, as described here and prescribed by the Technical Application Format. The Technical Application will be rated by a Selection Committee (SC) using the criteria described in this section.

2. Review and Selection Process

a) Merit Review

USAID will conduct a merit review of all applications received that comply with the instructions in this NOFO. Applications will be reviewed and evaluated in accordance with the following criteria shown in descending order of importance:

1. Technical

   The proposed minimum amount of HC Waste to be collected in excess of 400,000 kgs per year.

   The extent to which the plan and schedule for collection, transport and treatment of HCW, for communication and coordination with USAID, district authorities, and health facilities is complete, efficient and feasible.

   The extent to which a proposed proof of concept to improve HCWM and segregation by facilities is feasible, efficient and innovative, and conducive to the reduction in the amount of hazardous waste.

   The extent to which the implementation plans contains measures for environmental risk mitigation and management.

2. Organizational Capacity:

   - Geographical span of the company performing HC Waste Management services.

   - The extent to which the applicant has experience in the full chain of Waste Management services, from segregation, pickup, packaging, labeling, transport, storage treatment, disinfection final disposal.

   - Availability of sufficient staff resources of adequate training and experience to undertake the proposed activity (relevant personnel includes drivers, HCW handlers, and supervisors and other staff as applicable and adequate training is considered training in HCW handling, safety, including first aid and using and maintaining PPE, and environmental safeguards).
- Accessibility to the infrastructure and technical resources needed to collect, package, label, weigh, transport, store, treat, and dispose of health care waste within the 88 counties covered by PEPFAR (e.g., trucks, storage locations, and access to treatment and disposal)

3. Management:

- The extent to which the Applicant’s management and organizational structure are clearly and rationally established to efficiently perform the proposed work.

- Qualifications of key personnel (Knowledge of GoU and WHO HCW management requirements from segregation through disposal)

- Capacity to provide financial and project-level management (project level management requires skills and experience in personnel management, management of a fleet of trucks and other equipment, and capacity to communicate and report to USAID in writing and verbally) of a complex, nation-wide program.

4. Past Performance:

Past performance on health care waste management activities similar in scope to the prospective USAID activity verified through references.

Factors to be considered when evaluating past performance are quality of service including adherence to environmental standards, timeliness, cost control and business relations.

b) Business Review

The Agency will evaluate the cost application of the applicant(s) under consideration for an award as a result of the merit criteria review to determine whether the costs are allowable in accordance with the cost principles found in 2 CFR 200 Subpart E.

The Agency will also consider (1) the extent of the applicant's understanding of the financial aspects of the program and the applicant's ability to perform the activities within the amount requested; (2) whether the applicant's plans will achieve the program objectives with reasonable economy and efficiency; and (3) whether any special conditions relating to costs should be included in the award.


The AO will perform a risk assessment (2 CFR 200.205). The AO may determine that a pre-award survey is required to inform the risk assessment in determining whether the prospective recipient has the necessary organizational, experience, accounting and operational controls, financial resources, and technical skills – or ability to obtain them – in order to achieve the objectives of the program and comply with the terms and conditions of the award. Depending on the result of the risk assessment, the AO will decide to execute the award, not execute the award, or award with “specific conditions” (2 CFR 200.207).
Depending on the result of the risk assessment, the AO may either decide to make the award, not execute the award, or award with “specific conditions” (2 CFR 200.207).
SECTION F: FEDERAL AWARD ADMINISTRATION INFORMATION

1. Federal Award Notices

Award of the agreement contemplated by this NOFO cannot be made until funds have been appropriated, allocated and committed through internal USAID procedures. While USAID anticipates that these procedures will be successfully completed, potential apparently successful Applicant is hereby notified of these requirements and conditions for the award.

USAID may notify the apparently successful Applicant of their recommendation for funding, but only a signed and executed award will constitute an obligation by USAID Agreement Officer to reimburse any costs incurred in the performance and implementation of a project/program. The signed and executed award will be e-mailed to the apparently successful Applicant.

The Agreement Officer is the only individual who may legally obligate USAID to the expenditure of public funds. The Agreement Officer may authorize pre-award costs in accordance with 2 CFR 200.209, but such pre-award costs will be incurred at the Applicant’s sole risk in the event the award is not signed by the Agreement Officer, or is denied or is less than the amount proposed by the apparently successful Applicant.

USAID will notify all unsuccessful Applicants that will not be considered for award explaining briefly why USAID did not select their application. Requests for additional information will not be considered from unsuccessful applicants.

2. Administrative & National Policy Requirements

The resulting award will be administered in accordance with Chapter 303 of USAID’s Automated Directives System (ADS-303), 2 CFR 200, 2 CFR 700, and the Standard Provision for Fixed Amount Awards to Nongovernmental Organizations at https://www.usaid.gov/ads/policy/300/303mat

See Annex 2, for a list of the Standard Provisions that will be applicable to any awards resulting from this NOFO.

The Recipient must abide by applicable laws and policies of the Republic of Uganda.

Implementation shall be in conformity with the local and international standards referred to in the Program Description.

3. Reporting Requirements

In addition to the reports required for payment of milestones as set forth in the Program Description and Milestone Payment Schedule therein, the Recipient shall submit the following reports in accordance with the applicable standard provisions or otherwise:

a) Foreign Tax Reports.

b) Quarterly VAT Reports:

Pursuant to bilateral agreements with the Government of Uganda (GOU), all imports and expenditures under this agreement by the Recipient and by non-local subcontractors/sub-recipients (as defined below) are exempt from Value-Added Tax (VAT) and Customs Duties imposed by the GOU for expenses directly associated with the activity. The GOU does not permit tax exemption at the point of sale. Therefore, the Recipient must budget and bill USAID for expenses inclusive of 18% VAT.

The Recipient must submit original VAT tax invoices/receipts, original certified summary (using a format provided by USAID) and 1 copy of all documents to USAID by the 25th of the month after the calendar year quarter end. For example, taxes and receipts for the period January to March are due April 25.

USAID will seek a VAT refund from the Government of Uganda. The refund will not be returned to the Recipient.

The Recipient is responsible for ensuring that subcontractors, sub awardees, and grantees comply with this requirement. All VAT claims, for the Recipient, subcontractors, sub awardees and grantees, must be submitted to USAID through the prime Contractor.

The USAID point of contact for submission of quarterly VAT information is kampalavatusaid@usaid.gov Office of Financial Management, USAID/Uganda.

c) PEPFAR Reporting:

Recipients implementing projects funded out of PEPFAR funds must report annually on program expenditures. Specifically, Recipients must use the form PEPFAR Program Expenditures (DS-4213 OMB 1405-0208) as a part of completing the PEPFAR Annual Progress Report at the end of each USG fiscal year (September 30).

In addition, recipients implementing PEPFAR-funded projects must provide necessary data to fulfill PEPFAR’s strategic information requirements.

d) Annual Certification for Human Trafficking:

The recipient must submit to the Agreement Officer, the annual “Certification regarding Trafficking in Persons, Implementing Title XVII of the National Defense Authorization Act for Fiscal Year 2013” as required prior to this award, and must implement a compliance plan to prevent the activities described above in section (a) of the provision (Schedule C, Mandatory Standard Provisions “TRAFFICKING IN PERSONS (April 2016)”). The recipient must provide a copy of the compliance plan to the Agreement Officer upon request and must post the useful and relevant contents of the plan or related materials on its website (if one is maintained) and at the workplace.

The first Certification should be submitted at the start of award. The concurrent certifications should be submitted within 30 calendar days following the end of each fiscal
year. The draft certificate is accessible at the link below:


4. Program Income

Program Income is not anticipated to be generated under this award. If generated, program income earned during the Activity’s period of performance must be added to the total program amount and used to further eligible objectives for the Activity.

5. Environmental Compliance

Section 117 of the Foreign Assistance Act of 1961, as amended, requires that the impact of USAID’s activities on the environment be considered and that USAID include potential negative environmental impact and long-term sustainability as a central consideration in designing and carrying-out its development programs. This mandate is codified in 22 CFR 216, which states that all USAID-financed activities be reviewed, potential impacts identified, and mitigative safeguards be designed prior to a final decision to proceed. The environmental compliance obligations under these regulations and procedures are specified in the following paragraphs.

(a) No activity may be funded under this program unless an environmental threshold determination (as defined by 22 CFR 216) has been reached in the form of an Initial Environmental Examination (IEE) which has been duly signed by the Bureau Environmental Officer (BEO).

Such determination has been presented for the Health Care Waste Management in Amendment#1 to the Initial Environmental Examination (IEE) for the Uganda_ HSS_Project. Pursuant to 22 CFR 216.2(c)(2), the following activities are **categorically excluded** from further environmental analysis:

(i) Education, technical assistance, or training programs except to the extent such programs include activities directly affecting the environment (such as construction of facilities, etc.);
(ii) Analyses, studies, academic or research workshops and meetings;
(iv) Document and information transfers;

In the IEE, the following activities fall under a **Negative Determination**, subject to **Condition(s):**

Collection and transport of hazardous HCW from USG supported health facilities to designated HCW disposal facilities, treatment, disinfection and final disposal;

**Potential Adverse Impacts**

Generation, storage and disposal of medical wastes: Although health care activities provide many important benefits to communities, they can also unintentionally do harm via poor management of the waste generated. This waste generally falls into three categories in terms of public health risk
and recommended methods of disposal:

- **General** health care waste, similar or identical to domestic waste, including materials such as packaging or unwanted paper. This waste is generally harmless and needs no special handling; 75–90 percent of waste generated by health care facilities falls into this category, and it can be burned or taken to the landfill without any additional treatment;

- **Hazardous** health care waste, including infectious waste (except sharps and waste from patients with highly infectious diseases), small quantities of chemicals and pharmaceuticals, and non-recyclable pressurized containers. All blood and body fluids are potentially infectious; and

- **Highly hazardous** health care waste, which should be given special attention, includes sharps (especially hypodermic needles), highly infectious non-sharp waste such as laboratory supplies, highly infectious physiological fluids, pathological and anatomical waste, stools from cholera patients, and sputum and blood of patients with highly infectious diseases such as tuberculosis and HIV.

**Potentially infectious waste:** Improper training, handling, storage and disposal of the waste generated in health care facilities or activities can spread disease through several mechanisms. Transmission of disease through infectious waste is the greatest and most immediate threat from health care waste. If waste is not treated in a way that destroys the pathogenic organisms, dangerous quantities of microscopic disease-causing agents—viruses, bacteria, parasites or fungi—will be present in the waste. Although sharps pose an inherent physical hazard of cuts and punctures, the much greater threat comes from sharps that are also infectious waste. Health care workers, waste handlers, waste-pickers, substance abusers and others who handle sharps have become infected with HIV and/or hepatitis B and C viruses through pricks or reuse of syringes/needles. Additionally, contamination of the water supply from untreated health care waste can also have devastating effects.

Most health facilities in Uganda, especially those located upcountry, lack or have inadequate facilities for health care waste (HCW) management. In addition, these facilities lack staff with adequate training in HCW management. Potential environmental impacts result from poor or inadequate management of HCW. Inadequate or improper collection, storage and disposal of HCW can lead to contamination of soil, surface and groundwater sources, loss of biodiversity, bioaccumulation of heavy metals along the food chain, air pollution from burning of HCW, disease transmission.

Effects on aquatic life are a major concern in disposal of HCW. Additional health risks related to disposal are that burning HCW and plastic medical supplies at low temperatures or in open containers results in release of toxic pollutants into the air (furans, dioxins).

Transportation of HCW could lead to the spread of disease and contamination of the environment through leeks, if vehicles not designed for this purpose are used.

Waste management activity team will work with their implementing partner to assure that the medical facilities and operations involved have adequate procedures and capacities in place to properly handle, label, treat, store, transport and properly dispose of blood, sharps and other medical waste. This document made a Negative Determination with Conditions for activities that
have potential for negative impacts on the environment if no environmental mitigation measures are implemented, these include; storage, collection, transportation, and disposal of medical waste.

USAID’s Sector Environmental Guidelines for Health Care Waste: http://www.usaidgems.org/Documents/SectorGuidelines/Healthcare contains guidance which should inform the waste management activity to promote proper handling and disposal of medical waste, particularly in the section entitled, “Minimum elements of a complete waste management program,” and support GOU and other stakeholders to strengthen health care waste (HCW) systems.

Additionally the waste management activity team will make reference to the Environmental Procedures Best Practices Report (2017) recommendations on health care waste management, (Attachment: F), when developing respective EMMPs.

The activity shall ensure that sufficient resources are allocated to activities that generate VMMC in order to appropriately manage the waste. For activities that generate health care waste, the A/COR and Implementing Partners will ensure that the following waste management practices are in place:

- Health facilities (or other appropriate organizations) will have a written waste management plan;
- Roles and responsibilities for staff in handling, storing, treating and disposal of HCW are clearly defined;
- Rules for managing VMMC waste are written and maintained;
- Staff is trained in the segregation, handling, storing, treating and disposing of VMMC.
- Protective clothing is available to protect staff and used by these staff when dealing with VMMC;
- Good hygiene practices are followed by staff;
- Staff are appropriately vaccinated against certain diseases, including hepatitis B and tetanus;
- Temporary storage containers are located in designated areas and labeled appropriately;
- Procedures for minimizing waste, including reuse and recycling, are established;
- A system for segregating waste is in place;
- Provide facilities for proper collection, segregation, storage, and disposal of VMMC;
- All private companies involved in transportation of VMMC waste are licensed and registered by the NEMA and adhere to NEMA regulations;
- All VMMC waste is transported, incinerated and disposed in designated facilities with appropriate infrastructure for VMMC waste incineration and disposal, and are registered by NEMA.

(c) Activities which have been assigned a Negative Determination with Conditions in the IEE will need to develop an Environmental Mitigation and Monitoring Plan (EMMP) in order to describe activity level implementation of the conditions listed in the IEE. The EMMP must include a monitoring plan for each mitigated condition, including timing and responsible party. The approved EMMP will be integrated into subsequent annual work-plans, making any necessary adjustments to activity implementation in order to minimize adverse impacts to the environment.

(d) If the Recipient plans any new activities outside the scope of the approved Regulation 216
environmental documentation, an amendment to the IEE will be prepared for USAID review and approval. No such new activities will be undertaken prior to receiving written USAID approval of an IEE amendment.

(e) All program activities must comply with host country environmental regulations unless otherwise directed in writing by USAID. In case of conflict between host country and USAID regulations, the latter will govern.

(f) The cost of environmental compliance should be budgeted and will be reimbursable under this program provided all other terms and conditions are met.

6. Climate Risks Management

All HCWM activities must take into account the potential impact of the program on climate change and proposed strategies to mitigate any climate risks. For the Health Care Waste Management activity, extreme weather events like heavy rains and floods could cut off access roads to and from some health facilities in hard-to-reach areas. This could delay transportation and disposal of VMMC wastes. Climate-proofing of the transportation and disposal systems is therefore required. The activity will ensure that transportation and disposal plans are based on weather forecasts. The Applicant shall integrate this climate risk mitigation measure into activity implementation plans.

7. Other Requirements

a) Utilization of Science, Technology, Innovation and Partnership (STIP) for Collaboration

The recipient is strongly encouraged to utilize science, innovation, technology, and partnership (STIP) to:

- Do business differently to enhance the lives of Ugandan beneficiaries and share best practices;
- Integrate change management practices to allow for program adaptation and realignment;
- Utilize project management tools/software for enhanced partnership and synergy with USAID and other programs and allow for reporting on multiple funding streams.

b) Non-Discrimination in Implementation of USAID-Funded Programs

In the implementation of USAID-funded programs, the Recipient or Sub Recipient shall not discriminate against any beneficiary or potential beneficiary, such as but not limited to, by capriciously or selectively withholding or denying assistance or benefits under the project, on the basis of any non-merit factor, including one or more of the following bases: race, color, religion, sex (including gender identity or perceived gender non-conformity, and pregnancy) national origin, disability, age, sexual orientation, genetic information, marital status, parental status, political affiliation, veteran’s status, or other factors that adversely impact the beneficiaries’ access to, or participation in, services provided under the award. Nothing in this provision is intended to limit the ability of a Recipient to target assistance to certain populations as defined in the approved work plan of a USAID-funded program. [End of Provision]
7. Federal Awarding Agency Contact(s)

Only the Agreement Officer is authorized to make commitments on behalf of USAID. The Agreement Officer is listed below:

Admir Serifovic  
Agreement Officer  
USAID/Uganda  
US Embassy Compound  
Plot 1577, Ggaba Road  
Kampala, Uganda

Generic Email: KampalaUSAIDSolicita@usaid.gov

Any questions while the funding opportunity is open may be submitted to the attention of Ms. Janepher Nabitosi, A&A Specialist at the above email.

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SECTION H: OTHER INFORMATION

USAID reserves the right to fund any or none of the applications submitted. The Agreement Officer is the only individual who may legally commit the Government to the expenditure of public funds. Any award and subsequent incremental funding will be subject to the availability of funds and continued relevance to Agency programming.

Applications with Proprietary Data

Applicants who include data that they do not want disclosed to the public for any purpose or used by the U.S. Government except for evaluation purpose, should mark the cover page with the following:

“This application includes data that must not be disclosed duplicated, used, or disclosed – in whole or in part – for any purpose other than to evaluate this application. If, however, an award is made as a result of – or in connection with – the submission of this data, the U.S. Government will have the right to duplicate, use, or disclose the data to the extent provided in the resulting award. This restriction does not limit the U.S. Government’s right to use information contained in this data if it is obtained from another source without restriction. The data subject to this restriction are contained in sheets {insert sheet numbers}.”

Additionally, the applicant must mark each sheet of data it wishes to restrict with the following:

“Use or disclosure of data contained on this sheet is subject to the restriction on the title page of this application.”
ANNEX 1 - BUDGET TEMPLATE

In addition to completing the SF 424-A, Applicants shall use the attached budget template in Excel to prepare both their detailed and summary budgets as well as the Milestone Budgets, in addition to the Milestone Plan in MS Word including the price of each milestone as part of the Cost Proposal.
ANNEX 2 - STANDARD PROVISIONS FOR FIXED AMOUNT AWARDS TO NONGOVERNMENTAL ORGANIZATIONS

The Standard Provisions as marked “Required” in the list below are applicable to the prospective award. The full text of the standard provisions is available at [https://www.usaid.gov/ads/policy/300/303mat](https://www.usaid.gov/ads/policy/300/303mat)

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<td>RAA14. PROHIBITION ON THE USE OF ANTI-TRAFFICKING FUNDS TO PROMOTE, SUPPORT, OR ADVOCATE FOR THE LEGALIZATION OR PRACTICE OF PROSTITUTION (JUNE 2012)</td>
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<td>RAA16. CONSCIENCE CLAUSE IMPLEMENTATION (ASSISTANCE) (FEBRUARY 2012)</td>
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<td>RAA21. LIMITATION ON SUBAWARDS TO NON-LOCAL ENTITIES (JULY 2014)</td>
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<td>RAA22. AWARD TERM AND CONDITION FOR RECIPIENT INTEGRITY AND PERFORMANCE MATTERS (April 2016)</td>
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<td>RAA23. PROTECTING LIFE IN GLOBAL HEALTH ASSISTANCE (May 2019)</td>
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**ANNEX 3 - ABBREVIATIONS AND ACRONYMS**

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>ADS</td>
<td>Automated Directives System</td>
</tr>
<tr>
<td>AO</td>
<td>Agreement Officer</td>
</tr>
<tr>
<td>AOR</td>
<td>Agreement Officer’s Representative</td>
</tr>
<tr>
<td>CFR</td>
<td>Code of Federal Regulations</td>
</tr>
<tr>
<td>EMMP</td>
<td>Environmental Mitigation &amp; Monitoring Plan</td>
</tr>
<tr>
<td>FAA</td>
<td>Fixed Amount Award</td>
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<tr>
<td>FAA</td>
<td>Foreign Assistance Act</td>
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<tr>
<td>FP</td>
<td>Family Planning</td>
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<tr>
<td>FY</td>
<td>Fiscal Year</td>
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<tr>
<td>GOU</td>
<td>Government of Uganda</td>
</tr>
<tr>
<td>HCW</td>
<td>Health Care Waste</td>
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<tr>
<td>HCWMA</td>
<td>Health Care Waste Management Activity</td>
</tr>
<tr>
<td>IEE</td>
<td>Initial Environmental Examination</td>
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<tr>
<td>NEMA</td>
<td>National Environmental Management Authority</td>
</tr>
<tr>
<td>MNCH</td>
<td>Maternal, Newborn and Child Healthcare</td>
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<tr>
<td>NOFO</td>
<td>Notice of Funding Opportunity</td>
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<tr>
<td>PEPFAR</td>
<td>President’s Emergency Plan for AIDS Relief</td>
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<td>PPE</td>
<td>Personal Protection Equipment</td>
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<tr>
<td>SAM</td>
<td>System for Award Management</td>
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<tr>
<td>USG</td>
<td>United States Government</td>
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<tr>
<td>VMMC</td>
<td>Voluntary Medical Male Circumcision</td>
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THE REMAINDER OF THIS PAGE LEFT BLANK INTENTIONALLY.