

**SAVING LIVES AT BIRTH: A GRAND CHALLENGE  
FOR DEVELOPMENT (Round IV)**

**REQUEST FOR APPLICATION (RFA)**

**RFA NUMBER: RFA-OAA-14-000071**

**Primary Point of Contact:**

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**USAID**  
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**BILL & MELINDA  
GATES foundation**



**Grand Challenges Canada  
Grands Défis Canada**





**Issuance Date: Wednesday, January 8 2014**

**Closing Date: Thursday, March 27, 2014**

**Closing Time: 2:00 p.m. EST**

**Questions Due Date: 5:00 p.m. EST, Friday, February 7, 2014**

**Subject:** Request for Application (RFA) for Saving Lives at Birth: A Grand Challenge for Development (Round IV)

Dear Prospective Applicant:

USAID<sup>1</sup>, the Government of Norway, the Bill & Melinda Gates Foundation, Grand Challenges Canada, and DFID invite applications to respond to **Saving Lives at Birth: A Grand Challenge for Development (Round IV)**. This request for applications describes this Challenge targeting maternal and neonatal health and the types of activities covered; funding available and the process and requirements for submitting applications; criteria for evaluating applications; and refers prospective applicants to relevant documentation on the internet. Saving Lives at Birth: A Grand Challenge for Development anticipates awarding up to 30 grants as a result of this RFA. To this end, the Saving Lives at Birth Challenge is seeking applications from eligible institutions as described in Section III of the RFA.

This RFA and any future amendments can be downloaded from <http://www.grants.gov>. Prospective Applicants that are unable to retrieve the RFA from the Internet can request an electronic copy by email at [GrandChallenge2014@usaid.gov](mailto:GrandChallenge2014@usaid.gov).

**DUE DATE: Applications shall be received no sooner than January 30, 2014 and no later than Thursday, March 27, 2014 at 2:00 pm EST via [www.savinglivesatbirth.net/apply](http://www.savinglivesatbirth.net/apply).**

Applicants should retain a copy of their application and accompanying enclosures for their records, as well as the acknowledgement of their submission to the online application intake platform.

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<sup>1</sup> Pursuant to the Foreign Assistance Act of 1961, as amended, the United States Government (USG), as represented by the U.S. Agency for International Development (USAID).

**QUESTIONS:** Prospective applicants who have questions concerning the contents of this RFA shall submit them in writing no later than 5 pm. EST on Friday, **February 7, 2014** via email at [GrandChallenge2014@usaid.gov](mailto:GrandChallenge2014@usaid.gov). We strongly recommend that you thoroughly review this RFA and the website (<http://savinglivesatbirth.net/apply>) prior to submitting your questions. We will confirm receipt of any questions and post all responses on Grants.gov and the Saving Lives at Birth website on **February 21, 2014**.

Issuance of this RFA does not constitute an award commitment on the part of USAID, nor does it commit any of the Partners to pay for costs incurred in the preparation and submission of applications. Further, the program reserves the right to reject any or all applications received.

Sincerely,

/s/

Jimmie Curtis  
USAID Agreement Officer

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## Commonly-Used Terms and Definitions in this RFA

Within the context of this RFA, applicants should be aware that these definitions apply to the following commonly-used terms.

Demand creation	Interventions that seek to empower and engage women of reproductive-age, their families and their communities at large to practice healthy behaviors, and be aware of and access health care during pregnancy, childbirth and the early postnatal period, especially the first two days after birth. Demand creation includes strategies for behavior change communication, community mobilization, social marketing, and/or advocacy as well as strategies that incentivize the use of health services/healthy behaviors.
Development Exchange	A dynamic gathering of Saving Lives at Birth innovators, development experts, and funders. At this event, innovators publically display their innovations in an open marketplace, attend workshops, and participate in the last stage of competition.
Innovation	The development and application of new (and/or modification of existing) tools, products, services or processes that address roadblocks to healthy pregnancies and births and is clearly differentiated from existing approaches.
Integrated solution	Approaches that integrate science and technology, service delivery, and demand creation in innovative and complementary ways.
Proof-of-concept	Strong evidence in a controlled or limited setting of promising health outcome(s) and/or the reduction of significant barrier(s) to health and demand for the solution.
Seed grant	A grant (for approximately \$250,000 USD for up to 2 years) to support the development and validation of ideas capable of impacting health outcomes for pregnant women and their newborns in low-resource settings.
Science and technology	Scientific and technological advances that prevent, detect, or treat maternal and newborn problems prior to conception, during the antenatal period, at the time of birth and in the early postnatal period in the home, community or in peripheral health facilities. Technological solutions do not need to be “high tech,” but they should be low-cost and designed with user needs in mind. ‘Science’ is conceptualized broadly and refers to any

	reach of scientific inquiry, ranging from the natural, health, social or behavioral sciences to engineering.
Service delivery	Approaches that provide high-quality antenatal, labor and delivery services and pre and postnatal care, including postpartum family planning and PMTCT.
Transition grant	A grant (no more than \$2 million USD for up to 4 years) to develop, refine, and rigorously test the impact of integrated solutions that have strong evidence in a controlled or limited setting of promising health outcomes and/or the reduction of significant barrier(s) to health and demand for the solution (i.e. have demonstrated proof-of-concept). These integrated solutions have the potential to credibly scale to improve the lives of millions of pregnant women and newborns in multiple countries over time.

## SECTION A. PROGRAM DESCRIPTION

### Program Summary

United States Agency for International Development (USAID), the Government of Norway, the Bill & Melinda Gates Foundation, Grand Challenges Canada, and UK's Department of International Development (DFID) have joined together to launch the fourth round of **Saving Lives at Birth: A Grand Challenge for Development**.

Together, we call for groundbreaking prevention and treatment approaches for pregnant women and newborns in poor, hard-to-reach communities around the time of childbirth. The estimated 2.6 million stillbirths, 2.9 million neonatal deaths and 287,000 maternal deaths that occur globally each year signal a major gap for intervention specifically around childbirth and the early postnatal period – a time when mothers and babies are most vulnerable and global progress in reducing mortality has been particularly poor. This gap in interventions is particularly acute in poor, underserved communities and among women who are disadvantaged.

Innovative ideas that can leapfrog conventional approaches are critical in this area. If we are to accelerate substantial and sustainable progress in reducing maternal and newborn deaths and stillbirths at the community level, we need innovative prevention and treatment approaches across three main domains:

- (1) Science & technology;
- (2) Service delivery; and
- (3) Demand-side innovation that empowers pregnant women and their families to practice healthy behaviors and be aware of and access health care during pregnancy, childbirth and the early postnatal period, especially the first two days after birth.

We are particularly interested in investing in approaches that integrate the latest scientific, technological, behavior change, and information and communication advances into radical solutions for impact on maternal and newborn health.

Significant breakthroughs in innovation often come about when new ideas and disciplines are applied to long-entrenched problems. New technologies and approaches can transform insurmountable development challenges into solvable problems. To harness this ingenuity, we encourage partnerships that bring together diverse expertise from non-traditional partners, particularly those that include private sector partners. We are calling on for-profit companies, non-governmental organizations, academic/medical research institutions, faith-based organizations, civic groups and foundations across a range of disciplines to take up this challenge.

Critical to the success of innovative solutions is a clear understanding of how best to implement them at scale, with priority emphasis on target

populations. To foster sustainability, we encourage ideas that integrate scientific / technological, social and business innovation<sup>2</sup>.

Successful implementation at scale likely includes private and/or public sector expertise and engagement in deploying, advocating for or sustaining solutions. Bold ideas also need to be championed by effective, results-driven leaders with the capacity to convene and engage with key influencers. Multidisciplinary/cross-sector teams are encouraged, where necessary, to ensure relevant scientific, social, and business expertise. Development of new interventions, technologies or approaches and their successful scale up should complement efforts to strengthen health systems and address broader determinants of health including poverty, inequity, gender inequality, and access to water and sanitation resources, all of which are needed to address this grand challenge for development.

Audacious but achievable ideas with the potential to lead to transformational change will be swiftly funded through at least one of two funding streams:

- (1) **Seed Funds** to support the development and validation of innovative ideas, and
- (2) **Transition Funds** to transition innovations with demonstrated proof-of-concept toward scale up.

These investments in potentially high-return projects are aimed to identify and support transformational approaches to women's and newborns' health that can be scaled up to dramatically – and sustainably – reduce deaths and poor birth outcomes for millions of women and newborns in the hardest to reach communities of the world.

This call for applications is the fourth one issued under this program. The Partners launched Saving Lives at Birth on March 9, 2011, issuing the first global call for transformative ideas to address this grand challenge. Since then, two additional calls have been initiated with resounding response from the global community. Since 2011, Saving Lives at Birth has supported 59 exciting and potentially transformational solutions through 61 grants – 51 seed and 10 transition to scale - to tackle this grand challenge and dramatically improve women's and newborns' health.

All finalists and awardees are highlighted on the Saving Lives at Birth website ([www.savinglivesatbirth.net](http://www.savinglivesatbirth.net)).

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<sup>2</sup> This approach is referred to as Integrated Innovation, for more information visit: <http://www.grandchallenges.ca/integrated-innovation/>



## Problem Statement

The onset of labor marks the start of a high-risk period for both mother and baby that do not ease until at least 48 hours after birth. During this short period of time, an estimated 145,000 maternal deaths, 1.45 million neonatal deaths, and 1.2 million stillbirths occur annually.

- For the mother, the critical conditions occurring during pregnancy and after labor include hemorrhage, hypertensive disorders such as preeclampsia and eclampsia, serious infections, and obstructed labor.
- For the newborn, the critical conditions occurring after birth are serious infections (sepsis, meningitis, pneumonia, and diarrhea), intrapartum-related deaths (“birth asphyxia”), and complications of preterm birth.
- Important causes of stillbirth include intrapartum asphyxia, maternal and antepartum hemorrhage, fetal bacterial infection, obstructed labor, syphilis, and malaria.
- Important causes of maternal and newborn complications result from births that are spaced too closely.

Almost all of the deaths during this high-risk period occur in low- and middle-income countries, especially in sub-Saharan Africa and South Asia, where access to quality care is also the poorest. Evidence-based interventions—such as skilled attendance at delivery; emergency obstetric and newborn care; parenteral administration of drugs; blood transfusions; kangaroo care for newborns; early initiation of breastfeeding; hygiene; and rapid diagnosis and early treatment of infections—do exist to manage complications around the time of birth. However, these interventions are not always available to the women and children who need them. Since many opportunities to optimize birth outcomes occur before and after the time of birth, it is also important to improve women’s access to evidence-based prenatal care, family planning resources (including contraception), birth spacing and delay, proper nutrition, and postnatal care.

In resource-poor settings, care at the time of birth is further impeded by the fact that people often lack material resources, electricity, clean water and adequate transportation to travel to hospitals, and that there are few trained health professionals or facilities capable of providing basic and comprehensive emergency obstetric care. Where trained professionals and facilities exist, quality of care can be further impeded by poor management and supervision, non-functioning supply chains, and lack of adherence to standard guidelines and protocols. Finally, gender norms, cultural beliefs, and traditions that limit a woman’s autonomy and decision making power, may also prevent women and their families from practicing healthy behaviors, and seeking and receiving life-saving care at and around the time of birth.

Taken together, these limitations leave poor, underserved women—who have the greatest geographical, financial and structural challenges in securing quality care at the time of delivery—and their infants at the

highest risk of poor pregnancy outcomes.

## The Challenge

We seek to address roadblocks to healthy pregnancies and births in three major domains:

- *Science & Technology*: lack of affordable and effective medical solutions appropriate for the community or clinic setting;
- *Service Delivery*: lack of quality health services, including inadequate numbers of trained, motivated, equipped and properly located and supervised health staff and caregivers; operating without adherence to up-to-date guidelines or evidence-based practices and limited by operational bottlenecks;
- *Demand*: lack of opportunity, ability, motivation, and empowerment to access health care or adopt healthy behaviors before, during, and after pregnancy.

**Science and Technology:** We invite bold ideas for scientific and technological advances that prevent, detect or treat maternal and newborn problems, prior to conception, during the antenatal period, at the time of birth and in the early postnatal period in the home, community or in peripheral health facilities. Technological solutions do not need to be "high tech," but they should be low-cost and designed with end-user needs in mind. Examples may include tools for identification and care of preterm and low birth weight newborns; newborn resuscitation; infection diagnosis and management, including HIV/AIDS and sepsis; early detection of high risk pregnancies; and prevention and treatment of preeclampsia/eclampsia. We also invite applications that consider technical innovations in nutrition and family planning, including healthy timing and spacing of pregnancy, that contribute to improved maternal and newborn health.

**Service Delivery:** We invite bold ideas for new approaches to provide high-quality labor and delivery services and pre and postnatal care, including postpartum family planning and PMTCT. Examples may include novel incentive schemes for recruiting and retaining skilled personnel, novel training and/or supervision programs for community-based or alternative health workers, mechanisms to improve referral and transportation of mothers with complications and sick newborns, or new ways of using information and communication technology (ICT) to improve health and healthcare delivery in hard-to-reach areas.

**Demand:** We invite bold ideas for empowering and engaging women of reproductive age, their families and their communities at large to practice healthy behaviors and be aware of and access health care during pregnancy, childbirth and the early postnatal period, especially the first two days after birth. Demand creation includes, but is not limited to, behavior change communication, social marketing, and/or advocacy as well as incentives for use of health services/healthy behaviors. The Saving

Lives at Birth partnership is looking for ideas that reduce barriers to seeking, accessing, and receiving evidence-based care. Such barriers include economic, social, and political factors, such as poverty, gender inequality, and limited education. Examples may include innovations that empower women and/or work to transform cultural and social norms that limit women's decision-making power and autonomy; innovative use of social networks, interpersonal communications and other new methods to provide/reach families with information that is culturally relevant and gender sensitive; mechanisms to incentivize individuals to seek care and/or adopt healthy behaviors and to negotiate for improved practices, including novel financing mechanisms to reduce costs or target scarce resources at those unable to pay; and mass communication methods that can help target individual and collective behavior to improve the uptake of care around the time of birth.

Any of these domains, alone or in combination, can help to improve the availability and quality of maternal and newborn health care.

Since many opportunities to optimize maternal and birth outcomes occur before and after the time of birth, **solutions do not need to focus solely on the window between labor and 48 hours post-delivery**. Where life-saving interventions exist but have not been successfully deployed or implemented, we invite bold ideas for overcoming specific barriers to scaling up.

We encourage for seed grants– and require for transition grants - bold ideas that effectively integrate the three domains outlined above – science and technology, service delivery and demand creation (**integrated solutions**).

## **Program Description and Structure**

This Grand Challenge for Development brings together multiple Partners – USAID, the Government of Norway, the Bill & Melinda Gates Foundation, Grand Challenges Canada, and DFID - to support a single challenge. The World Bank is also an affiliate of the program. Projects will be jointly selected through a unified application process. Successful innovators will be supported collectively as a *community of innovators* by all five of the Saving Lives at Birth Challenge Partners. The Partners will work with this community to foster learning, collaboration, and shared approaches. The grants to successful innovators will be administered and managed on behalf of all the Partners by either USAID or Grand Challenges Canada.

The Saving Lives at Birth Challenge will invest in a portfolio of projects. Through this portfolio, we will seek groundbreaking innovations by:

- **Providing seed funds** to support the development and validation of innovative solutions capable of positively impacting health outcomes for pregnant women and their babies in low-resource settings

- **Providing transition to scale funds** to develop, refine, and rigorously test the impact of integrated solutions that have strong evidence in a controlled or limited setting of promising health outcomes and/or the reduction of significant barrier(s) to health and demand for the solution. These integrated solutions have the potential to credibly scale to improve the lives of millions of pregnant women and newborns in multiple countries over time. Transition funding is limited to integrated solutions that unite science and technology, service delivery, and demand creation.

Key features of the Saving Lives at Birth Challenge are:

- A brief application
- Rapid turnaround time—we aim to select grants within five months from the proposal submission deadline
- Opportunities for shared learning and collaboration between innovators, funders, and other public health experts including participation by all finalists in the Development Exchange July 29-31, 2014 in Washington, DC and participation by awardees in meetings of the Saving Lives at Birth community at future Development Exchange events or annual Grand Challenges meetings hosted by the Bill & Melinda Gates Foundation, Grand Challenges Canada, USAID and other Partners
- A review process designed to identify potentially groundbreaking ideas that show great promise. Our review process is based on reviewers with a track record in identifying innovative ideas who will recommend the applications they find most pioneering and that have the potential for greatest impact.

**Multiple rounds of funding:**

It is expected that this Grand Challenges initiative will invite applications in at least four separate rounds – this RFA is requesting proposals for the fourth round of funding.

**Anticipated  
Number of Awards**

Seed grants (valued generally at \$250,000 USD each) and transition grants (valued up to \$2 million USD each) will be awarded in this fourth round of funding.

Assuming a sufficient number of applications of merit, and subject to the availability of funding, this fourth round of the Saving Lives at Birth Challenge is expected to support 25 seed grants and 5 transition grants of varying amounts, although actual awards may vary for each category. Seed grants will support projects that span up to two (2) years and transition grants for projects spanning up to four (4) years. The Partners reserve the right to fully or incrementally fund selected application(s) as well as to partially fund selected application(s).

**Seed Funds**

- **Focus:** Seed funds will be provided to support the development and

validation of ideas capable of impacting health outcomes for pregnant women and their babies in low-resource settings. **Integrated solutions** (approaches that integrate science and technology, service delivery, and demand creation in innovative ways) are encouraged but not required. If seed grants propose an integrated solution, all three components (science and technology, service delivery, and demand) do not need to be novel; the innovation may rest in the integration of the components that enhances the effect on improved birth outcomes over that of each component in isolation.

- **Eligibility:** Proposed solutions for seed funds may have been previously tested (but preliminary data are not required), but should not be current standard practice; however, innovative variations on existing approaches may be considered (e.g., a new means to deliver an existing service or a new way to make an old model demonstrably more effective or cost effective). Incremental solutions that are only slight improvements over existing approaches will not be funded. Previous Saving Lives at Birth seed grantees are eligible to apply. Applicants may need more than one seed grant to reach proof of concept.
- **Funding:** Funding levels will correspond to the scope and scale of the innovation but will generally be \$250,000 USD per project. USAID-administered seeds will be awarded using a Fixed Obligation Grant.<sup>3</sup>
- **Length of Award:** Seed projects will be funded for up to two (2) years.
- **Number of Awards:** An anticipated 25 applications will be funded in this fourth round of funding, although actual numbers may vary.

#### **Transition Funds**

- **Focus:** The Saving Lives at Birth Challenge will award transition funds to further develop, refine and rigorously test the impact of integrated solutions that have strong evidence in a controlled or limited setting of promising health outcome(s) and/or the reduction of significant barrier(s) to health and demand for the solution. These integrated solutions have the potential to credibly scale to improve the lives of millions of pregnant women and newborns in multiple countries.
- **Eligibility:** Projects for transition funds must have strong evidence in a controlled or limited setting of promising health outcome(s) and/or the reduction of significant barrier(s) to health (i.e., proof of concept) and demand for the solution to warrant expanded support. Applications

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<sup>3</sup> A Fixed Obligation Grant is used to support specific projects when the Agency is confident that a reasonable estimate of the actual cost of the overall effort can be established and the Agency can define accomplishment of the purpose of the grant through defined milestones. The schedule of disbursements must be associated with one or more very specific program milestones where there is a certainty about the cost of achieving each milestone and where accomplishment of each milestone by the Beneficiary is readily discernible in fact and in time. The schedule of disbursements reflects both the timing and the amount of beneficiary payments for the accomplishment of each milestone, and it is therefore essential that the Grants Evaluation Committee be satisfied that there is sufficient cost history to negotiate the schedule of disbursements.

must provide sufficient and credible evidence to demonstrate their proof of concept and the link to positive impact on maternal and newborn health. **Without sufficient evidence, applicants should consider applying for a seed grant.** Transition Funds will be limited to integrated solutions only (approaches that integrate science and technology, service delivery, and demand creation domains in innovative ways). All three components (science and technology, service delivery, and demand creation) do not need to be novel; the innovation may rest in the integration of the components that enhances the effect on improved birth outcomes over that of each component in isolation. Note that components should be integrated in a meaningful and complementary manner, merely combining three stand-alone components into one project is not considered an integrated solution. A key component of achieving sustainability and scale is partnerships. Reviewers will look for partnerships that contribute expertise relevant to the scale and sustainability of the idea. Co-funding from partners is encouraged, as this demonstrates a key stake in project success by project partners, as well as demand for the solution.

- **Funding:** Funding levels will correspond to the scope and scale of the innovation but will not exceed \$2 million USD per project.
  - Some innovations may require testing at various levels (local, regional, and across several regions) in the transition stage. Strong justification should be made as to how the scale of implementation corresponds to the scope of the project.
- **Length of Award:** Transition grants will be funded for up to four (4) years.
- **Number of Awards:** An anticipated five (5) applications will be funded in the fourth round of funding, although actual numbers may vary.

### **Moving Between Stages**

Projects will enter the program portfolio at either the seed or transition stage described above. Projects receiving seed funds can apply for seed or transition funds in potential future rounds of funding under this program. Receipt of funding at any stage does not guarantee future funding at another stage.

We expect only a small portion of seed grants to demonstrate sufficient success to be competitive for further funding under the transition to scale category.

- Transition grants may not be the immediate next step for successful seed grant projects; seed grant recipients may need to apply for continued seed funds to support the further development and validation of their solutions. For previous Saving Lives at Birth seed grantees that apply for follow-on seed funding under this RFA for the same project, strong justification is needed for continued funding. Reviewers will look for how the scope and scale of the project takes into account previous work, specific achievements, lessons learned, and the proposed pathways forward.

- About 10-20 percent of seed fund projects are anticipated to be sufficiently successful to be competitive for funding at the transition stage, though this may vary with the quality of the portfolio of projects.
- Simply meeting the milestones will not automatically lead to the next stage. As all seed grantees applying for transition grants will compete with other applicants in the transition to scale category; only the most successful and promising seed grants may be in the competitive range at the next stage.

Successful transition to scale projects will demonstrate sufficient impact, value, and sustainability at project end. We expect many will be ready to fully scale within a country or region. As other public or private funders adopt these interventions at scale, they will no longer require support from the Saving Lives at Birth Challenge. Graduation to scale will be a key metric of both innovation and program success.

## What We Are Looking For

### Interventions that:

- Substantially increase demand for and access to primary health interventions for women and newborns (for example, by at least 50 percent for interventions with low coverage);
- Substantially improve the quality of care as measured by health outcomes; and
- Improve and sustain healthy behaviors.

### Solutions should:

- Be "off the beaten track," daring in premise, and clearly differentiated from standard practice;
- Enhance uptake, acceptability and provide for **sustained use** (potential for sustainability as defined as cost-recovery, sustained use, and sustainable impact);
- Be **low-cost** or highly cost-effective;
- Have a strong likelihood of achieving a **substantial impact** on one or more important adverse maternal, fetal, or neonatal health conditions described in the problem statement above;
- Be **scalable** in resource-poor settings; and
- Be able to be **monitored, measured and evaluated**.

### Competitive applications will address:

- The anticipated results to be achieved within the lifetime of the grant
- The context in which the solution will be delivered (e.g., the user's needs and wants; community characteristics; connectivity with health authorities and existing health facilities; local leadership, government and civil society buy-in)
- How the solution will have a substantial impact on maternal and newborn health, including any previous demonstrated proof-of-concept
- How the solution will be delivered/administered (e.g., frequency of service, personnel, etc.)
- How the solution will improve upon the best existing alternative(s)

- available today and/or standard practice
- How the solution will (or can) integrate science and low-cost technology, service delivery and demand
- How the solution addresses underlying determinants of seeking maternal healthcare
- How the solution will work to avoid potentially harmful unintended consequences as applicable
- How the organization is positioned to carry out the work successfully (including organizational and financial sustainability)
- The commitment of partners that contribute expertise relevant to the scale and sustainability of the idea as applicable
- The duration of the time required to implement proposed solution
- A concrete plan for measuring, evaluating, and sharing results
- How the solution addresses determinants of health, public policies, and other ethical / social / cultural / legal frameworks that could limit uptake
- How the solution incorporates financial models or business systems to develop and deliver the solution affordably and sustainably

### **Strong Areas of Interest**

We are particularly interested in novel innovations in any of the following areas, but not limited to:

- Approaches to prevent stillbirth and preterm birth, such as reducing prolonged or obstructed labor, pre-eclampsia and infections
- Approaches targeting individual and collective behaviors and social norms (particularly gender inequality) to increase access, uptake and retention in antenatal care, facility based labor and delivery and postnatal care, including healthy timing and spacing of pregnancies through family planning and postpartum family planning, early initiation of breastfeeding, Prevention of Mother to Child Transmission (PMTCT) of HIV and other HIV/AIDS prevention, care and treatment services for pregnant women, infants and children.
- Simple, low-cost technologies adapted or designed for use in hard-to-reach, low-resource settings (e.g., simpler or portable technologies for newborn resuscitation, identification and care of preterm and low-birth weight newborns, infection management, prevention and treatment of postpartum hemorrhage, etc)
- Mechanisms to improve referral and transportation of mothers with complications and sick newborns
- Ways that Information and Communication Technology (ICT) can be used to improve health, healthcare delivery, and accountability for maternal and newborn health in low-resource areas in new, measurable, low-cost and integrated ways.
- Interventions that reduce barriers to accessing or receiving appropriate treatment and evidence-based care.
- Solutions that recognize the critical roles of the end-user in the development process.



We encourage integrated solutions that bring together cutting-edge science and/or low-cost technologies, service delivery, and demand innovation in transformative new ways.

## **SECTION B: ELIGIBILITY CRITERIA**

### **What We Will Not Fund**

- Applications that do not present a coherent experimental plan with appropriate metrics and methods to determine success or failure
- Incremental solutions that are only slight improvements over existing approaches, including mHealth approaches that do not offer transformational improvements or expansion compared with current practices or address how to move towards integration of multiple information systems into one solution
- Proven approaches that have already tackled scale up challenges in low and middle income countries
- Solutions that are not applicable to the eligible countries (see Section C)
- Approaches that detract from favorable family practices, such as those that prevent immediate and exclusive breastfeeding or skin-to-skin care
- Approaches that reinforce or ignore harmful gender norms
- Basic scientific or laboratory-intensive research in the natural sciences. Basic research is defined as research directed towards fuller knowledge or understanding of the fundamental aspects of phenomena and of observable facts without specific applications towards processes or products in mind
- Theoretical and/or descriptive socio-economic research
- Approaches that address only tertiary care or mental health
- Replication of an approach in a new geography in the absence of an innovative implementation strategy

### **Measuring Success**

The work proposed in the application must include a clear set of key experiments, methodologies or activities that test the idea in a way that could provide sufficient evidence of impact. In many cases, but not all, this will mean that a solution will be tested using a robust experimental design including control and intervention groups with a clear set of indicators to define success.

Innovations will ultimately scale up outside of this program, either by the private sector, the public sector (including host country governments and donors or civil society groups), or some combination of the two.

For those innovations anticipated to be publicly provided (or by civil society), a key metric for success is cost-effectiveness and evidence of demand among country governments and civil society.

For those innovations for which scaling by the private sector without public

subsidy is planned, the Saving Lives at Birth Challenge will look for evidence of demand among target users and a compelling value proposition (an analysis and quantified review of the benefits, costs and value that an innovation can deliver to target groups).<sup>4</sup>

In both cases, the Saving Lives at Birth Challenge calls for sufficient alliances or partnerships to scale the innovation (e.g., relevant stakeholders, joint ventures, selling/distribution agreements, channel partnerships, licensing arrangements, etc.) and the commitment on the part of those partners to the innovation and its transition to scale and sustainability. At the transition stage, evidence of co-funding from partners is encouraged, as this demonstrates a key stake in project success by project partners, as well as demand for the solution.

## SECTION C: APPLICATION GUIDELINES AND SUBMISSION INSTRUCTIONS

### Overview of Application Process

The Saving Lives at Birth Challenge seeks innovative ideas that can leapfrog conventional approaches. Every aspect of the program, including the carefully designed topics describing critical scientific barriers to progress in global health, the abbreviated application, and the rapid review process, are designed to swiftly award funding to groups that are testing ideas that could lead to significant breakthroughs in global health.

Issuance of this RFA does not constitute an award or commitment on the part the U.S. Government or any of the Partners, nor does it commit any of the Partners to pay for costs incurred in the preparation and submission of an application.

Procedures for submitting applications are outlined below.

### Eligibility Criteria

We welcome and encourage applications from all types of organizations including foreign and domestic for-profit companies, non-profit organizations, faith-based organizations, foundations, academic institutions, civic groups and regional organizations. **Individuals and governments are not eligible to apply. For the purposes of this RFA, publicly-funded universities or universities with government affiliations are not considered governments.**

Innovators new to Grand Challenges competitions, including non-

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<sup>4</sup> Applicants are encouraged to access Grand Challenge Canada's Online Proposal Development Resource at [www.grandchallenges.ca/proposaldevelopment](http://www.grandchallenges.ca/proposaldevelopment), which is updated regularly and contains material to help researchers and innovators around the world develop their project proposals and plan for how their innovation will go to scale, be sustained and have impact globally.

development experts and applicants from low- and middle-income countries are particularly encouraged to apply.

We also encourage partnerships that bring together diverse expertise. Many applicants in the first three rounds included leadership from partners in low- and middle-income countries. Where joint partnerships include innovators from low- and middle-income countries, we encourage the partnership to designate the low- or middle-income country partner as the Project Manager/ Principle Investigator (PI). Such a designation should constitute a meaningful effort to foster the leadership of the low- or middle-income country partners and should not be pro forma.

Grantees must be legally recognized organizational entities under applicable law and be able to document the above.

Applicants must follow the guidelines in the Application Instructions.

Please note that multiple submissions from an institution are allowed. Each submission, however, must be associated with a different primary contact (Project Manager/Principal Investigator) and propose a different idea. We encourage institutions to submit their best idea.

The Partners are committed to standardizing the grant management and reporting process across managing organizations to the greatest possible extent. Please note, however, that finalists and awardees will be subject to the rules and regulations of the respective organizations managing the grants. Therefore, we encourage applicants to familiarize themselves with the eligibility requirements and conditions of funding of both mechanisms.

See Section E: Award and Administration below, for links to the relevant regulations, standard provisions and required certifications that applicants will be required to submit upon request prior to award depending on whether the project is supported by a grant administered and managed by either USAID or Grand Challenges Canada.

## **Eligible Country List**

The Saving Lives at Birth Challenge seeks applications that have an operational focus in low-income countries, as defined by the World Bank. Proposals with an operational focus in middle-income countries will also be considered.

Applicants from organizations based in, or applications with an operational focus in, the following countries are not eligible: Cuba, Iran, North Korea and Syria.

## **Timetable**

### **Submission Deadlines**

*Applicants must submit applications by March 27, 2014.*

### **Competition Timeline and Key Steps**

*The estimated timeline from application to award is 6 months.*

*January 8 2014: RFA released*

*January 8 – February 7, 2014: Applicants invited to submit questions on the*

RFA

February 7, 2014: Questions due by 5:00 pm EST

February 21, 2014: Responses posted on grants.gov and website

January 30, 2014 through March 27, 2014: Applicants invited to submit seed applications and transition concept notes

March 27, 2014: Call for applications closes at 2 p.m. EST

May 21, 2014: Transition finalists notified to submit full applications

June 27, 2014: Full applications of transition finalists due

July 29-31, 2014: Development Exchange in Washington, DC

Around September 30, 2014: Finalization of awards

## **Submission Instructions**

The following are instructions for how applications shall be submitted.

### **SEED APPLICATIONS**

1. Applications shall be submitted by March 27, 2014. Applications will not be accepted before January 30, 2014 and after March 27, 2014, 2:00 p.m. EST.
2. Applications shall be submitted electronically via [www.savinglivesatbirth.net/apply](http://www.savinglivesatbirth.net/apply). More information on application submission is found in the Application Instructions and on our website.

### **TRANSITION APPLICATIONS**

1. Concept notes shall be submitted by March 27, 2014. Concept notes will not be accepted before January 30, 2014 and after March 27, 2014, 2:00 p.m. EST.
2. If initial review indicates the concept note merits further consideration for funding based on the evaluation criteria (see page 31 below), a full application will be requested. Full applications are due by June 27, 2014 at 2:00 p.m. EST.
3. Both the concept note and full applications shall be submitted electronically via [savinglivesatbirth.net/apply](http://savinglivesatbirth.net/apply). More information on application submission is found in the Application Instructions and on our website.

For all applications and concept notes, it is the applicant's responsibility to ensure that files are complete and transmitted by the deadline. The applicant bears full responsibility for data errors or omissions.

Facsimile proposal submissions will not be accepted.

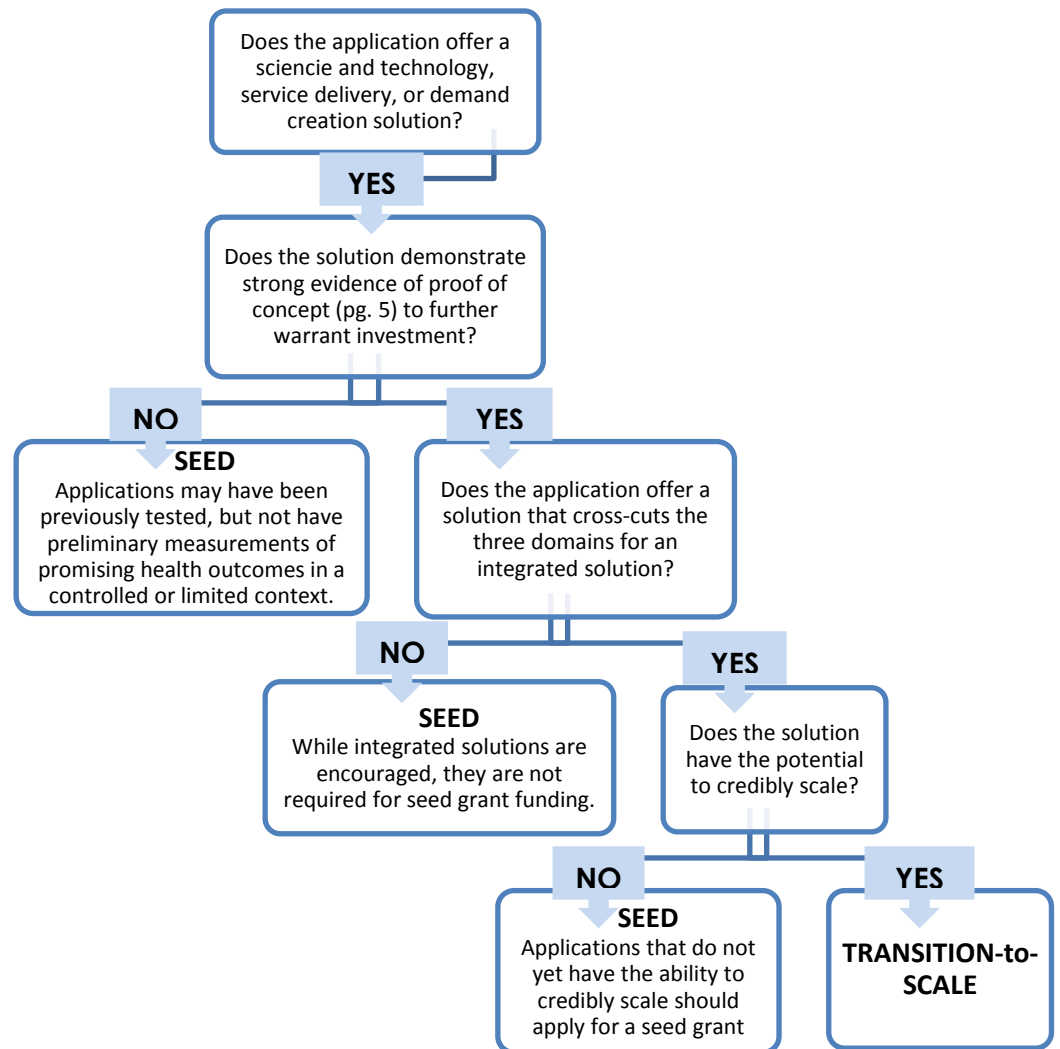
The Saving Lives at Birth Challenge has the authority and ability to invite applicants to submit an application for funding. *Note: An invitation to submit an application does not constitute an award. The program may choose to not fund applications even after they have been requested.*

## Deciding Between Stages (Seed vs. Transition)

Applicants should use the following decision tree to determine whether to submit a project for a seed or transition grant.

### Decision Tree

Follow the blocks of the decision tree to determine the appropriate funding stage for an application.



## Application Instructions

Applicants should use the following instructions and follow the simplified application format.

**Content of the Application/Concept Note Package** An initial application/concept note package consists of a A) basic applicant information, B) technical application, C) detailed budget and budget

narrative, D) supporting information, and E) past performance references.

All applications must be written in English. Applications should be written clearly and with minimal jargon as reviewers will possess a variety of backgrounds and technical expertise.

Page limits:

- For seed grants, technical applications must be no longer than 3 pages. (All applications must use a standard font no smaller than 11-point font with one-inch margins. **Technical Applications containing more than 3 pages for seed grants will be ineligible for funding.**
- For transition grants, concept notes must be no longer than 3 pages. **Concept notes containing more than 3 pages will be ineligible for funding.** For transition grants invited to submit full applications, technical applications must be no longer than 9 pages. **Full applications for transition grants that are more than 9 pages will be ineligible for funding.**
  - Any charts or tables must be included within the technical application and will be considered within the page limit. References and citations to academic publications or other resources are not required but are encouraged. If included as a separate page as end notes, references and citations are not included in the respective application page limits.
- Supporting information, including biographical sketches and letters of support, must not exceed the information required below. Additional information not requested will be disregarded.
- Supporting information is not included in the stated page limits.

Applications that do not adhere to the above restrictions will be ineligible.

Contents of the Full Application Package

### **A) Basic Applicant Information**

Through the online platform, applicants are asked to input the following details about the organization applying for funding and about the innovation itself.

#### Section I: Basic Information

- Name and address of applicant
- Type of organization (e.g., for-profit, non-profit, university, etc.)
- Point of contact (lead contact name; relevant telephone, fax, and e-mail information)
- Name and email of the Project Manager. Where joint partnerships include innovators from low- and middle-income countries, we encourage the partnership to designate the low- and middle-income country partner as the Project Manager.
- Concise title and objective of proposed activity
- Application category (seed grant or transition to scale grant)
- Domain of application – one or more of the following: science and

technology, service delivery and/or demand creation.

- Focus of application – one or more of the following: maternal health, neonatal health, stillbirth.
- (If applicable) Cause(s) of mortality for maternal health – one of more of the following: excessive bleeding, infections, hypertensive disorders of pregnancy, obstructed labor, other direct causes, other indirect causes
- (If applicable) Cause(s) of mortality for neonatal health– one of more of the following: prematurity and low birth weight, neonatal infections, birth asphyxia and birth trauma, congenital abnormalities, neonatal tetanus, diarrheal diseases, other causes
- Technical focus of application – one or more of the following: diagnostics, nutritional supplements/food products, service delivery devices, drug discovery, mHealth, training, supervision, incentives (service delivery), incentives (demand creation), availability of essential drugs and commodities, availability of basic EmOC, MNCH interventions received when needed, , electronic medical records, data collection and entry, referral, social marketing, women's and community empowerment, behavior change communication, male engagement, affordability, social norms, transportation, literacy, poverty alleviation, advocacy, gender, client satisfaction, accountability, other
- Tracer indicators of maternal and neonatal health– one of more of the following : contraceptives, antenatal care, PMTCT, early initiation of breastfeeding, pneumonia treatment, neonatal tetanus protection, IPTp for malaria, skilled attendant at delivery, postnatal care for mothers, postnatal care for newborns, improved drinking water, improved sanitation
- Country(s) where the proposed activities will be implemented; countries where proposed activities' direct beneficiaries reside
- Partner organizations engaged in the project. Multidisciplinary/cross-sector teams are encouraged, where necessary, to ensure relevant scientific, social, and business expertise.
- Pending applications for funding from any of the Saving Lives at Birth partners
- A short, concise statement describing what the Savings Lives at Birth funding will achieve within the context of the overall activity. This statement should be specific to achievements with the Saving Lives at Birth funding and time period of award only and not reflective of longer-term goals if the project includes multiple donors and/or several stages.

## Section II: Summary Paragraph (abstract)

Applicants are asked to provide a brief summary of their project innovation in response to the following two questions:

1. What is the essence of your idea and how will it significantly improve the outcomes of the problem you have identified?

Consider including the following information in your response:

- *Rationale*: What problem will the project address?

- *Approach*: What approach(es) does this project take to address the problem (science and technology, service delivery, and/or demand creation)?
  - *Objective, End point, and Impact*: What is the primary objective and expected end point of your project? What is the expected impact of the project if successful?
2. What makes this project innovative and a significant improvement upon standard practice?

Summaries shall not exceed 250 words. **Applications with project summaries longer than 250 words will be declared ineligible for funding.**

**Seed grants:** Note that the Partners will conduct an initial Innovation Screen based on the summary text so careful attention to this section is important. Reviewers will screen summaries against the Innovation Screen criteria listed on page 35 of the Review process. Note that those applicants who received a grant under previous rounds of Saving Lives at Birth and are now seeking follow-on seed funding under this RFA for the same program will not be evaluated under the Innovation Screen evaluation criterion.

**Transition grants:** Note that in the event that a large number of transition applications are received, the Partners may also conduct an initial screen of the concept notes. Reviewers will screen concept notes against the screening criteria listed on page 36 of the Review process.

**All applicants:** Also note that the summary paragraph of all finalists and eventual award recipients may be used for public communication before and after the awards are made, including the time leading up to the Development Exchange. The Saving Lives at Birth Partners reserve the right to make minor edits to summaries in order to enhance their readability for public communication. Because the summaries will be used publicly, proprietary information should not be disclosed in the project summary.

## **B) Technical Application**

The Technical Application, or body of the application, should be presented in Sections I, II and III according to the instructions within each section below. If an applicant chooses to include charts, graphs, or references, add them within the appropriate section. All of the sections below, including the use of charts, graphs, or references, should not exceed three pages for seed grants concept notes for transition grants, and nine pages for transition grants (upon request of full proposals). Applicants are requested to be specific about the geographic location(s) where the proposed activities will occur and the potential geographic or regional applicability. Additionally, applicants are encouraged to consult the evaluation criteria below when formulating the technical application.

### Section I. What is your idea?



Use this section to briefly describe your idea and the project design. Make sure that your idea directly fits the topic; otherwise your proposal may be disqualified.

- Indicate in one or two sentences **in bold** the essence of your idea – the specific problem you are addressing, your proposed solution, how it will be delivered, and who are the primary beneficiaries.
- Explain why your idea is an unconventional or creative approach to the stated problem and how it improves upon the best existing alternatives.
- Describe the scientific and/or technical basis for your idea and why you expect it to succeed.
- Describe the context and/or cultural relevance of your idea – explain how your idea is culturally informed and is designed to address the user's needs.
- Describe your theory of change and time to impact, considering your innovation's causal pathway and assumptions therein, to lead to improved health outcomes.
- Identify the level of funding requested and the specific project goals to be achieved with this level of funding within the two-year time frame for seed funds and up to four-year time frame for transition grants. For seed grants, identify the expected end point of the two-year time frame (ex. working prototype, validation of innovation in the field, etc) and, if you do not anticipate reaching proof of concept in the two years, how this end point relates to your proof of concept.
- For applicants who received a grant under previous rounds of Saving Lives at Birth and are now seeking follow-on seed funding under this RFA for the same project, describe how this two-year project continuation builds upon the work, achievements, and lessons learned from the previous grant. Explain why continued investment is warranted.
- Define success for this proposed project both overall (ultimate impact) and in the context of the Saving Lives at Birth funding (e.g., outcome at the conclusion of this Saving Lives at Birth award, if selected and successful, what is the expected end result? What is the expected end result beyond the Saving Lives at Birth funding?). What is your anticipated timeline to impact?

*Section Ia (Transition applicants only). What is your proof-of-concept?*

Identify and fully explain the proof of concept supporting your idea. Sufficiently describe the evidence in a controlled or limited setting of promising health outcome(s) and/or of the reduction of significant barrier(s) to health and demand for the solution. Reviewers will look for a strong description and rationale of proof of concept.

*Section II. How will you execute and test your plan?*

Use this section to briefly describe the project implementation and evaluation plan specific to the results to be achieved with the funding from the Saving Lives at Birth partnership. The work proposed in your application must include a clear set of key experiments, methodologies or

activities to be completed within the time period of the grant that test the described endpoint stated for the Saving Lives at Birth funding. If there are additional analyses to be completed through other funding and/or over a longer period of time in order to fully test your idea in a way that could provide sufficient evidence of successful outcomes that the project would be ready for application at scale in low- resource settings, describe those as well and identify the source(s) of funding to be used for the further project phases as well as a preliminary timeline for achievement of those ends. Applications with vague descriptions, vague testing methodologies, or insufficient description of the role of the Saving Lives at Birth funding within the broader project scope will not be funded. In addition, briefly describe your organization's capacity to perform the work proposed in the application, and any and all partners involved.

- State the interim objectives and critical milestones that demonstrate progress towards the project outcome to be achieved during the project. This includes any new technologies, tools or models to be developed or data to be generated.
- Describe the experimental plan to meet the critical milestones, objectives, and ultimately the project outcome.
- Describe the plan for measuring results including specific indicators of success.
- Provide a detailed schedule or timeline for the attainment of each milestone and/or objective.
- Identify impediments or critical decision points that could require a revision in the work plan or milestones.
- Describe potential harmful unintended consequences, if applicable, and how your project will address them.
- For transition grants that innovatively integrate proven interventions, describe how the interventions work together as a cohesive program; the operations research to be conducted or that has been conducted to show the bundle of interventions is more effective than the existing practice; and how the solution integrates with the existing health system.
- Describe how the work will be performed within the budget and in the time period allocated for either a seed or transition grant.
- Identify the next steps of the project if the experiments under this grant are successful.
- Describe your organizational and partner capacity and describe how your partnerships contribute expertise relevant to the scale and sustainability of the project.

*Section III. How does your solution demonstrate its potential to scale and sustain health and development impacts?*

Briefly describe your project's potential for scale and sustainability. Sustainability is defined as cost-recovery, sustained use, and sustainable impact. For seed grants, discuss how the proposed solution will demonstrate the potential to sustain health and development impacts at full scale, if successful. For transition grants, describe how the project will continue to have beneficial health and development impacts after the

funding period. Please mention partnerships and any co-funding commitments here.

- Describe the potential scale at which the idea can be implemented and how many people you expect will be impacted.
- For those innovations anticipated to be publicly provided (or by civil society), applicants should discuss cost-effectiveness and evidence of demand among country governments and civil society.
- For those innovations for which scaling by the private sector without public subsidy is planned, applicants should present evidence of demand among target users and a compelling value proposition (an analysis and quantified review of the benefits, costs and value that an innovation can deliver to target groups). This could also include endorsement from country governments, civil society and evidence of co-funding to support sustainability.
- For applications with a technology component, provide a summary of costs, including estimated cost to the end user.
- For revenue-generating projects, project the long-term expenses and revenue/income stream (noting any market assumptions for sources such as user fees, sales revenues, community contributions, etc.). If breakeven is not expected by the end of project support, the strategy for external donor or investor support between the end of the project and the breakeven point should be stated.

**Detailed Budget and Budget Narrative** (not included in page limit)

Applicants shall use the (1) budget and (2) travel template provided on the application portal and on the Saving Lives at Birth website ([www.savinglivesatbirth.net/apply](http://www.savinglivesatbirth.net/apply)) to show how funds will be used to support the activities proposed in the application. The budget shall display unit costs (if applicable) and costs by year and shall include sub-cost applications for each component. Please note that the budget template includes costs up to four (4) years – seed applicants should only budget costs for up to two (2) years and transition applicants may budget costs up to four (4) years. Estimated travel costs shall be documented in the travel template. The budget will contain the following categories:

1. Direct Labor:

*Full-time / part-time Employees*

List the direct salaries and wages proposed in accordance with the applicant's personnel policies.

*Fringe Benefits*

If the applicant has a fringe benefit rate that has been approved by an agency of the U.S. Government, such rate should be used and evidence of its approval should be provided. If a fringe benefit rate has not been so approved, the application should propose a rate and explain how the rate was determined. If the latter is used, the narrative should include a detailed breakdown comprised of all items of fringe benefits (e.g., unemployment insurance, workers compensation, health and life insurance, retirement, FICA, etc.) and the costs of each,

expressed in dollars and as a percentage of salaries

#### *Consultants*

List the work to be performed by any consultants, including level of effort (LOE), and list of their past work-history including daily rates.

2. Travel and Transportation (using travel template)  
Indicate the number of trips, domestic, regional, and international, and the estimated costs for all personnel and consultants. Specify the origin and destination for proposed trips, duration of travel, and number of individuals traveling. Per diem should be based on the applicant's normal travel policies. Applicants should budget one team member to attend one-two meetings of the Saving Lives at Birth community **per year** (estimate of \$5000 per meeting for airfare, accommodation, registration and meals). This line item does not need to include the 2014 Development xChange. Please use the provided Excel spreadsheet and provide justification for the travel.
3. Equipment  
List estimated types of equipment and if there are a high number of supplies provide a rationale for these costs in the budget narrative..
4. Supplies  
List supply items related to this project and if there are a high number of supplies provide a rationale for these costs in the budget narrative.
5. Other Direct Costs (ODCs)  
This includes communications, report preparation costs, passports, visas, medical exams and inoculations, insurance (other than insurance included in the applicant's fringe benefits), equipment, office rent, etc. The narrative should provide a breakdown and support for all other direct costs.
6. Sub-award(s)  
List any goods and services being procured through a contract mechanism List any goods or services.
7. Indirect Costs  
The applicant should support the proposed indirect cost rate with a letter from a cognizant U.S. Government audit agency, a Negotiated Indirect Cost Agreement (NICRA), or with sufficient information for USAID to determine the reasonableness of the rates (For example, a breakdown of labor bases and overhead pools, and the method of determining the rate). **If the Contractor lacks a NICRA, then all costs shall be incorporated as direct costs.** Applicant organizations should be aware that if their award is managed by Grand Challenges Canada, indirect costs may not exceed 12 percent of allowable direct costs.

The program encourages prospective grantees to focus resources on project

implementation rather than salaries, equipment and supplies. The budgetary aspects of applications will be reviewed for cost realism and cost effectiveness in accordance with the evaluation criteria.

### **Budget Narrative**

While there is no page limit for the budget narrative, applicants are encouraged to be as concise as possible, but still provide the necessary details. The following detailed information from the applicant is required:

- The budget should be for a period of years that correspond to whether you are planning a seed or transition grant and using the budget template provided.
- If the applicant has established a consortium or another legal relationship among its partners, the cost application must include a copy of the document establishing the parameters of the legal relationship between the parties. The agreement should include a full discussion of the relationship between the applicants including identification of the applicant with which USAID will treat for purposes of agreement administration, identity of the applicant which will have accounting responsibility, how agreement effort will be allocated and the express agreement of the principals thereto to be held jointly and severally liable for the acts or omissions of the other.

In addition, this budget narrative is expected to include:

- Justification of costs associated with the program, including staff, consultants, travel, equipment, supplies, etc.
- The breakdown of all costs associated with the program.
- The breakdown of all costs according to each partner organization involved in the program.
- The costs associated with external, expatriate technical assistance and those associated with local in-country technical assistance.
- The breakdown of any financial and in-kind contributions of all organizations involved in implementing this program.
- Potential contributions of non-USAID or private commercial donors to this program.
- Procurement plan for commodities, goods and services (if applicable).

In all cases, funding levels will correspond to the scope and scale of innovations. The scope and scale is expected to vary between innovations and the appropriate scope and scale for each innovation should be defined and justified; funds will be allocated to reflect the scope of testing as well as the funds needed to build to scale.

**Cost Share:** There is no cost share requirement.

**Supporting Information (not included in page limit)**

Applicants are encouraged to submit the following as appropriate:

- Brief biographical descriptions of key project personnel
- Draft letter of intent from any existing resource or implementing partners, with explicit mention of desire to co-fund, where relevant (recommended)
- Letters of support from countries in which you propose to operate (recommended for transition to scale grants)

**Past Performance references (not included in page limit)**

Please complete past performance information for three (3) past performance references which describe any contracts, grants, or cooperative agreements which the applicant organization, as well as any consortia or joint venture partners and any subcontractors or subawardees that will perform a substantive role in the applicant's program, has implemented involving similar or related programs over the past three years. Please include the following information: name and address of the organization for which the work was performed; name and current telephone number and email address of responsible representative from the organization for which the work was performed; contract/grant name and number (if any), the period of contract/grant performance, annual amount received for each of the last three years and beginning and end dates; brief description of the project/assistance activity and key project accomplishments / results achieved to date.

It is recommended that the applicant alert the contacts that their names have been submitted and that they are authorized to provide past performance information when requested.

Please note that the Partners reserve the right to obtain past performance information from other sources including those not named in this application.

The review team will review all applications and may engage the applicant for clarifications or further information as needed.

**Standard Forms (upon request)**

The following three standard forms may be asked of the applicant upon award negotiation :

- Application for Federal Assistance (SF-424)
- Cost Application Information (SF-424A)
- Assurances - Nonconstruction Programs (SF-424B)

A link to these forms can be found at:

<http://www.grants.gov/web/grants/forms/sf-424-mandatory-family.html#sortby=1>

<b>Materials to be Submitted by ALL</b>	<b>Materials to be Submitted Upon Request</b>
<ul style="list-style-type: none"> <li>• Basic Applicant Information (to be submitted via the online platform)</li> <li>• Technical Application <ul style="list-style-type: none"> <li>• Not to exceed 3 pages for seed grants and transition concept notes</li> </ul> </li> <li>• Detailed Budget and Budget Narrative (no page limit) <ul style="list-style-type: none"> <li>• Applicants shall use the budget and travel template provided. There is no template for the narrative.</li> </ul> </li> <li>4. Supporting Material (no page limit) <ul style="list-style-type: none"> <li>• Brief biographical descriptions</li> <li>• Draft letters of intent from any existing resource or implementing partners, with explicit mention of desire to co-fund, where relevant (recommended)</li> <li>• Letters of support from countries in which you are operating (recommended for transition grants)</li> </ul> </li> <li>5. Past performance references (three)</li> </ul>	<ol style="list-style-type: none"> <li>1. Full applications for transition grants (not to exceed 9 pages)</li> <li>2. Standard Forms <ul style="list-style-type: none"> <li>• Application for Federal Assistance (SF-424)</li> <li>• Cost Application Information (SF-424A)</li> <li>• Assurances – Nonconstruction Programs (SF-424B)</li> </ul> </li> </ol>

**Evaluation Criteria**

Seed and Transition applications will be evaluated separately. Applications will be evaluated on the basis of the following criteria (as defined for both seed and transition grants Pioneering innovation is significantly more important than the other technical criteria.

The final award selection will be based on a combination of technical strength, cost, and pioneering innovation.

**For Seed Grants**

**1. Innovation (5 points)**

Demonstration that the proposed solution offers a creative approach to the problem outlined in the challenge and is clearly differentiated from existing approaches.

**2. Sustained Impact (5 points)**

Demonstration that the proposed solution is relevant to the problem outlined in the challenge and potentially transformative. Does the solution:

- Address a key roadblock or critical condition as described in the challenge.
- Apply to hard-to-reach, low-resource settings in low- and middle-

income countries once implemented.

- Address gender dynamics where relevant.
- Have the potential to substantially reduce stillborn, maternal and/or newborn deaths.
- Provide a clear and compelling description of the potential scale at which the innovation could be applied
- Provide a realistic strategy of how health and development impacts will be sustained at scale, including a realistic timeframe and pathway to reach the point of revenue breakeven for revenue-generating projects or continued support from other sources such as local governments, donors, private foundations, etc. for projects not generating any income or revenue.
- Demonstrate a specific and segmented understanding of the target population, i.e. a clear articulation of the innovation's value proposition and evidence of demand (including willingness and/or ability to pay).

### **3. Execution and Evaluation Plan (5 points)**

- Extent to which the proposed project objectives and interim milestones are appropriate, feasible and technically sound within the budget and time allocated for seed funding.
- Extent to which the project has proposed clear, measurable and realistic monitoring and evaluation plan, including key indicators. Reviewers will examine the quality of the proposed indicators of the outcomes/results you expect to achieve and any other method(s) you propose to use to measure project success.

### **4. Organizational Capacity and Partnerships (5 points)**

- Depth and breadth of organizational capacity, including talent, experience and leadership of key project personnel or partners, if applicable (e.g., relevant domain knowledge and experience, track record of professional success relevant to the proposal and its applicability to the program objective).
- Demonstration of support and/or engagement of local/national partners in project design, implementation, and evaluation.
- For applicants who received a grant under previous rounds of Saving Lives at Birth and are now seeking follow-on seed funding under this RFA for the same project, describe plans to engage partners in implementing and/or transitioning to scale your innovation.

### **5. Pioneering (15 points)**

Applications with highest potential to achieve sustained, groundbreaking impact and/or to become true game changers in the field.

## **For Transition Grants (both concept note and full proposal)**

### **1. Innovation (5 points)**

Demonstration that the proposed solution to be refined, rigorously



tested, and scaled offers a creative approach to the problem outlined in the challenge and is clearly differentiated from existing approaches.

## **2. Sustained Impact (10 points)**

- Demonstration that the proposed solution is relevant to the problem outlined in the challenge and potentially transformative. Does the solution:
  - Have the potential to substantially reduce stillborn, maternal and/or newborn deaths?
  - Have sufficient and credible evidence of proof-of-concept, i.e., strong evidence of promising health outcomes in a controlled or limited setting and/or strong evidence in the reduction of significant barrier(s) to health and evidence of demand for the solution in a controlled or limited setting for mothers and/or newborns?
  - Illustrate an integrated solution combining science and technology, service delivery and demand creation?
  - Address a key roadblock or critical condition as described in the challenge?
  - Demonstrate the ability to be scaled up in hard-to-reach, low-resource settings in a low- and /or middle-income country?
  - Provide a clear and compelling description of the potential scale at which the innovation could be applied and the expected impact on intended beneficiaries both within and beyond the life of the grant?
- Demonstration that the proposed solution can continue to have beneficial health and development impacts after the funding period.
  - *For revenue-generating projects*, a realistic timeframe and pathway to reach the point of revenue breakeven should be included.
  - *For projects that are not generating any income or revenue, and/or expect the innovation to be delivered through public sector channels*, the proposal should provide a compelling and realistic plan for ensuring continued uptake after completion of Saving Lives at Birth program support.
- Extent to which the project demonstrates a specific and segmented understanding of the target population, i.e. a clear articulation of the innovation's value proposition and evidence of demand (including willingness and/or ability to pay).

## **3. Execution Plan (5 points)**

Extent to which the proposed project objectives and interim milestones are appropriate, feasible and technically sound within the budget and time allocated for either transition funding.

## **4. Evaluation Plan (5 points)**

Extent to which the project has a clear and rational monitoring and evaluation plan that is structured to evaluate outcome and impact and inform future scale up activities. Reviewers will examine the quality of the proposed indicators (clear, measurable, and realistic) of the

outcomes/results you expect to achieve and any other method(s) you propose to use to measure project success.

#### **5. Organizational Capacity and Partnerships (5 points)**

Demonstration that the applicant and its partners have the necessary depth and breadth of talent, experience and leadership to transition to scale and sustain the project.

- Extent to which the applicant have sufficient alliances or partnerships to scale the innovation (e.g., relevant stakeholders, joint ventures, selling/distribution agreements, channel partnerships, licensing arrangements, etc?). This could also include evidence of co-funding from partners to support sustainability.
- Extent to which the applicant and its partners have relevant domain knowledge and experience, track record of professional success relevant to the proposal and its applicability to the program objective.
- Demonstration of support and/or engagement of local/national partners in project design, implementation, and evaluation.

#### **6. Pioneering (15 points)**

Applications with highest potential to achieve sustainable, groundbreaking impact and/or to become true game changers in the field.

#### **Non-scored Evaluation Factors for ALL Applications:**

While no points are assigned to the below factors, they are important and material to the award decision.

##### **(a) Past Performance**

Past Performance information obtained demonstrates successful past performance implementing previous work similar in scope.

##### **(b) Cost**

In the later stages of review, costs included in the proposed budget will be reviewed to ensure they are allowable, allocable, and reasonable. Cost effectiveness will be considered in relation to any proposed cost-share. While a cost-share is not required, it could contribute to the achievement of the results of this funding opportunity.

Budget proposals will also be subject to cost realism analysis. The cost realism analysis will verify the applicant's understanding of the requirements, assess the degree to which the cost application reflects the approaches in the technical application, and assess the degree to which the costs included in the application accurately represent the programmatic requirements set forth in the application.

***All other factors being technically equal, the Saving Lives at Birth Partners***

**reserve the right to ensure project and geographic diversity in applications selected for award.**

## **Review Process**

The review process for seed and transition grants are outlined below:

### **For Seed Grants**

Seed grants will be evaluated in three stages: (1) an initial eligibility screen, (2) an innovation screen, and (3) a two-step technical review.

1. **Stage One: Initial Eligibility Screen.** All applications are screened to ensure that they meet the eligibility criteria. Applications that are disqualified at this stage from further review include those that are not in compliance with the Eligibility Criteria or the Application Instructions described in Section C.
2. **Stage Two: Innovation Screen.** If a large number of seed applications are received, eligible applications will be screened for innovation and potential for transformational impact. Innovation screeners will base their evaluation solely on the summary paragraph provided on the cover page. This screening process will utilize the criteria below as relevant for seed grants:

#### **1. Innovation**

Demonstration that the proposed solution offers a creative approach to the problem outlined in the challenge and is clearly differentiated from existing approaches.

#### **2. Impact**

Demonstration that the proposed solution is relevant to the problem outlined in the challenge and potentially transformative. Does the solution:

- Address a key roadblock or critical condition as described in the challenge?
- Apply to hard-to-reach, low-resource settings in low- and middle-income countries once implemented?
- Have the potential to substantially reduce stillborn, maternal and/or newborn deaths ?
- Provide a clear and compelling description of the potential scale at which the innovation could be applied?

Note: Applicants who received a grant under previous rounds of Saving Lives at Birth and are now seeking follow-on seed funding under this RFA for the same program will not be evaluated under the Innovation Screen evaluation criterion.

3. **Stage Three: Technical Review.** This stage consists of a two-step review process.

**Step 1:** A panel of reviewers will review the remaining applications and select finalists based on all the evaluation criteria - (1) Innovation; (2) Sustained Impact; (3) Execution and Evaluation Plan; (4) Organizational Capacity and Partnerships; and (5) Pioneering.

**Step 2:** Applicants advancing to this stage will be invited to attend the Development Exchange event in Washington, DC.

Based on *all* evaluation criteria - (1) Innovation; (2) Sustained Impact; (3) Execution and Evaluation Plan; (4) Organizational Capacity and Partnerships; and (5) Pioneering– and in-person interviews, reviewers will recommend applicants for awards.

### **For Transition Grants**

Transition grants will be evaluated in two stages. The first stage consists of a three step review of the concept note: (1) an eligibility screen, (2) initial screen, and (3) technical review. The second stage consists of two steps review of the full application: (1) a second eligibility screen and (2) technical review.

#### **1. Stage One: Concept Notes**

**Step 1: Initial Eligibility Screen.** All transition concept notes are screened to ensure that they meet the eligibility criteria. Applications that are disqualified at this stage from further review include those that are not in compliance with the Eligibility Criteria or the Application Instructions described in Section C.

**Step 2: Initial Screen.** If a large number of transition applications are received, eligible applications will be screened on the criteria listed below. Screeners will base their evaluation on the full application.

##### **1. Innovation**

Demonstration that the proposed solution to be refined, rigorously tested, and scaled offers a creative approach to the problem outlined in the challenge and is clearly differentiated from existing approaches.

##### **2. Impact**

Demonstration that the proposed solution is relevant to the problem outlined in the challenge and potentially transformative. Does the solution:

- Have the potential to substantially reduce stillborn, maternal and/or newborn deaths?
- Have evidence of proof-of-concept, i.e., strong evidence of promising health outcomes in a controlled or limited setting and/or strong evidence in the reduction of significant barrier(s) to health and evidence of demand for the solution in a controlled or limited setting for mothers and/or newborns?
- Illustrate an integrated solution combining technology, service

- delivery and demand creation?
- Address a key roadblock or critical condition as described in the challenge?
  - Demonstrate the ability to be scaled up in hard-to-reach, low-resource settings in a low- and /or middle-income country?
  - Provide a description of the potential scale at which the innovation could be applied and the expected impact on intended beneficiaries both within and beyond the life of the grant?

**Step 2: Technical Review.** Reviewers will evaluate all eligible concept notes and select finalists based on all the evaluation criteria - (1) Innovation; (2) Sustained Impact; (3) Execution Plan; (4) Evaluation Plan; (5) Organizational Capacity and Partnerships; and (6) Pioneering.

Applicants successful at this stage will be invited to submit full applications. Applicants will receive review comments that should be addressed in the full application.

## 2. Stage Two: Full Applications

**Step 1: Secondary Eligibility Screen.** All transition full applications are screened to ensure that they meet the eligibility criteria. Applications that are disqualified at this stage from further review include those that are not in compliance with the Eligibility Criteria or the Application Instructions described in Section C.

**Step 2: Technical Review.** Applicants advancing to this stage will be invited to attend the Development Exchange event in Washington, DC.

Full applications will be evaluated on all evaluation criteria - (1) Innovation; (2) Sustained Impact; (3) Execution Plan; (4) Evaluation Plan; (5) Organizational Capacity and Partnerships; and (6) Pioneering – and interviews conducted with each applicant. Reviewers will recommend applicants for awards on this basis.

For all awards, reviewers will seek to select innovators across the three priority areas: science & technology, service delivery, and demand. Reviewers will ensure that a portion of the recommended applications are from low and middle income countries.

**Validation and final selection.** Before the announcement of the awards, an Executive Committee or Governing Board for each of the respective funding mechanisms will independently review and validate the panel recommendations to ensure consistency with applicable policies, procedures and practices of the respective funding organization, inclusive of past performance evaluation. The final decision regarding the awarding of grants is the responsibility of the respective funding

organization.

**Development Exchange:** To take advantage of the presence of a variety of development actors together in one place, the Partners will host the Development Exchange in Washington, DC on July 29-31, 2014. Finalists will display their innovations/innovative ideas in an open marketplace. As part of this Exchange, finalists will have the opportunity to network with each other, with other development experts and innovators, and other potential funders. Finalists will also participate in a series of workshops tailored to the participants' needs such as business planning, fundraising and monitoring and evaluation. The Partners will cover the cost for one representative from each finalist team to attend the Development Exchange event. Only one representative may attend the closed sessions of the Development Exchange. Some or all of the awards will be announced in a high-level award ceremony at the end of the Development Exchange.

**Unsuccessful Projects:** Applicants with unsuccessful projects will receive notice that their project was not selected and may request feedback.

**Management of Conflict of Interest:** To identify and avert conflicts of interest among reviewers, reviewers will not be permitted to review applications from organizations which the reviewer has self-identified conflicts of interest.

## SECTION D: AWARD EXECUTION AND ADMINISTRATION

### Award and Administration Information

Successful applications may result in a grant or cooperative agreement following a recommendation for funding. Each grant will be administered independently by either Grand Challenges Canada or USAID and will be subject to the reporting requirements and rules of the respective funding organization (see Eligibility Criteria under Section B above). Prior to award execution, the funding organization may solicit additional information necessary to execute the award.

### Certifications and Representations

- All Certifications and Assurance information can be found in ADS-303.3.8(a), **see** "<http://www.usaid.gov/ads/policy/300/303>" **for more information.**

### Reporting

While each funding organization's reporting rules may vary, funders will align reporting requirements as much as possible. Applicants should anticipate the following deliverables to demonstrate the project's progress and success:

- A detailed work-plan and monitoring and evaluation plan, with expected timelines to completion
- Periodic progress reports detailing the technical and programmatic

achievements, including detailed documentation of the technical work accomplished and success and lessons learned from the project.

- Dissemination of knowledge through publications in peer-reviewed literature, patent applications, etc.

### **Grantee Responsibilities**

Grantees will be expected to:

- **Attend one-two designated meeting of the Saving Lives at Birth community per year.** These meetings may include the Development Exchange tied with future funding rounds and the annual Grand Challenges meetings hosted by the Bill & Melinda Gates Foundation, Grand Challenges Canada, USAID, and other partners. Applicants are expected to include funding in their budgets for one person to attend such meetings (\$5000/year).
- Actively **communicate and collaborate** with partners and other grantees on challenges and progress against milestones; seek opportunities to learn from other efforts; and look toward building integrated solutions that collectively can have a transformational impact on maternal and neonatal health in these target populations.
- **Exhibit fiscal responsibility.**
- **Operate in accordance with the terms and conditions** of the award.

Grantees will likely be responsible for the following activities and documentation during the life of the program, in accordance with the rules of the funding organization (funders will align requirements as much as possible):

- Conducting ongoing assessment of progress and a final evaluation, and submitting periodic reports according to the requirements outlined in the award;
- Requesting approval for any changes in program description or budgets;
- Briefing Saving Lives at Birth Partners on project progress and outcomes;
- Compliance with Saving Lives at Birth branding and marking requirements;
- Cooperating with Saving Lives at Birth Partners to facilitate rigorous program evaluations; and
- Maintaining communication with key Saving Lives at Birth staff.

### **1. Grants administered by USAID:**

#### **DUNS and SAM Registration**

Award nominees will need to obtain a Data Universal Number (DUNS) and be registered with the Central Contractor Registration (CCR) before award. This process can be slow; it is strongly encouraged that organizations begin this process early. A DUNS number is a unique identifier that verifies the existence of a business entity globally. DUNS numbers are assigned for each physical location of a business. The CCR is the primary registrant database for the U.S. Federal Government. More

information about this process can be found here:

- Obtaining a DUNS Number: <http://fedgov.dnb.com/webform>
- Registering with SAM: <https://www.sam.gov>

### **Authority to Obligate the Government**

The agreement officer is the only individual who may legally commit the pooled resources to the expenditure of public funds. No costs chargeable to the proposed Agreement may be incurred before receipt of either a fully executed Agreement or a specific, written authorization from the Agreement Officer.

### **Type of Award**

Seed grant winners will be awarded fixed obligation grants (FOGs) and transition grant winners will be awarded Cooperative Agreements with substantial involvement.

### **SUBSTANTIAL INVOLVEMENT:**

In accordance to ADS 303.3.11, USAID substantial involvement in awards is limited to cooperative agreements. See "<http://www.usaid.gov/ads/policy/300/303f>" for additional information

### **Relevant Documentation**

Resulting awards to U.S. non-governmental organizations will be administered in accordance with Chapter 303 of USAID's Automated Directives System (ADS-303), 22 CFR 226, 2 CFR 220 for universities (formerly OMB Circular A-21), 2 CFR 230 for non-profit organizations (formerly OMB Circular A-122), and OMB Circular A-133 for both universities and non-profit organizations or 48 CFR 31.2 (for for-profit organizations), and Standard Provisions for U.S. Nongovernmental Organizations.

These policies and federal regulations are available at the following web sites:

- ADS-303:  
<http://www.usaid.gov/ads/policy/300/303>
- 22 CFR 226:  
[http://www.access.gpo.gov/nara/cfr/waisidx\\_03/22cfr226\\_03.html](http://www.access.gpo.gov/nara/cfr/waisidx_03/22cfr226_03.html)
- 22 CFR 228:  
[http://www.access.gpo.gov/nara/cfr/waisidx\\_10/22cfr228\\_10.html](http://www.access.gpo.gov/nara/cfr/waisidx_10/22cfr228_10.html)
- Applicable OMB Circulars  
<http://www.whitehouse.gov/omb/circulars/index.html>
- 48 CFR 31.2:  
<http://www.gpo.gov/fdsys/pkg/CFR-2011-title48-vol1/pdf/CFR-2011-title48-vol1-part31-subpart31-2.pdf>



Standard Provisions for U.S. Nongovernmental Organizations:  
<http://www.usaid.gov/ads/policy/300/303>

Resulting awards to non-U.S. non-governmental organizations will be administered in accordance with Chapter 303 of USAID's Automated Directives System (ADS-303), 2 CFR 220 for universities (formerly OMB Circular A-21), 2 CFR 230 for non-profit organizations (formerly OMB Circular A-122), or 48 CFR 31.2 (for for-profit organizations), and Standard Provisions for non-U.S. Nongovernmental Organizations. Standard Provisions for Non-U.S. Nongovernmental organizations are available at <http://www.usaid.gov/ads/policy/300/303>

Resulting awards to public international organizations will be administered in accordance with Chapter 308 of USAID's ADS (ADS-308), including the Standard Provisions set forth in ADS-308.5.15.

These documents are available for further information:

- ADS-308
- <http://www.usaid.gov/ads/policy/300/308>
- Survey on Ensuring Equal Opportunity for Applicants  
<http://www.ed.gov/fund/grant/apply/appforms/surveyeo.pdf>
- SF-424 Cost application/Cost Application Documents
- <http://www.grants.gov/web/grants/forms/sf-424-mandatory-family.html#sortby=1>

### **Financial Reporting Requirements**

Financial reporting requirements will be in accordance with 22 CFR 226. See

"[http://edocket.access.gpo.gov/cfr\\_2010/apratr/pdf/22cfr226.52.pdf](http://edocket.access.gpo.gov/cfr_2010/apratr/pdf/22cfr226.52.pdf)" for additional information.

### **Global Health Access**

Applicants acknowledge the partners' mutual goal of promoting (a) the prompt and broad dissemination of knowledge gained during the Project and (b) availability and accessibility of the intended product(s) at reasonable cost to people most in need within developing countries.

### **Pre-Award Survey**

The Agreement Officer (AO) may determine a Pre-Award survey is required and if so, would establish a formal survey team to conduct an examination that will determine whether the prospective recipient has the necessary organization, experience, accounting and operational controls, and technical skills – or ability to obtain them – in order to achieve the objectives of the program.

Applicants must have established financial management, monitoring and evaluation, internal control systems, and policies and procedures that comply with established U.S. Government standards, laws, and regulations. All potential awardees will be subject to a responsibility determination (pre-award audit) issued by a warranted Agreements Officer (AO) in USAID.

### **Initial Environmental Examination (IEE)**

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 environmental sustainability as a central consideration in designing and carrying out its development programs. This mandate is codified in Federal Regulations (22 CFR 216) and in USAID's Automated Directives System (ADS) Parts 201.5.10g and 204 (<http://www.usaid.gov/who-we-are/agency-policy/series-200>) which, in part, require that the potential environmental impacts of USAID-financed activities are identified prior to a final decision to proceed and that appropriate environmental safeguards are adopted for all activities. The environmental compliance obligations of the applicant under these regulations and procedures are specified in the following paragraphs of this RFA.

An Initial Environmental Examination (IEE) has been approved for these grants and Cooperative Agreements. The IEE covers activities expected to be implemented under this agreement. USAID may determine that a Negative Determination With Conditions applies to one or more of the proposed activities. This indicates that if these activities are implemented subject to the specified conditions, they are expected to have no significant adverse effect on the environment. The Recipient shall be responsible for implementing all IEE conditions pertaining to activities to be funded under this award.

As part of its initial Work Plan, and all Annual Work Plans thereafter, the applicant, in collaboration with the USAID Agreement Officer's Representative (AOR) and Mission Environmental Officer or Bureau Environmental Officer, as appropriate, shall review all ongoing and planned activities under this cooperative agreement to determine if they are within the scope of the approved Regulation 216 environmental documentation.

Unless the approved Regulation 216 documentation contains a complete environmental mitigation and monitoring plan (EMMP), the Recipient shall prepare an EMMP or M&M Plan describing how they will, in specific terms, implement all IEE and/or EA conditions that apply to proposed project activities within the scope of the award. The EMMP or M&M Plan shall

include monitoring the implementation of the conditions and their effectiveness.

If the Recipient plans any new activities outside the scope of the approved Regulation 216 environmental documentation, it shall prepare an amendment to the documentation for USAID review and approval. No such new activities shall be undertaken prior to receiving written USAID approval of environmental documentation amendments. Any ongoing activities found to be outside the scope of the approved Regulation 216 environmental documentation shall be halted until an amendment to the documentation is submitted and written approval is received from USAID

In addition, the Recipient 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 shall govern.

#### **Authorized Geographic Code**

The authorized geographic code for sub-procurements of services under this award is 935. The authorized geographic code for procurement of commodities is 935. Any sub-procurement of goods outside of code 937 will be considered on a case-by-case basis.

#### **Branding and Marking:**

##### **In accordance to ADS: 303.3.6.3(f) – Branding and Marking**

Marking and branding will be expected so applicants should budget accordingly. See <http://www.usaid.gov/ads/policy/300/303> for more information.

#### **2. Grants administered by Grand Challenges Canada:**

Grand Challenges Canada will conduct due diligence prior to awarding a grant, and will monitor research milestones and financial expenditures throughout the grant period.

#### **Indirect Costs**

Grand Challenges Canada will provide a limited amount of indirect costs based on the nature of the applicant organization, to a maximum of 12 percent of allowable direct costs.

#### **Global Access Policy**

Grantees of Grand Challenges Canada are expected to adhere to the Global Access Policy ([http://www.grandchallenges.ca/wp-content/uploads/globalaccess\\_policy\\_2010May03\\_EN.pdf](http://www.grandchallenges.ca/wp-content/uploads/globalaccess_policy_2010May03_EN.pdf)), which is grounded in the following three principles:

1. Breakthrough solutions to global challenges are made accessible to those in need, particularly in the developing world. Accessibility relates

to both price and availability.

2. Knowledge gained through discovery is broadly, and as promptly as possible, distributed between related projects and to the global scientific community.
3. Commercialization of resulting outputs is encouraged, as long as the first two principles are achieved.

### **Data Access**

Grand Challenges Canada is committed to optimizing the use of data to translate knowledge into life-saving solutions. To fulfill this objective, data must be made widely and rapidly available to the Grand Challenges Canada research community and the broader global health community through ethical and efficient data access practices. In accordance with global access, data access represents an elaboration of the second guiding principle of the Global Access Policy, which states that knowledge gained through discovery is broadly, and as promptly as possible, distributed between related projects and to the global scientific community.

Grantees may be required to develop and submit a Data Access Plan (DAP) that specifies how data access will be implemented and the timeframe for data release. Data refers at a minimum to final, annotated quantitative and qualitative datasets and accompanying information, such as metadata, codebooks, data dictionaries, questionnaires and protocols.

Grand Challenges Canada recognizes the value of intellectual property and commercialization, and the benefits of first and continuing use of data, but not prolonged or exclusive use. In some cases, intellectual property protection, laws or regulations may delay or preclude access to data. In such cases, the grantee will provide justification to warrant a partial or complete waiver of the data access requirement.

### **Ethics Policy**

Grantees of Grand Challenges Canada are expected to adhere to the Ethics Policy ([http://www.grandchallenges.ca/wordpress/wp-content/uploads/ethicspolicy\\_2012Jul18\\_EN.pdf](http://www.grandchallenges.ca/wordpress/wp-content/uploads/ethicspolicy_2012Jul18_EN.pdf)).