



## **Ugandan Academy for Health Innovation and Impact – Request for applications for clinical management, research and capacity building projects in HIV or TB - RFA 001/2016- Guidance for Applicants**

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### **Summary**

This guidance is for applicants wishing to apply to the Ugandan Academy in response to the RFA 001/2016 call for proposals in the areas of Clinical Management, Capacity Development and Research.

This call for proposals is supported by the Ugandan Academy for Health Innovation and Impact. The budget for sub-granting activities is 950,000 USD for a period of two years.

**This Ugandan Academy RFA 001/2016 call will accept applications from Ugandan organisations as primary recipients of the subgrants within the territory of Uganda including National Non-Governmental Organisations (NNGOs), Community Based Organizations and Academia.** The Principal Investigators applying for this call must be hosted by a Ugandan institution or an institution based in Uganda.

- **Open date:** 8 August 2016
- **Closing date:** 1 September 2016 4pm

### **Contents**

- i) Background**
- ii) How to apply to Ugandan Academy RFA 001/2016**
- iii) Application Timeline and submission**
- iv) Eligibility Information**
- v) Assessment Criteria**
- vi) Checklist for submission**

### **i) Background**

The Ugandan Academy for Health Innovation and Impact (The Ugandan Academy) is the flagship implementation of Connect for Life™ – a collaborative new program to

empower healthcare workers, academics, and patients to address critical health challenges, including HIV, TB, and maternal and child health in innovative, collaborative, and context-appropriate ways. The Academy will be initially funded by Janssen, the Pharmaceutical Companies of Johnson & Johnson as part of its commitment to global public health through collaboration with the Johnson and Johnson Corporate Citizenship Trust.

Connect for Life™ is a collaborative programme aimed at sustainably empowering health systems in underserved regions and improving the health of vulnerable populations. Using a patient-centric model that combines partnerships, local expertise, and technology, it engages local healthcare actors to enable and catalyse research, capacity development, and clinical management in order to achieve lasting impact on public health in resource-limited settings. The Ugandan Academy was formed after the signing of a Memorandum of Understanding (MoU) in November 2015 and is thus a collaborative effort between the Ugandan Ministry of Health, Infectious Diseases Institute, Janssen, the pharmaceutical companies of Johnson & Johnson and The Johnson & Johnson Corporate Citizenship Trust.

The vision of the Academy is **“Sustainable health care accessible to all in Uganda”** and the mission is **“To improve health outcomes through innovations in clinical care, capacity building, systems strengthening and research, which inform policy and practice, with a strong emphasis on HIV and TB”**

### **Aims of the sub-granting programme**

The Ugandan Academy was formed to urgently and demonstrably improve health outcomes for people living with or being affected by Human Immunodeficiency Virus (HIV) infection and tuberculosis (TB) through a range of carefully focused interventions combining applied relevant research resulting in improved national policy/guidelines, and associated training and systematic on-going support; and is focused on taking an inclusive approach to make a sustainable impact on the lives of patients in Uganda, in particular those who are most vulnerable. This call will support applications for 1 project in each of the following areas; a) clinical management, b) research and c) capacity building.

#### **a) Request for Applications for a Clinical Management Project**

Eligible applications will seek to:

- Scale up a known effective intervention in HIV or TB care in order to improve lives of people in Uganda
- A project with an innovative approach is essential

- Inclusion of work with new technologies / health / mHealth will be welcomed

## **Scope**

**This call for proposals for a clinical management project seeks proposals aiming at the implementation of one or more activities that will lead to real and practical changes in order to improve health of people living with HIV and/or TB.** . The proposals should identify clearly the health issues and/or risk factors to be addressed and describe the pathway for how the proposed approach will be incorporated into systems to reach scale and lead to improved health outcomes. Any strategies must be in line with National priorities, as outlined in particular in the Uganda Health Sector Development Plan II for 2015/16 – 2019/20, Uganda’s National Development Plan II and Uganda Vision 2040, as well as the Ugandan National HIV and AIDS Strategic Plan 2015/2016 - 2019/2020. HIV related projects should contribute to the overall WHO and Uganda MOH goal of Zero new infections, Zero discrimination and Zero HIV and AIDS-related deaths

Interventional strategies can be broad, interdisciplinary and multi-faceted, addressing, for instance:

- HIV testing and linkage to care (must be able to measure and demonstrate on improvement of the HIV clinical cascade)
- Increase in number of patients accessing HIV care and treatment
- Increase in number of women accessing PMTCT services
- Improved adherence to HIV treatment and reduction in HIV drug resistance
- assessment of resistance in second line treatment failures, or assessment of resistance in children and adolescents leading to better informed guidelines
- Increased diagnosis of people with TB
- Improved contact tracing of people with TB
- Nutritional approaches in HIV or TB to improve outcomes
- Improved adherence to TB treatment and reduction in lost to follow up
- Other improvements in access or success of HIV and / or TB treatment
- Projects contributing or concentrating on social support and stigma are also encouraged

- Novel strategies and mechanisms for monitoring and evaluation of HIV and or TB projects

### **Target Population**

A focus on vulnerable groups (e.g. adolescents and young people, pregnant women, children, discordant couples and/or patients on second line treatment) and/or people in hard to reach geographical areas will be favorably considered.

Proposals should consider the impact of gender on the health of people living with HIV and/ or TB. Although some individual proposals may have a reason to focus on one gender our intention is to have a mixed portfolio of projects across the programme. If proposals focus on one gender, the reason for this should be justified in the proposal.

The proposal should aim to deliver an intervention that has an impact on a large number of direct (those living with HIV and / or TB) and indirect beneficiaries (those at risk of HIV and or TB, families and carers of those living with HIV and / or TB; the project should aim for a **minimum** of 2,000 beneficiaries in year 1 and 5,000 in year 2. Please justify clearly in your proposal why you have chosen the selected populations.

**Alignment with national response** Projects that support and are synergistic to existing Health systems strengthening and/ or HIV and / or TB projects with other funders will be welcomed, with documented support from the funder.

### **b) Request for Applications for research proposal for novel strategies to combat HIV and / or TB in Uganda**

Eligible applications will seek to:

- Evaluate an intervention designed to improve HIV or TB prevention, diagnosis, care or treatment in Uganda
- A project with an innovative approach is essential
- Inclusion of work with new technologies / eHealth / mHealth will be welcomed

- **Scope**

This call for proposals for a research project seeks proposals aiming at evaluating one or more interventions which will lead to real and practical changes in order to improve health of people living with HIV and/or TB.. The proposals should identify clearly the

health issues and/or risk factors to be addressed and describe the pathway for how the proposed approach could be incorporated into systems to reach scale and lead to improved health outcomes.

Interventions can be broad, interdisciplinary and multi-faceted, addressing, for instance:

- Implementation science on scale up of proven combination HIV prevention (biomedical, behavioural and structural with known efficacy in a geographical area at a scale, quality, and intensity to impact the epidemic)
- Novel strategies for improving HIV testing and linkage to care (must be able to measure and demonstrate on improvement of the HIV clinical cascade including increase enrolment and early initiation)
- Novel strategies to increase in number of women accessing PMTCT services
- Novel strategies or diagnostic approaches to decrease opportunistic infections in people living with HIV (and/or TB)
- Novel strategies or technologies to increased diagnosis of people with TB
- Experimental nutritional approaches in HIV or TB to improve outcomes
- Novel strategies or implementation science designed to increase adherence to HIV and / or TB treatment and reduction in lost to follow up (aiming for 90% Virological suppression in people living with HIV)
- Other improvements in access or success of HIV and / or TB treatment

### **Target Population**

A focus on vulnerable groups (e.g. adolescents and young people, pregnant women, children, discordant couples and/or patients on second line treatment) and/or people in hard to reach geographical areas will be favorably considered.

Proposals should consider the impact of gender on the health of people living with HIV and/ or TB. Although some individual proposals may have a reason to focus on one gender our intention is to have a mixed portfolio of projects across the programme. If proposals focus on one gender, the reason for this should be justified in the proposal.

The proposal should outline the projected sample size for the research project. Please justify clearly in your proposal why you have chosen the selected study populations.

### **Impact statement**

The Ugandan Academy aims to support research that will inform national policy/guidelines. Therefore a dissemination and policy statement will be required in the application, and letter of support from relevant parties should be obtained.

### **c) Request for Applications for capacity building projects for health care workers in Uganda**

Eligible applications will seek to:

- Deliver a capacity building programme designed to improve skills or knowledge of health care workers in Uganda in the area of HIV or TB
- A project with an innovative approach is essential
- Inclusion of work with new technologies / eHealth / mHealth will be welcomed

### **Scope**

This call for proposals for a capacity building project seeks proposals aiming at assisting health care workers in Uganda to keep up to date with skills or knowledge required for them to undertake their work. The scope of the project allows for any modality of training; for example it could deliver a “one-off” training course, or provide ongoing support for rurally isolated health care workers. It could cover one aspect of HIV and / or TB care, or a whole range of health related knowledge and information.

### **Target Population**

The capacity building project can target any cadre of health care workers at any stage of their career. This could include those in early training, or those already practicing in the field. The project should have the potential to reach a minimum of 2000 health care workers, but could aim for a smaller number during the study duration, if this is a pilot project. Plans for scale up post project would need to be outlined in the application.

### **Alignment with national activities**

In order to ensure that there is not overlap or competition in HIV services, applicants must ensure that they have a letter of support for their proposal from the relevant district or regional authorities which outlines the need for additional resources and a novel approach of the proposed project. Projects that support and are synergistic to existing Health systems strengthening and/ or HIV and / or TB projects with other funders will be welcomed, but a letter of support from the existing funder/s is required

### **Timeline**

Call opens	8 August 2016
Deadline for proposal submission	1 <sup>st</sup> September 2016 - 16:00 EAT
Reviewers meeting	September 2016
Award decisions made	Mid October 2016
Project proposed start	31 <sup>st</sup> October 2016

## ii). How to apply to the Ugandan Academy RFA 001/2016

The overall budget for sub-granting activities for the 2016-2018 cycle is 950,000 USD for a period of two years. We intend to fund 3-4 projects in this cycle; one in each of the areas of clinical management, research and capacity development. We may be flexible on the sizes of project and are open to considering feasibility and pilot work as well as larger-scale projects. Each project will run for a maximum of 24 months, with a proposed start date of 31<sup>st</sup> October 2016.

ID	Area	Maximum value of application (USD)
1	Clinical Management	\$230,000
2	Capacity Development	\$120,000
3	Research	\$230,000

Your application should include details of your proposal, details of the project environment, people involved and references. Your application should detail how your proposal is aligned with The Ugandan Academy for Health Innovation and Impact. The proposals must not be longer than 11 pages A4 plus one additional page of references (with additional appendices as outlined below). Please use: • Arial font with a minimum size of 11pt (excluding text on diagrams and mathematical symbols) • A minimum of single line spacing • Standard character spacing • Margins of no less than 2cm. Please number all pages of the application. Please complete the proposal in English and use USD for all costs. The proposal should be saved in a PDF format.

It should include the following sections:

### 1) Project Summary Title Page (1 page)

- Project title (not more than 150 characters)
- Project applied for a) clinical management b) research c) capacity building

- Project summary (max 300 words – could be understood by a member of the public, and will be posted on The Ugandan Academy website and IDI Website if the proposal is successful)
- Duration of project
- Total amount requested (USD)

## 2) Project description (2.5 pages)

Please describe the project to be undertaken

### *General*

What are the aims and objectives of the project?

Where will the project take place?

Who will the beneficiaries (or participants) be?

Why has this population been chosen?

Why is this project needed now and in this location? Please consider issues such as burden of disease and priority for the relevant local, regional and national health services.

How does the project align with national priorities and with The Ugandan Academy priorities?

### *Specific*

#### a) Clinical management

Please give details of any vulnerable populations that will be included in the project. Please give a breakdown of proposed beneficiaries (direct and indirect) per year including age and gender and other characteristics if appropriate (HIV and or TB status, pregnancy, in education, discordant couple, second line HIV or TB treatment etc)

Please give details on how you will implement the project.

What is innovative or novel about your approach?

#### b) Research

Give details of the study design and techniques that will be used and why. - Enough detail must be given to show why the research is likely to be competitive in its field.

- Please explain why your chosen methodology is the most appropriate to address your research question. • Please describe any preliminary and feasibility data that informs the approach taken. Please include a hypothesis, objectives and primary and secondary endpoints. What gaps in existing knowledge will be addressed by the study and why is addressing those gaps using an implementation research approach important? Please include a sample size calculation and statistical analysis plan • What evidence is there that the answer to your research question is needed and wanted by relevant users, for instance, policy makers?

*Please include a 1 page appendix outlining ethical issues related to the study and how they will be addressed (ethical approvals, regulatory issues, adherence to GCP, ethical concerns related to vulnerable participants)*

#### c) Capacity building



Give details about which health care workers will be targeted and why. Please explain the mechanism of capacity building. Please explain how health care workers will be reached / sensitized about the capacity building. Please explain how building capacity will enable a change/ shift in the health system over time and how you foresee a direct impact on the healthcare workforce as well as indirect impact on patients. What is innovative or novel about your approach?

**3. Monitoring and evaluation (max 2 pages)** Please outline the M&E strategy for the project and the personnel involved. *Please include a maximum 4 page M&E matrix as an appendix, as per the attached template (essential for all projects including research).* Please note M&E should be approximately 10-20% of the total budget for capacity building and clinical management, and data / statistics should be approximately 10-20% of the total budget for research projects.

Outcome	Performance Indicator <i>(including definitions)</i>	Expected Output(s) <i>(Quantify as appropriate)</i>	Data source	Timeline <i>(Due date)</i>	Responsible Person
<b>Goal 1:</b>					
<b>Objective 1.1:</b>					
Activity 1.1.1					
Activity 1.2.1					
<b>Objective 1.2:</b>					
Activity 1.2.1.					
Activity1. 2.2					
<b>Goal 2:</b>					
<b>Objective 2.1:</b>					
Activity 2.1.1					
Activity 2.1.2.					
<b>Objective 2.2:</b>					
Activity 2.2.1					
Activity 2.2.2					

#### **4. Partnerships and Impact (0.5 page)**

What policymaking partners or other stakeholders will be involved? Please explain how you will engage with beneficiaries, their families and carers, the community, clinical and non-clinical health workers, civil society, industry, policy and decision makers during and after the project. Please explain how you will work with these groups to sustain and to further scale up your project after the end of this funding. Please explain any communications strategies that the project will have. Please include key partners and a list of letters of support. If the project will be supporting an ongoing funded project for delivering services in Uganda, please provide a short summary of the project, which

activities will be funded by each party and how these are synergistic, duration, funding level and *provide a letter of support from the existing funding partner as an appendix.*

**5. Management capability statement (1 page)**

For all projects please describe your team and how they incorporate the range of discipline and experience necessary to carry out the project. Please outline any track record in carrying out related work. Please indicate if you need to hire any additional staff and what their roles will be. (0.5 page).

Please include the following table with up to 4 ongoing/ previous projects which show capacity in this area, with details of a contact at the funders (name, phone number and email) that you would be happy for us to approach for a reference. (0.5 page)

Name of project	Funder	Value of project	Time period	Name of principle investigator or project lead	Funder contact person
1					
2					
3					
4					

*A maximum 2 page CV of Key personnel (up to 6) should be included as an appendix. (For research projects an additional 1 page of publications can be added for each key personnel)*

**6. Overall Cost estimated / Budget (narrative 1 page, template up to 3 pages)**

Applicants must submit an itemized, line-item budget and narrative with staffing breakdown (i.e., name, position title, and annual salary, percentage of time and effort, and amount requested) and justification for all requested costs. Organisational overhead can be included, but should be justified in the narrative. Please use the format shown below. An excel version can be obtained by emailing Diana Asiimwe Bena, Program Manager, [dasiimwe@idi.co.ug](mailto:dasiimwe@idi.co.ug) or David Mpagi, Senior Grants Manager, [dmpagi@idi.co.ug](mailto:dmpagi@idi.co.ug).

**Budget Preparation Guidelines**

This document provides guidance for the preparation of a budget request and examples to help with the process. Adherence to this guidance will facilitate timely review and approval of a budget request.

**Salaries and Wages**

For each requested position, provide the following information:

- 1) Name of staff member occupying the position, if available;
- 2) Annual salary;
- 3) Percentage of time budgeted for this program;
- 4) Total months of salary budgeted; and
- 5) Total salary requested.

Also, provide a justification and describe the scope of responsibility for each position, relating it to the accomplishment of program objectives.

<b>Position Title and Name</b>	<b>Annual Salary</b>	<b>Time</b>	<b>Months</b>	<b>Amount Requested</b>	<b>Justification/Role</b>
Project Coordinator, Martin Kasirye	\$10,000	100%	12 months	\$10,000	
Finance Administrator, John Musoke	\$8,000	50%	12 months	\$4,500	
Finance Administrator, (To be determined, TBD)	\$6,500	50%	12 months	\$3,250	
Total Personnel				XXXXX	

*Sample Justification*

The format may vary, but the description of responsibilities should be directly related to specific program objectives.

Job Description: Project Coordinator – (Martin Kasirye)

This position directs the overall operation of the project including overseeing the implementation of project activities, coordination with other agencies, development of materials, provisions of service and training, collects, tabulates and interprets required data, program evaluation and staff performance evaluation. This individual is the responsible authority for ensuring reports and documentation are submitted to the Academy. This position relates to all program objectives.

### **Fringe Benefits**

Fringe benefits are usually applicable to direct salaries and wages. Provide information on the rate of fringe benefits used and the basis for their calculation. If a fringe benefit rate is not used, itemize how the fringe benefit amount is computed.

Fringe benefits computed by an established rate.

Fringe Benefits Total \$\_\_\_\_\_ 10% of Total salaries = Fringe Benefits

If fringe benefits are not calculated using a percentage of salaries, itemize how the amount is determined for each salary and wage being requested.

### **Equipment**

Equipment is defined as tangible, non-expendable property that has a useful life of more than one year AND an acquisition cost of \$500 or more per unit. . However, in circumstances where your organization has a lower threshold, you may work within range to ensure that the threshold is consistent with your organization's policy.

All budget requests should individually list each item requested, and provide the following information:

- 1) Number needed;
- 2) Unit cost of each item; and
- 3) Total amount requested.

Also,

Provide a justification for the use of each item and relate it to specific program objectives. Maintenance or rental fees for equipment should be shown in the *other* category.

<b>Item Requested</b>	<b>Number Needed</b>	<b>Unit Cost</b>	<b>Amount Requested</b>
Computer Workstation	2	\$500	\$1,000
Computer	1	\$800	\$800
Total Equipment			\$1,800

### *Sample Justification*

The computer workstations will be used by the principal investigator and statistician to collect required data, perform data analysis, and generate reports. These computers will also support the daily operation of the project, routine correspondence, research, and electronic communication.

## Consultant Costs

This category should be used when hiring an individual to give professional advice or services (e.g., training, expert consultant, etc.) for a fee, but not as an employee of the grantee organization. Written approval must be obtained from the Academy prior to establishing a written agreement for consultant services, and must be obtained annually in order to re-establish the written agreement. Approval to initiate or continue program activities through the services of a consultant requires submission of the following information to the Academy for each consultant:

1. **Name of Consultant:** Identify the name of the consultant and describe his or her qualifications.
2. **Organizational Affiliation** (if applicable): Identify the organization affiliation of the consultant.
3. **Nature of Services to Be Rendered:** Describe the consultation that will be provided, including the specific tasks to be completed and specific deliverables. A copy of the actual consultant agreement should not be sent to the Academy.
4. **Relevance of Service to the Project:** Describe how the consultant services relate to the accomplishment of specific program objectives.
5. **Number of Days of Consultation** (basis for fee): Specify the total number of days of consultation.
6. **Expected Rate of Compensation:** Specify the rate of compensation for the consultant (e.g., rate per hour, rate per day). Include a budget showing other costs (e.g., travel, per diem, supplies, and other related expenses) and list a subtotal.
7. **Method of Accountability:** Describe how the progress and performance of the consultant will be monitored. Identify who is responsible for supervising the consultant agreement.

If the required information described above is not known at the time the application is submitted, the information may be submitted later as a revision to the budget. In the body of the budget request, a summary should be provided of the proposed consultants and amounts for each.

## Travel

Dollars requested in the Travel category should be for recipient staff travel only. Travel for consultants should be shown in the Consultant category. Travel for other participants (e.g., advisory committees, review panel, etc.) should be itemized as specified below and placed on the Other category.

For In-Country Travel, provide a narrative justification describing the travel staff members will perform. List where travel will be undertaken, number of trips planned, who will be making the trips, and approximate dates. If mileage is to be paid, provide the number of kilometers and the cost per kilometer. If per diem/lodging is to be paid, indicate the number of days and amount of daily per diem, as well as the number of nights and estimated cost of lodging. Include the cost of ground transportation, when applicable.

For Out-of country Travel, provide a narrative justification including the same information requested above. For this award, no out of country travel is allowed.

Sample Travel Budget

Number of Trips	Number of People	Number of Total kilometers	Cost per kilometer	Amount Requested
1	2	500 km	\$0.27	\$270
25	1	300 km	\$0.27	\$2,025
<b>Total</b>				<b>\$2,295</b>

Per Diem or Lodging	Number of People	Number of Units	Unit Cost	Amount Requested
Per Diem	2	2 days	\$10/day	\$40
Lodging	2	1 night	\$25/night	\$50
<b>Total</b>				<b>\$90</b>

**Other**

This category contains items not included in the previous budget categories. Individually list each item requested and provide appropriate justification related to the program objectives.

Item Requested	Number of Months	Estimated Cost per Month	Number of Staff	Amount Requested
Telephone	\$	\$		
Postage	\$	\$		
Equipment Rental	\$	N/A	\$	
Internet Provider Service	\$	N/A	\$	
<b>Total Other</b>				

Item Requested	Number Needed	Unit Cost	Amount Requested
Printing	___ documents	\$	\$

Sample Justification

For printing costs, identify the types and number of copies of documents to be printed (e.g., procedure manuals, annual reports, materials for media campaign).

## **Indirect Costs**

To claim indirect costs, the applicant organization must have a current approved and audited indirect cost. Otherwise this is capped to 10% of total direct costs net of Equipment.

DETAILED BUDGET FOR BUDGET PERIOD						FROM
PERSONNEL (Applicant organization only)					%	DOLLAR AMOUNT REQUESTED
NAME	ROLE ON PROJECT	TYPE APPT. (months)	EFFORT ON PROJECT	Salary Requested	Fringe Benefit	Budget
SUBTOTALS ----->						\$0
CONSULTANTS						Budget
SUBTOTALS ----->						\$0
TRAVEL						Budget
Local travel						
SUBTOTALS ----->						\$0
SUPPLIES&CONSUMABLES						Budget
SUBTOTALS ----->						\$0
EQUIPMENT (Itemize)						Budget
SUBTOTALS ----->						\$0
OTHER COSTS						Budget
SUBTOTALS ----->						\$0
CONSORTIUM/CONTRACTUAL COSTS			DIRECT COSTS			
SUBTOTAL DIRECT COSTS FOR BUDGET PERIOD						
FACILITIES AND ADMINISTRATION COSTS (%)						\$0
TOTAL COSTS FOR BUDGET PERIOD						\$0





## 7. Timelines/ beneficiaries / risks (1.5 page)

Please include a timeline

Please include the following table with number of beneficiaries per year.

Direct beneficiaries (individuals/patients who will benefit directly of the intervention during the reporting period). <i>Please note – not all beneficiaries may be relevant to your project; if so, please include the comment n/a in those cells.</i>		Estimated Number Year 1	Estimated Number Year 2	Estimated Number Overall
Overall total				
	Men >18 years			
	Women >18 years			
	Children <18 years			
	Children <5 years			
	Pregnant women			
	Young adults/adolescents (age 15-25 – male)			
	Young adults/adolescents (age 15-25 – female)			
	HIV discordant couples			
	Patients on second line treatment			
Overall health care workers trained				
	Nurses trained			
	Midwives trained			
	Clinical officers trained			
	Medical officers trained			
	Laboratory officers trained			
	Administration/ management			

Please include a section on the top 5 major risks to the project and your planned mitigations as per the table below

	Risk	Mitigating strategy
1		
2		
3		
4		
5		

## 8. Organization details (1 page)

- Name of organization
- Contact details of the organization (telephone, fax, e-mail, physical and postal contact)
- Contact person for the proposal within the organization
- Type and legal status (attach registration certificates as appropriate as an appendix)
- Short profile of the organization (when it was established, core business, key personnel, previous experience in conducting related activities)
- Most recent / last Audited accounts

## 9. References (if applicable) (1 page)

## 10. Appendices

### iii). Application Timeline and submission

3 hard copies, and a soft copy (on USB) of the application must be delivered in person to The Ugandan Academy for Health Innovation and Impact offices on the 4<sup>th</sup> floor , Level 5 of the IDI Knowledge centre, Makerere University Main Campus by 25<sup>th</sup> August 2016 - 16:00 EAT. Please refer all queries to:

**Diana Asimwe Bena**, Program Manager, phone contact: 0776352286, [dasiimwe@idi.co.ug](mailto:dasiimwe@idi.co.ug). **David Mpagi**, Senior Grants Manager, phone contact:0752611384 , [dmpagi@idi.co.ug](mailto:dmpagi@idi.co.ug) .

### iv). Eligibility information

#### **NNGO's, CBOs, Academia and Principal Investigators (PIs) / project lead (PL)**

The NNGO, CBO, Academia or PI must be based in Uganda. The PI or PL must be employed by an eligible institution that is legally registered in Uganda. Principal Investigators cannot be based in a country outside Uganda. **Co-investigators (Co-Is)** Co-investigators can be based in Uganda or abroad. It is not permitted for the same person to be Principal Investigator or project lead on any more than one proposal submitted to this call.

#### **v) Assessment criteria**

The proposals will be assessed by a team of peer reviewers drawn from IDI and other independent organisations in Uganda.

For this scheme, peer reviewers will be asked to comment on the following criteria in assessing the proposals. i) Relevance and Quality of Project ii) Quality of Team iii) Project Implementation Plans iv) Potential Impact

Item	Number of points available
Relevance and Quality of Project	25
Innovation	15
Potential Impact (including value for money)	15
Project Implementation Plans	10
Quality of Team / track record	25
Ethical issues & Statistics (research) / Monitoring and Evaluation (capacity building and clinical management)	10
Total	100

### vi) Checklist for submission

	Section	Detail	Included (yes/no)
1	<b>Project Summary Title Page</b>	1 page	
2	<b>Project description</b>	2.5 pages	
3	<b>Monitoring and evaluation</b>	2 pages	
4	<b>Partnerships and Impact</b>	0.5 page	
5	<b>Management capability statement</b>	1 page (including table of previous/ on-going funders)	
6	<b>Budget narrative</b>	1 page	
7	<b>Timelines/ beneficiaries / risks</b>	1.5 page (including beneficiary table, and table of risks)	
8	<b>Organizational details</b>	1 page	
9	<b>References</b>	1 page (if relevant)	
10	<b>Appendices</b>	Monitoring and Evaluation Matrix	
		Letters of support from existing funding partners	
		Key personnel CVs	
		Budget template	
		Last Audited accounts	
		Registration certificates	