USAID
FROM THE AMERICAN PEOPLE

Solicitation for U.S. Personal Service Contractor

Position Title	MEASURE III Senior International Health Advisor
Solicitation Number:	M/OAA/GH/OHA-09-0001
Issuance Date:	October 22, 2008
Closing Date:	November 13, 2008
Closing Time:	12:00 P.M. EST

Dear Prospective Applicants:

The United States Government, represented by the U.S. Agency for International Development (USAID), is seeking applications **(Optional Form 612 only)** from qualified U.S. citizens to provide personal services as a MEASURE II Senior International Health Advisor ("Advisor") under a Personal Services Contract (PSC), as described in the attached solicitation.

Submittals shall be in accordance with the attached solicitation at the place and time specified above. Applicants interested in applying for this position **MUST** submit the following application materials:

1. Complete and **hand-signed** U.S. Government application form OF-612 (including OF-612 continuation sheets as needed); and

2. Supplemental documentation specifically addressing the Quality Ranking Factors (QRFs) specified in the attached solicitation.

Submission of a resume alone, without the above-cited documents, **IS NOT** a complete application. Incomplete or unsigned applications will not be considered. Three (3) hard copies **AND** one (1) emailed copy of the **signed** OF-612 and supplemental documentation must be mailed or delivered (and emailed) to:

Rosalind Sika
U.S. Agency for International Development
Office of Acquisition and Assistance
M/OAA/GH/OHA, RRB 7.09-034
1300 Pennsylvania Ave, NW
Washington, D.C. 20523

Email: rsika@usaid.gov

Applicants should retain for their record copies of all documents submitted. Questions regarding this solicitation may be directed to the undersigned at rsika@usaid.gov.

Sincerely,

Rosalind Sika

Rosalind Sika
Contracting Officer

Solicitation for U.S. Personal Services Contractor (USPSC)
MEASURE III Senior International Health Advisor

1. **SOLICITATION NUMBER:** M/OAA/GH/OHA-09-0001

2. **ISSUANCE DATE:** October 22, 2008

3. **CLOSING DATE/TIME FOR RECEIPT OF APPLICATIONS:** November 13, 2008 at 12:00 Noon

4. **POSITION TITLE:** MEASURE III Senior International Health Advisor

5. **MARKET VALUE:** GS-15 Equivalent ($115,317- $149,000). Final compensation will be negotiated within the listed market value based upon the candidate's past salary, work history and educational background. Candidates who live outside the Washington, D.C. area will be considered for employment but no relocation expenses will be reimbursed.

6. **PERIOD OF PERFORMANCE:** Two (2) years, with an option to renew for up to two (2) additional years, subject to availability of funds and continued need for the services.

7. **PLACE OF PERFORMANCE:** Washington, D.C

8. **SECURITY ACCESS**: Secret level clearance required

9. **AREA OF CONSIDERATION:** U.S. citizen

10. **STATEMENT OF WORK**

10.1 Major Duties and Responsibilities

The MEASURE Phase III Senior International Health Advisor (hereafter referred to as the "Advisor") shall serve as the Cognizant Technical Officer (CTO) for the MEASURE Phase III Monitoring and Assessment for Results (MMAR III) Leader with Associates (LWA) Cooperative Agreement, directly supporting the Bureau for Global Health's technical expertise in monitoring and evaluation. The Activity Objective of the Cooperative Agreement is to improve the collection, analysis and presentation of data to promote better use of data in planning, policymaking, managing, monitoring and evaluating population, health, and nutrition programs. The Advisor shall also support general monitoring and evaluation activities within the Global Health Bureau's Strategic Planning, Evaluation and Research (SPER) Division.

10.2 Key CTO responsibilities (75%):

(1) Provide program and management support to the MMAR III LWA to achieve the expected results. The MMAR III program is USAID Global Health Bureau's primary vehicle for supporting improvements in monitoring and evaluation in population, health and nutrition worldwide. MMAR III will contribute significantly to the effectiveness with which health data are applied to improve health policies and services in the countries that USAID assists. The objective of MMAR III is

"improved collection, analysis and presentation of data to promote better use of data in planning, policymaking, managing, monitoring and evaluating population, health and nutrition programs." This will be achieved through the following six results:

1. increased user demand for data and tools;

2. increased individual and institutional capacity in monitoring and evaluation;

3. increased collaboration and coordination in obtaining and sharing health sector data;

4. improved tools, methodologies and technical guidance;

5. increased availability of data, methods and tools; and

6. increased facilitation of data use. The program will contribute to all eight program elements - HIV/AIDS, Tuberculosis (TB), Malaria, Avian Influenza (AI), Other Public Health Threats, Maternal and Child Health, Family Planning and Reproductive Health, and Water Supply and Sanitation – by measuring progress in each program element, building tools and designing new methodologies across all results;

(2) Be the USAID representative of the project, work closely with the Project Director and other senior management staff, lead the Bureau for Global Health management team;

(3) Monitor the implementing partner's progress in achieving the objectives of the Program Description and verify that the implementing partner's activities conform to the terms and conditions of the agreement;

(4) Make written recommendations to the Agreement Officer for any changes to the Program Description, technical provisions, and /or any other terms or conditions, as necessary;

(5) Administer financial responsibilities of ensuring that all funding actions comply with USAID's forward funding guidelines, review the recipient's request for payments or financial reports, and monitor the financial status of the award;

(6) Provide technical guidance on program strategy and activities;

(7) Act as technical liaison between the implementing partner and the Agreement Officer within the Office of Acquisition and Assistance (OAA) including problem solving, project management, and regular communication with project director;

(8) Participate in the periodic evaluation of the implementing partner's performance, which includes evaluation of the quality of the products and/or services, the effectiveness of cost control efforts and the timeliness of performance;

(9) Lead the USAID MMAR III Management Team, encouraging a culture of collaboration and mentorship and contributing to the furtherance of the MEASURE program's objectives;

(10) Travel to provide oversight of MMAR III program activities, advising USAID field Missions' staff members on ways MMAR III activities can contribute to their program's objectives;

(11) Act as activity lead and point person for other offices within the Bureau for Global Health, USAID field missions, and other participating US Government agencies and multi-lateral agencies.

10.3 Key Monitoring and Evaluation responsibilities (25%):

(1) Provide technical assistance to the Office of HIV/AIDS and the President's Emergency Plan for AIDS Relief (PEPFAR) on monitoring and evaluation activities;

(2) Participate as a member of the Monitoring Evaluation and Reporting (MER) team;

(3) Participate in planning, implementing and reporting on USAID activities at the Team, Division, Office, and Agency levels;

(4) Analyze monitoring and evaluation data for inclusion in Agency and multilateral reports;

(5) Advise technical program managers on indicator selection, target setting, monitoring and data quality assessment and validation;

(6) Review and analyze the results component of country operational plans and reports in coordination with the MER Team;

(7) Communicate outcomes and recommendations to internal and external partners; prepare and present monitoring and evaluation data to a wide variety of audiences;

(8) Prepare, present and disseminate materials, speeches, graphics, etc. on monitoring and evaluation of HIV/AIDS and related programs to serve reference, informational and advocacy purposes.

11. POSITION LOCATION AND SUPERVISORY CONTROLS

The Advisor will be located in USAID's Bureau for Global Health, Office of HIV/AIDS (GH/OHA). The incumbent will be responsible for providing program and management support to the MEASURE Phase III Monitoring and Assessment for Results. S/he will report on a day-to-day basis to the Strategic Planning, Evaluation and Research (SPER) Division and be directly accountable to the Division Chief. It is expected that the incumbent will also promote and facilitate effective communication between and among the USAID MEASURE Management Team across bureau offices, other concerned USG Agencies, and partner multilateral organizations, international donors. S/he is expected to manage relationships and assignments with minimal supervision.

The Advisor will be responsible for overseeing the Bureau for Global Health MMAR III team as team leader. This Bureau-wide team includes at least one Technical Advisor from the Offices of HIV/AIDS (OHA), Health, Infectious Disease and Nutrition (HIDN), Population and Reproductive Health (PRH), one Program Assistant from OHA and additional ad-hoc support from the President's Malaria Initiative (PMI) and Avian Influenza (AI) Offices.

12. PHYSICAL DEMANDS: The work is generally sedentary and does not pose undue physical demands.

13. START DATE: Immediately, once necessary clearances are obtained.

14. POINT OF CONTACT: See Cover Letter.

15. MINIMUM EDUCATION, EXPERIENCE AND OTHER REQUIREMENTS FOR THE POSITION

Applicants must possess the minimum qualifications for the position, as specified below. Applicants who do not meet all of education and experience and other selection factors are considered NOT qualified for the position.

15.1. Education/Experience Requirements

(1) Minimum Master's degree in public health, public policy, epidemiology or related discipline.

(2) Minimum 10 years' management experience working in public health or a related field with at least 5 years' experience in senior management position for large global health projects.

(3) Knowledge of routine health information systems, monitoring and evaluation methodology (including frameworks), data quality assurance, analysis reporting and best practices in data dissemination and data use.

(4) Knowledge of data management processes and tools including web-based database systems preferred.

(5) Demonstrated experience with managing data, information, and monitoring and evaluation of HIV/AIDS program activities.

(6) Strong interpersonal communication and writing skills.

(7) Strong teamwork and leadership skills, ability to mentor junior staff.

(8) Fluency in French or Spanish desired.

(9) Ability to recognize areas of weakness and willingness to learn.

(10) Ability to work with diverse teams.

(11) High degree of judgment, maturity, ingenuity and originality to interpret strategy, to analyze, develop and present work results and to monitor and evaluate implementation of programs.

(12) Willingness to travel.

15.2. Other Requirements:

(1) Applicant is a U.S. Citizen.

(2) The Applicant must possess a high degree of fluency in both written and spoken English.

(3) Complete and hand-signed U.S. Government application form OF-612 (and OF-612 continuation sheets, as needed) submitted (Note: Applicants must include complete dates (months/years) and hours per week for all positions listed on the form to allow for adequate evaluation of related and direct experience. Experience that cannot be quantified will not be counted towards meeting the experience requirements).

(4) Supplemental documentation specifically addressing the Quality Ranking Factors (QRFs), as specified below in 16.

(5) Ability to obtain a SECRET level clearance as provided by USAID

(6) Verification of academic credentials

16. QUALITY RANKING FACTORS (QRF)

Following are the Quality Ranking Factors (QRF) and required skills:

16.1 Program Management (40 Points) - Ability to manage large, complex global health projects, including programmatic, technical and financial issues:

1. Ability to provide leadership in managing the implementation of a strategic vision and results framework

2. Ability to oversee details of financial management

3. Ability to track and monitor progress

4. Ability to solve complex problems in the field

16.2 Technical Knowledge (30 Points) – Ability to provide technical guidance and leadership to MMAR III senior management and serve as a technical resource for MER team:

1. Knowledge of routine health information systems, monitoring and evaluation methodology (including frameworks), data quality assurance, analysis reporting and best practices in data dissemination and data use

2. Knowledge of data management processes and tools including web-based database systems

3. Demonstrated experience with managing data, information, and monitoring and evaluation of population, health and nutrition program activities

16.3 Interpersonal and Communication Skills (30 Points)

1. Demonstrated capacity to communicate effectively both orally and in writing

2. Demonstrated ability to make clear, accurate oral presentations on technical monitoring and evaluation or routine health information topics

3. Ability to work with diverse, non-co-located teams; build team cohesiveness and organization

16. 4 Total Possible QRF Points: 100

17. BASIS OF RATING

Applicants who meet the minimum Education, Experience and Other Requirements, specified in 15.1 and 15.2 above, will be further evaluated based on scoring of the Quality Ranking Factor (QRF) responses submitted with the application form. Those applicants determined to be competitively ranked may also be evaluated on interview performance and satisfactory professional reference checks.

Applicants are required to address each of the QRFs on a separate sheet describing specifically and accurately what experience, training, education and/or awards they have received that are relevant to each factor. Be sure to include your name and the announcement number at the top of each additional page. Applicants who do not meet the minimum requirements will be considered NOT qualified for the position. Failure to address the Quality Ranking Factors may result in not receiving credit for all pertinent experience, education, training and/or awards.

18. SECURITY CLEARANCE

NOTE: If a Secret security clearance is not obtained within nine months after offer acceptance, the offer may be rescinded.

19. NOTE REGARDING GOVERNMENT OBLIGATIONS FOR THIS SOLICITATION

This solicitation in no way obligates USAID to award a PSC contract, nor does it commit USAID to pay any cost incurred in the preparation and submission of the application.

20. NOTE REGARDING DATA UNIVERSAL NUMBERING SYSTEM (DUNS) NUMBERS

All individuals contracted as US PSCs are required to have a DUNS Number. USAID will provide a generic DUNS Number and PSCs are not required to register with CCR.

For general information about DUNS Numbers, please refer to FAR Clause 52.204-6, Data Universal Numbering System (DUNS) Number (10/2003)
http://acquisition.gov/comp/far/current/html/52_200_206.html#wp1137568

21. LIST OF REQUIRED FORMS FOR PSCs

The Optional Form 612 specified in this solicitation can found at

http://www.usaid.gov/forms/

Completion of additional forms for security will be required when notified by the Contracting Officer that the applicant has been selected for the position.

22. CONTRACT INFORMATION BULLETINS (CIBs) and ACQUISITION & ASSISTANCE POLICY DIRECTIVES (AAPDs) PERTAINING TO PSCs

CIBs and AAPDs contain changes to USAID policy and General Provisions in USAID regulations and contracts. Please refer to the following website to determine which CIBs and AAPDs apply to this position:

http://www.usaid.gov/business/business_opportunities/cib/subject.html#psc

23. AAPD 06-10 – PSC MEDICAL PAYMENT RESPONSIBILITY

AAPD No. 06-10 is hereby incorporated as Attachment 1 to the solicitation.

24. BENEFITS/ALLOWANCES:

As a matter of policy, and as appropriate, a USPSC is normally authorized the following benefits and allowances:

24.1 BENEFITS:

Employer's FICA Contribution
Contribution toward Health & Life Insurance
Pay Comparability Adjustment
Annual Increase
Eligibility for Worker's Compensation
Annual & Sick Leave

24.2 ALLOWANCES (<u>if Applicable</u>).*

(A) Temporary Lodging Allowance (Section 120).
(B) Living Quarters Allowance (Section 130).
(C) Post Allowance (Section 220).
(D) Supplemental Post Allowance (Section 230).
(E) Separate Maintenance Allowance (Section 260).
(F) Education Allowance (Section 270).
(G) Education Travel (Section 280).

(H) Post Differential (Chapter 500).
(I) Payments during Evacuation/Authorized Departure (Section 600), and
(J) Danger Pay (Section 650).

* Standardized Regulations (Government Civilians Foreign Areas).

25. FEDERAL TAXES:

U.S. Personal Services Contractors (USPSCs) are required to pay Federal Income Taxes, FICA, and Medicare

26. ALL QUALIFIED APPLICANTS WILL BE CONSIDERED REGARDLESS OF AGE, RACE, COLOR, SEX, CREED, NATIONAL ORIGIN, LAWFUL POLITICAL AFFILIATION, NON-DISQUALIFYING HANDICAP, MARITAL STATUS, SEXUAL ORIENTATION, AFFILIATION WITH AN EMPLOYEE ORGANIZATION, OR OTHER NON-MERIT FACTOR.

ATTACHMENT 1

ACQUISITION & ASSISTANCE POLICY DIRECTIVE (AAPD) NO. 06-10
PSC MEDICAL EXPENSE PAYMENT RESPONSIBILITY

General Provision 22, MEDICAL EXPENSE PAYMENT RESPONSIBILITY (OCTOBER 2006)

(a) Definitions. Terms used in this General Provision are defined in 16 FAM 116 available at http://www.foia.state.gov/REGS/fams.asp?level=2&id=59&fam=0 .

Note: Personal Services Contractors are not eligible to participate in the Federal Employees Health Programs.

(b) The regulations in the Foreign Affairs Manual, Volume 16, Chapter 520 (16 FAM 520), Responsibility for Payment of Medical Expenses, apply to this contract, except as stated below. The contractor and each eligible family member are strongly encouraged to obtain health insurance that covers this assignment. Nothing in this provision supersedes or contradicts any other term or provision in this contract that pertains to insurance or medical costs, except that section (e) supplements General Provision 25. "MEDICAL EVACUATION (MEDEVAC) SERVICES."

(c) When the contractor or eligible family member is covered by health insurance, that insurance is the primary payer for medical services provided to that contractor or eligible family member(s) both in the United States and abroad. The primary insurer's liability is determined by the terms, conditions, limitations, and exclusions of the insurance policy. When the contractor or eligible family member is not covered by health insurance, the contractor is the primary payer for the total amount of medical costs incurred and the U.S. Government has no payment obligation (see paragraph (f) of this provision).

(d) USAID serves as a secondary payer for medical expenses of the contractor and eligible family members who are covered by health insurance, where the following conditions are met:

(1) The illness, injury, or medical condition giving rise to the expense is incurred, caused, or materially aggravated while the eligible individual is stationed or assigned abroad;

(2) The illness, injury, or medical condition giving rise to the expense required or requires hospitalization and the expense is directly related to the treatment of such illness, injury, or medical condition, including obstetrical care; and

(3) The Office of Medical Services (M/MED) or a Foreign Service medical provider (FSMP) determines that the treatment is appropriate for, and directly related to, the illness, injury, or medical condition.

(e) The Mission Director may, on the advice of M/MED or an FSMP at post, authorize medical travel for the contractor or an eligible family member in accordance with the General Provision 10, Travel and Transportation Expenses (July 1993), section (i) entitled "Emergency and Irregular Travel and Transportation." In the event of a medical emergency, when time does not permit consultation, the Mission Director may issue a Travel Authorization Form or Medical Services

Authorization Form DS-3067, provided that the FSMP or Post Medical Advisor (PMA) is notified as soon as possible following such an issuance. The contractor must promptly file a claim with his or her medevac insurance provider and repay to USAID any amount the medevac insurer pays for medical travel, up to the amount USAID paid under this section. The contractor must repay USAID for medical costs paid by the medevac insurer in accordance with sections (f) and (g) below. In order for medical travel to be an allowable cost under General Provision 10, the contractor must provide USAID written evidence that medevac insurance does not cover these medical travel costs.

(f) If the contractor or eligible family member is not covered by primary health insurance, the contractor is the primary payer for the total amount of medical costs incurred. In the event of a medical emergency, the Medical and Health Program may authorize issuance of Form DS-3067, Authorization for Medical Services for Employees and/or Dependents, to secure admission to a hospital located abroad for the uninsured contractor or eligible family member. In that case, the contractor will be required to reimburse USAID in full for funds advanced by USAID pursuant to the issuance of the authorization. The contractor may reimburse USAID directly or USAID may offset the cost from the contractor's invoice payments under this contract, any other contract the individual has with the U.S. Government, or through any other available debt collection mechanism.

(g) When USAID pays medical expenses (e.g., pursuant to Form DS-3067, Authorization for Medical Services for Employees and/or Dependents), repayment must be made to USAID either by insurance payment or directly by the contractor, except for the amount of such expenses USAID is obligated to pay under this provision. The Contracting Officer will determine the repayment amount in accordance with the terms of this provision and the policies and procedures for employees contained in 16 FAM 521. When USAID pays the medical expenses, including medical travel costs (see section (e) above), of an individual (either the contractor or an eligible family member) who is covered by insurance, that individual promptly must claim his or her benefits under any applicable insurance policy or policies. As soon as the individual receives the insurance payment, the contractor must reimburse USAID for the full amount that USAID paid on the individual's behalf or the repayment amount determined by the Contracting Officer in accordance with this paragraph, whichever is less. If an individual is not covered by insurance, the contractor must reimburse USAID for the entire amount of all medical expenses and any travel costs the contractor receives from his/her medevac provider.

(h) In the event that the contractor or eligible family member fails to recover insurance payments or transfer the amount of such payments to USAID within 90 days, USAID will take appropriate action to collect the payments due, unless such failure is for reasons beyond the control of the USPSC/dependent.

(i) Before departing post or terminating the contract, the contractor must settle all medical expense and medical travel costs. If the contractor is insured, he or she must provide proof to the Contracting Officer that those insurance claims have been submitted to the insurance carrier(s) and sign a repayment agreement to repay to USAID any amounts paid by the insurance carrier(s).