SUBJECT: Solicitation for a U.S. Citizen /Third Country National Personal Service Contractor (US/TCN PSC) – Presidential Malaria Initiative (PMI) Advisor – Burkina Faso

Dear Prospective Offerors:

The United States Government, represented by the U.S. Agency for International Development (USAID), is seeking offers from U.S. Citizens or Third Country Nationals (TCN) qualified to provide personal services under contract as described in this solicitation.

Offers must be in accordance with Attachment 1, Sections I through VIII of this solicitation. Incomplete or unsigned offers will not be considered. Offerors should retain copies of all offer materials for their records.

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 offers.

Any questions must be directed in writing to the Point of Contact specified in the attached information.

Sincerely,

[Signature]

Angela Williams-Bostic
Acting Supervisory Executive Officer
I. GENERAL INFORMATION

1. SOLICITATION NUMBER: 72068519R00006

2. ISSUANCE DATE: June 13, 2019

3. CLOSING DATE/TIME: July 4, 2019 - 5:00 p.m. (Senegal time)

4. POSITION TITLE: Presidential Malaria Initiative (PMI) Advisor - Burkina Faso

5. MARKET VALUE: GS-14 ($90,621 - $117,810 per annum) (Final compensation will be negotiated within the listed market value.) TCNPSC under this solicitation are eligible for benefits in accordance with AIDAR Appendix J, sec. 4(c)(2)(ii)(B)). An exception has been approved by the Mission Director in accordance with AIDAR Appendix J and ADS 309m aa, requesting Approval to Use Alternate Classification Procedures (ACP).

6. PERIOD OF PERFORMANCE: Immediate upon receipt of security/medical clearances. (The duration of the US Personal Services Contract or Third Country National Personal Services Contract will be for an initial two (2) years, with three (3) one-year option periods, subject to satisfactory performance, availability of funds and continuing need of the position.) Level of effort is full time (40 hours per week).

7. PLACE OF PERFORMANCE: Ouagadougou, Burkina Faso


9. STATEMENT OF DUTIES:

Background and Introduction

Burkina Faso is a landlocked Sahel country located in the center of West Africa with a total estimated population of 20.2 million in 2018. Twenty percent of the population lives in urban areas. Women represent 51.8 percent, and children under five years of age represent 18.14 percent of the population. Pregnant women account for 5.49 percent of the total population according to the same estimates. Data from the 2015 Tracking Results Continuously (TRaC) survey show that the infant mortality rate has decreased from 65 deaths per 1,000 live births in 2010 to 45, while the maternal mortality rate has dropped from 341 deaths to 330 deaths per 100,000 live births during the same period.

Malaria remains a major public health issue and is endemic throughout the country, with a seasonal upsurge from June through October. In Burkina Faso, the rainy season duration varies across the country with corresponding variances in seasonal malaria transmission based on geographic zones. In the north, the rainy season is up to three months; in the central zone, it lasts up to six months, and in the south, it can last up to nine months.

Overall, malaria activities are organized at all three levels of the public health system:

- The central level is responsible for developing strategies, mobilizing resources, coordinating partners, monitoring implementation, and evaluating performance
- The intermediate level is comprised of 13 health regions with eight regional hospitals that serve as referral centers
• The peripheral level is comprised of 70 health districts with a total of 45 district hospitals, 57 medical centers and 1,839 health centers, plus approximately 17,668 community health workers.

In addition to public sector facilities, the private sector includes about 133 hospitals, 397 medical and nursing centers, 45 health facilities run by NGOs or faith-based organizations, and 140 biomedical laboratories. There are about 246 private pharmacies, with private drug sellers numbering around 617 countrywide. These private health facilities are mainly found in Ouagadougou and Bobo-Dioulasso. The private sector is integrated into the health system—participating in regular meetings with the Ministry of Health (MoH), ensuring at least some compliance with technical guidelines. The National Malaria Control Program (NMCP) is considering providing private sector staff training on malaria prevention and treatment guidelines, and creating a memorandum of understanding to further engage the private sector in malaria control activities.

OVERVIEW

The U.S. President's Malaria Initiative (PMI)

When it was launched in 2005, the goal of the U.S. President’s Malaria Initiative (PMI) was to reduce malaria-related mortality by 50 percent across 15 high-burden countries in sub-Saharan Africa through a rapid scale-up of four proven and highly effective malaria prevention and treatment measures: insecticide-treated mosquito nets (ITNs); indoor residual spraying (IRS); accurate diagnosis and prompt treatment with artemisinin-based combination therapies (ACTs); and intermittent preventive treatment of pregnant women (IPTp). With the passage of the Tom Lantos and Henry J. Hyde Global Leadership against HIV/AIDS, Tuberculosis, and Malaria Act in 2008, PMI developed a U.S. Government Malaria Strategy for 2009-2014. This strategy included a long-term vision for malaria control in which sustained high coverage with malaria prevention and treatment interventions would progressively lead to malaria-free zones in Africa, with the ultimate goal of worldwide malaria eradication by 2040-2050. Consistent with this strategy and the increase in annual appropriations supporting PMI, four new sub-Saharan African countries and one regional program in the Greater Mekong Sub-region of Southeast Asia were added in 2011. The contributions of PMI, together with those of other partners, have led to dramatic improvements in the coverage of malaria control interventions in PMI-supported countries, and all 15 original countries have documented substantial declines in all-cause mortality rates among children under five years of age.

In 2015, PMI launched its next six-year strategy, setting forth a bold and ambitious goal and objectives. The PMI Strategy for 2015-2020 takes into account the progress over the past decade and the new challenges that have arisen. Malaria prevention and control remains a major U.S. foreign assistance objective and PMI’s strategy fully aligns with the U.S. Government’s vision of ending preventable child and maternal deaths and ending extreme poverty. It is also in line with the goals articulated in the Roll Back Malaria Partnership’s second-generation global malaria action plan, “Action and Investment to defeat Malaria 2016-2030: for a Malaria-Free World” and the World Health Organization’s updated Global Technical Strategy: 2016-2030. Under the PMI Strategy 2015-2020, the U.S. Government’s goal is to work with PMI-supported countries and partners to further reduce malaria deaths and substantially decrease malaria morbidity, towards the long-term goal of elimination.

In 2017, consistent with an increase in annual appropriations, PMI again launched new country programs in Cameroon, Côte d’Ivoire, Niger, and Sierra Leone, and expanded an existing program in Burkina Faso to PMI focus country status. With the addition of these new focus countries, PMI now has programs in 24 countries in sub-Saharan Africa.
The U.S. President’s Malaria Initiative in Burkina Faso

In 2017, Burkina Faso became a PMI focus country with a current annual budget of $25 million per year. The program implements proven and highly effective malaria prevention and control interventions in support of the NMCP strategic plan and outlined in Malaria Operational Plans (MOPs) for 2017, 2018 and 2019. Key interventions include:

**Entomologic monitoring and insecticide resistance management:** Burkina Faso has strong entomological capacity and history of malaria vector research including insecticide resistance monitoring.

**Insecticide Treated Nets (ITNs):** The national strategy for Burkina Faso uses ITNs as the principal tool for malaria prevention. Burkina Faso has benefitted from three mass campaigns in 2011, 2013, and 2016, and will benefit from another one in 2019.

**Indoor Residual Spraying (IRS):** Burkina Faso’s national strategy includes IRS, along with ITNs and larval source management, as vector control interventions to prevent malaria.

**Malaria in pregnancy:** All pregnant women in Burkina Faso benefit from free antenatal care services, including prevention and treatment of malaria, with guidelines stating that at least three doses of sulfadoxine-pyrimethamine be given during pregnancy, along with a free ITN.

**Seasonal malaria chemoprevention (SMC):** The NMCP’s strategy is to provide seasonal malaria chemoprevention for children 3-59 months of age across the country.

**Case management:** PMI supports Burkina Faso’s goal of testing 100 percent of suspected cases and correctly treating 100 percent of confirmed cases of malaria with an appropriate antimalarial at all levels of the health system.

**Social and behavior change communication:** Part of the NMCP strategy emphasizes the key areas of advocacy, social mobilization, and behavior change communication, and serves as a guideline for all malaria partners in Burkina Faso. A new national communications strategy for 2016-2020 was finalized in February 2017 and includes seasonal malaria chemoprevention, IPTp, and the administration of pre-referral rectal artesunate at the community level.

**Surveillance, monitoring, and evaluation:** PMI works with NMCP to strengthen the quality of malaria data and improve data use at all levels.

**Other health systems strengthening:** A health system strengthening is integral to the success of malaria programming in Burkina Faso.

**Basic Function of the Position**

The USAID President’s Malaria Initiative (PMI) Resident Advisor (RA) in tandem with the US Centers for Disease Control and Prevention (CDC) PMI RA manages the overall health portfolio, and provides technical and administrative guidance as needed. Concurrently, the USAID/PMI RA and other Contracting Officer Representatives and Assistance Officer Representatives (COR/AOR), along with the Foreign Service National (FSN) PMI staff, shall oversee the planning, implementing, and monitoring of the PMI funded activities.
S/he will be the point person to liaise with backstops for PMI in USAID/Washington D.C., and in the USAID Burkina Faso Country Office (USAID/Burkina Faso) Health Team. S/he shall consider the macro picture of the health portfolio while focusing on malaria activities and work with the entire health team to achieve maternal and child mortality reduction goals.

The USAID/PMI RA shall exercise substantial judgment in planning and carrying out tasks, in representing the USG in critical technical and policy forums, in resolving problems and conflicts, and in taking appropriate steps to meet deadlines. With approval from the Health Office Director, the USAID/PMI RA may be requested to perform governmental functions such as officially representing USAID at functions, approving policy documents, budgeting, and developing planning documents.

The USAID/PMI RA must also possess an understanding of the social, economic and cultural determinants and implications of the malaria epidemic in Burkina Faso, as well as have the experience and skills required to help formulate the USG position on malaria and contribute to important policy decisions as a malaria focal point of the USAID/Burkina Faso Health Team.

**Duties and responsibilities**

The specific duties and responsibilities of the USAID PMI RA will include, but are not limited to, the following:

1. Plan malaria prevention and control activities consistent with the malaria control coverage needs identified by the strategy and plans of the National Malaria Control Program (NMCP) and PMI. The USAID/PMI RA is primarily responsible for the implementation of the Malaria Operational Plan (MOP) approved activities.

2. Serve as Contracting Officer Representative/Assistance Officer Representative (COR/AOR) for the malaria bilateral activity — and Activity Manager for several mechanisms. S/he will work with key USAID implementing partners to ensure that malaria commodities are purchased in a timely and cost effective manner and monitor shipment and distribution of these commodities.

3. Work closely with the National Malaria Control Program, other donors supporting malaria prevention and control (WHO, Bill and Melinda Gates Foundation, UNICEF, the Global Funds for AIDS Tuberculosis and Malaria, World Bank, etc.), non-governmental organizations, and faith-based organizations, for a smooth implementation of PMI activities in coordination with other donors’ activities.

4. Ensure that all activities are consistent with internationally accepted best practices and relevant to the specific malaria epidemiology of Burkina Faso, as well as with PMI policy and technical guidance.

5. Participate in the development of planning documents such as the MOP and Burkina Faso Mission Operational Plan (OP) as well as activity implementation documents such as Acquisition and Assistance requests and activity monitoring documents. The USAID/PMI RA will also follow-up on approval of such documents and verify that planned malaria-related goods and services are received.

6. Represent USAID at malaria related meetings and ensure effective communication and coordination between PMI-funded activities and malaria programs funded by other donors including the WHO, UNICEF, the Global Fund and the Government of Burkina Faso.
7. Provide technical support to all partners and managerial support as needed during the implementation phases of the initiative to ensure the quality of interventions supported and that programmatic targets are met.

8. Ensure that malaria activities are integrated into overall whole of US government Global Health Initiative (GHI) activities and to coordinate these activities with the NMCP and MOH to avoid duplication of effort and programming gaps.

9. Ensure accountability of funds provided by the PMI.

10. Ensure that financial and technical reports on the PMI in Burkina Faso are prepared and submitted as required, including complying with PMI’s Quarterly Reporting initiative.

11. Ensure PMI pipeline reviews are conducted on a regular basis and make recommendations for adjustment as appropriate and initiate reprogramming memoranda to that end; and

12. The incumbent shall perform other tasks as requested by the Health Team Leader.

Specifically, the USAID/PMI Resident Advisor’s time shall be divided in the following ways:

A) Technical Leadership (30%)

The USAID/PMI RA, working in collaboration the CDC/PMI RA, the PMI FSN, the NMCP and PMI staff in the US, will be responsible for developing and providing expert malaria technical guidance and advice to guide planning and implementation of malaria control interventions. The USAID/PMI RA will be responsible for developing annual work plans in line with PMI objectives and goals in collaboration with the in-country PMI team. This will include but is not limited to case management of malaria in health facilities and at the community level, mass campaigns, intermittent preventive treatment of pregnant women, indoor residual spraying, and social behavior change key documents.

Collaborate with the in-country PMI team, the Embassy, USAID-funded grantees, international organizations and appropriate Government of Burkina Faso officials to provide substantive technical and programmatic leadership in malaria analysis and planning. This includes: identifying achievable development results in collaboration with government officials; maintaining support from in-country partners and stakeholders; and identifying and obtaining key approvals for new opportunities to provide targeted support for activities related to malaria to be funded under PMI.

Specific activities:

1. The USAID/PMI RA, working in collaboration with the CDC/PMI RA, the USAID Health team, especially foreign service national (s) assigned to PMI, Burkina Faso Ministry of Health authorities (in particular the NMCP) and PMI staff in the US, will be responsible for developing annual MOPs in line with PMI guidance health team’s objectives and goals. This will include but is not limited to case management of malaria in health facilities and at the community level, mass campaigns, intermittent preventive treatment of pregnant women (IPTp), indoor residual spraying (IRS), supply chain, forecasting and procurement, and social behavior change key documents to promote the use of these interventions.
2. Reviews and modifies the Health Results Framework with particular focus on malaria results, fully developing new and on-going activities, including technical, policy, social soundness, gender and budgetary analyses.

3. Prepares the annual malaria operational plans and other required documentation and reporting of malaria required by USAID/Washington given Burkina Faso’s status as a PMI focus country.

4. Prepares sections of the Health Development Objective narratives in the annual Operating Plan and performance report related to PMI activities and budgets.

B) Management of Activity Implementation (25%)

The USAID/PMI RA, in collaboration with the NMCP, will provide technical guidance and management support to collaborating agencies, to ensure sound management of malaria interventions implemented under the PMI. This includes but is not limited to malaria prevention and control activities such as behavior change and communication activities, bed nets purchase and distribution through the existing health services and at the community level, antimalarial drug purchase and distribution through the existing health system, intermittent preventive treatment of pregnant women (IPTp) coverage and the diagnosis and treatment of malaria, and the indoor residual spraying. The USAID/PMI RA will serve as the COR/AOR or Activity Manager of PMI implementing instruments and be responsible for monitoring and reporting the results for all PMI activities. The USAID/PMI RA, in collaboration with the CDC/PMI RA and PMI FSN, will also be responsible for monitoring and reporting the results of all PMI activities. S/he shall manage and oversee services and deliverables provided by contractors and grantees, in accordance with USAID program management regulations and procedures, and practices.

Specific activities:

1. Leads the PMI activities: organizes regular meetings with implementing partners, reviews progress reports and assessments, makes field visits to activity sites to document progress, conducts data quality assessments, completes environmental compliance and monitoring, identifies issues and problems, and facilitates problem solutions by identifying and securing technical assistance and other resources as appropriate.

2. Participates in the review and approval of technically sound proposals submitted by applicants. Provides technical guidance to USAID’s partners to develop the malaria sections of their annual work plan, including identifying in-country participant training activities. Provides these partners guidance on malaria research results and lessons learned from interventions in Burkina Faso.

3. Provides technical oversight on pharmaceutical and non-pharmaceutical supply chain to ensure that commodities quantification and required paper work for ordering supplies are completed in a timely manner and that stock outs of anti-malarial commodities minimized as much as possible.

4. Provides oversight for commodity pipeline to ensure the country has a constant supply of essential anti-malarial supplies while at the same time ensuring avoidance of overstocking either at central level or peripheral health facilities.
5. Develops scopes of work and coordinates visits for short-term advisors coming into Burkina Faso, secures/provides needed clearances for these visits, and ensures that results are consistent with MOH and Health Office and ICS activities and requirements.

6. Participates in regular Health meetings and other key malaria related meetings as appropriate, such as Steering Committees and technical working groups. Meet regularly with implementing partners (monthly C/AOR and activity manager meetings). Meet regularly with government of Burkina Faso officials (specifically the NMCP) and other donors and partners to ensure coordination and leveraging of resources with other organizations providing services related to malaria prevention, detection and treatment. Provide updates to USAID leadership and Front Office as necessary on progress and issues related to Malaria discussed in technical working groups.

7. Participates in and makes presentations at professional meetings related to malaria.

8. Drafts sections of the annual portfolio reviews related to malaria activities describing progress, identifying implementation issues, technical problems. Provide input related to malaria in the annual performance planning report and operational plan.

C) Partner Relationships (25%)

Successful performance in this position depends upon establishing and maintaining productive collaborative relationships with a wide range of partners and stakeholders within the Ministry of Health, local governments, the World Bank, the Global Fund, WHO, UNICEF, Bill and Melinda Gates Foundation other donors, and NGOs dealing with issues focusing on malaria. The USAID/PMI RA shall, therefore, develop and maintain relationships with these partners and stakeholders in order to effectively ensure that all of USG PMI activities are complementary and enhance all other malaria activities being implemented in Burkina Faso. S/he will participate in meetings hosted by the NMCP on malaria, as well as other key stakeholders.

D) Coordination with Other PMI Personnel (10%)

The USAID/PMI RA will be supervising the Foreign Service national Malaria Specialist. The USAID/PMI RA will communicate regularly and work jointly with the CDC/PMI RA as well as other members of the USAID/Burkina Faso Health Team, USAID/Washington and CDC Atlanta PMI staff.

E) Monitoring and Evaluation (10%)

Monitoring and evaluation is a key component of the PMI. The USAID/PMI RA will be responsible in working with the CDC/PMI RA in developing a monitoring and evaluation plan in line with PMI targets, as well as ensure that PMI partners develop project monitoring plans and report in a timely manner on their activities. It is also expected that the USAID/PMI RA shall provide expert advice and practical experience in helping the MOH, the NMCP and other partners to monitor inputs and outcomes, and progress towards PMI goals. The USAID/PMI RA will ensure smart integration with ANC clinic interventions and seek leverage with other partners such as the Global Fund, the World Bank, Bill and Melinda Gates, Malaria Consortium and UNICEF.

The USAID/PMI RA shall make sure that a coherent monitoring and evaluation plan is in place to track PMI activities, results and impact for reporting to USAID/Washington. Significant results and impact data should also be presented to the NMCP.

Working in close collaboration with the CDC PMI RA and FSN Malaria Specialist as well as other health Team staff members, the USAID PMI Resident Advisor shall coordinate the PMI Quarterly Reports and Annual
Report (including data collection and performing data quality assessment and populate the template and narrative).

Position Elements

Work Environment and Travel

The primary place of work is USAID Country Office Burkina Faso located in Ouagadougou. The USAID PMI RA may be required to travel within and outside of Burkina Faso to meet the responsibilities of the position.

Exercise of Judgment

The USAID/PMI RA exercise a broad scope of independent judgment. Refers to immediate supervisor and other professional staff members on matters pertaining to policy, priority or resolution of problems for which there is no clear precedent. Judgment must be exercised in making strategic and operational decisions in this complex operational environment that presents well-documented risks to partners and attracts significant high-level attention from USG decision and policy makers.

Authority to make commitments

The USAID/PMI RA will have no authority to make financial commitments on behalf of the U.S. government, unless such authority is specifically delegated.

Level and purpose of contacts

The USAID/PMI RA serves as the primary responsible Officer in the monitoring of PMI programs, and reporting on their implementation to PMI office in USAID/Washington, USAID/Burkina Faso, US Embassy Ouagadougou, and the USAID Regional Office in Dakar.

Supervisory Relationship

The incumbent will supervise one (1) Cooperating Country National Personal Service Contractor (CCNPSC) Project Management Specialist (Malaria), Grade FSN-11.

Supervisory Controls

The PMI Advisor will be supervised on a day-to-day basis by the USPSC Health Officer located in USAID/Burkina Faso.

Security and Medical Clearance Requirements

The applicant selected to fill this position must be able to obtain a Security Clearance, which involves a comprehensive background investigation performed by a U.S. Government Agency.

The applicant selected to fill the position must also receive a Worldwide Availability Medical Clearance (WWA/Class 1). Details of how to obtain such clearance will be provided after selection and acceptance of the job offer.

The selected applicant must obtain both the required security and medical clearances within a reasonable period of time (USAID will provide details regarding these clearances to the selected applicant).

A substantial delay in obtaining either required clearance will make the applicant ineligible for selection.
Compensation

This position has been classified at GS-14 grade.

For USPSC, the actual salary of the successful applicant will be negotiated within that pay band depending on qualifications and previous earning history.

For TCNPSC, the actual salary of the successful applicant will be negotiated based on approved Alternate Classification Procedures and benefits in accordance with AIDAR Appendix J, sec. 4(c)(2)(ii)(B)).

10. AREA OF CONSIDERATION: OPEN TO U.S. CITIZENS AND THIRD COUNTRY NATIONALS

U.S. Citizens and Third Country Nationals (TCN). Per ADS 309.3.1.11(c), if the Contracting Officer (CO) issued a combined solicitation that was open to multiple eligible sources (i.e. U.S. Citizens and TCNs), the Technical Evaluation Committee (TEC) must not evaluate U.S. Citizens and TCN offers together. In order to comply with the order of preference in section 309.3.1.4, the CO must provide the TEC only those offers received from the preferred type first. After the evaluation of U.S. Citizens offers, if the CO, as the Source Selection Authority, determines that there are no qualified U.S. Citizens for the position, the CO may then provide the TCN offers to the TEC for evaluation.

For USPSC:
• Be a U.S. Citizen;
• Submit a complete application as outlined in the solicitation section titled APPLYING (Section IV);
• Be able to obtain a Secret Clearance;
• Be able to obtain a Department of State issued Medical Clearance;
• Be willing/able to travel to work sites and other offices as/when requested;
• Employment is subject to funds availability and all required approvals/clearances obtained.

For TCNPSC:
• Be a Third Country National. Third Country National means an individual: (1) Who is neither a citizen nor a permanent legal resident of the United States nor of the country to which assigned for duty (Burkina Faso); and (2) Who is eligible for return to his/her home country or country of recruitment at U.S. Government expenses;
• Submit a complete application as outlined in the section titled APPLYING (Section IV);
• Be able to obtain a required Employment Authorization;
• Be able to obtain a Department of State issued Medical Clearance;
• Be willing/able to travel to work sites and other offices as/when requested;
• Employment is subject to funds availability and all required approvals/clearances obtained.

If a TCNPSC is selected for award, during the period of this contract, the TCNPSC contractor will be required to train a CCNPSC identified by USAID in his/her recognized Technical Area of Expertise. The Supervisor will establish a structured training plan for the TCNPSC with a work objective and performance benchmarks to measure the contractor's progress toward achieving this required training deliverable.

11. PHYSICAL DEMANDS: The work requested does not involve undue physical demands.

12. POINT OF CONTACT FOR QUESTIONS: Address questions to the following mailbox:
usaiddakar-hr@usaid.gov  Ensure that the Subject Line Has the Solicitation Number and Position Title you are applying for.

13. INSTRUCTIONS ON HOW AND WHERE TO SUBMIT COMPLETED APPLICATIONS: Refer to Section IV of the Solicitation.

II. MINIMUM QUALIFICATIONS REQUIRED FOR THIS POSITION

Education:
Advanced degree in public health, medicine, behavioral science, international health or health science.

Prior Work Experience:
Minimum of ten (10) years’ of progressively responsible experience in designing, implementing, and managing communicable disease or maternal and child health programs or malaria and/or parasitic diseases and other health programs in developing countries. Experience in resource management (staff and budget) and program management is required.

Knowledge:
Proven knowledge and experience with international, bilateral donor program management. Demonstrated through relevant experience and training:

(a) Proven knowledge of main malaria technical areas, behavior change communication, prevention and control, elimination, drug management.
(b) Proven knowledge of malaria control and elimination strategies and operational program design, implementation, and evaluation.
(c) Overall understanding of social, economic and cultural determinants and implications of the epidemic in Burkina Faso and/or its neighboring countries.

Other skills and Abilities:
The successful applicant is also required to have strong technical skills in such areas as program planning, design and development, and oversight of health management systems such as laboratory, information, human resource management, procurement, monitoring and evaluation. Demonstrated technical leadership, program management, strategic planning on issues related to malaria and/or health systems strengthening through publications, conference presentations, policy experience and problem solving skills working in complex projects in a highly sensitive environment is required.

Language:
Demonstrated proficiency/ fluency in oral and written English (Level 4), as well as French (Level 3), are required.

III. SELECTION AND EVALUATION FACTORS

Selection Process
After the closing date for receipt of application, a Selection Committee will convene to review applications that meet the minimum requirements and evaluate them in accordance with the evaluation criteria. Incomplete applications from applicants who do not meet the minimum requirements will not be scored. As part of the
selection process, only shortlisted applicants will be invited to participate in an oral interview. Required reference checks will be conducted only for shortlisted applicants who meet the specified requirements. The applicant's references must be able to provide substantive information about his/her performance and abilities.

**Evaluation Factors**

**Work Experience – 40 points**
The USAID/PMI Resident Advisor is required to have at least ten (10) years of progressively responsible experience in designing, implementing and managing child survival and maternal health activities including malaria and other health programs in developing countries.

Demonstrated technical leadership, program management, strategic planning, policy experience and problem solving skills, working on complex projects in a highly sensitive environment are required.

The applicant should have expertise in at least three (3) of the following malaria skill sets: Malaria program management, malaria microscopy or malaria rapid diagnostic kits.

**Knowledge Skills and Abilities – 35 points**

(a) Analytical ability to interpret public policies on malaria and assist in the development of revised policies.

(b) Management and administrative skills are required to develop and implement effective malaria prevention and treatment program activities involving financial and human resources. Administrative skills are required to assist in the oversight of cooperating agency technical advisors and institutional contractors.

(c) Skill in conceptualizing programs, policies, and plans and developing strategies for their management and implementation. The applicant must be able to integrate short and long range objectives of the USAID Health Team and the PMI with the cultural/organizational needs of the government.

(d) Knowledge and skills in quantitative and qualitative evaluation methods; experience in designing and evaluating activities. The USAID/PMI RA must have proven skills in capacity building and mentoring local staff in a developing country.

(e) Demonstrable skills are required in working effectively with health personnel of diverse cultural backgrounds, negotiating agreements on matters of program strategy and performance, writing, administration, and management. Ability to navigate and manage politically sensitive issues related to malaria control/infectious diseases.

**Language, Communication, and Computer Skills – 10 points**
The USAID/PMI RA must have the following (these sub-factors are of equal weight and importance):

(a) Excellent verbal and written communication skills (English - Level 4 and French - Level 3), tact and diplomacy are required to establish and develop sustainable working relationships at the highest level and a high level of trust with public/private organizations. Verbal communication skills are also used to negotiate activity plans and resolve activity implementation issues with counterparts, partners and team members. Ability to communicate technical information to health and non-health audiences is required. Excellent written communication skills are required to prepare regular and ad hoc reports, activity documentation and briefing papers.

(b) Excellent computer skills. An applicant will not be considered if s/he does not meet the minimum requirements: (i) Fully functional in Windows, MS Outlook, word processing, and spreadsheet software is required; (ii) Fully functional in using the Internet to solve problems and research
information, such as USG and USAID regulatory guidance, best practices and latest trends relating to malaria and public health is required.

**Teamwork and Interpersonal Skills – 15 points**

Excellent leadership, communications and interpersonal skills are critical to this position. The USAID PMI Resident Advisor is required to have the following:

(a) Ability to work effectively with a broad range of USG personnel and partners, and have demonstrated skills in donor coordination and collaboration. Ability to work both independently and in a team environment to achieve consensus on policy, program and administrative matters.

(b) Ability to work effectively under pressure and in a team environment and communicate highly technical information to various audiences, and achieve consensus on policy, project, research, and administrative matters.

(c) Willingness to work on USAID/Burkina Faso health team program activities outside of the malaria portfolio. This may include taking on management responsibilities for, but not limited to: neglected tropical disease, HIV/AIDS, nutrition, family planning, global health security agenda, and maternal and child health programs.

**Evaluation Summary**

Work Experience: 40 points  
Knowledge Skills and Abilities: 35 points  
Language, Communication, and Computer Skills: 10 points  
Teamwork and Interpersonal Skills: 15 points  
**Total Possible Points: 100 points**

In order to be considered for the position, applicants must meet the Minimum Qualifications listed above. Consideration and selection will be done by the Selection Committee based on the Evaluation Factors.

Please note that only shortlisted applicants will be contacted to participate in the oral interview process.

**PAST PERFORMANCE/PROFESSIONAL REFERENCE CHECKS**

Applicants are required to provide no less than five (5) references with an accurate email address. The references will be asked to provide a general assessment of the applicant’s suitability for the position. It is the responsibility of the applicant to ensure submitted references are available to provide a written reference in a timely manner.

In addition to comments from references, the Selection Committee will take into account awards or other evidence of outstanding performance in any areas related to the above selection criteria. USAID/Senegal reserves the right to obtain from previous employers relevant information concerning the applicant’s past performance and may consider such information in its evaluation.

**IV. APPLYING**

To ensure consideration of applications for the intended position, Applications must be received by the closing date and time specified in Section I, item 3 and submitted electronically to: usaid dakar-hr@usaid.gov with the Solicitation Number and Position Title in the application submission Subject Line.
Qualified applicants are required to submit a complete application packet including:

1. A Signed and Dated Cover Letter with current résumé/curriculum vitae (CV) attached. The CV/résumé must contain sufficient relevant information to evaluate the application in accordance with the stated evaluation criteria. Broad general statements that are vague or lacking specificity will not be considered as effectively addressing particular selection criteria.

2. Applicants are required to provide the names and contact information of no less than five (5) references who are not family members or relatives. References should include current or former Supervisors who can provide information regarding applicant job knowledge and professional work experience. Applicants must provide accurate e-mail addresses for all references.

3. Information for the required Personal Services Contracts Form AID 309-2 can be found at http://www.usaid.gov/forms/. Applicants should note that the salary history for the purposes of the AID 309-2 is the base salary paid, excluding benefits and allowances such as housing, travel, etc. Applicants are required to complete and sign the form.

To ensure consideration of applications for the position, applicants must prominently reference the Solicitation Number in the Application Submission and Cover Letter.

ALL DOCUMENTS MUST BE SUBMITTED IN ENGLISH.

NOTE: This position requires the submission of complete forms and/or supplemental materials as described above. Failure to provide the required information and/signed documents will result in the applicant not being considered for employment. Applicants are required to sign and date both the Cover Letter and a completed USAID Form, AID 309-2.

Please note that incomplete and/or unsigned applications will not be considered.

V. LIST OF REQUIRED FORMS FOR PSC HIRES

Once the Contracting Officer (CO) informs the successful applicant about being selected for a contract award, the CO will provide the successful applicant instructions about how to complete and submit the following forms:

Forms outlined below can be found at: http://www.usaid.gov/forms

1. Medical History and Examination form (DS-6561)
2. Questionnaire for Sensitive Positions (for National Security) (SF-86), or Questionnaire for Non-Sensitive Positions (SF-85)
3. Finger Print Card (FD-258)

VI. BENEFITS/ALLOWANCES*

(a) Temporary Quarter Subsistence Allowance (Section 120)
(b) Living Quarters Allowance (Section 130)
(c) Cost-of-Living Allowance (Chapter 210)
(d) Post Allowance (Section 220)
(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 Allowance (Section 650)

*Eligibilities for allowances are in accordance with Standardized Regulations (Government Civilians Foreign Areas) based on the type of appointment and Mission Policy.

VII. TAXES

USPSCs are required to pay Federal income taxes, Medicare and applicable State Income taxes.

VIII. USAID REGULATIONS, POLICIES AND CONTRACT CLAUSES PERTAINING TO PSCs

USAID regulations and policies governing USPSC and TCNPS awards are available at these sources:


13. Ethical Conduct. By the acceptance of a USAID personal services contract as an individual, the contractor will be acknowledging receipt of the “Standards of Ethical Conduct for Employees of the Executive Branch,” available from the U.S. Office of Government Ethics, in accordance with General Provision 2 and 5 CFR 2635. See https://www.oge.gov/web/oge.nsf/OGE%20Regulations.

EQUAL EMPLOYMENT OPPORTUNITY POLICY

The United States Government does not discriminate in employment on the basis of race, color, religion, sex (including pregnancy and gender identity), national origin, political affiliation, sexual orientation, marital status, disability, genetic information, age, membership in an employee organization, retaliation, parental status, military service, or other non-merit factor.

END OF SOLICITATION