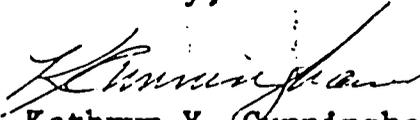




Please sign the original and eight (8) copies of this grant letter to acknowledge your acceptance, and return the original and seven (7) copies to the Office of Contract Management.

Sincerely,



Kathryn Y. Cunningham  
Grant Officer  
Central Operations Division  
Office of Contract Management

Attachments:

1. Schedule
2. Standard Provisions

Accepted:

By: Walter W. Sullister  
Title: Vice President  
Date: October 10, 1985

FISCAL DATA

PIO/T.:	936-5057.11-5361619
Appropriation No.:	72-1151021.8
Allotment No.:	548-36-099-00-20-51
Budget Plan Code:	DDAA-85-13600-CG11
Project No.:	936-5057.11
Total Obligated Amount:	\$130,000
Total Estimated Cost:	\$1,530,000
Cognizant Technical Office:	S&T/RUR
Project Manager:	D. Hansen
DUNS Number:	10-200-5451
Employer Identification No.:	158-1438873 A1

## ATTACHMENT 1

### SCHEDULE

#### A. Purpose of Grant

The purpose of this Program Support Grant is to marshall human and institutional resources in order to train technical personnel and administrators, and to develop and strengthen the Grantee as a self-sustaining institution supporting disease prevention and health promotion in developing countries.

#### B. Period of Grant

This grant is effective as of the date of the grant letter, and will remain in effect for a period of five years. In order to maintain a five year forward planning term, this grant will be extended for one year if mutually agreed by the parties at the time of each annual review and forward planning exercise described in Article III of the Memorandum of Understanding, or as may otherwise be agreed during any special reviews and evaluations discussed under Article IV of said Memorandum.

It is agreed that the reviews and planning exercises discussed in the above mentioned Articles III and IV of the MOU will encompass this Grant.

#### C. Amount of Grant and Payment

1. There is obligated hereunder the amount of \$130,000 for grantee expenditure during the term of this grant consistent with paragraph two next below. Based upon the availability of funds and mutual agreement of the parties hereto, additional annual funding may be provided in amounts not to exceed 10 percent of the School's annual average of A.I.D. business for the immediately preceding three years, to a maximum funding of \$350,000.

2. To provide necessary latitude in programming, unexpended funds obligated hereunder can remain available in an amount not to exceed the average of amounts that were provided under this grant over the immediately preceding three years.

3. Payment shall be made to the grantee in accordance with the procedures set forth in Attachment 3, entitled "Standard Provisions", in the specific provision entitled "Payment - Periodic Advances".

D. Financial Plan

The following is the Financial Plan for year one of this Grant. Revisions to this Plan shall be made in accordance with the Standard Provision of this grant entitled "Revision of Financial Plans."

Salaries	\$ 52,184
Fringe Benefits	9,916
Travel/Transportation	29,350
Other Direct Costs	20,000
Materials/Supplies	12,550
Training	6,000
TOTAL	\$130,000

E. Reports

The Grantee shall prepare annual reports and submit two copies each to the Grant Officer and AID's Office for Research and University Relations of the Bureau for Science and Technology (S&T/RUR). Such reports shall be submitted six months prior to the end of the obligation funding period set forth in the covering letter hereto, and shall include the following:

- (a) A substantive report describing the nature of the activities performed under the grant indicating their relationship to the objective of the grant.
- (b) An administrative report covering expenditures by types of activity, breaking down such expenditures by Federal and non-Federal funds.
- (c) A work plan which sets forth anticipated activities for the ensuing period.

The Grantee's Report will be evaluated and further funding decisions will be made at the time of the MOU annual review, on the basis of progress in meeting the objective of the grant in the context of the Joint Memorandum of Understanding and in the context of supplemental documentation submitted by the Grantee in support of the grant.

A final report shall be submitted within 60 days after the completion of all efforts hereunder, summarizing the activities performed under this grant and accomplishments in meeting the grant objective.

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**F. Special Provisions**

A. The following Standard Provisions are deleted: 5A, 5B, 7A, 7C, 9, 10B, 12, 13B, 13C, 16, 17, 18, 20, and 28. Note: Provisions 16, 17, and 18 are replaced under Section G below.

B. It is understood that any purchased goods and services with source, origin or nationality other than the U.S. or the cooperating country (i.e., Local Cost Financing per Standard Provision No. 11) will be subject to Standard Provision No. 10A.

**G. Standard Provisions and Alterations**

A. The Standard Provisions applicable to this grant are set forth in AID Form No. 1420-51 (2-82), appended hereto as Attachment No. 2, and are modified as set forth in Attachment No. 2A, entitled "Alterations in Grants - November 1984 Attachment to AID Forms 1420-51, and -52."

B. Standard Provisions 16, 17, and 18 are replaced by Attachment 2B entitled "Voluntary Population Planning (July 1985)".

JOINT MEMORANDUM OF UNDERSTANDING  
BETWEEN THE  
AGENCY FOR INTERNATIONAL DEVELOPMENT  
AND  
MOREHOUSE SCHOOL OF MEDICINE  
AND  
TULANE SCHOOL OF PUBLIC HEALTH AND TROPICAL MEDICINE

Pursuant to the authority contained in The Foreign Assistance Act of 1961, as amended, including section 104 (c), entitled "Assistance for Health and Disease Prevention," The Agency for International Development (AID) and The Morehouse School of Medicine and The Tulane School of Public Health and Tropical Medicine (hereafter described as the University(ies) or, specifically, as Morehouse and Tulane), hereby enter into This Joint Memorandum of Understanding (JMOU) relating to health and disease prevention ("health").

ARTICLE I - PURPOSE

As authorized in the above mentioned legislation, AID developed health, population and nutrition policies and strategies to guide program development and implementation. These policies and strategies include, but are not limited to, health promotion and disease prevention activities, like immunization, child spacing, oral rehydration therapy, breast-feeding and other modalities included in primary health care. To assist in the support of these strategies, it is AID's intention to marshal the human and institutional resources of eligible Universities (including their medical schools), in a more effective cooperative relationship with AID, in order to train technical personnel and administrators and to develop and strengthen self-sustaining institutions supporting disease prevention and health promotion in developing countries. The major objective of this cooperative relationship is the improvement of primary health care and child survival programs, in their broadest context -- to be realized by the provision of long-term support through assessment and the application of appropriate biomedical technology, research and training for solving health and disease problems in developing countries. This will be accomplished by improving U.S. University involvement in AID's effort to meet its program goals in health promotion and disease prevention; and by strengthening the

capabilities of individual Universities in programs related to international health development.

The commitment of eligible Universities of the U.S. to participate in AID's primary health care and child survival programs is recognized as vital in providing sustained support for helping the developing countries to solve their health and population problems. At the same time, the commitment of AID to a long term relationship with Universities also is recognized as essential if Universities are to achieve their full potential in assisting AID to accomplish its mission. Further, it is a specific AID objective to expand the capability, resources and experiences of historically Black colleges and Universities in international health, so as to increase the involvement and participation of historically Black Universities in the Agency's programs.

This JMOU in health establishes the initial framework for a collaborative relationship and understanding between AID and the two Universities, and provides broad guidelines for the joint planning and implementation of programs in health promotion, child survival, and related areas. This JMOU is also intended to facilitate the further development of an efficient and effective long term cooperative relationship and working relationship between the two Universities and AID in the conduct of mutually agreed upon components of the AID child survival programs. In furtherance of this purpose, it provides for joint development of a forward planning mechanism which discusses potential levels and kinds of services for long term participation by the two Universities in AID programs.

The JMOU in health sets forth actions to be taken by AID and by the two Universities which constitute a quid pro quo that will facilitate continuity of involvement by the two Universities in a longer term setting, and will assure AID of more qualified, responsive, and effective resources with greater capacity to support AID's health programs on a sustained basis.

In summary, the JMOUs in health with U.S. medical schools and schools of public health are designed to pair medical schools of historically Black Universities with schools of public health in other major Universities that have substantial current involvement with AID health programs. The JMOU program has two major objectives: (1) to increase the capacity of the Universities engaged in the JMOU's in health to provide quality technical assistance for the Agency's overseas health development assistance programs, and (2) to increase the involvement and participation of historically Black institutions in the Agency's program.

Under this program, the non-Black medical school (partner) selected should be engaged in a substantial volume of AID

health business. Without a proven track record, the cooperative relationship is less likely to be able to facilitate greater involvement by the historically Black university (partner) in AID's technical assistance activities. The cooperating Universities will be expected to work with one another in joint strengthening activities, and jointly to bid on, apply for, and implement health related technical assistance projects and other AID-funded activities.

With respect to joint strengthening activities, the cooperating Universities are expected to collaborate in whatever preparatory or other exercises, program and resource development activities are deemed necessary to strengthen the cooperative relationship. This resource development activity includes, but is not limited to the following: (1) exchange of faculty, (2) language training, (3) seminars/symposia, (4) library development, (5) cross-cultural orientation, (6) pre-departure training programs and (7) administrative/fiscal management training and systems development.

This JMOU provides a basis for the two Universities to utilize their complementary strengths in jointly responding to the needs of developing countries in the areas of health promotion and disease prevention, emphasizing primary care.

#### ARTICLE II - THE TWO UNIVERSITIES

- A. The two Universities have (or will have within the first year of the JMOU) adopted and implemented policies and procedures which encourage faculty and staff involvement in international programs, and which demonstrate the commitment of their administrators to institutional involvement in such programs. Failure to have these policies and procedures in place by the end of Year 01 may result in termination of the agreement. Statements of these policies and procedures, when mutually agreed upon, shall be incorporated as Attachments A-1 and A-2 to this JMOU.
- B. The two Universities agree to work together to strengthen each other's individual capability and their joint capability to participate in AID's primary care and child survival activities in developing countries.

#### ARTICLE III - DURATION, REVIEW, FORWARD PLANNING AND EXTENSION

- A. This JMOU in health is effective on the date of the last signature hereto and will remain in effect for five (5) years. It is anticipated that this JMOU may be extended for an additional five (5) year period depending upon the outcome of evaluations, assessments and the mutual agreement of all parties concerned.

Formal review and forward planning exercises will be conducted annually by AID, before the fourth quarter of AID's fiscal year, on each University's activities separately and on the two Universities' activities jointly. These exercises will cover all activities conducted under the JMOU, including a review of ongoing implementation of policies and procedures under Articles II and V hereof.

Forward planning will include identification of opportunities in AID's primary care and child survival activity, programs of work of individual faculty, and research and training in order for the two Universities to develop independently and jointly the levels and kinds of capabilities required in AID programs. As part of this review, the two Universities will prepare and submit to AID (S&T/RUR) a plan which shows clearly their areas of complementarity/supplementarity, and how they have and intend to work together to help meet AID's needs in health promotion and disease prevention in developing countries with AID programs. The parties may also mutually agree to extension, modification, amendment, or termination of the JMOU.

- B. At least once each year, in preparation for the Annual Review and Forward Planning Exercise, the responsible officers in each of the two Universities engaged in this JMOU will arrange a review and planning session for their own University, to include appropriate faculty and staff engaged in these international health activities.

#### ARTICLE IV - EVALUATION

In addition to the review described under Article III, AID, or either of the two Universities, may request special reviews and evaluations of the implementation of this JMOU in health at any time. The results of such reviews shall be reported in writing to AID and to both Universities.

#### ARTICLE V - COLLABORATION WITH OTHER INSTITUTIONS

The parties recognize that other institutions within the community of U.S. Universities, particularly small universities, have significant talent and expertise in specific areas, relevant to international development programs. It is agreed that maximum advantage should be taken of these resources in the design and implementation of AID and other projects, and that AID and the two Universities should encourage the participation of and collaborative relationships with such other institutions in the conduct of the primary health care and child survival programs.

## ARTICLE VI - INSTITUTIONAL PARTICIPATION

The two Universities agree to use their best efforts to provide personnel from their regular or long-term faculty and staff for long-term participation in health promotion and disease prevention in cooperating countries, with a geographic emphasis on Africa and the Caribbean Basin and second language emphasis on French and Spanish.

The Universities will use their best efforts to concentrate on projects that involve strengthening human resources and institutional capacities, with special emphasis on the science and technology of primary care and child survival, and to focus insofar as possible on institution building projects that involve the integration of primary care systems in development, research and training. The two Universities further propose to focus on areas listed below and to use their special comparative strengths in interdisciplinary approaches, systems approaches, and human resource development, including the role of women and the family in health development, in their project activity.

### A. Subject Matter Concentration

By Tulane and Morehouse jointly

1. Participant Training
2. Primary Health Care
3. Planning, Management and Evaluation
4. Diarrheal Diseases and Oral Rehydration Therapy
5. Education of Health Personnel in Africa

Within this framework of collaborating in all aspects of their efforts, the individual schools will concentrate on specific subject matter areas as follows:

By the Tulane School of Public Health and Tropical Medicine

1. Health and Management Information Systems
2. Maternal/Child Health (Primary Health Care)
3. Tropical Medicine
4. Epidemiology (Planning, Evaluation and Methodology)
5. Nutrition Intervention
6. Health Education

By the Morehouse School of Medicine

1. Maternal/Child Health (Primary Health Care)
2. Women in Health

- B. Beginning in Year 02 and for the duration of this JMOU, the participating Universities agree to use their best efforts

to provide the following numbers of full-time equivalents (FTE's) by their own permanent employees of assistance to AID/funded projects. Detailed identifications, including numbers and division in numbers between the Universities, etc., will be reviewed and revised, as appropriate, by the two Universities and AID, during the first Annual Review and Forward Planning Exercise on or before the beginning of Year 02 of the program.

FULL-TIME EQUIVALENTS (FTE's)

<u>FISCAL YEAR</u>	<u>TULANE</u>	<u>MOREHOUSE</u>	<u>TOTAL</u>
Year 02	2	1	3
Year 03	3	2	5
Year 04	3	2	5
Year 05	4	3	7

ARTICLE VII - SUSTAINED AID SUPPORT

AID is committed for the term of this Memorandum to sustain the level of cooperative involvement indicated in Article VI above. It is anticipated that AID's support of this involvement may include the following:

- A. Alternative Program and Project Opportunities  
AID agrees, subject to the availability of funds, the mutual agreement of the parties, and procurement regulations, to provide the two Universities with program and project opportunities so that they can sustain employment at the specified levels.
- B. Program Support Grant  
The Program Support Grant discussed next under Article VIII-B may be used, as an alternative to A above, to sustain, for interim periods, the employment levels specified in Article VI.
- C. Other Alternatives  
If, during any such interim period, the Universities together, under their various contract and grant agreements with AID, have not provided to AID the specified levels of their personnel for work abroad in health programs, AID will advise them of other opportunities. These opportunities may include the placement of staff members into activities funded by AID under contracts, grants or cooperative agreements with other entities; temporary assignments of an institution's permanent employees

to AID missions or regional or central bureaus in accordance with the applicable provisions of the Joint Career Corps (JCC), or other Inter-Governmental Personnel Act (IPA) arrangements, as implemented by AID.

## ARTICLE VIII - AGREEMENTS AND FUNDING

### A. Contracts and Grants

It is understood that funding for the Universities' levels of cooperative involvement described in Article VI which is realized through contracts, grants and cooperative or other agreements, will be dependent upon such agreements being awarded in accordance with applicable acquisition (i.e., contracting) and assistance (i.e., grant and cooperative agreement) procedures, appropriate to the circumstances of the activity authorized.

### B. Program Support Grants (PSG)

1. Program Support Grants, entered into separately with each of the two institutions, will be utilized to permit the Universities to conduct activities directed toward sustaining and upgrading their health performance capabilities, fulfilling the objectives of their health-directed efforts, and enhancing their ability to jointly respond to the needs of primary, health care and child survival assistance programs in developing countries.
2. Subject to the availability of funds and the mutual agreement of the parties, outline of PSG arrangements will be as follows:
  - a. During the first year of the activity supported by this JMOU, each PSG will be divided into two allocations. The first and larger will support the overall development and expansion of program resources in each institution, to assist in the development of the necessary long-term professional capability to individually support AID's programs related to health in development. This allocation will hereafter be referred to as the basic or "floor" allocation. The second allocation, hereafter referred to as the "linkage" allocation will be provided to encourage, assist and support collaboration and articulation of program activity between the paired institutions. Each PSG, therefore, will support the current and future involvement of each institution in AID's international programs. It will also provide the necessary assistance to both, to develop collaborative programs/projects which assure cooperation in mutually agreed upon areas.

- b. The basic or "floor" allocation for Morehouse will remain constant throughout the life of the JMOU. Beginning with Year 02 of this JMOU, however, and thereafter, an amendment to the JMOU will shift the funding criteria for Tulane from the Year 01 basic or "floor" allocation to an allocation based on a formula to be determined by AID. This formula will relate to annual full-time equivalent overseas staff assignments and the amount of AID business entered into annually by each institution. Beginning with Year 02, Morehouse will also become eligible to increase its basic or "floor" allocation, using the same funding formula mentioned above.
- c. During Year 01, the amount of the PSG for each institution will be \$100,000 for the "floor" allocation, plus \$30,000 to each participating institution for the "linkage" allocation.
- d. Activities funded by the PSG will follow the outline of Annual Work Plans, the first of which is to be submitted and approved as part of the PSG application process, but not incorporated in the grant document.
- e. While each of the two institutions shall have maximum responsibility and flexibility in managing their individual PSG; the PSG will be used only for the support of the Universities' participation in AID's health programs. The Annual Work Plan will be used in evaluating progress. It will be structured in accordance with guidelines provided by AID to the institutions.
- f. The PSG will indicate that AID's funds will be used for the following activities of the two institutions:
- (i) To provide direct support to their current and immediately foreseeable contract activities in order to enhance contract or grant performance.
  - (ii) To otherwise mobilize their professional and institutional resources, prepare their staff, focus relevant aspects of their research and educational programs on developing countries' problems and otherwise increase and maintain their capacity to participate in primary care and child survival and related activities in developing countries, focusing on the subject matter areas described

in Article VI. It is expected that all of these activities will be in direct support of the two Universities' participation in AID projects.

(iii) Expenditures under the above categories are not meant to replace items normally included in grants and contracts.

C. Matching Requirements

Tulane will be required to match the Support Grant dollar-for-dollar using non-federal funds. At the same time, Morehouse will be required to match the Support Grant on a dollar for every two dollars of grant funds basis, using non-federal funds, beginning with the obligation for year two.

D. Other

AID and the two Universities will explore other ways and means of accessing technical services from the two Universities, including cost reimbursable contracts, for AID health programs.

MOREHOUSE SCHOOL OF MEDICINE

TULANE SCHOOL OF PUBLIC HEALTH

BY: Miss M. Sullivan, M.D.

AND TROPICAL MEDICINE  
BY: James E. Banta

DATE: 2 OCT 1985

DATE 30 SEP 1985

UNITED STATES OF AMERICA  
Agency for International Development

BY: J. M. Peter Hoffmann

DATE: JAN 6 1986

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