



# Foreign, Commonwealth & Development Office

## CALL DOWN CONTRACT

Framework Agreement with:	FHI 360 UK
Framework Agreement for:	Global Development Delivery Framework (GDD) Lot 2 – Health and Humanitarian
Framework Agreement ECM Number:	ecm 5783
Call Down Contract For:	ITT 6529 – ASEAN-UK Health Security Partnership (HSP) Grant Facility and HSP Peer Exchange Platform
Contract ECM Number:	ecm 7207

I refer to the following:

1. The above-mentioned Framework Agreement dated 18<sup>th</sup> December 2023
2. Your proposal of 25<sup>th</sup> September 2024

and I confirm that FCDO requires you to provide the Services (Annex A, Terms of Reference), under the Terms and Conditions of the Framework Agreement which shall apply to this Call Down Contract as if expressly incorporated herein.

### 1. Commencement and Duration of the Services

- 1.1 The Supplier shall start the Services no later than 1<sup>st</sup> February 2025 (“the Start Date”) and the Services shall be completed by 31<sup>st</sup> March 2029 (“the End Date”) unless the Call Down Contract is terminated earlier in accordance with the Terms and Conditions of the Framework Agreement.

### 2. Recipient

- 2.1 FCDO requires the Supplier to provide the Services to the FCDO (the “Recipient”).

### 3. Financial Limit

- 3.1 Payments under this Call Down Contract shall not, exceed £20,250,000 (“the Financial Limit”) and is **exclusive of UK VAT but inclusive of all applicable local taxes**, if applicable as detailed in Annex B.  
FCDO may, at its discretion, consider the option for a cost and time extension to the contract of up to an additional 36 months and up to an additional £20 million (of FCDO or other donor funding), based on need and subject to the extension of the FCDO business case and a contract amendment. FCDO and the Supplier can agree to extend the programme at any time during the contract.

March 2024



# Foreign, Commonwealth & Development Office

## 4. FCDO Officials

### 4.1 The Project Officers are:

[REDACTED]  
[REDACTED]  
[REDACTED]

### 4.2 The Contract Officer is:

[REDACTED]

## 5. Key Personnel

### 5.1 The following of the Supplier's Personnel cannot be substituted by the Supplier without FCDO's prior written consent:

Personnel	Job Title	Organisation
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]

## 6. Reports

### 6.1 The Supplier shall submit project reports in accordance with the Terms of Reference at Contract Management Reporting and Validation, paragraph 9 and Quarterly Report Template, Annex 2.



## Foreign, Commonwealth & Development Office

### 7. Call Down Contract Signature

- 7.1 If the original Form of Call Down Contract is not returned to the Contract Officer (as identified at clause 4 above) duly completed, signed and dated on behalf of the Supplier within **5 working days** of the date of signature on behalf of FCDO, FCDO will be entitled, at its sole discretion, to declare this Call Down Contract void.

No payment will be made to the Supplier under this Call Down Contract until a copy of the Call Down Contract, signed on behalf of the Supplier, returned to the FCDO Contract Officer.

Signed by an authorised signatory  
for and on behalf of Secretary of State for Foreign,  
Commonwealth and Development Office

Name:

\_\_\_\_\_

Position:

\_\_\_\_\_

Signature:

Date:

Signed by an authorised signatory  
for and on behalf of the Supplier

Name:

\_\_\_\_\_

Position:

\_\_\_\_\_

Signature:

Date:

## Annex A

### Terms of Reference

#### **ASEAN-UK Health Security Partnership Programme (HSP) Grant Facility and HSP Peer Exchange Platform**

#### **Key Programme Information**

##### **1. Introduction**

- 1.1. The UK became an ASEAN Dialogue Partner (DP) in August 2021 and agreed an [ASEAN-UK Plan of Action \(PoA\)](#) in August 2022, which sets out priority areas for ASEAN-UK cooperation over the next five years, including global and regional public health. The Plan of Action (PoA) reflects shared ASEAN and UK priorities and is consistent with the UK International Development Strategy and the Integrated Review Refresh.
- 1.2. The ASEAN-UK Health Security Partnership (HSP) is a five-year programme that will improve capacity for the prevention, detection, and response to health threats in ASEAN and its 10 Member States plus Timor-Leste, contributing to improved regional and global health security.
- 1.3. The programme will build cooperation between UK and ASEAN public health actors and directly contribute to delivery of the ASEAN-UK POA, including the following objectives:
  - a) To promote coordination and collaboration in sectors involved in One Health
  - b) To sustain and consolidate partnerships to prevent, detect and respond to global health security threats, such as Antimicrobial Resistance and future epidemics.
  - c) To 'strengthen health systems and access to care'.
- 1.4. The HSP programme will support activities that are aligned with relevant national and regional strategies e.g., [ASEAN-UK Plan of Action](#), [ASEAN Strategic Framework for Public Health Emergencies](#), ASEAN One Health Joint Plan of Action and [ASEAN Post-2015 Health Development Agenda \(APHDA\)](#) and the [Asia Pacific Health Security Action Framework](#).
- 1.5. The programme will directly support the implementation of ASEAN Health Cluster priorities, with emphasis on clusters 2 (Responding to All Hazards and Emerging Threats) and 3 (Strengthening Health System and Access to Care). The HSP programme will also contribute towards implementation of the Initiative for ASEAN Integration (IAI) Workplan IV (and any successor IAI workplans).

##### **2. Objectives**

- 2.1. The ASEAN-UK Health Security Partnership Programme (HSP) is expected to help reduce the health, social and economic impacts of health emergencies in ASEAN. HSP programme interventions will contribute to three priority outcomes in the ASEAN region:
  - Strengthened preparedness and response to health emergencies.
  - Improved health system resilience and equitable access to care.
  - Better understanding and improved action to address the health impacts of climate change.

2.2. The ASEAN-UK Health Security Partnership programme is also expected to support:

- The mobilisation of a One Health approach
- The strengthening of health systems, recognising the centrality of health systems to delivering both Universal Health Coverage and enhanced Health Security.
- The advancement of health equity in the region, including through implementation of the [Initiative for ASEAN Integration \(IAI\)](#)
- A demand-led and adaptive approach that supports implementation of ASEAN's health priorities through a competitive grant making modality.

### 3. Timing and Budget

3.1. The HSP programme is expected to commence in February 2025 and should be completed by March 2029. The contract will be delivered in three phases:

- a) **Inception Phase** – 6 months. Successful completion of the Inception Phase and continuation of the contract will require the Supplier to achieve all Inception Phase deliverables, subject to acceptance by FCDO.
- b) **Implementation Phase** – from 6 months post contract signing until three months prior to end of contract
- c) **Exit Phase** – final three months of contract.

3.2. The total available budget for the HSP programme is **up to £20.25 million**. This budget is **exclusive of UK VAT** but **inclusive of all applicable local taxes**. It is the responsibility of the Supplier to establish its taxation position both in the UK and in the countries that are referred to in this ToR.

3.3. FCDO may scale up and/or down or discontinue this contract at any point in line with the Framework Terms and Conditions. Scaling down is at FCDO's discretion and may occur for various reasons, including but not limited to a change in the security and/or political circumstances of countries or a shortage of funds. FCDO may, at its discretion, consider the option for a cost and time extension to the contract of up to an additional 36 months and up to an additional £20 million (of FCDO or other donor funding), based on need and subject to the extension of the FCDO business case and a contract amendment. FCDO and the Supplier can agree to extend the programme at any time during the contract.

3.4. The indicative split of funding by financial year for components 1 and 2, Monitoring & Evaluation and Programme Management Costs is set out in the table below. FCDO will confirm and agree the available budget and ceiling in advance of each financial year. The Supplier must be flexible and build programme plans which could be scaled up or down relatively quickly should budget availability change.

Activity	ASEAN-UK Health Security Partnership Programme (HSP)					Sub-Total
	(2024/25)	(2025/26)	(2026/27)	(2027/28)	(2028/29)	
Component 1: HSP Grant Facility	£ 425,000	£ 3,925,000	£ 5,000,000	£ 3,500,000	£ 1,000,000	£ 13.85m
Component 2: HSP Peer Exchange Platform		£ 250,000	£ 400,000	£ 250,000	£ 100,000	£ 1m
Monitoring & Evaluation (ringfenced)	Profile tbc					£ 1m
Programme Management Costs	Profile tbc					Up to £ 4.4m
Total						£20.25m



#### 4. Scope

4.1. The ASEAN-UK Health Security Partnership Programme will be delivered through three components:

- **Component 1: HSP grants facility** funding catalytic<sup>1</sup> medium-long term projects that support implementation of relevant national and regional policies and action plans to strengthen health security and preparedness for health emergencies, contributing to HSP target outcomes. The grants facility will fund i.) competed grant awards open to relevant ASEAN Member State (AMS) institutions (e.g. National Institutes of Public Health), CSOs and academic institutes<sup>2</sup>, and ii.) non-competed grant funding at the regional level to the ASEAN secretariat and ASEAN institutions.
- **Component 2: HSP peer exchange platform** brokering and funding competed, short-medium term peer exchange partnerships between UK, ASEAN and 'global south' practitioners, researchers, policy makers and academics across One Health domains. Peer exchange partnerships are intended to support: i.) structured knowledge exchange; ii.) dissemination of best practice; iii.) technology transfer; iv.) cross-border collaboration v.) One Health collaboration. The platform will support partnerships that contribute to HSP outcomes, are aligned with relevant action plans and/or strengthen one or more of the 13 IHR core capacities<sup>3</sup> or capacity building needs identified through the Performance of Veterinary Services (PVS) pathway.
- **Component 3: A partnership with the UN Quadripartite** (FAO, WHO, WOA, UNEP) enabling their combined support to implementation of the ASEAN One Health Joint Plan of Action. This component will be managed through a separate contribution agreement and does not form part of the proposed contract.

4.2. This Terms of Reference (ToR) outlines the services required for the Supplier to co-design, implement and manage components 1 and 2, including:

- **Programme design and delivery** – leading and facilitating a participatory co-design process (involving ASEAN, FCDO) for the detailed design of components 1 and 2; implementing both components including end-to-end management of the grant cycle; implementing effective financial management and supporting the development of a grant portfolio that represents strong value for money.
- **Agile technical and programme assistance** – the provision of a small and agile core of technical assistance that incorporates (or can draw on) capabilities in One Health, programme management and stakeholder coordination. Technical assistance will principally support eligible actors in IAI countries<sup>4</sup> and Timor Leste in the development of proposals and provide support to smaller FCDO posts in those countries on demand generation, monitoring and communications.

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<sup>1</sup> FCDO intends that, where possible, grant funding should support catalytic investments that advance relevant national and policy priorities. Catalytic inputs might be expected to result in mobilisation of additional domestic or donor resource; unlock transformative change or generate new momentum in policy implementation.

<sup>2</sup> Exact eligibility criteria for grant and peer exchange award competitions will be determined by the supplier as part of programme co-design in consultation with ASEAN and FCDO.

<sup>3</sup> The 13 core capacities are: (1) National legislation, policy and financing; (2) Coordination and National Focal Point communications; (3) Surveillance; (4) Response; (5) Preparedness; (6) Risk communication; (7) Human resources; (8) Laboratory; (9) Points of entry; (10) Zoonotic events; (11) Food safety; (12) Chemical events; (13) Radionuclear emergencies.

<sup>4</sup> Cambodia, Lao PDR, Myanmar and Viet Nam

- **Governance** – Support to FCDO in implementing co-owned programme governance arrangements and stakeholder management across key relationships, including through establishing a staff presence in Jakarta to support programme coordination in liaison with FCDO and the ASEAN Secretariat.
- **Risk management & compliance** – implement effective programme risk management and compliance assurance processes for prospective grantees.
- **Monitoring and evaluation** - the design and implementation of a robust and proportionate portfolio approach to monitoring and evaluation.
- **Communications** - overarching support to programme communications (including demand generation and communicating programme outputs).

## 5. Recipients and beneficiaries

5.1. The ASEAN-UK Health Security Partnership programme will deliver outputs at a regional level (through ASEAN and its institutions) and at country level in all 10 ASEAN Member States plus Timor-Leste.

a) **HSP grants facility:** at the regional level recipients of the grants facility are expected to include organisations including the ASEAN Secretariat (ASEC); relevant ASEAN institutions (e.g., ASEAN Centre for Public Health Emergencies - ACPHEED); and at the country level, relevant governmental and academic institutes (e.g. National Institutes of Public Health, One Health Secretariats) and civil society organisations.

b) **HSP peer exchange platform:** recipients of peer exchange partnership awards will include individual/groups of policy makers, researchers and practitioners from across One Health domains working to address programme objectives at the regional or national level within ASEAN. In addition to supporting peer exchange partnerships between ASEAN stakeholders, the platform will also have the flexibility to support the participation of UK government or global south technical agencies, where there is a clear expression of demand from an ASEAN stakeholder.

5.2. All AMS are eligible recipients for UK Official Development Assistance (ODA) with the exception of Singapore and Brunei. However, to ensure the programme supports outputs across ASEAN (and leverages strengths and expertise within ASEAN) the budget will, at FCDO's discretion, include a small non-ODA allocation to enable Singapore and Brunei's participation.

5.3. **Myanmar** - will be included in the programme; however, funds will not be used to benefit the military regime. Where possible, opportunities to support non-state actors and assist the people of Myanmar will be explored, with current severe operational constraints to delivery in Myanmar being acknowledged.

5.4. **Timor Leste** - as requested by the ASEAN Secretariat, the programme will also include activity in Timor-Leste in support of their accession to ASEAN following approval in principle to join the Association.

5.5. **IAI** - this programme will have a particular focus on projects which can support the health and wellbeing strategic area in the Initiative for [ASEAN Integration \(IAI\) Workplan IV](#) to reduce the health development gap. This means taking an equitable approach in the allocation of resources to programme inputs in IAI countries.



## 6. Outputs

### 6.1. Inception Phase

<b>Inception (design) phase:</b> Lead and facilitate an iterative and participatory co-design process for components 1 and 2 with key programme stakeholders. <b>Duration:</b> 6 months.		
Output	Deliverable [Milestone deliverables are in red]	Timeline
Programme governance and coordination	Establish a HSP staff presence in Jakarta	By month 2
	Develop mechanisms for co-governance of the programme in liaison with FCDO and ASEC	
	Develop and agree the ToR for a joint programme steering committee	
	Identify clear responsibility for decision making between structures and define how the programme will implement an adaptive approach <sup>5</sup> to delivery.	
	Consider the need, composition, and ToR for a technical steering group(s) and / or grant selection panels. Making consideration of: <ul style="list-style-type: none"> <li>a) ASEAN's existing health cluster structures and whether these can be used to guide the programme and support grant selection.</li> <li>b) The inclusion of ASEAN &amp; UK/FCDO subject matter experts</li> <li>c) The importance of programme governance structures that allow for timely and effective decision making.</li> </ul>	By month 3

<sup>5</sup>The HSP programme will adopt an adaptive approach to delivery in recognition of a.) the multitude of pathways towards delivering programme outcomes, b.) the growing number of donors and initiatives supporting GHS, c.) the dynamic emergence of opportunities and risks and d.) an untested level of demand for programme support. This means the programme will include a deliberate process of testing, learning and experimentation, with regular opportunities for programme stakeholders to take stock and course correct.

<b>Programme Communication</b>	Develop a programme <b>stakeholder engagement and communication strategy</b> that leverages supplier and FCDO capabilities	By month 6
	Plan and deliver a public launch event for the HSP programme in consultation with FCDO and ASEAN.	By month 6
<b>Compliance</b>	<b>Develop and submit to FCDO a comprehensive programme risk register</b>	By month 4
	Design, prepare and implement a proportionate approach to due diligence for grantees that provides assurance of key FCDO compliance requirements.	By month 5
	Develop and implement policies, strategies, and tools to equip the programme with: <ul style="list-style-type: none"> <li>a) An integrated approach to risk management that systematically identifies, monitors, and mitigates programme risks, including through maintenance of a programme risk register.</li> <li>b) Robust systems and measures for fraud prevention and identification</li> <li>c) Measures to ensure safeguarding of vulnerable groups through the prevention of sexual exploitation and abuse and the detection and escalation of safeguarding incidents.</li> <li>d) A gender equality and social inclusion strategy (GEDSI) underpinned by relevant analysis.</li> <li>e) Robust programme financial management including regular audited statements of expenditure.</li> </ul>	By month 6
<b>Monitoring, Evaluation and Learning</b>	<b>Update the programme theory of change (annex 1) and in liaison with FCDO, finalise programme KPIs and logical framework</b>	By month 6
	<b>Finalise and prepare implementation of the programme MEL strategy</b> that: <ul style="list-style-type: none"> <li>a) Integrates monitoring within the grant cycle and draws on a mixed methods (quantitative / qualitative) approach to M&amp;E where appropriate</li> <li>b) Leverages grantee and FCDO posts' capacity (where available) for monitoring, with clear allocation of responsibilities for M&amp;E between stakeholders</li> <li>c) Captures relevant learning and evidence enabling an adaptive approach and regular assessment of progress against the programme's Logframe and Theory of Change</li> <li>d) Includes provision for additional support and capacity building on M&amp;E for grantees in IAI countries plus Timor Leste</li> <li>e) Incorporates a robust endline evaluation that, to the extent feasible, is independent of programme stakeholders (involvement of an independent MEL provider is permissible).</li> <li>f) Enables a determination of programme contribution to relevant ASEAN health objectives, programme outcomes and impact.</li> </ul>	By month 6
	<b>Submit inception report</b>	By month 6

<b>Technical Assistance</b>	Finalise ToR for the HSP TA hub	By month 2
	Mobilise HSP TA hub, enabling access to relevant expertise (see section 8, skills and expertise).	By month 4
	As part of the costed programme workplan for years 1 and 2, create a nested workplan for the TA hub that includes: <ul style="list-style-type: none"> <li>a) Ongoing capacity for technical engagement with the ASEAN Secretariat, ASEAN health clusters and institutions within the context of the programme and specifically in steering and managing grant and peer exchange competitions and programme governance</li> <li>b) Stakeholder engagement to raise awareness of the HSP programme and build demand for programme opportunities</li> <li>c) Inputs in IAI countries and Timor Leste to identify, broker and directly support the development of quality grant and peer exchange applications</li> <li>d) Ongoing support to UKMIS ASEAN; the ASEAN secretariat; and relevant ASEAN and UK government institutions in the development of early pipeline, non-competed grant and peer exchange awards at the regional level.</li> <li>e) Inputs to support programme M&amp;E and communications, leveraging FCDO capacity where it exists and providing enhanced direct support in IAI countries plus Timor Leste</li> </ul>	
	Undertake a preliminary stakeholder analysis at the regional level and in IAI countries <sup>6</sup> plus Timor Leste to inform future grant and peer exchange award development	
<b>Grant management</b>	Review relevant ASEAN policy documents and lead a process of consultation with ASEC, ASEAN health clusters and FCDO to define an initial ranking of thematic priorities, within scope of programme objectives, to inform the sequencing of grant and peer exchange award competitions.	By month 2
	Under the HSP grants facility, develop options for proposed grant values, duration, and grant 'types' making consideration of how the programme can support catalytic multi-country and regional outputs as well as, where appropriate, innovation. (Please refer to section 7 – developing a portfolio)	By month 4
	Develop and finalise the design of a demand-led HSP Peer Exchange Platform, noting the objectives of this component to enable i.) structured knowledge exchange; ii.) dissemination of best practice; iii.) technology transfer; iv.) cross-border collaboration v.) One Health collaboration at the individual level (i.e. between practitioners, researchers, policy makers and academics).	By month 6
	Put forward options for the sequencing of grant and peer exchange award competitions, finalising a clear programme workplan (years 1 and 2).	

<sup>6</sup> Cambodia, Myanmar, Laos, Vietnam

	In liaison with FCDO and ASEC define the specific eligibility and selection criteria for competitive grant and peer exchange award competitions in years 1 and 2 of the programme.	
	Propose an equitable resource allocation model, informed by consultation, that would enable the programme to: <ul style="list-style-type: none"> <li>a) Make a substantial contribution to implementation of health objectives under the Initiative for ASEAN Integration (IAI)</li> <li>b) Support mobilisation of a One Health approach<sup>7</sup> to health security and preparedness</li> <li>c) Deliver programme outputs in all 10 ASEAN member states plus Timor Leste</li> <li>d) Build a coherent, equitable and balanced grant portfolio contributing to all 3 programme outcomes.</li> <li>e) Adopt a feasible pace of delivery, within the constraints of the programme timeline and stakeholder capacity</li> </ul>	
	Design grant and peer exchange application processes, including consideration of whether to utilise a 2-stage application process (expression of interest / request for proposals) to reduce the burden on prospective grantees	
	Consolidate and define the programme operating model, governance and grant cycle processes in an accessible HSP handbook(s) and communications materials for dissemination to programme stakeholders including prospective grantees.	
<b>Pilot Project Delivery</b>	Support FCDO in the development of non-competed grant / peer-exchange awards to i.) ASEC, ii.) the UK Food Standards Agency and iii.) UK-South East Asia Vaccine Research Manufacturing Hub. Integrate management of these grants within the evolving HSP grant management systems.	Months 1-6
	Develop and launch a pilot grant competition. Gather learning and stakeholder feedback to inform finalisation of grant award application and selection processes and other relevant inception phase outputs.	By month 4

<sup>7</sup> Defined by the UN convened One Health High Level Expert Panel as “an integrated, unifying approach that aims to sustainably balance and optimise the health of people, animals and ecosystems. It recognises that the health of humans, domestic and wild animals, plants, and wider environment (including ecosystems) are closely linked and interdependent.



## 6.2. Implementation Phase

<b>Implementation (delivery) phase:</b> Lead and manage implementation of components 1 and 2 including end-to-end management of the grant cycle.	
Output	Deliverable
<b>Programme governance and coordination</b>	Provide technically credible and diplomatically astute programme leadership. Effectively represent FCDO and programme objectives.
	Proactively facilitate implementation of programme governance structures, involving FCDO and ASEAN counterparts.
	Support coordination and engagement of programme stakeholders, including: <ul style="list-style-type: none"> <li>a. UK posts in the region and the UK mission to ASEAN</li> <li>b. ASEC, ASEAN health clusters and institutions</li> <li>c. AMS governments, institutions, and grantees</li> <li>d. UN agencies under component 3</li> </ul>
<b>Grant management</b>	Provide end to end grant cycle management for the HSP portfolio across components 1 and 2. <ul style="list-style-type: none"> <li>a) Prepare and implement agreed grant and peer exchange award competitions.</li> <li>b) Manage grant and peer exchange award application processes.</li> <li>c) Facilitate grant and peer exchange award selection processes.</li> <li>d) Undertake due diligence on prospective grantees and peer exchange award recipients.</li> <li>e) Make grant and peer exchange awards.</li> <li>f) Implement portfolio approach to monitoring &amp; evaluation and oversee grant and peer exchange partnership reporting.</li> <li>g) Maintain robust financial and risk management.</li> <li>h) Oversee grant closure</li> </ul>
	Develop and implement programme exit strategy
<b>Technical assistance</b>	Implement planned technical assistance and stakeholder engagement per the HSP workplan and TA hub ToR, including enhanced support in IAI countries plus Timor Leste
	Continue to support ongoing development of regional level grants.
	Guide and leverage FCDO's internal regional health network to support programme delivery (e.g. demand generation, M&E, communications)



<b>Compliance</b>	Implement a proportionate approach to due diligence for grantees that provides assurance of key FCDO compliance requirements.
	Implement policies, strategies, and tools to equip the programme with: <ul style="list-style-type: none"> <li>a) An integrated approach to risk management that systematically identifies, monitors and mitigates programme risks, including through maintenance of a programme risk register.</li> <li>b) Robust systems and measures for fraud prevention and identification</li> <li>c) Measures to ensure safeguarding of vulnerable groups through the prevention of sexual exploitation and abuse and the detection and escalation of safeguarding incidents.</li> <li>d) Robust programme financial management including regular audited statements of expenditure.</li> </ul>
<b>Programme communication</b>	Lead the development and dissemination of programme communications including: <ul style="list-style-type: none"> <li>a) Raise awareness of the HSP programme and demand for grant opportunities among relevant stakeholders at country level, working with FCDO comms capacity where this exists</li> <li>b) Widely communicate grant competition opportunities to prospective grantees</li> <li>c) Effectively communicate grant outputs and HSP contribution to ASEAN objectives, including case studies</li> <li>d) Identify and leverage opportunities for high-profile communications that demonstrate the mutual value of UK/ASEAN cooperation and contribute to programme visibility and impact, including supporting UK Ministerial and Senior Official engagement</li> </ul>
<b>Monitoring, evaluation and learning</b>	Lead implementation of HSP MEL strategy in liaison with programme stakeholders
	Undertake and submit to FCDO quarterly reports for components 1 and 2 of the HSP programme
	Consolidate programme data and provide insights to support FCDO Annual Reviews of the programme
	Organise and deliver, in liaison with FCDO and ASEAN, regular coordination and learning events with programme stakeholders to share learning/lessons and ensure all components are converging toward the programme's intended outcomes and impact.

## 7. Developing a grant / peer exchange award portfolio

- 7.1. As set out in 6.1 (Inception Phase: Grant Management) the Supplier will, as part of the inception phase, be expected to develop options for proposed grant values, duration, and grant 'types' and put forward options for the sequencing of grant and peer exchange award competitions.
- 7.2. FCDO's expectation is that the HSP programme will fund multiple grant and peer exchange awards. Noting FCDO and ASEAN's intention that the programme should support outputs in all 10 ASEAN member states (plus Timor Leste), across One Health domains and contributing to HSP's 3 priority outcomes, The Supplier shall assume they will be responsible for the development and management of a large portfolio of grants and peer exchange awards.
- 7.3. Suppliers should assume a minimum total number of 40 grants and 25 peer exchange awards over the duration of the programme. The Supplier shall consider how to build and maintain scalable capacity for grant development and management.

## 8. Skills and expertise

- 8.1. In delivering the co-design, implementation and management of the ASEAN-UK Health Security Partnership the Supplier will be required to mobilise and deploy skills and expertise that include, but are not limited to:
  - Understanding and experience of ASEAN as an institution, including ASEAN structures, governance and ways of working
  - One Health and public health context of the ASEAN region;
  - Public, animal and environmental health;
  - Health security and preparedness for health emergencies including relevant regional and international frameworks;
  - Health systems development and system strengthening;
  - The climate change and health nexus;
  - Programme, grant cycle and risk management;
  - Financial management
  - Complex programme leadership
  - Diplomatic engagement and stakeholder management
  - Communications;
  - Monitoring, Evaluation and Learning;
  - Gender Equality, Disability and Social Inclusion;
  - Safeguarding and the prevention of Sexual Exploitation and Abuse
- 8.2. FCDO anticipates that delivery of the programme will require a significant regional presence. With FCDO approval, the Supplier shall propose and assemble an appropriate team composition to deliver the objectives of this ToR and will require roles that fulfil the following functions:
  - **Senior programme leader** – responsible for overall delivery; strategic direction of the programme; relationship management of key project stakeholders, including senior external stakeholders in FCDO, ASEAN, ASEAN member states and other donors

- **Technical Adviser(s), including M&E** – staff with relevant technical expertise (8.1) enabling them to credibly engage with external technical counterparts and to shape HSP delivery and maximise programme effectiveness
- **Programme manager(s)** – staff with expertise and experience in the development and management (programme and financial) of complex projects / grant portfolios

## Key Contract Management Information

### 9. Contract management reporting and validation

- 9.1. **Reporting Requirements** – In addition to the outputs specified in 6.1 (Inception Phase), the Supplier will submit an inception report at the end of the inception phase. Quarterly narrative and financial reporting will be required throughout the programme and an endline evaluation and a final comprehensive communications product that highlights the multi-year achievements of the programme. The Supplier will also provide FCDO with access to information required to complete its internal programme annual review and project completion review.

#### a) Inception Report

<b>Format</b>	The inception report should consist of a short (<8 pages) narrative report.
<b>Submission</b>	The Inception report should be submitted within the final two weeks of the last month of the inception phase. The Inception report should be submitted to FCDO through the UK Mission to ASEAN contact person.
<b>Content</b>	The inception report should provide an overview of key lessons learnt during the inception phase, including on ways of working, and how these will be applied to the implementation phase.

#### b) Quarterly Reports

<b>Format</b>	The Quarterly reports document should refer to the FCDO reporting template (please see annex 2)
<b>Submission</b>	<p>The Quarterly report should be submitted within one month of the end of each quarter of programme delivery</p> <p>The Quarterly report should be submitted to FCDO through UK Mission to ASEAN contact person</p>
<b>Content</b>	<p>The Quarterly reports document should include updates on:</p> <ul style="list-style-type: none"> <li>• Detailed progress reporting and lessons learnt</li> <li>• Detailed plans for next quarter</li> <li>• Financial reporting</li> <li>• Risk register update</li> <li>• Revised activity-based budget (if budget allocations have changed since last quarter)</li> <li>• Completed payment request template</li> </ul>

## 10. Performance Management

- 10.1. During the inception phase, FCDO will assess the performance of the Supplier against the key milestone deliverables set out below against which payment of fees will be made.

Inception Phase	
Milestone deliverable	Timeline / comment
Finalised ToR for the HSP TA hub submitted	Month 2
Initial ranking of thematic priorities to inform sequencing of grant and peer exchange award competitions	
Pilot grant competition launched	Month 4
Costed programme workplan for years 1 and 2 and risk register submitted.	
Preliminary stakeholder analysis for regional level and IAI countries + Timor Leste submitted	
Stakeholder engagement and communication strategy submitted	Month 6
Finalised logical framework, updated Theory of Change and MEL strategy submitted	
HSP handbook(s) for dissemination to programme stakeholders and prospective grantees are submitted.	
Inception report submitted	

During implementation, FCDO will assess the performance of the Supplier by measuring progress against the programme logframe and monitoring of SMART KPIs, which will be refined and agreed during the Inception Phase, including the evidence required to assess the achievement of each KPI. FCDO reserves the right to review and refine each KPI, and the percentage linked to the KPI payments, for the Implementation Phase as the logframe is developed and is based on the more defined workplans and budgets that will be agreed in the Inception Phase and will be reviewed as part of the FCDO Annual Review process.

### Indicative KPIs to be refined and agreed during the Inception Phase

KPI Ref. No.	Proposed KPI	Frequency	Success Criteria	Evidence Required	Weighting %
KPI001	Efficiency of due diligence assessments during grant cycle	Quarterly	Proportion of due diligence assessments and recommendations made within 6 weeks of grant selection is >75%	Monitoring data for grant making process included in quarterly reports	Weighting 20%
KPI002	Timely and effective development of a grant portfolio	Quarterly	Disbursement of grant funds is at least 80% of planned value based on annual costed workplan	Financial management information submitted through quarterly reports	Weighting 15%
KPI003	Timely and effective development of a peer exchange portfolio	Quarterly	Disbursement of peer exchange award funds is at least 80% of planned value based on annual costed workplan	Financial management information submitted through quarterly reports	Weighting 15%
KPI004	Equity of resource allocation	Annual	<p>Equitable resource allocation objectives are met or exceeded.</p> <p>[Success criteria for this KPI will be developed and agreed during the inception period. Equity objectives for resource allocation are described in the ToR, (section 6.1; grant management) and include equitable allocation in relation to a.) Initiative for ASEAN Integration countries plus Timor Leste b.) human, animal and environmental sectors</p>	TBC	20%



KPI No.	Ref.	Proposed KPI	Frequency	Success Criteria	Evidence Required	Weighting %
KPI005		Grant quality.	TBC	<p>Proportion of grant portfolio meeting grant quality expectations</p> <p>[Success criteria for this KPI will be developed and agreed during the inception period. Potential success criteria that could be used in determining grant quality include:</p> <ul style="list-style-type: none"> <li>• Timeliness of grant implementation and spend against forecast</li> <li>• Timely submission of grant reporting</li> <li>• Qualitative and/or quantitative assessments of project achievement against planned outputs and HSP outcomes</li> </ul>	TBC	20%
KPI006		Quality and timeliness of HSP quarterly reports	Quarterly	<p>Quarterly reports received within one month of end of quarter in line with the agreed template.</p> <p>Quarterly financial data and results monitoring are submitted without errors.</p>	Quarterly report	Weighting 10%

- 10.2. It is expected that KPIs will be further refined during the inception phase and as the logical framework is developed. KPIs will be **reviewed and agreed on an annual basis** as part of the FCDO Annual Review process.

## 11. Payment Structure

- 11.1. **Inception phase fees:** during the inception phase fees will be paid in 3 tranches at months 2, 4 and 6. Fee payments will be in arrears and linked to submission, and FCDO's acceptance, of milestone deliverables (see 10.1 Milestone Deliverables). Late submission of milestone deliverables, or submission of deliverables not deemed by FCDO to be of acceptable quality, may lead to a delay, or non-payment of fees until the required deliverables are submitted or remedied.
- 11.2. **Inception phase expenses:** during the inception phase expenses (including but not limited to travel, subsistence, accommodation, office costs etc.) will be paid every 2 months in arrears and will be based on actuals. Where possible, payment of fees and expenses will be aligned in single payments.
- 11.3. **Implementation phase fees:** during the implementation phase fees will be paid quarterly in arrears, in line with the agreed costed work plan. In each financial year 20% of the supplier's fees will be performance based, with payment linked to FCDO's assessment of the supplier's achievement against agreed KPIs (see 10.1 Indicative KPIs). The methodology for performance-based payments will be refined and agreed between FCDO and the supplier during the inception phase and **will be confirmed via a contract amendment**.
- 11.4. **Implementation phase grant fund payments:** during the implementation phase payments for Grant Funds will be made quarterly and will be shown separate to the payments for fees and expenses in the Cost Proforma.
- 11.5. **Implementation phase expenses:** during the implementation phase expenses (including but not limited to travel, subsistence, accommodation, office costs etc.) will be paid quarterly in arrears and will be based on actuals.
- 11.6. Expenses during both inception and implementation will use the Price Schedule unit rates as a ceiling (provided they are in line with the overall budget agreed with the FCDO policy on expenses). A complete breakdown of costs for all expenses should be made available when requested.
- 11.7. Proposals should be made in British Pound Sterling (GBP) and the Supplier will be required to report and receive payment in GBP. Please note that managing exchange risk fluctuations is the responsibility of the supplier.

## 12. Performance-based payments, draft methodology

- 12.1. The supplier will demonstrate to FCDO at specific review points, to be agreed with FCDO during the inception phase, its performance against KPIs. Quarterly invoices will be reimbursed with a proportion of fees linked to successful delivery of KPIs.
- 12.2. There will be an opportunity to reimburse a percentage of performance-related payments that were withheld for missing KPIs in the following quarter. This will be dependent on the

Supplier demonstrating significant sustained improvement (moving up through the scoring bands) in relation to the specific KPI.

- 12.3. FCDO reserves the right to review and refine the weighting of KPIs for the implementation phase based on the more defined workplans and budgets agreed in the inception phase, in consultation with the Supplier. The evidence and process to assess achievement of KPIs will be agreed in the Inception Phase.
- 12.4. FCDO reserves the right to edit, delete or replace KPIs, in agreement with the Supplier, during the term of the contract.
- 12.5. KPIs will be scored out of 500. Weightings will be applied to each KPI, which will then be scored out of 1- 5 each quarter.

<b>KPI Scoring Methodology</b>	<b>Score</b>
<b>Fail:</b> the supplier has failed to meet any of the KPI targets that are set out in the contract	1
<b>Inadequate:</b> The performance of the supplier is significantly below that of the KPI targets that are set out in the contract	2
<b>Requires Improvement:</b> The performance of the supplier is below that of the KPI targets that are set out in the contract	3
<b>Approaching target:</b> The supplier is close to meeting the KPI targets that are set out in the contract	4
<b>Good Performance:</b> The supplier is meeting or exceeding the KPI targets that are set out within the contract	5

- 12.6. In line with the maximum total score of 500, the proposed payment % structure shall be as follows:

<b>Total Score</b>	<b>Payment</b>
400 - 500	100%
300 - 399	75%
200- 299	50%
199 and below	0%

- 12.7. An illustrative worked example of the KPI Scoring Methodology is below. If a KPI failure occurs (a score below 199), the Supplier will provide a rectification plan to FCDO for review and approval to ensure successful delivery.

<b>KPI</b>	<b>FREQUENCY</b>	<b>WEIGHTING</b>	<b>MAX SCORE</b>	<b>ILLUSTRATIVE SCORE</b>	<b>WEIGHTED SCORE</b>
#1	Quarterly	20	100	5	100
#2	Quarterly	15	75	2	30
#3	Quarterly	20	100	5	100
#4	Annual	15 (Annual)	75	4	60
#5	TBC	10	50	2	20
#6	Quarterly	20	100	1	20
<b>TOTAL</b>		<b>100%</b>	<b>500</b>		<b>290</b>

- 12.8. The methodology will be refined and agreed between FCDO and the Supplier during the Inception Phase.

### 13. Contractual Review Points

- 13.1. The contract will be subject to a review at the end of Spending Review period 2024/25 and at the end of the inception phase. Continuation of the contract after this phase will be based on FCDO's assessment of satisfactory performance, including progress against agreed inception phase outputs.

### 14. Exit & Closure Requirements

- 14.1. The supplier should aim for delivery of full and final results by the end of the implementation phase. The Supplier should be prepared to retain flexibility for scale up and extension scenarios.
- 14.2. The supplier will be responsible for delivery of the closure phase. FCDO will support by promoting or hosting events that support the positive legacy and lessons sharing component of this phase. The supplier must ensure that plans to ensure sustainability of outcomes and outcomes are in place before the end of the closure phase.

## Compliance

### 15. GDPR (General Data Protection and Regulations)

- 15.1. The FCDO will be the data controller and the Supplier would be the data processor. All data and metadata are owned by the FCDO and suppliers should ensure that all data is rigorously stored, protected and documented in line with the [GDPR Commercial Guide](#).
- 15.2. Please refer to the details of the GDPR relationship status and personal data (where applicable) for this project as detailed in Annex 3 and the standard clause 33 in Section 2 of the Contract.

### 16. Risk

- 16.1. **Risk matrix:** During the inception phase, the Supplier is expected to produce a risk matrix, of which final sign off will be with FCDO through the UK Mission to ASEAN. FCDO guidance on the structure of the risk matrix will be shared. Bidders should indicate their assessment of the major risks to the HSP programme (delivery, financial, reputational, safeguarding etc) and how they would mitigate them, including how they would work flexibly to mitigate the risk of political changes or instability disrupting programme, how and when they will escalate them to the FCDO, and how they would mitigate such risks to prevent undue delay to HSP programme activities.
- 16.2. **Fraud and Corruption:** FCDO has a zero- tolerance approach to corruption. The supplier will have full responsibility for monitoring and mitigating the risk of fraud and corruption in the delivery of HSP programme.
- 16.3. **Delivery Chain Mapping:** FCDO will require the supplier to plot out a delivery chain map as part of their ongoing monitoring of the HSP programme. This delivery chain map should include all the levels of the organisations contracted to or by the supplier, from grass roots

delivery. The supplier will be required to submit returns providing these details, as a minimum on an annual basis.

- 16.4. **Transparency:** FCDO has transformed its approach to transparency, reshaping our own working practices and pressing others around the world to do the same. FCDO requires suppliers receiving and managing funds to comply with FCDO International Aid Transparency Initiative (IATI) regulations and to release open data on how this money is spent in a common, standard, reusable format, and to require this level of information from immediate Grantees and downstream partners. It is a contractual requirement for all suppliers to comply with this, and to ensure they have the appropriate tools to enable routine, financial reporting, publishing of accurate data and providing evidence of this to FCDO. Further IATI information is available from <http://www.aidtransparency.net/>.

## **17. UK International Development Branding**

- 17.1. The supplier will be required to follow FCDO's branding guidance, and appropriately document their approach to external communications. Full guidance can be found here: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/929383/UK-aid-guidance-Oct-2020.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/929383/UK-aid-guidance-Oct-2020.pdf)
- 17.2. The supplier will also be required to complete a UK International Development Visibility Statement, setting out how and where they will acknowledge ODA and non-ODA funding from the UK government. Details and the statement template are included in the above guidance.
- 17.3. No publicity is to be given to this contract without the prior written consent of FCDO. Any press releases made in relation to this programme should be arranged in collaboration with/approved by FCDO through UK Mission to ASEAN.

## **18. Do No Harm and Safeguarding**

- 18.1. All organisations that work with or come into contact with children should have safeguarding policies and procedures to ensure that every child and young adult, regardless of their age, gender, religion or ethnicity, can be protected from harm.
- 18.2. FCDO requires assurances regarding protection from violence, exploitation and abuse through involvement, directly or indirectly, with FCDO suppliers and programmes. This includes sexual exploitation and abuse but should also be understood as all forms of physical or emotional violence or abuse and financial exploitation.
- 18.3. In bids, the supplier should set out their safeguarding policies and processes to expressly prohibit sexual exploitation and abuse, including their plans to ensure that any incidents are reported and dealt with appropriately in a timely manner.
- 18.4. The Supplier should report at [reportingconcerns@fcdo.gov.uk](mailto:reportingconcerns@fcdo.gov.uk) any allegation credible enough to warrant an investigation of SEAH. Full guidance on FCDO's Safeguarding standards, commitments and Due Diligence guidance can be found here: <https://www.gov.uk/guidance/safeguarding-against-sexual-exploitation-and-abuseand-sexual-harassment-seah-in-the-aid-sector>
- 18.5. The Supplier must demonstrate a sound understanding of the ethics in working in this area and applying these principles throughout the lifetime of the programme to avoid doing harm to beneficiaries. In particular, the design of interventions and programme evaluations



should recognise and mitigate the risk of negative consequence for women, children, and other vulnerable groups.

- 18.6. The Supplier will be required to include a statement that they have duty of care to informants, other programme stakeholders and their own staff, and that they will comply with the ethics principles in all programme activities. Their adherence to this duty of care, including reporting and addressing incidences, should be included in both regular and annual reporting to FCDO.
- 18.7. A commitment to the ethical design and delivery of evaluations including the duty of care to informants, other programme stakeholders and their own staff must be demonstrated.
- 18.8. FCDO does not envisage the necessity to conduct any environmental impact assessment for the implementation of HSP programme activities. However, it is important to adhere to principles of “Do No Harm” to the environment. This should be considered explicitly in the risk register. Flights should be kept to a minimum and all travel should take place in economy class.

## **19. Duty of Care**

- 19.1. The Supplier is responsible for the safety and well-being of their Personnel and Third Parties affected by their activities under this contract, including appropriate security arrangements. They will also be responsible for the provision of suitable security arrangements for their domestic and business property.
- 19.2. The FCDO will share available information with the Supplier on security status and developments in-country where appropriate.
- 19.3. The Supplier is responsible for ensuring appropriate safety and security briefings for all their Personnel working under this contract and ensuring that their Personnel register and receive briefing as outlined above. Travel advice is also available on the FCDO website (<https://www.gov.uk/foreign-travel-advice>) and the Supplier must ensure they (and their Personnel) are up to date with the latest position.

## **20. Modern Slavery**

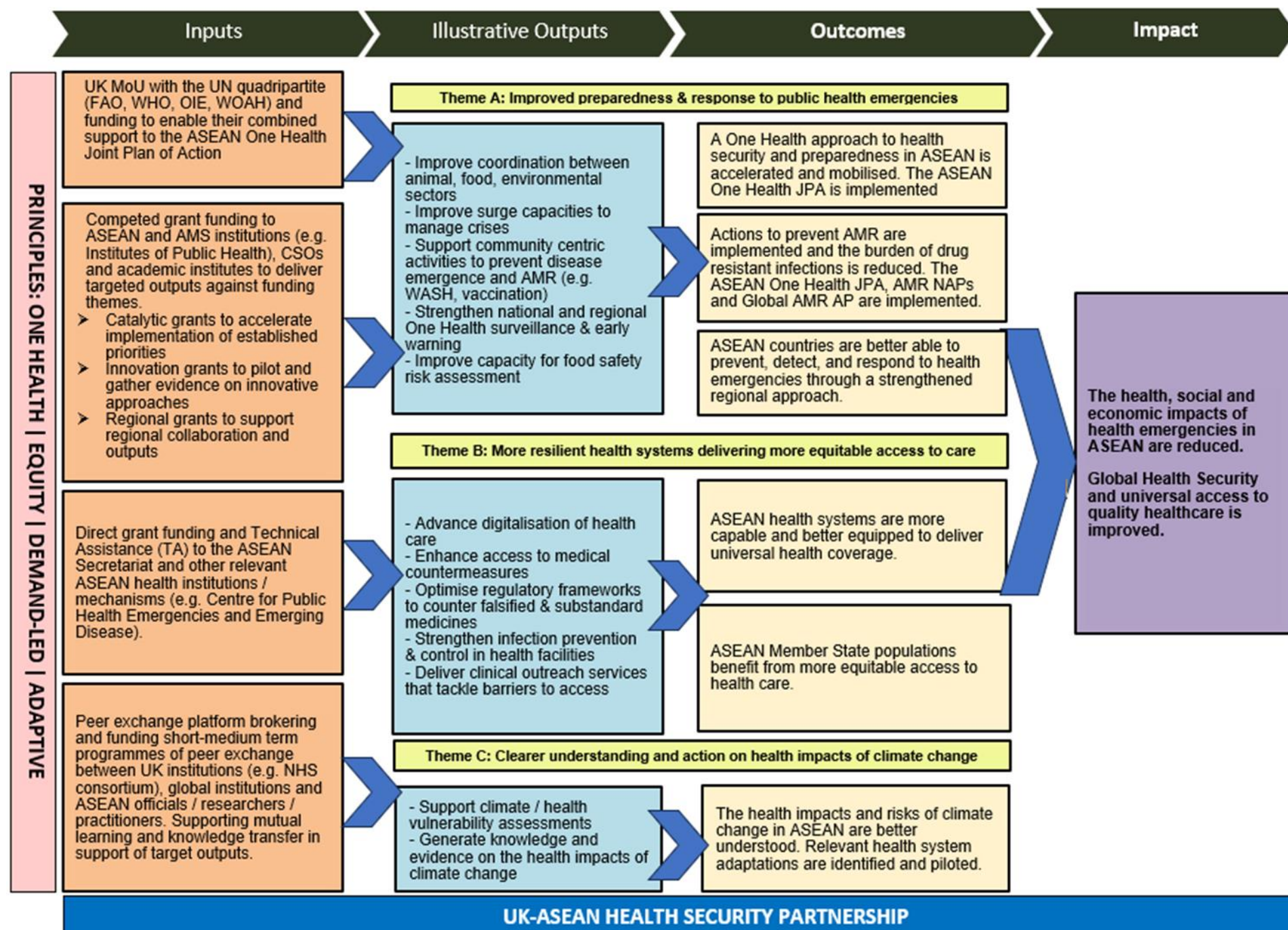
- 20.1. The FCDO is taking action against modern slavery through current programming, and we are working to expand our reach and scale-up successful country office and centrally managed programmes. A large number of our programmes operating through country offices look at addressing the underlying vulnerabilities of people at risk of modern slavery, with a particular focus on those within indirect supply chains.
  - a) Strengthening evidence base of effects of laws, policies, practices on workers in high-risk industries including migrant garment and domestic workers.
  - b) Advocacy and common understanding of corrective legal, policy and procedural measures.
  - c) Information campaigns among employers.
  - d) Training and awareness programmes for direct employees and supply chain employees
  - e) Organising workers to protect themselves and access services.
  - f) Sensitising labour recruiters on accountability for fair recruitment.
  - g) The FCDO Supply Partner Code of Conduct sets out the expectation for all supply partners to have full awareness of the International Labour Organisation (ILO).

- h) The HMG Modern Slavery Statement sets out how UK government departments must take action to ensure modern slavery risks are identified and managed in government supply chains.

## **21. Disability**

- 21.1. For FCDO disability inclusive development means that people with disabilities are systematically and consistently included in and benefit from international development. Civil Society and Private Sector partners should outline their approach to disability inclusion and how people with disabilities will be consulted and engaged throughout the project.
- 21.2. Suppliers should also set out their approach to ensuring that children with disabilities, who are among the most marginalised children, benefit, and secure foundational learning outcomes.

## Annex 1: HSP Theory of Change



## Annex 2: Quarterly Report template

### UK Mission to ASEAN Programme Quarterly Report

*Sections 1-5 of this template should be completed by the programme implementing partner and submitted to FCDO once a quarter. The implementing partner should also attach: an up-to-date risk register, an updated activity-based budget (if budget allocations have changed since last quarter) and a payment request template (with associated expenditure reporting) if payment is also being requested.*

Part 1: Programme Summary	
Programme Title	
Programme Start Date	
Programme End Date	
Reporting Quarter	
Lead Implementer	<i>(Lead implementing organisation or consortium)</i>
Report Author	
Date Submitted	

Part 2: Programme Progress Summary	
Top achievements / deliverables this quarter	<i>(Summary of the most significant activities or achievements delivered this quarter, including how these deliverables contributed to the intended programme outcomes. If any of those achievements received external coverage or comms, please include links to stories and photos. 500 words max.)</i>
Top challenges / lessons learned for next quarter	<i>(Summary of the main challenges, delays or problems with programme delivery encountered this quarter, and any lessons learned for future programme delivery. 500 words max.)</i>
Risk Narrative	<i>(Summary of any key changes to risks this quarter. Did any new risks arise? Are any risks outside of risk appetite (and how were these mitigated)? Are any changes anticipated next quarter? These updates should also be reflected in more detail in the programme risk register, to be attached. 200 words max.)</i>
GESI Narrative	<i>(Summary of progress made or challenges faces in implementing Gender, Equality and Social Inclusion priorities. 200 words max.)</i>
Stakeholder engagement	<i>(Summary of any key events or engagements with priority stakeholders this quarter – i.e. partner governments, multilateral organisations, ASEAN institutions, British Embassies or High Commissions. 200 words max.)</i>



<b>Priorities for next quarter</b>	<i>(Summary of the top priorities for the coming quarter. Detailed plans for next quarter are requested in part 4, so this should just be a short summary of the main focus and top priorities. 200 words max.)</i>
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<b>Part 3: Detailed Progress Reporting</b>	
<b>Logframe / Workplan changes this quarter</b>	<i>(Summary of any changes that were agreed to the logframe or workplan this quarter. This should include any changes to milestone targets. These should have been agreed in advance.)</i>
<b>Output</b>	<b>Progress this quarter</b>
<i>(This should match one of the agreed outputs in the logframe or workplan)</i>	<i>(Description of activities delivered and milestones achieved related to the specified output. Please add/remove rows as required.)</i>
<b>Outcome</b>	<b>Progress this quarter</b>
<i>(This should match one of the agreed outcomes in the logframe or workplan)</i>	<i>(Description of any progress made towards the agreed programme outcomes. This should outline <u>how the outputs listed above have collectively contributed to the intended outcomes</u>. What evidence do we have so far that the outputs above are contributing to the intended outcomes?)</i>

<b>Part 4: Detailed Plans for Next Quarter</b>	
<b>Output</b>	<b>Progress planned next quarter</b>
<i>(This should match one of the agreed outputs in the logframe or workplan)</i>	<i>(Description of activities planned and milestones which are expected to be achieved related to the specified output next quarter)</i>

<b>Part 5: Finance Reporting</b>	
<b>Finance Narrative</b>	<i>(Summary of programme finances and spending this quarter. Was there an underspend or overspend against the original quarterly forecast, and why? What level of confidence do you have that you will meet the full forecast for this financial year (FY)? If there have been any changes, please attach an updated ABB. 200 words max)</i>



<b>Total Agreed FY Budget</b>	<b>Latest FY Forecast</b>	<b>Spend to date this FY</b>	<b>Forecast for this quarter</b>	<b>Q1 actual spend / forecast</b>	<b>Q2 actual spend / forecast</b>	<b>Q3 actual spend / forecast</b>	<b>Q4 actual spend / forecast</b>
<i>(Total budget originally allocated for this FY)</i>	<i>(Latest forecast for total spend this FY)</i>	<i>(Total spend so far this FY)</i>	<i>(Amount originally forecast for this reporting quarter)</i>	<i>(Amount spent in Q1 – either forecast or actual if in the past)</i>	<i>(Amount spent in Q2 – either forecast or actual if in the past)</i>	<i>(Amount spent in Q3 – either forecast or actual if in the past)</i>	<i>(Amount spent in Q4 – either forecast or actual if in the past)</i>

<b>Part 6: Approval</b> <i>(to be completed by FCDO once sections 1-5 are submitted)</i>	
<b>Approved by SRO</b>	<i>(Name of SRO)</i>
<b>Approved on</b>	<i>(Date of approval)</i>

**Appendix A: of the Terms of Reference (Annex A)**  
**Schedule of Processing, Personal Data and Data Subjects**

This schedule must be completed by the Parties in collaboration with each-other before the processing of Personal Data under the Contract.

The completed schedule must be agreed formally as part of the contract with FCDO and any changes to the content of this schedule must be agreed formally with FCDO under a Contract Variation.

Description	Details
<b>Identity of the Controller and Processor for each Category of Data Subject</b>	<p>The Parties acknowledge that for the purposes of the Data Protection Legislation, the following status will apply to personal data under this contract</p> <p>1) The Parties acknowledge that Clause 33.2 Protection of Personal Data Section 2 of the contract shall not apply for the purposes of the Data Protection Legislation as the <b>Parties are independent Controllers</b> in accordance with Clause 33.3 in respect of the following Personal Data:</p> <ul style="list-style-type: none"><li>• necessary for the administration and/or fulfilment of this Contract.</li></ul>