

CFP REF. UNOPS/CFP-2020/001/ATSCALE

**Support to ATscale to develop audiological profiles for pre-programmable hearing aids and to analyse operational experience of the use of pre-programmable hearing aids in low- and middle-income countries, as defined by the World Bank.**

**Answers to Questions from applicants received before the deadline:  
Tuesday May 22.2020 17:00 hrs Geneva time (CET)**

1. Are there any other grants that are likely to be scheduled related to hearing aids?  
- As there are likely to be several research areas for hearing aids, potential grantee would like to ensure they consider all that may become available and apply for those that they believe as an organisation they could deliver.
  - a. **ATscale plans to schedule other grants related to hearing aids, however, grants in the foreseeable future are not anticipated to be research related. More information will be available as each grant is released.**
2. Do you have a schedule of planned grants for ATscale (for hearing aids)?
  - a. **ATscale anticipates providing more grants in the hearing aids space but cannot yet release information about the content or timing of these.**
3. If we are a single non-profit organization applying to both Lot 1 and Lot 2, can we apply with the same 3 countries for both Lots?
  - a. **Yes, research related to both Lots can be conducted in the same countries.**
4. Can a sub-grantee be a for-profit company?
  - a. **A sub-grantee may be a for-profit company if the primary grantee's institutional policies permit and if the sub-grantee complies with conditions for sub-grantees and sub-contractors per the terms and conditions in the UNOPS Grant Support Agreement.**

5. Can we have more than one sub-grantee per Lot?
  - a. **According to the UNOPS Grant Support Instructions, the primary Grantee's indirect costs/management fee is capped to a maximum limit of 10% of the total Grant Award value. To ensure best value-for-money, applicants are encouraged to minimize the number of sub-grantees that charge indirect costs/management fees, where feasible.**
6. Given that the project timeframe is only 6 months and is scheduled to begin in the midst of a COVID-19 crisis, can we use a Convenient Sampling methodology for identifying the audiograms?
  - a. **A convenience sample is suitable; however, it should be representative of the adult population in the country, especially in terms of gender, education level, income level, and urban and rural participants.**
7. Does the sample need to match the hearing loss prevalence in the country?
  - a. **The sample does not need to match the prevalence, in terms of numbers or causes; however, it should be representative of the adult population in the country, especially in terms of gender, education level, income level, and urban and rural participants.**
8. Is this call for proposals limited to adult patients with hearing loss or can it also include children?
  - a. **Currently, the focus is on adults with hearing loss, as they are the most suitable candidates for pre-programmable hearing aids. If children are included, they should be treated as a separate sample.**
9. Are applicants expected to cover the costs of pre-programmable hearing aids in their grants?
  - a. **ATscale does not plan to provide additional funds to support the costs of pre-programmable hearing aids. Applicants are welcome to consider other options, including conducting operational research in populations who are already using pre-programmable hearing aids.**

10. The revised call for proposals is still not very clear with regards the possible extensions regarding the covid crisis. Many countries at present are not allowed to have their clinics open and are not seeing patients/participants and thus, if this continues, it would not be possible to collect the data required to complete Lot 2 of the project. Hopefully that restriction will ease in the second half of the year allowing data collection to go ahead but a clear indication of extension of Lot 2 until early to mid 2021 would be appreciated.

**a. The current agreement in place will allow implementation of the grant through the end of January 2021 (including submission of all deliverables). We recognise the challenges faced by applicants in the context of COVID-19, however, and the team will continue to look at whether an extension of this timeline is possible, which can then be discussed further during grant negotiations. Concerning the timing of implementation – we expect the selected grantee to begin implementation as soon as is feasible, while respecting restrictions due to the COVID-19 pandemic.**

11. How flexible will the grant timescale be in light of Covid19?

**a. See response to question 10.**

12. Will there be a gap between notification of whether we were successful, and the 6-month period for the project. I ask because obtaining ethical approval can take up to 3 months, and we are happy to start this process before the 6 months starts should we be successful. To clarify further, the potential grantee confirmed that they would need 3 months to set up ethical approvals in each country before any work took place. They cannot start work before these approvals are obtained.

**a. The successful applicant may commence the work later, leaving a gap between selection and beginning of grant implementation for necessary steps such as applying for ethical approval, but implementation still needs to be completed, with deliverables submitted, by the end of January 2021 in the current circumstances. If an extension of this timeline is secured, the commencement date can be pushed further, as long as the work is completed by the deadline.**

13. What is the funding bodies policy on publications arising from the data collection and analysis arising from the grant. Normally we would like to publish the results of the investigations to ensure that the findings are available to academics and clinicians working in the field. Would this be possible (with appropriate citation and acknowledgement of the funding source and the UNOPS ownership of the data)?

- a. **Publication in academic journals by the grantee or presentation at scientific meetings by the grantee is allowable following the required approvals and appropriate acknowledgements, the details of which would be agreed during the contracting phase.**

14. We assume that the reports of this study will be published by UNOPS / ATscale.

Can you let us know what format or publication these will appear in?

- a. **All the parties involved look forward to working together to ensure the results of the work done under this grant are disseminated appropriately to inform future efforts. ATscale's plans for dissemination have not yet been formalised, but will be determined based on results and coordinated with the successful applicant.**

15. We understand the intent of having the data be available publicly, but the institution may have concerns about releasing all rights of intellectual property. Is this negotiable? This is particularly a concern if there is an opportunity for us to present the findings in a second publication or at a scientific meeting. Our goal would be to disseminate this information and would like to make sure that it reaches the widest audience possible. If we were to present this information in another forum, we would of course cite the support of ATscale and UNOPS.

- a. **If the concern regarding intellectual property is about timing on when the information is released publically, the timing and modality of information sharing can be coordinated with the successful applicant.**

16. The sample of 100 people with threshold >20dB in the worse ear – are you hoping for a sample who would benefit from hearing aids (i.e. excluding those who need wax removal, or surgery and focussing on those with sensorineural hearing loss only)?

- a. **We are expecting all participants in the samples (at least 100 participants per location) to be those who have the potential to benefit from hearing aids.**