

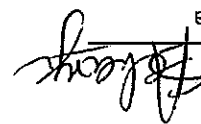


Annual Progress Report - 2009

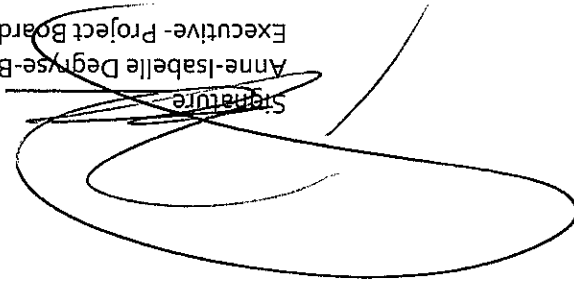
Project Title

Award ID: 00051246
Award Title: Scaling up access to HIV prevention, treatment and care
Project ID: 00063710
Source of Funds: TRAC and Cost-sharing
Implementation Modality: DEX
Project Beginning Year: 01/01/2009
Project Ending Year: 12/31/2010

Signature
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Executive-Project Board



Annual Progress Report – Part I

1. Overview of the Project

Nepal was awarded GFATM Round two grant on HIV/AIDS which primarily focused on preventing the spread of HIV/AIDS among the labor migrant and young people and provide support and care services to those who are infected and affected with HIV/AIDS. The Round 7 grant was awarded to Nepal to focus on reduction of HIV transmission in Nepal and to enhance the quality of life of people living with HIV. Due to the need to scale-up implementation multiple Principal Recipients (PRs) namely Save the Children-SC, Family Planning Association in Nepal-FPAN and United Nation Development Programme -UNDP were selected.

UNDP-Nepal as a PR is mandated to focus its efforts on strengthening the capacity of the government to manage and implement HIV/AIDS activities; expanding access and coverage of HIV testing and counseling; STI diagnosis and treatment; and strengthening health service capacity to provide quality treatment and care to people living with HIV/AIDS. At the same time the grant also focuses on establishing ARV centers and also by increasing awareness through peer educators and outreach workers. It focuses on strengthening the District AIDS Coordination Committee (DACCC) to promote multi-sectoral response to HIV/AIDS at the district level. The project is also tasked to strengthen the capacity of Department of Health Services and Ministry of Health and Population, as a sub-recipient.

Likewise, UNDP as PR is also responsible for the overall procurement and supply chain management of HIV/AIDS commodities in the country. The total grant under GFATM R7 is US \$ 6.7 million for the period November 15, 2008 – November 15, 2010 of which US \$ 3,707,841 was allocated for year one activities. UNDP successfully completed its one of year of operation of GFATM grant and is entering into the year 2 activities

2. Results in 2009

UNDP, as a principal recipient of Global Funds established 30 new VCT sites, 2 new ART sites and 2 new ART sub centre. In order to support the sites with well trained staffs, 130 counselors; 277 STI technicians; 60 lab technicians were trained. Within the year 2009, 102 DACC members were trained. The ART guideline and STI guideline were revised; VCT SOP; OI training package; EQAS protocol and the National M & E Training package developed. National database system was established. Similarly ARV, OI, STI drugs, HIV Test Kits, reagents, VCT and lab equipments and commodities (condom, lubricants and harm reduction supplies) were purchased as per GFATM Procurement Service Plan and supplied and resupplied to the service delivery points as necessary.

a. Progress towards CPAP Outcome and Output Indicators

If the project has an M & E Framework with an indicators tracking table, annex it hereto. If the project does not have a table already, fill in the following table (illustrated with an example from MEDEP):

CPAP Outcome:	Employment and income opportunities and access to financial services enhanced, especially for youth and excluded groups and PLWHA in partnership with the private sector and CSOs.
CPAP Outcome Indicators, baselines, targets and current	Proportion of population below national poverty line (disaggregated by caste/ethnicity) Baseline: 31% (2004)

<p>Target: 24% Current status: No Updates</p>	<p>CPAP Output: Policies designed and initiatives developed to expand employment opportunities for poor youths, women and individuals from socially excluded groups in selected districts.</p>	<p>CPAP Output Indicators, baselines, targets & current status</p> <p>Number of HIV infected and affected people having received skill based training who are employed Baseline: None (2008) Target: 416 (300 PLWH and their family and 116 IDUs)</p> <p>Current status: and A total of 417 participants (150 PLWH and 150 family member of PLWH and 117 Ex-IDUs participated in micro enterprise development programme and attended various related trainings such as Appreciative Inquiry, Start and Improve Your Business etc. Following the introductory livelihood trainings, technical skill development training was provided to 260 PLWH including one of their family member and 85 IDUs as per their choice of micro business.</p> <p>As of December 2009, a total of 250 participants have received raw material support from the project and are engaged in various small businesses.</p>	<p>CPAP Outcome: Strengthened national capacity for governance and coordination of AIDS response</p>	<p>CPAP Outcome Indicators, baselines, targets and current status</p> <p>Number of GFATM proposals approved Baseline: 2/7 Target: 1 additional proposal Current Status: Nepal's proposal for GFATM Round 9 was not accepted.</p>	<p>CPAP Output: Support the development of appropriate oversight and management structures for the semi autonomous HIV/AIDS entity</p>	<p>Project Output Indicators (if different from CPAP Output indicators), baselines, targets and current status</p> <p>% of HIV/AIDS donors resources managed by the Government Baseline: Less than 1% Target: 40% Current Status: No update</p> <p>Financial, procurement, monitoring and evaluation procedures developed for the semi autonomous entity</p> <p>Baseline: The frame work for the national entity is already approved from the parliament and the formal establishment for the entity is in process</p> <p>Target: M&E plan in place; minor gaps in the M&E system assessments, PSM plan in place</p> <p>Current status: Financial, procurement, human resource and monitoring and evaluation policy/guideline developed and detailed out in the bi-laws of HIV/STI Control Board (HSCB) and endorsed by the MOHP. Capacity Development Plan developed for HSCB and support provided to implement the plan in 2009. Monitoring and evaluation plan and tool developed and data base system established at HSCB. M&E Operational Plan is in place and M&E Capacity Development Training is planned 2010</p>
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b. Achievements against Annual Work Plan (Annual Targets & Activities)

Annual Targets	Achievement (against Annual Targets)	Planned Activities	Achievements (against activities & actions)	Financial				
				Fund	Budget Code	Budget	Expenditure	
<p>- Development of capacity assessments of the national entities (Department of Health Services, Ministry of Health and Population, National Centre for AIDS and STD Control and HIV/AIDS and STI Control Board as per GFATM Rd 7 grant agreement requirement)</p> <p>- Development of capacity building strategies and plans for the national entities</p> <p>- Initiate implementation of the capacity building plans</p> <p>- Exit strategy for UNDP as implementing entity for GFATM developed.</p>	<p>Output 1: Support the capacity building of the national HIV/AIDS entities and implementation of large donor grants</p>	<p>Activity Result 2.1.1- Prevention : Testing and Counselling Expand access and coverage of quality HIV testing and counselling, and STI diagnosis and treatment Milestones/Deliverables - Action Train 148 counsellors on basic counselling Train 88 VCT lab technicians on HIV testing Establish and support 30 new diagnostic and testing sites Provide ART/OI/STI drugs and HIV test kits to 21 ART sites and 50 VCT sites Train 60 Health Facility In-charge/Clinic manager on AIDS Program Management Provide Technical assistance to VCT centres through a Consultant</p>	<p>Trained 159 counsellors on basis counselling Train 130 VCT lab technicians on HIV testing Expanded diagnostic and testing in 30 sites ART/OI/STI drugs and HIV test kit provided to 21 ART and 115 VCT sites Trained 60 Health Facility In-charge/Clinic manager on AIDS Program Management Planned for 2010 as year 2009 was focused on VCT service centre expansion from 36 to 65 VCT service centres.</p>	GFATM	394,998	352,747		
							<p>Activity Result 2.2.2 - Supportive environment : Strengthening of civil society and institutional capacity building Expand access and coverage of quality HIV testing and counselling, and STI diagnosis and treatment Action Update of national protocols and development of</p>	<p>National protocols and standards operating procedures of VCT services updated and is under endorsement</p>

ART		completed and is under finalization process				
Refurbish 21 ART sites		Assessment completed, RFQ called, quotation received and under review and under final selection. Contract issuance planned for early January, 10				
Train 100 service providers of ARV and HIV care sites on Clinical management training		Trained 17 service providers of ARV and HIV care sites on Clinical management training. Since establishment of VCT service sites were deemed necessary the programme focused on establishing VCT sites first. Activities related to ART will be continued in 2010.				
Train 50 lab persons on ART monitoring		Training postponed for the 1 st quarter of 2010 as national training curriculum was not available and there was a need to develop the curriculum. The curriculum development is already in progress.				
Establish 2 new ART sites		2 ART Site established				
Organize yearly national network meeting of all ART sites		Organized meeting at all ART sites				
On-going Monitoring and supervision ART sites		Monitoring and supervision of 21 ART sites conducted.				
Activity Result 3.3.5 Prophylaxis and treatment for opportunistic infections Strengthen health service capacity to provide quality care and treatment for people living with HIV/AIDS						
Actions: Updating/printing of OI guideline and training package		Final draft of OI guideline prepared and is under finalization process				
Activity Result 3.4.6 - Health Systems Strengthening: Laboratory Services Strengthen health service capacity to provide quality care and treatment for						
			GFATM		17,116	18,590

people living with HIV/AIDS	Revise/Develop and validate the National Protocol on national laboratory quality assurance	Final draft of the National Protocol on National Laboratory Quality Assurance prepared and under finalization	GFATM		140,444	72,848
support for operation and maintenance of CD4 and PCR Machine	Supported the operation and maintenance of 10 CD4 and 1 PCR and 4 FACS Calibre Machine by contracting BD India for annual maintenance. This will prevent sudden break down and ensure smooth operation of CD4 and PCR machines. Under this contract, engineers from BD India visited CD4 sites and provided on-the-job-training to the operators also.					
Procurement of Lab equipments	Lab equipments and VCT equipment procured and distributed to central and 5 regional laboratory and VCT equipment to 15 new VCT center					
Support for National Public Health Laboratory of Central and district level	Supported provided to National Public Health Laboratory of Central and district level by recruiting staffs (1 Microbiologist, 1 technician and a Data Manager) thus enabling NPHL to provide quality health service to its clients.					
Activity Result 3.4.7- Health Systems Strengthening: Procurement and Supply Chain Management Strengthen health service capacity to provide quality care and treatment for people living with HIV/AIDS	Contract agency to manage the supply chain management	Contracted Management Support Services Agency to manage on-going supply chain				
Train 23 storage managers of the centre and Dist Hospitals in inventory management and reporting for ARV	Train 23 storage managers of the centre and Dist Hospitals in inventory management and reporting for ARV	Trained 23 storage managers of the centre and Dist Hospitals in inventory management and reporting for ARV. This has enhanced the reporting system.	GFATM		1,355,082	1,221,735
Train 23 storage manager in	Train 23 storage manager in	Planned for January since this is a	UNDP		650,000	650,000

	Data entry and 10 on forecasting	continuation of the inventory management and reporting training.				
	Train 2 National staff on Drug Supply Management System	Trained 2 National staff one from PMU and one from NCASC logistics focal person on Drug Supply Management System thus enhancing supply chain management of drugs in the programme areas				
	Procure ARV, STI & OI Drugs, condoms and lubricants	Procured , supply and resupplied ARV, STI & OI Drugs, condoms and lubricants to GON health facility and NGOs				
	Activity Result 5.4.8 - Health Systems Strengthening: Strengthening Strategic Information System Build the capacity of the Government of Nepal and civil society to manage and implement HIV/AIDS activities					
	Strengthen national M&E system and develop M&E training package	International Consultant hired to strengthen M & E System and to develop M&E training package. The draft package has been handed over to NCASC to take over the further process of finalizing it.	GFATM		295,844	85,979
	Establish a National Database System at NCASC and HSCB	National Database System established at NCASC and HSCB				
	Train 75 persons on M and E	Due to the delay in finalizing M&E training Curriculum the training has been postponed to the first quarter of 2010.				
	Conduct study on HIV Case Reporting	Final draft of the study is ready. Will be shared amongst partners and finalized.				
	Activity Result 5.2.2 - Health Systems Strengthening: Strengthening civil society and institutional capacity building Build the capacity of the					

Government of Nepal and civil society to manage and implement HIV/AIDS activities	Train 35 DACC coordinators and 70 DACC members on AIDS program Management	Trained 30 DACC coordinators and 70 DACC members on AIDS program Management. Though the remaining 5 DACC Coordinators had already been selected but yet to be on board a gap was visible in the training. It is expected that the selected candidates will be on board by the first quarter of 2010.	GFATM		383,516	112,909
	Organize 5 Annual Regional Review Meetings of DACC	Organized 3 (2 regions clubbed within the 3 meetings held) Annual Regional Review Meetings of DACC				
	Procurement of equipments	Procurement of equipments such as furniture's and other official equipments done and handed over to the respective DACC offices.				
	Support to DACC	Supported DACC by providing operational cost along with training DACC coordinators along with DACC Members.				
	Project Management Cost 5.2.9					
	Organize Planning Meetings & Review Workshop	Organized 1 Planning Meeting in October '09 & 3 Review Workshops	GFATM		222,138	224,1681
Participation in international GFATM meeting/workshops	Participated in international GFATM meeting/workshop attended by two PMU staffs					
	Total			3,707,841	2,894,786	

Note: Achievement till end of Dec. '09

Within its treatment component, 3488 people have been provided with antiretroviral treatment (ARV) services. There has been significant increase by 409 people from the first trimester to the second trimester and eventually by 262 people in between second trimester and third trimester with some death cases, transfer out cases and cases lost to be followed up. The trend of drop out is also significant ranging in above 200 per trimester.

Till Jan '10, targeted 2 ART sub centers have been established. During this period 25898 episode of treatment have been treated against Opportunistic Infection which seems to be quite high. The number has been high since the record includes repeated clients as well as new clients.

d. Other Results contributing to the Output and/or Outcome

Against its target to expand Voluntary Counseling and Testing (VCT) sites 29 new sites have been established till Jan. '10. With the additional VCT services sites there are now 65 sites functioning in total through government hospitals and PHCs. The main objective behind increasing the number of VCT sites is to increase their access to as many people as possible who seek VCT services. Through these 65 VCT sites 17280 people have been tested and counseled till 15th Nov. 2009. While the new VCT sites that have been established in the 3rd quarter are yet to report on the service being provided, the ones that were established during the 02nd quarter have started reporting regularly. However there has been no documentation in regards to the demand creation or availability of awareness programmes to increase the awareness level in the community. With the additional VCT sites the total number of people tested and counseled is expected to rise in the coming period. It has been predicted that 4 clients will be tested and counseled per day per site in each new sites established thus totaling up to 51840 people being tested per site in a year while the number of people tested and counseled in each old sites is predicted to be 3 clients per day per site reaching up to 17280 people per site in a year as specified in the performance framework. The targets were set by Global Fund under the assumption that clients prefer visiting new sites for VCT trainings.

One of the challenges faced by the programme is in reaching out to female to participate in the various trainings. Through the various trainings it has been providing in the National level, in total 53 females out of 438 health professionals have been trained. The different trainings include training on 'Voluntary HIV Counseling and testing', 'STI Etiological Case Management', 'HIV Testing' and 'Aids Programme Management'. While male are the major participants in most of the trainings, the number of female is high in certain trainings such as STI Etiological Case Management and HIV testing due to it being highly prevalent in female rather than male and at the same time treatment for STI is highly sought by females in the context of Nepal.

c. Results in Gender Equality, Women's Empowerment, and Social Inclusion

Describe results achieved by the project in promoting gender equality, women's empowerment and social inclusion, using the questions below as guidance.

The major target of GF support is to "Strengthen National Capacity for governance and coordination of AIDS response." It aims on building the capacity of the National HIV/AIDS entities in implementing large donor grants through health sector component while it has no special focus on Gender Equality, Women's Empowerment and Social Inclusion, it has been able to address to the uprising issue of third gender by incorporating them in the service provision list and also by acknowledging their presence in the society. Likewise, the programme has opened up its trainings for both male and female.

In line with its objective of supporting the training of national counterparts, the project has committed itself in training the government counterparts in 16 different components as such in 2009. 62 health workers have been trained on etiologic management, 175 health workers trained on syndromic management. Similarly, 25 people have been trained on logistics management, and 100 District Aids management. Similarly, 25 people have been trained on etiologic management, 175 health workers trained on syndromic management. Similarly, 25 people have been trained on logistics management, and 100 District Aids management.

To date out of the 105 targeted DACCS Coordinators/members to be trained on HIV/AIDS Programme Management 102 members have been trained till Nov. 15th 09. The remaining members will be trained after the selected DACCC Coordinators come on board during the first quarter of 2010.

NCASC and HSCB which will be part of the CD implementation plan.

throughout December, 2009. An Exit Strategy has been in built in the capacity development plan of Implementation Plan of HSCB were developed in early 2009 and implementation started in March, 2009 prepared by outsourcing HURDEC to do the needful. The Capacity Development Strategy and HSCB to consider the role and structure of the Board; Capacity Development Strategy for HSCB was HSCB, based upon the key findings and recommendations, a working support group was established in approved the plan will be implemented by conducting the activities enlisted in the plan. In regards to the Plan has been developed to and has been submitted for final approval by the GoN. Once the plan is Procurement Specialist and a Store Assistant to support programme delivery. A capacity development assistants; finance and administration team, comprising of Finance Officer and a Finance Assistant and and Programme Officers; M&E team, comprising of M&E Officer, Surveillance Officer and two M&E UNDP has recruited 11 PMU staffs such as Programme team comprising of a Programme Coordinator capacity development plan for the respective entities. Based upon the key findings and recommendations, HIV & STI Control Board as a requirement of GFATM Rd 7 grant agreement and also to develop a Health and population / Department of Health services, National Centre for AIDS and STD control and HIV/AIDS PMU had conducted capacity assessments of the 3 National entities in 2008 i.e. Ministry of

have been made to strengthen the national logistic management system of MOHP.

MOHP especially for the health sector component of the HIV/AIDS programme. Similarly focused efforts Change and foster better coordination at district and central level. Similarly, support has been provided to made in strengthening the capacity of the HIV/AIDS & STI control board to bring necessary policy This project has been implemented in partnership with DOHS/NCASC and HSCB. Efforts have been

Briefly describe the capacity development strategy of the project, and describe national capacity built over the course of the year, looking at the following elements (This section will provide information for reporting to HQ.)

4. Contribution to Capacity Development

Though youths are beneficiaries of treatment programmes like ARV, STI, OI and VCT services there is no special programme to address youth.

Briefly describe, if relevant, how your project has supported youth. Where possible, provide significant examples and/or data illustrating your points.

3. Support to Youth initiatives

In total out of 35 districts with DACCC Coordinators, 30 have been reporting according to the national guideline including the National List of Core Indicators. The DACCS that have not reported are the ones where the Coordinators have not yet been recruited.

The high staff turnover rate (5 staffs as of 2009) being offered better opportunities and the time consuming staff hiring and contract extension procedure has hampered the programme in its implementation.

High staff turnover at the PMU

Government health facilities need to prepare the reports for the GFATM. Reporting has been irregular and quality of reporting needs to be improved.

Reporting

Frequent changes in the government staffs including the director of NCASC have made implementation of GFATM activities a serious challenge. The same applies to the work centre of HSCB, when the Vice Chair resigned in August 2009 and has not been replaced and no delegation of authority was provide to the Manager of the Board.

GFATM had assigned the HIV/AIDS PMU as GFATM PR, NCASC and HSCB had to perform as SRS. One of the difficulties in working with the Government entities, which seems very difficult due to the lack of clear roles and responsibilities attributed to each entity. Since decisions have to be taken by the government entities the lengthy and complex processes have affected the program performance.

At the government level

6. Implementation Challenges

An International Consultant has been hired to develop a Capacity Development Plan and implement the same for HSCB. The capacity development plan should include a plan to establish HR, Procurement and Financial System. This target has been accomplished in 2009. The HR, Procurement Plan and Financial System are all in place in HSCB.

UNDP HIV/AIDS PMU had partnership with Ministry of Health & Population/Department of Health services, National Centre for AIDS and STD Control and HIV & STI control Board.

5. Partnerships / South-South Solutions

Based on the framework prepared by an International Database Consultant a National Database has been established at HSCB and MoHP to strengthen the M&E System at the National level with the support of Yomari, a Local Software Development Company and orientation workshop to those involved in record keeping and reporting is yet to be conducted in 2010. This will allow both the entities to report on the national indicators and contribute to strengthening the National Plan.

Committee Coordinators trained. Through this the trainees will be able to provide quality health services from their service sites in the coming days.

7. Lessons learned and next steps

- To improve timeliness and quality reports from government health facilities constant follow-up with feedback on reports received will be conducted on a regular basis.
- For certain items such as HIV test kits that have expiry dates, delivery plan should be prepared before hand and constant follow-up done to ensure delivery at the right destination

8. Implementation Status of DEX or NEX Audit Action Plan (if applicable)

Audit areas – Findings	Impact Severity	Target date for Implementation	Implementation Status
Enhancement of Atlas knowledge/Training needed of Finance Staffs	Delay in updating	July 2009	Knowledge of staff on ATLAS has been improved however periodic training will further ensure proper recording of financial transactions.
Lack of monitoring and explanation for under & over utilization of expenditures to particular activities in comparison to Last Approved Budget	Donor relationship / project performance / budgetary control mechanism	Ongoing	Started to generate quarterly reports, analyzed the variances, discuss in project board and re-plan for subsequent period.
- Refund not yet received from NGOs, whose contracts were not extended, had not refunded unspent funds within time limit as stipulated in agreement.	Excess payment may not be recovered	December 2009	Disallowed costs and unspent funds were adjusted in subsequent payments to NGOs having ongoing agreements with UNDP. In the case of discontinued NGOs, most of the disallowed costs and unspent funds have been recovered.
- Inventory procured by NGOs neither returned back nor transfer of title took place	Resource of project / Loss of property	December 2009	Out of 12 NGOs, process of handover has been completed to 10 NGOs. 2 NGOs have ongoing project agreement with UNDP.
Direct Expenditure Report (DER) does not contain enough of Information on transaction. Negative balances in fund code	Accountability /Reliability	December 2009	Being a system issue has been discussed with UNDP HQ and solved.