



UNDP Southern Sudan

2011 Annual Work Plan

Project name	Amount
HIV/AIDS Prevention and Care Programme in Southern Sudan: Global Fund for AIDS, TB and Malaria (GFATM) Round 4	US\$5,794,739

H.E David Deng Athorbei Minister of Finance and Economic Planning Government of Southern Sudan	Mr. Joe Feeney Head of Office UNDP Southern Sudan Programme
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Date: 25 - 01	Date:



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**United Nations Development Programme
Southern Sudan
Annual Work Plan 2011**

Project Title HIV Prevention and Care Programme for Southern Sudan: GFATM Round 4

UNDAF Outcome: By 2012, individuals and communities have equitable access to and increased utilization of strengthened and quality basic social services within an enabling environment, with special emphasis on women, youth, children and vulnerable groups.

Expected CP Outcome: Improved impact of resources to fight HIV/AIDS (*and other diseases*)

Expected CP Output: Better delivery/usage of the GFATM funds for response to HIV/AIDS and other diseases.

Implementing Partner: UNDP
Government of Southern Sudan, Ministry of Health (MoH),
Southern Sudan HIV/AIDS Commission (SSAC)
Responsible Parties: Catholic Diocese of Torit (CDoT), WHO, UNICEF

Brief Description

The HIV/AIDS Prevention and Care Project aims to strengthen a coordinated Southern Sudan response to HIV/AIDS by building capacity at the GoSS, State and County levels, and supporting the scale up of comprehensive HIV/AIDS services. The project is in its second phase, and it will end on July 31st 2011.

The major objectives are to: (i) improve knowledge and practice of HIV and Sexually Transmitted Infections (STI) preventative measures by the general adult population, youth and vulnerable population subgroups during 2005-2010; (ii) develop and expand treatment, and care and support services for people and families living with HIV/AIDS; and (iii) build the capacity of Southern Sudan HIV/AIDS Commission (SSAC), NGOs and local institutions to effectively manage and monitor HIV/AIDS programmes.

Programme Period:	2009-2012	2011 AWP budget:	US\$5,794,739
Programme Component: 1	Poverty Reduction and the Achievement of the MDGs	Total resources required:	US\$5,794,739
Atlas Award ID:	41178	Total allocated resources:	US\$5,794,739
Start date:	1 January 2011	• Regular:	
End Date:	31 July 2011	• Other:	
PAC Meeting Date:	30 November 2010	• GFATM	US\$5,794,739
Management Arrangements:	Direct Implementation	Unfunded budget	N/A
		In-kind Contributions:	N/A

Agreed by the Ministry of Finance and Economic Planning: _____

Agreed by the Ministry of Health: _____

Agreed by the UNDP: _____

I. ANNUAL WORK PLAN

Year: 2011

EXPECTED OUTPUT	PLANNED ACTIVITIES	TIMEFRAME				RESPONSIBLE PARTY	PLANNED BUDGET			
		Q 1	Q 2	Q 3	Q 4		Funding Source	Budget Description	Amount	
<p>Output 1: Improved knowledge and practice of HIV and STI preventive measures by general adult population, youth and vulnerable population sub-groups</p> <p><i>Indicators: Number of HIV/AIDS communication materials distributed</i> <i>Baseline: N/A</i> <i>Targets: 500,000</i></p>	<p>1. Activity Result: Behaviour Change Communication-Mass Media</p> <p>1.1.1 Action: Development of materials for communications using print media, and distribute through various channels</p>	X	X	X		<p>UNDP in support of UNICEF, SSAC, CDoT, and MoH</p>	72600 (Grants)	US\$260,102		
<p>Indicators: Number of people trained <i>Baseline: 800</i> <i>Targets: 1,505</i></p>	<p>1.1.2 Action: Conduct awareness-raising workshops for leaders of unformed personnel</p>	X	X	X			<p>UNDP in support of UNICEF, SSAC, CDoT, and MoH</p>	72300 (Materials & Goods)	US\$19,000	
<p>Indicators: number of people sensitized <i>Baseline: 3,512</i> <i>Targets: 12,300</i></p>	<p>1.1.4 Action: BCC outreach activities with community leaders, local government and NGO staff and peer educators in communication, peer education and prevention</p>	X	X	X				<p>UNDP in support of UNICEF, SSAC, CDoT, and MoH</p>	GMS (7%)	US\$19,537
<p>Indicators: number of condoms distributed <i>Baseline: 1,151,480</i> <i>Targets: 5,000,000</i></p>	<p>1.1.5 Action: Conduct condom promotion mass campaign (including distribution)</p>	X	X	X						

<p><i>Indicators:</i> Number of master trainers trained Baseline: 374 Targets: 420</p> <p><i>Indicator:</i> Life skills trainers trained Baseline: 557 Target: 140</p> <p><i>Indicator:</i> Number of schools with teachers trained in life-skills based HIV/AIDS education Baseline: 421 Target: 600</p> <p><i>Indicator:</i> Number of young people exposed to HIV/AIDS education in and out of school settings Baseline: 100,000 Target: 117,191</p> <p><i>Indicator:</i> Revision of Curriculum/Evaluation Report Baseline: 0 Target: 1</p>	<p>2. Activity Result: Youth Education and Prevention</p> <p>1.2.1 Action: Conduct Training of trainers on life-skills based HIV/AIDS education for primary and secondary school students.</p> <p>1.2.2 Action: Skill development workshop for trainers of out-of-school youth</p> <p>1.2.3 Action: Conduct training for teachers in life-skills HIV/AIDS education</p> <p>1.2.4 & 1.2.5 Action: Conduct life-skills based education for in and out of school youth</p> <p>1.2.6 Action: Evaluation of Life Skills Peer Education Intervention</p>	<p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p>	<p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p>	<p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p>	<p>UNDP in support of UNICEF, and CDoT</p> <p>UNDP in support of UNICEF, and CDoT</p> <p>UNDP in support of UNICEF, and CDoT</p> <p>UNDP in support of UNICEF, and CDoT</p> <p>UNDP in support of UNICEF</p>	<p>GFATM/300 78</p>	<p>72600 (Grants) GMS (7%)</p>	<p>US\$61,571 US\$4,310</p>
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<p><i>Indicator:</i> Community-based prevention and awareness-raising activities targeting mobile populations <i>Baseline:</i> 141,281 <i>Target:</i> 80,000</p> <p><i>Indicator:</i> Number of sex workers and their clients reached with awareness-raising activities <i>Baseline:</i> 16,757 <i>Target:</i> 30,002</p>	<p>3. Activity Result: Programmes for specific groups</p> <p>1.3.1 Action: Community-based prevention and awareness-raising activities targeting mobile populations</p> <p>1.3.2 Action: Conduct awareness-raising activities for sex workers (Training of Trainers) – 20 outreach sessions for 10 Trainers each, i.e. 200 trainers per year</p>	<p>X</p> <p>X</p> <p>X</p>	<p>X</p> <p>X</p> <p>X</p>	<p>UNDP in support of MoH</p> <p>UNDP in support of MoH</p>	<p>GFATM/300 78</p>	<p>72600 (Grants) GMS (7%)</p>	<p>US\$38,968 US\$2,728</p>
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<p><i>Indicator:</i> Number of new service deliverers trained as counsellors per national VCCT protocol <i>Baseline:</i> 291 <i>Target:</i> 311</p>	<p>4. Activity Result: Counselling and Testing</p> <p>1.4.1 Action: Training of new service deliverers in VCCT per National protocol (incl. for mobile teams)</p>	<p>X</p> <p>X</p> <p>X</p>	<p>UNDP in support of MoH</p>	<p>GFATM/300 78</p>	<p>72600 (Grants)</p> <p>72300 (Materials & Goods)</p> <p>GMS (7%)</p>	<p>US\$255,351</p> <p>US\$106,870</p> <p>US\$25,355</p>
<p><i>Indicator:</i> Number of VCCT supervisors trained <i>Baseline:</i> 0 <i>Target:</i> 30</p>	<p>1.4.2 Action: Training of VCCT Supervisors</p>	<p>X</p> <p>X</p> <p>X</p>	<p>UNDP in support of MoH</p>			
<p><i>Indicator:</i> Number of new VCCT sites established <i>Baseline:</i> 28 <i>Target:</i> 30</p>	<p>1.4.3 Action: Expansion of new VCCT sites according to standardized guidelines(including BCC material, condoms)</p>	<p>X</p> <p>X</p> <p>X</p>	<p>UNDP in support of UNICEF, and CDoT</p>			
<p><i>Indicator:</i> Percentage of VCCT centres reporting no stock-out of test kits <i>Baseline:</i> N/A <i>Target:</i> 100%</p>	<p>1.4.4 Action: Procurement of Test Kits</p>	<p>X</p> <p>X</p> <p>X</p>	<p>UNDP in support of UNICEF, and CDoT</p>			
<p><i>Indicator:</i> Number of people receiving HIV counselling and testing, including provision of test results <i>Baseline:</i> 71,670 <i>Target:</i> 135,000</p>	<p>1.4.5 Action: Provision of VCCT services</p>	<p>X</p> <p>X</p> <p>X</p>	<p>UNDP in support of UNICEF, and CDoT</p>			

<p><i>Indicator:</i> Number of service deliverers trained in syndromic management of STIs <i>Baseline:</i> 128 <i>Target:</i> 258</p>	<p>5. Activity Result: STI Diagnosis and Treatment</p> <p>1.5.1 Action: Training of service delivery staff in Syndromic management of STIs (incl. SPLA medical corps)</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of WHO, and CDoT</p>	<p>GFATM/300 78</p>	<p>72600 (Grants) 72300 (Materials & Goods) GMS (7%)</p>	<p>US\$32,211 US\$202,024 US\$16,396</p>
<p><i>Indicator:</i> Number of health facilities receiving commodities <i>Baseline:</i> N/A <i>Target:</i> 100</p>	<p>1.5.2 Action: To ensure STI drugs and commodities procurement and supply to STI sites</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of MoH, and CDoT</p>			
<p><i>Indicator:</i> Number of patients receiving comprehensive management <i>Baseline:</i> 32,343 <i>Target:</i> 50,003</p>	<p>1.5.3 Action: Provision of STI comprehensive management</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of MoH, and CDoT</p>			
<p><i>Indicator:</i> Number of Pregnant women tested for syphilis <i>Baseline:</i> N/A <i>Target:</i> 9,000</p>	<p>1.5.4 Action: To provide STI screening at ANC sites</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of MoH</p>			
<p><i>Indicator:</i> Number of supervision visits <i>Baseline:</i> 12 <i>Target:</i> 32</p>	<p>1.5.5 Action: Supervision and monitoring of STI services at sites</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of MoH</p>			

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<p>Output 2: Treatment, care and support services for people and families living with HIV/AIDS developed and expanded</p>	<p>6. Activity Result: Antiretroviral Treatment and monitoring</p>	<p>GFATM/300 78</p>	<p>72600 (Grants) 72300 (Materials & Goods) GMS (7%)</p>	<p>US\$720,311 US\$1,026,200 US\$122,256</p>
<p><i>Indicator:</i> Number of service deliverers trained in ART Baseline: 133 Target: 100</p>	<p>2.6.1 Action: Train service deliverers in provision of ART according to guidelines</p>	<p>X</p>	<p>UNDP in support of MoH, and WHO</p>	
<p><i>Indicator:</i> Number of service deliverers trained in Paediatric ART Baseline: 0 Target: 15 <i>Indicator:</i></p>	<p>2.6.2 Action: Train service deliverers in Paediatric ART management</p>	<p>X</p>	<p>UNDP in support of MoH, UNICEF, and CDoT</p>	
<p>Number of service deliverers trained in PMTCT Baseline: 130 Target: 142</p>	<p>2.6.3 Action: Train service delivery staff in the provision of PMTCT according to national guidelines</p>	<p>X</p>	<p>UNDP in support of MoH, UNICEF, and CDoT</p>	
<p><i>Indicator:</i> Guidelines finalized and distributed Baseline: 0 Target: 1</p>	<p>2.6.4 Action: Development of national PMTCT guidelines</p>	<p>X</p>	<p>UNDP in support of SSAC, UNICEF, and CDoT</p>	
<p><i>Indicator:</i> Number of sites distributing BCC materials Baseline: 0 Target: 28</p>	<p>2.6.5 Action: Development and distribution of BCC materials for ART/PMTCT services</p>	<p>X</p>	<p>UNDP in support of MoH, UNICEF, and CDoT</p>	
<p><i>Indicator:</i> Number of ANC sites providing PMTCT services Baseline: 31 Target: 36</p>	<p>2.6.6 Action: Integration of PMTCT into ANC sites</p>	<p>X</p>	<p>UNDP in support of MoH, and WHO</p>	

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<p><i>Indicator:</i> Number of health facilities providing ART & related services <i>Baseline:</i> 14 <i>Target:</i> 22</p>	<p>2.6.7 Action: Expansion of ART for PLWHAs</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of MoH, and WHO</p>
<p><i>Indicator:</i> Number of sites receiving commodities <i>Baseline:</i> 14 <i>Target:</i> 22</p>	<p>2.6.8 Action: Procurement of kits & consumables for VCCT/ART/PMTCT</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of WHO, UNICEF, and CDoT</p>
<p><i>Indicator:</i> Number of people receiving ART (Adults, ANC, children) <i>Baseline:</i> 3,146 <i>Target:</i> 2,550</p>	<p>2.6.10 Action: Provision of ART to PLWHA in 18 sites</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of WHO</p>
<p><i>Indicator:</i> Number of support groups/clubs established with active members <i>Baseline:</i> 0 <i>Target:</i> 2</p>	<p>2.6.14 Action: Establishment of support groups for PLWHA and people affected (including special groups i.e. SPLA) by HIV/AIDS linked to health facilities</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of WHO</p>

<p>Indicator: Number of laboratory technicians trained Baseline: 35 Target: 50</p>	<p>7. Activity Result: Blood Safety and Universal Precautions</p> <p>2.7.1 Action: Training of laboratory technicians in laboratory testing in blood screening, blood donor recruitment & retention and appropriate clinical use of blood and blood products</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of MoH</p>	<p>72600 (Grants) 71200 (International Consultants) 72300 (Materials & Goods) GMS (7%)</p>	<p>US\$104,431 US\$14,250 US\$214,812 US\$23,345</p>
<p>Indicator: number of health workers trained in UP Baseline: 30 Target: 200</p>	<p>2.7.2 Action: Training of health workers in universal precaution practices</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of MoH</p>		
<p>Indicator: Number of health facilities receiving supplies Baseline: N/A Target : 20</p>	<p>2.7.3 Action: Procurement of universal precautions and laboratory testing supplies</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of WHO, and MoH</p>		
<p>Indicator: Number and % of health screening facilities transfused blood units for HIV according to national guidelines Baseline: 18 Target: 29</p>	<p>2.7.4 Action: Strengthening hospital-based blood transfusion services activities (incl. blood banks in tertiary hospitals)</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of WHO</p>		
<p>Indicator: Number of health facilities applying national safety guidelines on blood safety and universal precautions Baseline: 31 Target: 57</p>	<p>2.7.5 Action: Supportive supervision and monitoring of universal precautions and blood safety activities at health facilities</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNDP in support of WHO</p>		

<p>Output 3: Capacities of SSAC, NGOs and local institutions built to effectively manage and monitor HIV/AIDS programmes</p>	<p>8. Activity Result: Supportive environment-monitoring & evaluation and operations research</p>		GFATM/300 78	72600 (Grants) GMS (7%)	US\$164,635 US\$11,524
<p><i>Indicator:</i> Number of senior staff members trained <i>Baseline:</i> 30 <i>Target:</i> 40</p>	<p>3.8.1 Action: Train MoH & SSAC senior staff in finance management (quick books)</p>	X	UNDP in support of MoH, and SSAC		
<p><i>Indicator:</i> Office established & equipped <i>Baseline:</i> N/A <i>Target:</i> 1</p>	<p>3.8.3 Action: Support to set-up of M&E section in MoH-HIV Directorate (Prefab. Staffs)</p>	X	UNDP in support of MoH, and SSAC		
<p><i>Indicator:</i> Tools finalized and distributed <i>Baseline:</i> N/A <i>Target:</i> 1</p>	<p>3.8.4 Action: Development of standardized M&E data collection tools</p>	X	UNDP in support of WHO, UNICEF, MoH, and CDoT		
<p><i>Indicator:</i> Annual meeting held <i>Baseline:</i> N/A <i>Target:</i> 2</p>	<p>3.8.5 Action: Convene national HIV/AIDS annual coordination Meeting</p>	X	UNDP in support of MoH, and SSAC		
<p><i>Indicator:</i> State annual meetings held <i>Baseline:</i> 1 <i>Target:</i> 2</p>	<p>3.8.6 Action: Convene state-level annual HIV/AIDS coordination meeting</p>	X	UNDP in support of MoH, and SSAC	X	
<p><i>Indicator:</i> Surveillance officer and lab supervisors recruited <i>Baseline:</i> N/A <i>Target:</i> 5</p>	<p>3.8.7 Action: Recruit Staff to MoH for Surveillance</p>	X	UNDP in support of MoH	X	

<p><i>Indicator:</i> Survey published by MoH <i>Baseline:</i> 0 <i>Target:</i> 1</p>	<p>3.8.8 Action: Conduct Sentinel Surveillance Survey-ANC sites & STI patients</p>	<p>X</p>	<p>UNDP in support of MoH</p>		
<p><i>Indicator:</i> Number of dissemination workshops conducted <i>Baseline:</i> N/A <i>Target:</i> 1</p>	<p>3.8.9 Action: Conduct HIV surveillance reports dissemination workshop</p>	<p>X</p>	<p>UNDP in support of MoH</p>		
<p><i>Indicator:</i> Finalization and distribution of national surveillance strategic plan <i>Baseline:</i> N/A <i>Target:</i> 1</p>	<p>3.8.10 Action: Development of HIV surveillance national strategic plan</p>	<p>X</p>	<p>UNDP in support of MoH, and SSAC</p>		
<p><i>Indicator:</i> Number of people trained to conduct sentinel surveillance <i>Baseline:</i> 50 <i>Target:</i> 108</p>	<p>3.8.11 Action: Train staff in sentinel surveillance</p>	<p>X</p>	<p>UNDP in support of MoH</p>		
<p><i>Indicator:</i> Number of sentinel sites operational <i>Baseline:</i> 24 <i>Target:</i> 25</p>	<p>3.8.12 Action: Establishment and operationalization of sentinel surveillance sites</p>	<p>X</p>	<p>UNDP in support of MoH</p>		
<p><i>Indicator:</i> Number of health facility quality assessments disseminated <i>Baseline:</i> N/A <i>Target:</i> 1</p>	<p>3.8.13 Action: Conduct health facility quality assessment</p>	<p>X</p>	<p>UNDP in support of MoH</p>		
<p><i>Indicator:</i> Number of workshops organized <i>Baseline:</i> 3 <i>Target:</i> 4</p>	<p>3.8.16 Activity action PLHIV Associations: Organization of national & state-level workshops</p>	<p>X</p>	<p>UNDP in support of SSAC</p>		

<p><i>Indicator:</i> Number and percentage of health facilities without ART drugs stock out <i>Baseline:</i> 80% <i>Target:</i> 100%</p> <p><i>Indicator:</i> Number of staff trained on PSM for ART <i>Baseline:</i> 40 <i>Target:</i> 50</p> <p><i>Indicator:</i> Experienced pharmacist recruited <i>Baseline:</i> N/A <i>Target:</i> 1</p>	<p>9. Activity Result: Procurement and Supply Management building Capacity</p> <p>3.9.1 Action: Conduct health facility PSM assessments</p> <p>3.9.3 Action: To train staff on PSM for ART</p> <p>3.9.4 Action: Recruitment of pharmacist in MoH to advise for test kits, ARV, OI, STI forecasting and PSM</p>	<p>X</p> <p>X</p> <p>X</p> <p>X</p>	<p>X</p> <p>X</p> <p>X</p> <p>X</p>	<p>UNDP in support of MoH, WHO, UNICEF, and CDoT</p> <p>UNDP in support of MoH</p> <p>UNDP in support of MoH</p>	<p>GFATM/300 78</p>	<p>72600 (Grants) GMS (7%)</p> <p>US\$23,750 US\$1,663</p>
<p><i>Indicator:</i> Recruitment of staff to manage Round 4 HIV/AIDS activities for SRs <i>Baseline:</i> 0% <i>Target:</i> 100%</p> <p><i>Indicator:</i> SR operational costs to manage Round 4 HIV/AIDS activities <i>Baseline:</i> 0% <i>Target:</i> 100%</p>	<p>10. Activity Result: Programme Planning and Administration</p> <p>3.10.1 Action: Recruitment of staff to support SR activities (WHO, MoH, UNICEF, CDoT, SSAC)</p> <p>3.10.2 Action: Support programme operational costs for activities under Round 4 HIV/AIDS including SR GMS (WHO, MoH, UNICEF, CDoT, SSAC)</p>	<p>X</p> <p>X</p> <p>X</p>	<p>X</p> <p>X</p> <p>X</p>	<p>UNDP in support of MoH, WHO, UNICEF, CDoT, and SSAC</p> <p>UNDP in support of MoH, WHO, UNICEF, CDoT, and SSAC</p>	<p>GFATM/300 78</p>	<p>72600 (Grants) GMS (7%)</p> <p>US\$916,662 US\$64,166</p>

	<p>Activity Result 11 (PMU): Strengthening management of the HIV Grant</p> <p>3.11.1 Action: Salaries and operation cost</p> <p>Activity Result 12: Project Management Activities properly carried out</p> <p>3.12.1 Action: Contract the Supply Chain Management agent (SCM)</p> <p>3.12.1 Action: Carry out Project Management Activities including liaising and reporting to CCM</p> <p>3.12.2 Action: PR infrastructure, planning and administration</p>	<p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p>	<p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p>	<p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p>	<p>UNDP-PMU</p> <p>UNDP PMU and SCM Agent</p> <p>UNDP-M&E</p> <p>UNDP PMU</p>	<p>GFATM/300 78</p>	<p>61100 (Staff Cost)-</p> <p>75105 (Facilities & Admin – Implement) (PR Planning, Admin, Infrastructure, and SCM)</p> <p>71600 (Travel-M&E)</p> <p>GMS (7%)</p> <p>Rental & Maintenance (common services-premises): 3%;</p> <p>Contribution (office common security) : 1%;</p> <p>Reimbursement Cost (to UNDP for support services); 1%;</p>	<p>US\$475,000</p> <p>US\$475,000</p> <p>US\$50,597</p> <p>US\$70,042</p> <p>US\$131,405</p> <p>US\$43,802</p> <p>US\$43,802</p> <p>US\$5,794,739</p>
TOTAL								

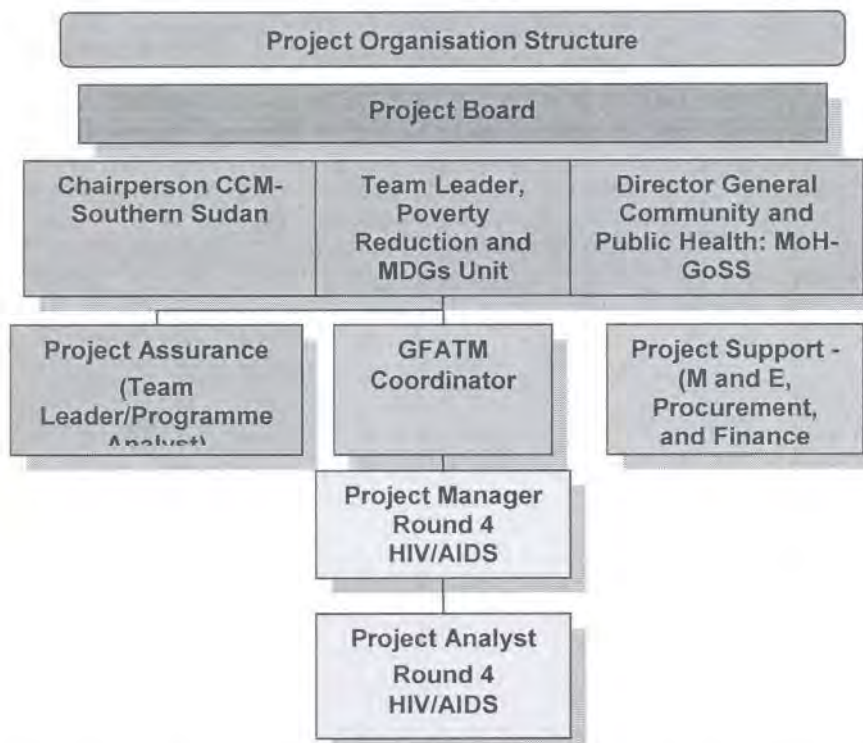


II. MANAGEMENT ARRANGEMENTS

The project will operate under the oversight of a Project Board which includes the Chair Person of CCM-SS (Country Coordinating Mechanism Southern Sudan), the Deputy Head of Office (Programme) for UNDP and the Director General of Community and Public Health. The Project Board is responsible for the overall direction and management of the project and has responsibility and authority for the project within the remit of the project mandate. The Project Board approves all major plans and authorises any major deviation from agreed plans. It is the authority that signs off the completion of each year of the project, as well as authorises the start of the next year. It ensures that required resources are committed, and arbitrates on any conflicts within the project, negotiating solutions to any problems between the project and external bodies.

The Project Board is ultimately responsible for assuring that the project remains on course to deliver the desired outcome of the project as defined in the Project Document. According to the size, complexity and risk of the project, the Project Board may decide to delegate some of this Project Assurance responsibility.

The overall project organisation structure is as follows:



The Global Fund Project is part of the Poverty Reduction and MDGs Unit and is supported by other Units such as Operations and Business Management Unit. In Southern Sudan, UNDP has been serving as a last resort Principal Recipient - PR since 2004 for five grants.

The PR works in collaboration with national and international partners involved in the fight against HIV and AIDS. The Global Fund resources are additional to national resources and as well as resources by other partners.

The PR has a number of Conditions Precedent and Special Terms and Conditions that should be fulfilled during various stages of the programme Grant Agreement. These Conditions Precedent and Special Terms and Conditions are outlined in Sections B and C of the Annex A to the Grant Agreement between Principal Recipient and the Global Fund.

The Country Coordination Mechanism – CCM performs the oversight function as well as monitoring and evaluation of the Global Fund projects in the country. Different stages of project implementation such as project amendments, phase two continuation requests, no cost extension request, are cleared by and submitted to the Global Fund through the CCM.

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The Local Fund Agent – LFA, serves as Global Fund representative in the country. It provides oversight of the project implementation, conducts verification of the programmatic and financial reports and makes recommendations to the Global Fund with regards to project progress and disbursement of funds.

The Project management Unit- PMU of the PR has four major functions.

Project Management: This is comprised of project managers and project analysts. The project manager is fully responsible for the overall coordination of the project activities. The project manager and the analyst works in close collaboration with the national counterparts and other stakeholders to implement this project.

Procurement and Supply Management: This team is headed by a procurement specialist, one procurement specialist for health products, a procurement analyst and an associate. Under the grant agreement signed between UNDP as PR and the Global Fund, all procurement activities are exclusively done by the PR.

Finance Management: This team is made up of a finance specialist, an analyst, two finance associates, and one administrative assistant. The finance team is responsible for budget management.

Monitoring and Evaluation: This team is composed of two M and E specialists, two analysts based at GoSS level, with four international UNVs based at state levels. The team is responsible for monitoring of project activities, review and verification of data and preparation of progress reports to the donor.

The PR has subcontracted six agencies to execute this project as follows:

Community and Public Health Directorate, Ministry of Health, Government of Southern Sudan (MoH-GoSS)

This Project is aimed at enhancing the Ministry of Health capacity at GoSS State and County levels to implement as well as monitor the health sector response to HIV and AIDS in Southern Sudan. The key components of the project include training and monitoring of service deliverers in HIV and AIDS Counselling and Testing, STI diagnosis and treatment, Anti Retro Viral Treatment and monitoring, as well as procurement and supply management capacity building. The project will be directly implemented by the Community and Public Health Directorate in the Ministry of Health.

Southern Sudan HIV/AIDS Commission (SSAC)

The HIV prevention and care project aims to strengthen a coordinated Southern Sudan response to HIV/AIDS by building capacity at the GoSS, State and County levels, and supporting the scale up of comprehensive HIV/AIDS services. The Project is in the second phase. In the first phase, the project supported the set up of SSAC coordinating mechanisms at GoSS and state levels. In this second phase emphasis is put on strengthening monitoring mechanisms at GoSS, States and counties, to ensure effective use of resources to fight HIV/AIDS. Key components of the project include coordination of the roll out of the SS HIV/AIDS strategic framework including the HIV/AIDS Behaviour Change Communication strategy, coordination of the roll out of the SS HIV/AIDS M&E framework as well as strengthening the capacity of SSAC at GoSS, State and county to coordinate and manage the HIV/AIDS response. The project will be directly implemented by SSAC.

WHO

WHO will continue supporting the roll out of ART to current and additional sites, including the provision of ART site implementation packages to NGO partners, training and ongoing support/supervision to HIV care and treatment activities. WHO technical assistance will include training of clinical mentors, support with product specification of ARVs and other drugs for the management of Opportunistic Infections (OI) among PLWHs, and review of the blood safety activities in the country.

A national programme officer will be recruited and seconded to the blood safety unit of the MoH-GoSS, to support with training in blood safety and universal precaution as well as reporting.

UNICEF, and

Catholic Diocese of Torit (CDoT)

UNICEF and CDoT are responsible for the implementation of the key interventions under the following Service Delivery Areas (SDAs): (1) Behaviour Change Communications (BCC) – Mass Media, (2) youth education and prevention, (3) counselling and testing, and (4) Anti-retroviral Treatment, specifically focusing on Prevention of Mother to Child Transmission (PMTCT).

Supply Chain Management agent: This is the SCM agent responsible for quantification of all drugs, supplies and lab equipments for the three diseases (TB, HIV/AIDS and Malaria). It is also responsible for proper storage of these drugs and other consumables and timely distribution to various health facilities. This agent also conducts support supervision to the health facilities and trains the health care providers in the rational use of drugs.

Audit arrangements

Article 7b, points i. and ii. Of the Special Terms and Conditions of the Grant Agreement between UNDP and the Global Fund state that:

- i. The Principal Recipient shall have annual financial audits conducted of Programme expenditures. Subject to the approval of the Global Fund, which approval shall not be unreasonably withheld, the Principal Recipient shall select an independent auditor to conduct the audits and set the terms of reference pursuant to which they shall be conducted. The cost of such special audit shall be borne by the Programme.
- ii. Should the Global Fund have reason to request a special purpose audit on the use of Global Fund resources, UNDP agrees to be responsible for: (i) securing the appointment of a mutually agreed independent auditor; and (ii) preparing mutually agreed audit Terms of Reference which reflect, as necessary, circumstances giving rise to the Global Fund's request for said audit. The cost of such special audit shall be borne by the Programme.

The PR is also required to conduct annual audits of the SRs.

Agreement on intellectual property rights and use of logo on the project's deliverables

The Principal Recipient must enter into an agreement with the Global Fund prior to using the Global Fund logo. The logo must be used in accordance with the terms and conditions of that agreement.

III. MONITORING FRAMEWORK AND EVALUATION

In accordance with the programming policies and procedures outlined in the UNDP User Guide, the project will be monitored through the following:

Within the annual cycle

- On a quarterly basis, a quality assessment shall record progress towards the completion of key results, based on quality criteria and methods captured in the Quality Management table below.
- An Issue Log shall be activated in Atlas and updated by the Project Manager to facilitate tracking and resolution of potential problems or requests for change.
- Based on the initial risk analysis submitted, a risk log shall be activated in Atlas and regularly updated by reviewing the external environment that may affect the project implementation.
- Based on the above information recorded in Atlas, a Project Progress Reports (PPR) shall be submitted by the Project Manager to the Project Board through Project Assurance, using the standard report format available in the Executive Snapshot.
- A project Lesson-learned log shall be activated and regularly updated to ensure on-going learning and adaptation within the organization, and to facilitate the preparation of the Lessons-learned Report at the end of the project
- A Monitoring Schedule Plan shall be activated in Atlas and updated to track key management actions/events

Annual reports

Annual Reports: Article 13, b. (2) states that Not later than 45 days after the close of each fiscal year of the Principal Recipient, the Principal Recipient shall submit to the Global Fund, in form and substance satisfactory to the Global Fund, an annual financial and programmatic monitoring report (in addition to the six-monthly reports) covering the preceding fiscal year.

Annual Project Review: Based on the above report, an annual project review shall be conducted during the fourth quarter of the year or soon after, to assess the performance of the project and appraise the Annual Work Plan (AWP) for the following year. In the last year, this review will be a final assessment. This review is driven by the Project Board (the Country Coordinating Mechanism) and may involve other stakeholders as required. It shall focus on the extent to which progress is being made towards outputs, and that these remain aligned to appropriate outcomes.

Additionally, in accordance with the Standard Terms and Conditions in the grant agreement between the Principal Recipient and the Global Fund, the project will be monitored as follows:

Six monthly reports

Article 13, b. (1) states that "not later than 45 days after the close of each reporting period of the specific programme grant agreement, the Principal Recipient shall submit to the Global Fund, in form and substance satisfactory to the Global Fund, a periodic report on the Programme. The report shall reflect (i) financial activity during the reporting period in question and cumulatively from the beginning of the Programme until the end of the reporting period; and (ii) a description of progress towards achieving the agreed-upon milestones set forth in Annex A of the Grant Agreement. The Principal Recipient shall explain in the report any variance between planned and actual achievements for the period in question".

Project Evaluation

The Global Fund projects are subject to two types of evaluations. Midterm evaluations are conducted for projects transitioning from phase I to phase II. Final evaluations are conducted at the end of phase II of the project. The HIV Round 4 grant is in phase II of project implementation and a final evaluation is planned at the end of the project.

Quality Management for Project Activity Results

OUTPUT 1: Improved knowledge and practice of HIV and STI preventive measures by general adult population, youth and vulnerable population sub-groups		
Activity Result 1	Behaviour Change Communication-Mass Media	Start Date: 1 January 2011 End Date: 31 July 2011
Purpose	To improve the knowledge and practice of HIV and STI preventive measures by general adult population, youth and vulnerable population sub-groups	
Description	<ul style="list-style-type: none"> • Develop 500,000 materials for communications using print media, and distribute through various channels • Conduct workshops for 1,505 leaders of uniformed personnel • Conduct one national KAP Survey • Conduct BCC outreach activities with 8,700 community leaders, local government and NGO staff and peer educators in communication, peer education and prevention • Conduct condom promotion mass campaign including distribution of 3,000,000 	
Quality Criteria	Quality Method	Date of Assessment
BCC outreach activities with 12,300 community leaders, local government and NGO staff and peer educators in communication, peer education and prevention conducted	Review of training reports, attend a minimum of two activities, and onsite verification	May, August, November 2011
Condom promotion mass campaign including distribution of 5,000,000 condoms	Review of campaign materials, attend a minimum of three of the campaigns	May, August, November 2011
Activity Result 2	Youth Education and Prevention	Start Date: 1 January 2011 End Date: 31 July 2011
Purpose	To improve the knowledge and practice of HIV and STI preventive measures by general adult population, youth and vulnerable population sub-groups	
Description	<ul style="list-style-type: none"> • Train 420 training of trainers on life-skills based HIV/AIDS education for primary and secondary school students. • Conduct skills development workshop for 140 trainers of out-of-school youth • Train 600 teachers in life-skills HIV/AIDS education • Conduct Life-skills based education for 117,191 in and out of school youth • Evaluate Life Skills Peer Education Intervention 	
Quality Criteria	Quality Method	Date of Assessment
Scale up life skills based HIV/AIDS education through training of trainers for both in and out of school youth	Review training curriculum and training reports	May, August, November 2011
Life-skills based education for 117,191 in and out of school youth	Review training curriculum and training reports	May, August, November 2011
Activity Result 3	Programmes for Specific Groups	Start Date: 1 January 2011 End Date: 31 July 2011
Purpose	To improve the knowledge and practice of HIV and STI preventive measures by general adult population, youth and vulnerable population sub-groups	
Description	<ul style="list-style-type: none"> • Conduct Community-based prevention and awareness-raising activities targeting 80,000 mobile populations • Conduct awareness-raising activities for 30,002 sex workers and clients including IPC and condom distribution 	
Quality Criteria	Quality Method	Date of Assessment
80,000 mobile populations reached with community-based prevention and awareness-raising activities targeting	Activity reports	May, August, November 2011
30,002 sex workers and clients	Activity reports	May, August, November

targeted for awareness-raising activities including IPC and condom distribution.		2011
Activity Result 4	Counselling and Testing	Start Date: 1 January 2011 End Date: 31 July 2011
Purpose	To improve the knowledge and practice of HIV and STI preventive measures by general adult population, youth and vulnerable population sub-groups	
Description	<ul style="list-style-type: none"> • Train new service deliverers in VCCT per National protocol (incl. for mobile teams) • Train VCCT Supervisors • Expand to new VCCT sites according to standardized guidelines(including BCC material, condoms) • Procure Test Kits • Provide VCCT services 	
Quality Criteria	Quality Method	Date of Assessment
Scale up VCCT services through training of service deliverers, supervisors, opening of new sites, and provision of supplies	Training reports, feedback through the SRs and site visits	May, August, November 2011
135,000 people receiving VCCT including the provision of test results	Quarterly site specific VCCT registers, on site data verification	May, August, November 2011
Activity Result 5	STI Diagnosis and Treatment	Start Date: 1 January 2011 End Date: 31 July 2011
Purpose	To improve the knowledge and practice of HIV and STI preventive measures by general adult population, youth and vulnerable population sub-groups	
Description	<ul style="list-style-type: none"> • Train 258 service delivery staff in Syndromic management of STIs (incl. SPLA medical corps) • Procure STI drugs and commodities and supply to 100 STI sites • Provide STI comprehensive case management to 50,003 clients • Provide STI Screening to 9,000 clients at ANC sites • Conduct supervision and monitoring of 32 STI service sites 	
Quality Criteria	Quality Method	Date of Assessment
Scale up STI syndromic management services through training of service deliverers, provision of supplies, and supervision and monitoring	Training reports, feedback through SRs and site visits	May, August, November 2011
50,003 clients provided with STI comprehensive case management	Quarterly site specific STI registers	May, August, November 2011

OUTPUT 2: Treatment, care and support services for people and families living with HIV/AIDS developed and expanded		
Activity Result 6	Antiretroviral Treatment and monitoring	Start Date: 1 January 2011 End Date: 31 July 2011
Purpose	To provide treatment, care and support services for people and families living with HIV/AIDS.	
Description	<ul style="list-style-type: none"> • Train 100 service deliverers in provision of ART according to national guidelines • Train 15 service deliverers in Paediatric ART management • Train 142 service delivery staff in the provision of PMTCT according to national guidelines • Develop national PMTCT guidelines • Develop and distribute BCC materials to 28 ART/PMTCT services • Integrate PMTCT into 36 ANC sites • Expand ART for PLWHAs to 22 (cumulative) sites • Procure ARVs, PMTCT and OI drugs and related commodities for 22 sites • Provide ART to 2,550 people (Adults, ANC, children) • Establish support groups for PLWHA and people affected (including special groups i.e. SPLA) by HIV/AIDS linked to health facilities 	
Quality Criteria	Quality Method	Date of Assessment

Scale up ART, IOs, and PMTCT services through training of service deliverers, opening new sites, provision of supplies, and supervision and monitoring	Attendance lists, review of training reports, and site specific reports	May, August, November 2011
Provide ART to 2,550 people (Adults, ANC, children)	Site specific reports, onsite data verification	May, August, November 2011
Support groups for PLWHA and people affected (including special groups i.e. SPLA) established and linked to health facilities	PLWHA reports	August 2011
Activity Result 7	Blood Safety and Universal Precautions	Start Date: 1 January 2011 End Date: 31 July 2011
Purpose	To provide treatment, care and support services for people and families living with HIV/AIDS.	
Description	<ul style="list-style-type: none"> • Train 50 laboratory technicians in laboratory testing in blood screening, blood donor recruitment & retention and appropriate clinical use of blood and blood products • Train 200 health workers in universal precaution practices • Procure universal precautions and laboratory testing supplies for 20 sites • Strengthen hospital-based blood transfusion services activities at 29 sites (incl. blood banks in tertiary hospitals) • Provide supportive supervision and monitoring of universal precautions and blood safety activities at 57 health facilities 	
Quality Criteria	Quality Method	Date of Assessment
Strengthening Blood Safety and Universal Precautions through training of health workers, providing laboratory supplies, and supportive supervision and monitoring	Attendance lists and review of training reports, supply chain management reports	May, August, November 2011
Hospital-based blood transfusion services activities strengthened at 29 sites (incl. blood banks in tertiary hospitals)	Site specific reports	May, August, November 2011
OUTPUT 3: Capacities of SSAC, NGOs and local institutions built to effectively manage and monitor HIV/AIDS programmes		
Activity Result 8	Supportive Environment-Monitoring & Evaluation and Operations Research	Start Date: 1 January 2011 End Date: 31 July 2011
Purpose	To carry out monitoring & evaluation and operations research activities	
Description	<ul style="list-style-type: none"> • Train 6 MoH & SSAC finance staff in quick books financial package • Finalize the National HIV M&E strategy • Support the set-up of M&E section in MoH-HIV Directorate (Prefab. Staffs) • Develop standardized M&E data collection tools • Convene 1 National HIV/AIDS annual coordination meetings • Convene 2 state-level annual HIV/AIDS coordination meetings • Recruit Staff to MoH for surveillance and other programme activities • Conduct sentinel surveillance survey-ANC sites & STI patients • Conduct HIV surveillance reports dissemination workshop • Develop HIV surveillance national strategic plan • Train 108 Staff in sentinel surveillance • Establish and operationalize sentinel surveillance sites • Conduct health facility quality Assessment • Conduct national & state-level workshops for PLWH Associations 	
Quality Criteria	Quality Method	Date of Assessment
Strengthen SSAC and MOH capacity through hiring of staff, provision of	SSAC and MOH staff in place, supplies and equipment provided,	February 2011

equipment and supplies, training in reporting requirements, etc.	and quality GFATM reports produced	
Standardized M&E data collection tools developed	Availability of data collection tools	February 2011
Sentinel surveillance survey for ANC sites & STI patients conducted	Surveillance data available	February 2011
Activity Result 9	Procurement and Supply Management Capacity building	Start Date: 1 January 2011 End Date: 31 July 2011
Purpose	To carry out monitoring & evaluation and operations research activities	
Description	<ul style="list-style-type: none"> Recruit a pharmacist in MoH to advise for test kits, ARV, OI, STI forecasting and PSM 	
Quality Criteria	Quality Method	Date of Assessment
Pharmacists hired	Staff contract	November 2010
Activity Result 10	Support to HR, planning and administration costs for SRs	Start Date: 1 January 2011 End Date: 31 July 2011
Purpose	Strengthening management of the SRs HIV grant	
Description	<ul style="list-style-type: none"> Recruit staff to manage SR activities Support planning and administration costs 	
Quality Criteria	Quality Method	Date of Assessment
Staff contracts	Staff contracts	May, August, November 2011
Financial reports on planning and administration cost	Financial reports	May, August, November 2011
Activity Result 11	Project Management Activities properly carried out	Start Date: 1 January 2011 End Date: 31 July 2011
Purpose	Strengthening management of the HIV grant	
Description	<ul style="list-style-type: none"> Liaise and report to CCM Conduct Quarterly Reviews Conduct Annual Review Conduct field monitoring and supervision 	
Quality Criteria	Quality Method	Date of Assessment
Regular updates to CCM	Minutes of CCM meetings and attendance lists	May, August, November 2011
Conduct annual and quarterly reviews, and as well as monitoring and supervisory visits	Minutes of the review process, monitoring and supervision reports	May, August, November 2011

IV. LEGAL CONTEXT

This document together with the CPAP signed by the Government and UNDP which is incorporated by reference constitute together a Project Document as referred to in the SBAA and all CPAP provisions apply to this document.

Consistent with the Article III of the Standard Basic Assistance Agreement, the responsibility for the safety and security of the implementing partner and its personnel and property, and of UNDP's property in the implementing partner's custody, rests with the implementing partner.

The implementing partner shall:

- a) Put in place an appropriate security plan and maintain the security plan, taking into account the security situation in the country where the project is being carried;
- b) Assume all risks and liabilities related to the implementing partner's security, and the full implementation of the security plan.

UNDP reserves the right to verify whether such a plan is in place, and to suggest modifications to the plan when necessary. Failure to maintain and implement an appropriate security plan as required hereunder shall be deemed a breach of this agreement.

The implementing partner agrees to undertake all reasonable efforts to ensure that none of the UNDP funds received pursuant to the Project Document are used to provide support to individuals or entities associated with terrorism and that the recipients of any amounts provided by UNDP hereunder do not appear on the list maintained by the Security Council Committee established pursuant to resolution 1267 (1999). The list can be accessed via <http://www.un.org/Docs/sc/committees/1267/1267ListEng.htm>. This provision must be included in all sub-contracts or sub-agreements entered into under this Project Document".

V. ANNEXES



Annex 1. RISK LOG

Project Title: HIV/AIDS Prevention and Care Programme in Southern Sudan: Global Fund for AIDS, TB and Malaria (GFATM) Round 4		Award ID: 41178		Date: 01/12/2010					
#	Description	Date Identified	Type	Impact & Probability	Countermeasures / Mngt response	Owner	Submitted, updated by	Last Update	Status
1	The grant ends on 31 July 2011, and it is the main source of funding for HIV/AIDS interventions in Southern Sudan and the only source of funding for ART.	2009/2010	Contextual	Discontinuation of essential services such as ART, OIs, STIs case management, PMTCT, etc. Impact: high Probability: high	The PR and CCM should submit a request for continuity of services for people on lifelong treatment - ART	The Project Manager in conjunction with the GFATM Coordinator, and the HIV/AIDS/STI Directorate of the MoH-GoSS/CCM	The Project Manager	The request for continuity of services will be submitted as part of the grant closure plan. A request to prepare grant closure documents was received from GFATM and the deadline in 30 April 2011.	01/11/2010



Annex 2
Project Staff Costs

	Name of Position	Location	International/National	Status	Months	Proforma Cost	Shared to this project	Budgeted in AWP	
								Output	Activity Result
1	Coordinator	Juba	National	In post	12	107,511.72	13,589.44	Improved coordination and management of GFATM projects	Technical support and advisory services to GFATM
2	Project Specialist - TB/HIV & HIV	Juba	International	In post	12	238,286.00	119,143.00	Overall project management and enhanced project delivery	Technical support to the overall project management
3	M&E Specialist	Juba	International	In post	12	238,286.00	30,119.26	Enhanced M&E capacity, delivery, and data quality	Technical support to the M&E system
4	PSM Specialist	Juba	International	In post	12	238,286.00	30,119.26	Enhanced PSM capacity and delivery	Technical support and overall procurement and Supply Chain Management services
5	Finance Specialist	Juba	International	In post	12	238,286.00	30,119.26	Enhanced Finance capacity, delivery and quality reporting	Technical support, finance services and delivery
6	Capacity Building Specialist - UNV (2)	Juba	International	In post	12	80,000.00	20,223.94	Enhanced national capacity to manage and monitor HIV/AIDS response	HIV/AIDS Capacity building
7	M&E Specialists - UNV (6)	Juba	International	In post	12	80,000.00	60,671.82	Enhanced M&E capacity and data quality at State, County and Facility level	M&E functions and delivery
8	Health Procurement Specialist UNV	Juba	International	In post	12	80,000.00	10,111.97	Enhanced Pharmaceutical capacity and pharmaceutical management	Procurement and Supply Chain Management services
9	Project Analyst (1) HIV R4	Juba	National	In post	12	64,887.00	64,887.00	Support to overall project management and enhanced project delivery	Project Management and delivery
10	M&E Analyst	Juba	National	In post	12	64,887.00	16,403.38	Support to M&E capacity, delivery, and data quality	M&E functions and delivery
11	Procurement and Contracting Analyst	Juba	National	In post	12	64,887.00	8,201.69	Support to PSM capacity and delivery	Procurement services

12	Finance Analyst	Juba	National	In post	12	64,887.00	8,201.69	Support to finance capacity, delivery and quality reporting	Finance services
13	Finance Associate	Juba	National	In post	12	31,948.00	8,076.43	Support to finance capacity, delivery and quality reporting	Finance services
14	Procurement Associate	Juba	National	In post	12	31,948.00	8,076.43	Support to PSM capacity and delivery	Procurement services
15	Asset Associate (1)	Juba	Vacant	In post	12	31,948.00	4,038.22	Support management of health and non health assets	Asset management
16	Admin Associate (1)	Juba	National	In post	12	31,948.00	4,038.22	Support office administration services	Administrative and secretarial support service
17	Driver (6)	Juba	National	In post	12	16,627.00	12,609.88	Logistical support to implementation of the project	Logistical services
18	Security guards	Juba	National	In post	12	16,627.00	6,304.94	Security services to staff, property and premises	Security services
19	Cleaner	Juba	National	In post	12	16,627.00	2,101.65	Cleaning services to premises	Cleaning services
TOTAL CHARGED TO THE PROJECT							457,037.48		

