

**LMG/National Malaria Control Program Capacity Building
Project: Program Year 2, Quarter 1 Progress Report
October 1 – December 31, 2014**

January 13, 2015

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Leadership, Management and Governance National Malaria Control Program Capacity Building Project (LMG/NMCP)

Program Year 2, Quarter I Progress Report
October 1-December 31, 2014



Submitted to U.S. Government President's Malaria Initiative on January 13, 2014

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Cover Photo: Participants at the Central Africa Roll Back Malaria Network/Roll Back Malaria (CARN/RBM) annual review meeting in Libreville, Gabon, from September 9-13, 2014.

PROJECT ACTIVITY SUMMARY FORM

Project Name: Leadership, Management and Governance National Malaria Control Program Capacity Building Project
Project Objectives: The two-year goal of the Leadership, Management and Governance National Malaria Control Program Capacity Building Project (LMG/NMCP) is to strengthen the National Malaria Control Programs' capacity as leaders to improve the coordination of national efforts in the fight against malaria. LMG/NMCP will achieve this goal through providing direct technical assistance to the National Malaria Control Programs in the following six confirmed countries identified by the U.S. Government President's Malaria Initiative (PMI): Burundi, Cameroon, Côte d'Ivoire, Guinea, Liberia, and Sierra Leone.
Implementing Partner(s): Management Sciences for Health
Agreement/Contract No: AID-OAA-A-11-00015
Life of Project (start and end dates): October 1, 2013 – September 30, 2015
Reporting Period (start and end dates): October 1, 2014 – December 31, 2014
Total Estimated Contract/Agreement Amount: \$6,724,000
Obligations to Date, December 31, 2014 (SF425): \$6,724,000
Project Expenditures through September 2014: \$952,903
October-November 2014 Expenses: \$399,141
Accrued Expenditures for the Reporting Period: \$262,357
Total Expenditures for Reporting Period: \$661,498
Total Project Expenditures to Date (as of Dec. 31 2014): \$1,614,402
Obligated Funds Remaining (as of Sept. 30, 2014): \$5,109,598
Estimated Expenditures for Next Reporting Period: \$734,245
Report Submitted by: Emmanuel Le Perru, Principal Technical Advisor
Report Submission Date: January 15, 2015

The views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

ACRONYMS

ACT	Artemisinin-based combination therapy
BCC	Behavior change communication
CCM	Country Coordination Mechanism
CDC	Center for Disease Control
CHAI	Clinton Health Access Initiative
CMPE	Center for Malaria, Parasitology and Entomology
ETU	Ebola treatment unit
CRS	Catholic Relief Services
HR	Human Resources
iCCM	Integrated Community Case Management
IP	Implementing partner
IPTp	Intermittent prophylactic treatment for pregnant women
LDP+	Leadership Development Program Plus
LFA	Local Funding Agent
LLIN	Long-lasting Insecticide-treated net
LMG	Leadership, Management and Governance
MDA	Mass drug administration
M&E	Monitoring and evaluation
MOHSW	Ministry of Health and Social Welfare (Liberia)
MOU	Memorandum of understanding
MSF	<i>Médecins Sans Frontières</i>
MSH	Management Sciences for Health
NFM	(Global Fund's) New Funding Model
NMCP	National Malaria Control Program
NSP	National Strategic Plan
OCAT	Organizational Capacity Assessment Tool
PMI	President's Malaria Initiative
PR	Principal Recipient (of Global Fund grant)
PROGRES	Program for Organizational Growth, Resilience, and Sustainability
PSI	Population Services International
PUDR	Progress Update and Disbursement Request
RBM	Roll Back Malaria
RDT	Malaria Rapid Diagnostic Tests
SIAPS	Systems for Improved Access to Pharmaceuticals and Services
SR	Sub-recipient (of Global Fund grant)
TRP	Technical Review Panel
TWG	Technical Working Group
USAID	United States Agency for International Development
WHO	World Health Organization

INTRODUCTION

The Leadership, Management and Governance Project (LMG) is a global five-year Cooperative Agreement awarded by USAID/Washington, designed to strengthen and expand the people-centered capacity building strategy pioneered under the previous Leadership, Management and Sustainability Program. The LMG Project's objective is to support health systems strengthening by addressing the gap in leadership, management, and governance capacity among policy makers, health care providers, and program managers to more effectively implement quality health services at all levels of the health system.

The President's Malaria Initiative (PMI) is providing technical assistance to six National Malaria Control Programs (NMCPs) through the Leadership, Management and Governance National Malaria Control Program Capacity Building Project (LMG/NMCP). The two-year goal of the LMG/NMCP Project is to build the capacity of the local NMCPs to effectively implement their national malaria strategies. This is accomplished through targeted technical and organizational capacity building support provided by Senior Technical Advisors who are seconded to NMCPs in seven target countries: Burundi, Cameroon, Côte d'Ivoire, Guinea, Lao PDR, Liberia, and Sierra Leone. The Senior Technical Advisors, with technical and operational support from a home office LMG/NMCP team, contribute to the LMG/NMCP project's overall goal by working with their respective NMCPs to achieve three main objectives which are adapted to specific country needs:

- **Objective 1:** National Malaria Control Program effectively manages human, financial, and material resources;
- **Objective 2:** National Malaria Control Program develops and directs policy and norms for the implementation and surveillance of the national malaria control strategy;
- **Objective 3:** National Malaria Control Program mobilizes stakeholders to participate in national malaria control coordination and implementation efforts.

The following is a summary of the activities carried out from October 1 – December 31, 2014. During this reporting period, the LMG/NMCP team continued to launch start-up activities and project implementation throughout the targeted countries on staggered timelines.

I. PROJECT PERFORMANCE

The LMG/NMCP team submitted on September 15, 2014, a revised program description along with the PY2 workplans for each country. The revised program description provides revised country annexes for the six currently confirmed countries – Burundi, Cameroon, Côte d'Ivoire, Guinea, Liberia, and Sierra Leone. The revised program description and workplans were officially approved by the project's program manager at PMI/Washington on November 25, 2014.

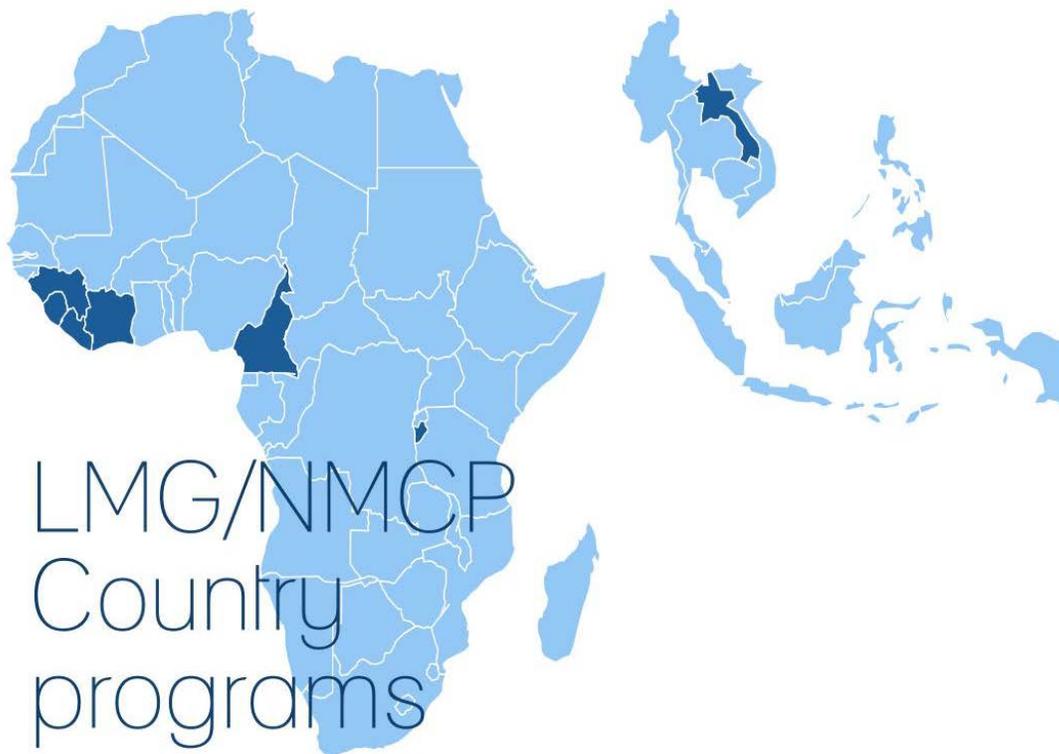
This quarter, the project assessed the organizational capacities of the NMCP in Cameroon and prepared to carry out the organizational capacity assessment in Burundi, provided technical support to NMCPs, and began to launch the Leadership Development Program Plus (LDP+). In Cameroon, the LMG/NMCP Senior Technical Advisor

OCAT ORGANIZATIONAL CAPACITY DEVELOPMENT TOOL

Measures organizational capacities in:

- Organizational planning and resource mobilization
- Communications
- Governance
- Project management
- Finance compliance and operations
- Advocacy
- Grant management
- Monitoring and evaluation
- Human Resources
- Institutional strengthening and change management

finished the organizational capacity assessment of the NMCP. The LMG/NMCP team is currently finalizing narrative reports on key findings from this analysis as well as reports on the assessments conducted with the NMCPs in Côte d'Ivoire and Liberia, which will be submitted to country missions and PMI/Washington. LMG/NMCP started operating in Burundi at the



beginning of October 2014, and the Senior Technical Advisor has been trained to utilize the same organization capacity assessment tool (OCAT) as was used in Cameroon, Côte d’Ivoire, and Liberia.

In the five active LMG/NMCP countries, the project has continued to support the development and revision of Global Fund concept notes, human resources management reviews, planning and implementation of long-lasting insecticide-treated net (LLIN) distribution campaigns, and coordination with key stakeholders. In Cameroon and Guinea, LMG/NMCP Senior Technical Advisors provided technical assistance to the NMCP to revise concept notes in response to Global Fund technical review panel (TRP) feedback and supported NMCPs throughout grant negotiations. One of the main activities supported by LMG/NMCP Côte d’Ivoire during this quarter was assistance to develop and finalize the Global Fund concept note for submission on October 15, 2014. The Senior Technical Advisor in Liberia continues to support the development of the Global Fund concept note, which is due for submission in 2015. The project completed the recruitment of the Senior Technical Advisor for LMG/NMCP in Burundi in September 2014, and he traveled to Bujumbura, Burundi, on October 5, 2014, and immediately began supporting the development of the Burundi concept note.

LMG/NMCP contributed technical support to national LLIN distribution in several countries during this quarter. In Liberia, the Senior Technical Advisor supported the NMCP to revise its national LLIN distribution plan in light of the Ebola outbreak. The Senior Technical Advisor in Cameroon assisted with planning for a phased campaign to take place throughout 2015, while the Senior Technical Advisor in Côte d’Ivoire provided key technical support during the census and distribution phases of the campaign during the quarter.

II. PROJECT MANAGEMENT

Project management priorities addressed during the reporting period and project management priorities for the coming quarter are addressed in Tables 1 and 2 below.

Table 1: Management priorities addressed during this reporting period

Management priorities	Status	Comments
Staff recruitment	In progress	<p>Recruitment completed for the Senior Technical Advisor positions in Burundi, Cameroon, Côte d’Ivoire, Guinea, and Liberia.</p> <p>Recruitment for the Senior Technical Advisor position in Sierra Leone was re-launched and home office staff interviewed two top candidates. One candidate will be interviewed a second time in January 2015.</p> <p>The LMG/NMCP project began recruiting a Malaria Supply Chain Senior Technical</p>

		Advisor to be seconded to the National Center for Malaria, Parasitology and Entomology (CMPE) in Lao PDR, and will identify and post a candidate in the next quarter.
Conduct local organizational capacity assessments	In progress	Guinea: Completed and validated Liberia: Completed and validated Côte d'Ivoire: Completed and under review Cameroon: Completed and under review Burundi: Will begin in the next quarter
Hold Annual Coordination Meeting and LDP+ training	Completed	The Annual Coordination Meeting and LDP+ training brought together all the Senior Technical Advisors and the home office Principal Technical Advisor, Project Officer, and Country Portfolio Manager from November 10-14, in Cotonou, Bénin. The meeting allowed project staff to provide updates on LMG/NMCP work in each country, share experiences and lessons learned, and discuss the next year of project implementation. The home office Principal Technical Advisor and LMG/Bénin Senior Technical Advisor co-facilitated a LDP+ training to prepare the Senior Technical Advisors to launch an LDP+ with their respective NMCP. Trip reports for each participant describe the meeting in depth and will be sent to PMI/Washington and mission activity managers at the beginning of next quarter.

Table 2: Management priorities for next reporting period

Management priorities for next reporting period	Comments
Continue discussions with PMI/ Washington regarding the expansion of LMG/NMCP activities beyond the currently confirmed six countries and update program documents as necessary	The LMG/NMCP home office team and PMI will continue to discuss the potential expansion of current LMG/NMCP activities to other countries.
Complete the recruitment of remaining Senior Technical Advisor positions	Recruitment is ongoing for the Sierra Leone Senior Technical Advisor, and a candidate will be recommended to the Mission for final interviews and selection.

Management priorities for next reporting period	Comments
	Recruitment for a Malaria Supply Chain Senior Technical Advisor in Lao PDR is ongoing. Candidates will be recommended to PMI/Washington for final interviews and selection.
Finalize country workplans	The Burundi PY1 workplan will be submitted following the initial organizational capacity assessment. The Sierra Leone workplan and budget will be developed following placement of the Senior Technical Advisor and completion of the initial assessment.
Finalize Memoranda of Understanding (MOU) with NMCPs	The LMG/NMCP team has finalized MOUs with NMCPs in Côte d'Ivoire, Guinea, and Liberia. LMG/NMCP will develop MOUs for Burundi, Cameroon, and Sierra Leone in the next reporting period.
Complete all required reports, including the Quarterly Accruals Report and Quarterly Report	All reports have been submitted on time during this reporting period. This is an ongoing requirement.

III. PROJECT ACTIVITIES

During this reporting period, the LMG/NMCP team continued to implement country-specific workplans and work with NMCPs to achieve the project's three main objectives. In Burundi, Cameroon, Côte d'Ivoire, and Guinea, LMG/NMCP Senior Technical Advisors provided direct support NMCPs to respond to the Global Fund TRP questions, prepared NMCP units for management of the next round of Global Fund grants, and facilitated communication between NMCPs, Country Coordinating Mechanisms (CCMs), the Global Fund, and other stakeholders.

The LMG/NMCP project provided coaching and organizational capacity building support to respective NMCPs to carry out key capacity building activities, as identified during organizational capacity assessments. In Guinea, this included working with key NMCP partners to develop an improved, portable monitoring and evaluation database. The Guinea NMCP also continued to hold monthly technical unit meetings, which provided them the time and space to better plan and coordinate activities. In Côte d'Ivoire, the project supported the NMCP to revise job descriptions for positions in five of the six NMCP departments, in line with Ministry of Health job description standards. In Cameroon, the LMG/NMCP Senior Technical Advisor provided ongoing coaching to the NMCP to institute regular meetings and improve the effectiveness of meetings by sharing management tools and approaches with NMCP staff.

LMG/NMCP Senior Technical Advisors, with support from the home office LMG/NMCP team, supported their respective NMCPs to plan anti-malaria activities included in National Strategic

LLIN Long-lasting insecticide-treated nets
 National LLIN distribution campaigns receiving planning and technical support from LMG/NMCP:

Plans (NSP). In Côte d’Ivoire, the project provided support for the planning and implementation of the mass distribution of LLINs in 59 counties. In Cameroon, the Senior Technical Advisor assisted the NMCP to develop a phased campaign strategy with LLIN distribution activities

COUNTRY	# LLIN	DATES
CAMEROON	TBD	May/Jul/Nov 2015
COTE D’IVOIRE	9,540,300	Dec 2014
LIBERIA	2,805,534	Jan 2015

scheduled for May, July, and November 2015. In Liberia, the project assisted the NMCP to revise the mass distribution strategy in light of the Ebola outbreak and to validate a continuous distribution strategy to pregnant women through health facilities.

While the number of cases has thankfully declined in the past quarter, Ebola remains a serious concern in Guinea, Liberia, and Sierra Leone, and continues to have an impact on malaria control efforts in both countries. LMG/NMCP Senior Technical Advisors have continued to support NMCPs to revise strategies and mobilize resources to sustain the fight against malaria in the context of the Ebola virus outbreak. In Guinea, the project provided technical and coordination support to the NMCP to organize a technical working group, made of key partners, to develop a malaria mitigation plan based on WHO guidelines, which aims to minimize the impact of Ebola on anti-malaria efforts. The LMG/NMCP Senior Technical Advisor also worked with NMCP staff to finalize the malaria/Ebola situational analysis in collaboration with the Center for Disease Control (See Annex I).

In Liberia, the LMG/NMCP Senior Technical Advisor worked closely with the NMCP to revise its malaria control strategy in light of the Ebola virus outbreak. With many health centers in Ebola hot zones closed, and few people willing to attend those centers that remained open for fear of infection, the NMCP reviewed the current strategy to identify which interventions would need to be revised in order to minimize the risk of Ebola infection while still maximizing malaria control measures. The revised strategy scales up treatment, suspends testing in line with “no touch” guidelines, and shifts the LLIN distribution strategy to avoid crowding. The NMCP’s targets for malaria control that were set before the outbreak were reviewed and revised to be more realistic and attainable given the current situation. In Liberia, the LMG/NMCP Senior Technical Advisor is currently analyzing health facility reports from August to December with the NMCP, to compare malaria indicators against the same period in 2013. Unfortunately, due

to the number of facilities that were closed, fewer reports are available, and the data that was collected likely is not sufficient for making helpful comparisons.



From November 10-15, 2014, LMG/NMCP Senior Technical Advisors were able to share these successes and experiences with one another at the first annual coordination meeting held in Cotonou, Bénin. The purpose of the meeting was to create an opportunity for project staff to exchange information regarding the implementation of their assistance to NMCPs in the region, and to train all LMG/NMCP Senior Technical Advisors to facilitate, implement, and support the Leadership Development Program Plus (LDP+) with the NMCPs they support. The meeting allowed LMG/NMCP staff to exchange experiences and lessons learned, both in terms of implementing the LMG/NMCP workplans and in terms of malaria technical knowledge, management approaches, and trends and innovations in malaria control efforts. The expected long-term result of the meeting is stronger relationships between the project's Senior Technical Advisors that facilitate regional coordination of malaria control efforts, as described in the overall Program Description for LMG/NMCP. The one-week meeting included the following agenda items:

- Review of the status of the LMG/NMCP project in different countries during the first year of implementation
- Discussion of mechanisms for harmonizing interventions across countries
- LDP+ facilitation training
- Use of online tools, including Google Applications, LeaderNet, and OLLIE (MSH's intranet) for information sharing and project management

- Discussion and distribution of LMG/NMCP management tools (OCAT, and MSH’s newly-developed Program for Organizational Growth, Resilience, and Sustainability-PROGRES)
- Follow-up discussions on Senior Technical Advisors’ presentations focused on technical assistance to the NMCP and working with the Global Fund
- LDP+ capacity building sessions facilitated jointly by the LMG/Bénin and LMG/Medford teams

Following the coordination meeting, LMG/NMCP Senior Technical Advisors began working with their respective NMCP Directors to plan and schedule LDP+ meetings and workshops, identify participants and teams, and identify LDP+ improvement team coaches. In December 2014, LMG/NMCP held alignment meetings (the first step of the LDP+ process) with NMCPs in Côte d’Ivoire and Guinea. The alignment meetings in Burundi, Cameroon, and Liberia are planned for next quarter, as well as the first LDP+ workshops. LMG/NMCP Senior Technical Advisors have begun using LeaderNet, a learning and social networking website that hosts a global community of those who lead, manage, and govern in the health sector of low and middle-income countries, to ask questions and support one another during the LDP+ process. LeaderNet pages have been created for the LMG/NMCP LDP+, and once the LDP+ has been launched in each country, participants will be instructed to create usernames and use the pages to communicate across countries. The tentative schedule for the LDP+ next quarter is as follows:

	January	February	March
Burundi		Alignment meeting, TOT, Workshop 1	
Cameroon	Alignment meeting, TOT, Workshop 1		Workshop 2
Côte d’Ivoire	Workshop 1		Workshop 2
Guinea	TOT and Workshop 1		Workshop 2
Liberia		Alignment meeting, TOT, Workshop 1	

LMG/NMCP – Guinea Senior Technical Advisor Dr. Youssoufa Lo

Though the Ebola virus outbreak continued to impede the Mission’s ability to meet as regularly as usual since the health team covers Guinea and Liberia, the LMG/NMCP Senior Technical Advisor participated in meetings with USAID to discuss project activities whenever possible and submitted weekly project updates throughout the reporting period.

ACTIVITIES

Strategies to minimize the impact of Ebola on the fight against malaria

During this reporting period, the Ebola outbreak in Guinea continued to negatively impact key malaria interventions and activities. The patient and health worker desertion of health facilities, death of health personnel, lack of community activities, and difficulty diagnosing and treating malaria due to the Ebola outbreak have all had a significant impact on malaria control efforts in

Guinea. These disruptions in the Guinea health system also negatively impacted quantitative monitoring and data collection: routine data collection and central, regional, and district supervisory visits were suspended, resulting in almost no quantitative data on the impact of the outbreak. Planned national health surveys and studies were delayed as well (the health information system database report was delayed, as well as planned surveys of health interventions and a national cancer study). Faced with this challenging situation and in response to a recommendation from the Roll Back Malaria (RBM) focal point for West Africa, the NMCP established a technical working group to discuss strategies for malaria control given the current context in Guinea.

The technical working group, including representatives from Plan Guinea, Population Services International (PSI), UNICEF, Child Fund, Stop Palu, Catholic Relief Services (CRS), Systems for Improved Access to Pharmaceuticals and Services (SIAPS), and World Health Organization (WHO), in addition to the LMG/NMCP Senior Technical Advisor, developed a mitigation plan based on the WHO guidelines (See Annex). The plan describes the main problems and bottlenecks encountered in malaria control, temporary measures to minimize the impact of the Ebola outbreak on the fight against malaria in the affected areas, and the corresponding budget required to implement the additional measures. Similarly, the LMG/NMCP Senior Technical Advisor helped finalize the malaria/Ebola situational analysis in collaboration with the Centers for Disease Control (CDC) and NMCP staff. The situational analysis outlines the survey which will be conducted in a sample of health facilities to assess the behavior of health workers, determine the impact of the epidemic on the fight against malaria, and propose corrective strategies. In November 2014, the response plan and survey protocol were submitted to the Global Fund, which agreed to finance all proposed activities with the extension of the consolidated round 10 grant.

Global Fund concept note revisions

The Guinea NMCP submitted the malaria concept note to the Global Fund on June 16, 2014, and received questions from the Global Fund that guided revisions to the concept note, which was resubmitted on September 12, 2014. The concept note was officially approved by the Global Fund in December 2014. Following the Global Fund Team Portfolio Manager's approval and instruction, the LMG/NMCP Senior Technical Advisor assisted the technical working group (TWG) to review key documents to prepare for grant negotiations with the Global Fund. Together they reviewed the performance framework, procurement and supply management plans, and total award budget. These review sessions enabled the TWG to better align intervention strategies and activities with the corresponding budget and performance indicators as well as prepare for grant negotiations.

Global Fund grant negotiations were held in Casablanca, Morocco, from December 8-12, 2014. The LMG/NMCP Guinea Senior Technical Advisor, along with three NMCP representatives and Catholic Relief Services (CRS) staff, attended this workshop, where they revised the grant budget and discussed key technical activities, including training, mosquito net distribution campaigns, seasonal chemoprevention, and medication management. During the grant negotiations, the NMCP and CRS teams presented the NMCP Human Resources reference

manual that was developed during the previous quarter, to the Global Fund Portfolio Manager, who will help recruit for the identified vacancies. During the course of negotiations, the various stakeholders agreed to modify certain detailed budgets in order to better align activities with national strategies. These changes have not impacted the overall budget for the Guinea grant.

Global Fund grant management

The NMCP's consolidated round 10 Global Fund grant was scheduled to end in December 2014; however, to avoid a potential funding gap due to the delayed start of the NMCP's new funding model grant and to mitigate the impact of the Ebola outbreak on the fight against malaria, the Global Fund approved extending the round 10 grant until June 2015. The LMG/NMCP Senior Technical Advisor provided technical support to the NMCP and CRS during several working sessions to update the round 10 grant documents and develop a budgeted workplan (using existing grant funds) for the period from January to June 2015. These revised documents reflect not only the NMCP's identified priorities through June 2015, but also the strategies adopted in the mitigation plan to minimize the impact of the Ebola outbreak on malaria prevention and control. With the Global Fund's extension of funding, the consolidated round 10 grant plan is currently being implemented by CRS as the principal recipient (PR) and the NMCP as sub-recipient (SR).

NMCP monitoring, evaluation and reporting

To increase the basic monitoring and evaluation capacity of NMCP staff, as recommended in the initial organizational capacity assessment, the LMG/NMCP Senior Technical Advisor assisted the NMCP in finalizing and distributing the operational procedures manual during this quarter. The LMG/NMCP Senior Technical Advisor also continued to support the development of a portable database for monitoring and evaluation with funding from Stop Palu, PMI, and CRS. The first version of this Excel-based database will supplement the central database (supported by WINDEV software) and is now available for use by the NMCP and partners. The portable database fills an important data collection gap while the central database, which is expected to be finished by the end of the next quarter, is still being developed by professional IT personnel. In addition to the database, the LMG/NMCP Senior Technical Advisor also assisted the NMCP to develop the terms of reference for a monitoring committee for the seasonal malaria chemoprevention program for children.

The LMG/NMCP Senior Technical Advisor continued to provide regular technical expertise to the NMCP during working sessions, meetings, and workshops, and the development of the NMCP's quarterly report, which is submitted to Guinea's Ministry of Health and Prevention. The LMG/NMCP Senior Technical Advisor provided specific input for improved monitoring, evaluation, and reporting, and provided crucial technical inputs to the NMCP for the development of a national LLIN distribution guide. These inputs included a literature review of routine LLIN distribution best practices, a first draft of the guide, organizing the validation workshop, and developing brief guides on LLIN distribution.

Leadership Development Program Plus (LDP+)

The LMG/NMCP Senior Technical organized the first alignment meeting with all NMCP leadership on December 19, 2014. A total of 14 high-level participants took part in this meeting, which aimed to present the LDP+ and gain support and buy-in from top decision-makers for the rest of the LDP+ process. At the beginning of the meeting, the meeting participants identified a priority health area for the LDP+ (management of NMCP data). By the end of the meeting the leadership team was put in place, the zone of the intervention determined (Conakry and Kindia), and next steps scheduled. A follow-up meeting with NMCP department heads and department officers is scheduled for January 29, and the first workshop is scheduled for February 17-19, 2015.

COORDINATION WITH PARTNERS

Following the recommendations presented in the NMCP organizational capacity assessment and as planned in the PY2 workplan, the LMG/NMCP Senior Technical Advisor continued to support weekly coordination meetings, chaired by the National Coordinator (which began in February 2014), to provide regular updates on the NMCP's current activities and plan for upcoming activities. By institutionalizing the weekly coordination meeting as a regular practice, the NMCP now has a reliable communication platform for coordinating anti-malaria activities and interventions.

Meetings with the USAID Health Team during this quarter gave the project an opportunity to present its achievements during the first year of implementation, share results from the annual coordination meeting, discuss the implementation of the Leadership Development Program Plus (LDP+) in Guinea and the procedure for submitting the final NMCP HR reference manual to the Ministry of Health for review and validation. The USAID Health Team confirmed its support for the LDP+ with the NMCP, the restructuring of the NMCP staff based on the modification of the NMCP human resources reference manual, and capacity building for NMCP staff.

In addition to the NMCP's weekly coordination meetings, the LMG/NMCP Senior Technical Advisor continued to support monthly coordination meetings for each of the five NMCP technical groups (Monitoring and Evaluation; Case management; Information, Education, Communication and Behavior Change Communication; Commodities; and Vector Control). These meetings, which assemble representatives of the NMCP and partners (Stop Palu, CRS, SIAPS, the Ministry of Health, universities and private sector partners) give the NMCP the opportunity to review activities and coordinate with other technical groups and partners. The technical groups form a solid framework for dialogue, coordination, and harmonization of key interventions, building upon the expertise of all stakeholders in the fight against malaria.

Regular meetings with Stop Palu and CRS provided the NMCP with an opportunity to review activity implementation requiring coordination and regular monitoring. During this quarter, working sessions between Stop Palu and the NMCP yielded several key results (described below). The LMG/NMCP Senior Technical Advisor also participated in several working sessions with CRS to validate technical documents, prepare site visits, and evaluate activities after a mission.

RESULTS

Key project results and deliverables from this quarter include:

- NMCP coordination meetings held weekly
- Ten of the 15 planned meetings for the five NMCP technical groups held
- Three coordination meetings with USAID and Stop Palu organized
- New funding model grant negotiations finalized with the Global Fund Portfolio Manager
- Mitigation plan to minimize the impact of the Ebola outbreak on the fight against malaria approved and funded by the Global Fund
- National LLIN distribution guide finalized
- An operational procedures manual completed
- An improved database for monitoring and evaluation completed
- An NMCP report for post-training monitoring drafted and the next quarterly coordination meeting prepared.

NEXT STEPS AND PRIORITY ACTIONS FOR THE NEXT QUARTER

Priority actions and priorities for the next quarter include:

- Launch the LDP+ with NMCP staff
- Provide technical assistance to the NMCP to develop their annual workplan
- Support the program to complete supportive supervision in the regions
- Continue technical assistance to the NMCP to develop a formative supervision guide, monitoring and evaluation procedural manual, excel database, and a report on strategies used to control malaria in the context of the Ebola outbreak
- Submit the final NMCP HR reference manual to the Ministry of Health for review and validation
- Assist the NMCP in implementation of the mitigation plan to minimize the impact of the Ebola outbreak on the fight against malaria
- Continue to provide technical assistance to the NMCP unit leaders and program coordinators to organize monthly coordination meetings for each of the five technical groups and hold quarterly coordination meetings with the Roll Back Malaria (RBM) Monitoring Committee.

LMG/NMCP – Liberia

Senior Technical Advisor Kwabena Larbi

During this reporting period, the LMG/NMCP team focused on implementing activities in the PY2 workplan and continued to collaborate with partners. As previously reported, due to the outbreak and rapid spread of Ebola virus in Liberia, the LMG/NMCP Senior Technical Advisor was evacuated to Accra, Ghana, on August 10, 2014. During the duration of the evacuation the Senior Technical Advisor worked remotely from Accra, and returned to post in Monrovia, Liberia, on October 10, 2014.

ACTIVITIES

Strategies to minimize the impact of Ebola on the fight against malaria

The shift of attention and considerable resources towards control of Ebola virus continued to affect the implementation of malaria control activities during this reporting period. Many health facilities in communities most affected by the Ebola outbreak were closed, and patients avoided the few facilities that remained open for fear of being misdiagnosed or having contact with those suspected of having Ebola. Health workers were reluctant to treat fever patients due to a lack of adequate infection prevention equipment. In response to these constraints, the NMCP had to adjust its implementation strategies in order to ensure ongoing malaria control measures. The NMCP is hopeful that by adjusting their approach, cases of malaria, which mimics the early signs of Ebola, will decline, and the burden on existing health facilities and Ebola Treatment Units (ETUs) will also be significantly reduced.

Key changes to the NMCP's strategies include:

1. Scale up of malaria treatment to all suspected cases in community and private sector;
2. Suspending rapid diagnostic testing in private sector and community settings;
3. Providing infection prevention "no touch" guidelines;
4. Shift from fixed site to house-to-house distribution of LLINs.

The NMCP also revised malaria targets that had been set before the Ebola outbreak in order to account for the impact of the outbreak on malaria control efforts: the proportion of malaria cases tested before treatment is likely near zero due to the no-touch policy that was put in place, the proportion of cases treated with ACTs without tests is projected to be higher than expected, and the consumption of ACTs is projected to be higher than expected at both private and community facilities. ACT consumption at the few facilities that remained open was likely higher than projected. The NMCP has not yet received data from health facilities for the period of October to December 2014, and data coming from them is likely inaccurate since so many were closed.

During the course of this quarter, the number of Ebola cases has declined, and there is hope that malaria control activities will be fully restored in line with the efforts by the Ministry of Health and Social Work (MOHSW) and partners to restore all health delivery services. These changes and positive developments have helped improve the confidence and morale of NMCP staff.

NMCP mass distribution campaign & continuous LLINs distribution

The LMG/NMCP Senior Technical Advisor provided technical support to the NMCP to revise the LLINs distribution strategy from fixed site to a door-to-door LLIN distribution and review "no touch" guidelines in

Better information allows people to better protect themselves from malaria infection

The LMG/NMCP Senior Technical Advisor understands this, so while planning for the Liberia mass LLIN campaign, he reminded NMCP staff that many people fail to correctly use mosquito nets due to the simple fact that they were never instructed on how to properly install them in their homes. The NMCP took this information to heart, and has included net installation demonstrations in the distribution plan. This way Liberians will not only receive the nets they need, but will also know how to use them to best protect themselves and their families.

response to the Ebola outbreak in Liberia. Monitoring tools, training manuals for the mass distribution campaign are being revised and will be available by the beginning of January 2015. The planned campaign will distribute approximately 2.8 million nets between January and March 2015.

The LMG/NMCP Senior Technical Advisor also supported the validation of a continuous distribution strategy to pregnant women through health facilities developed in collaboration with USAID's Deliver project and Liberia's MOHSW, by helping coordinate a two-day orientation workshop was held with representatives from Liberia's 15 county health offices in December 2014, during which implementation guides and job aids were developed and distributed to each county health team. The LMG/NMCP Senior Technical Advisor also assisted the NMCP in analyzing and completing quantification of required LLINs per county and health facility for continuous distribution, which is a new strategy that aims to ensure that distributed LLINs are not wasted. The NMCP now provides one LLIN to pregnant women upon their first contact with a health facility and upon delivery in the health facility.



The LMG/NMCP Senior Technical Advisor (right) explains the purpose of anti-malarial mass drug administration (MDA) to community members during the NMCP's rapid assessment in New Kru Town, Monrovia, Liberia.

Coordination of NMCP activities

During this reporting period, the LMG/NMCP Senior Technical Advisor worked with the NMCP to lead a series of meetings and discussions, both internally and with partners, to minimize any potential disruptions to malaria control activities due to the Ebola outbreak. Instead of administering Malaria Rapid Diagnostic Tests (RDTs), health workers are now verbally diagnosing fever or history of fever as proxy for malaria infection to avoid any potential risks of Ebola infection. The LMG/NMCP project actively promoted this change in procedure, as it will reduce risk of Ebola virus transmission while ensuring that malaria control activities are sustained. Following through on WHO guidance, the LMG/NMCP Senior Technical Advisor provided technical support to monitor a mass antimalarial drug administration (MDA) led by *Médecins Sans Frontières* (MSF) to communities with high Ebola prevalence to reduce the number of non-Ebola fever cases reported to ETUs and health facilities.

In response to WHO's revised recommendations to increase intermittent prophylactic treatment for pregnant women (IPTp) after the second trimester of pregnancy, the LMG/NMCP team provided technical support to review the NMCP's

pregnancy and malaria policy. The draft policy is completed and will be validated by stakeholders and implemented in early 2015.

During the reporting period, the LMG/NMCP Senior Technical Advisor participated with the NMCP team to collaborate with the Clinton Health Access Initiative (CHAI) technical team to finalize the narrative and begin costing of Liberia's NSP for 2014-2020. The team revised the narrative and objectives in the NSP to align them with relevant guidance from the Global Fund, Roll Back Malaria, Global PMI Malaria Operational Plans, and WHO's Global Malaria Action Plan. As a result, the NSP's objectives and targets are now more feasible and realistic, grounded in Liberia's current context.

The LMG/NMCP Senior Technical Advisor also helped the NMCP's Monitoring and Evaluation unit develop a rapid survey questionnaire, which was used to conduct a rapid assessment of the first round of MDA (led by MSF) in Monrovia's communities with high Ebola transmission rates. As a result of the rapid assessment findings, the NMCP recommended that MSF hold more awareness campaigns before the next MDA campaign is launched. The results of the assessment were shared with MSF, the MOHSW, and partners.

COORDINATION WITH PARTNERS

During the reporting period, the LMG/NMCP Senior Technical Advisor continued to actively participate in weekly meetings between the NMCP and all partners involved in malaria control efforts in Liberia. Project staff participated in weekly conference calls to facilitate the LLIN distribution campaign in light of the Ebola outbreak with partners including the Global Fund, PMI, Plan Liberia/Canada, UNICEF, CDC Liberia and headquarters, WHO, UNICEF, and the Malaria Prevention Alliance. Specifically, the LMG/NMCP Senior Technical Advisor is playing a central role in coordinating and facilitating NMCP staff involvement in the planning and completion of LLINs distribution planned for January 2015.

The LMG/NMCP Senior Technical Advisor continued to work with the NMCP to implement county-level iCCM and participate in the iCCM TWG. During this quarter the focus of iCCM work was on coordinating community case management activities, assisting the vector control technical working group to respond to Global Fund questions, and completing micro planning and monitoring plans for the upcoming LLIN distribution. The LMG/NMCP Senior Technical Advisor joined NMCP personnel in case management TWG meetings and helped to revise malaria in pregnancy guidelines and develop supervision tools for MDA. These TWG meetings involved partners from the MOHSW, PMI/USAID, UNICEF, USAID | DELIVER Project, the Liberian Red Cross, and MSF, among others.

RESULTS

Key project results and deliverables from this quarter include:

- LLINs mass campaign strategy finalized
- Continuous distribution strategy validated and LLINs moved to health facilities
- Implementation and monitoring of two rounds of MDA supported
- Malaria in Pregnancy Guidelines revised for validation by malaria in pregnancy technical working group made up of MOH, WHO, UNICEF, PMI, and NGO partners.

CHALLENGES AND LESSONS LEARNED

Due to the shift of attention and considerable resources towards control of Ebola virus, implementation of several planned malaria control activities were delayed or suspended. Planning for the mass LLIN distribution campaign is moving forward, but in order to be successful the NMCP has had to continually review the distribution schedule and distribution methods. The evolving and constantly changing prognosis of the Ebola outbreak warranted constant revisions of the LLINs distribution strategy, which then required subsequent revisions to distribution tools and the marketing budget. Understanding that these constant revisions would result in interminable delays to the distribution, the LMG/NMCP Senior Technical Advisor advised the working group to adopt a final strategy to move forward with scheduling the planning and budgeting process. As a result, the final strategy for simultaneous, country-wide, door-to-door LLINs distribution was approved. The plan will be implemented beginning in mid-January 2015.

NEXT STEPS AND PRIORITY ACTIONS FOR THE NEXT QUARTER

Priority actions and priorities for the next quarter include:

- LLIN mass distribution campaign
- Second round of continuous LLIN distribution
- Complete the National Malaria Strategic Plan
- Launch the Global Fund country dialogue for the concept note
- Update the Global Fund dashboard for the current malaria grant
- Launch the LDP+ with the NMCP, hosting an alignment meeting with stakeholders

LMG/NMCP – Côte d'Ivoire

Senior Technical Advisor Pépin Miyigbena

During this quarter, the LMG/NMCP Senior Technical Advisor supported the NMCP in the development and submission of its Global Fund concept note. Other activities included revising key internal documents and guidelines as described in this year's workplan, assisting the NMCP in planning and carrying out the mass LLIN distribution, and completing job descriptions for NMCP staff in order to address weaknesses revealed by the initial organizational capacity assessment.

ACTIVITIES

Global Fund concept note development

The LMG/NMCP Senior Technical Advisor focused heavily on supporting the development and submission of the malaria concept note during this quarter. The malaria concept note for Côte d'Ivoire was successfully submitted by the deadline of October 15, 2014.

The LMG/NMCP Senior Technical Advisor supported this process by proposing a new strategy for coordinating and managing key actors in order to submit the concept note by the (already delayed) deadline of October 15. This strategy included coordinating a small group of NMCP staff to be responsible for finalizing the concept note based on the Global Fund's feedback, working with the TWG to address Global Fund comments, and assisting the NMCP to compile

supplementary annexes as requested by the Global Fund. The LMG/NMCP Senior Technical Advisor also worked with the procurement and stock management specialist to review stock quantification and to complete the procurement and stock management template required by the Global Fund. The LMG/NMCP Senior Technical Advisor also assisted the NMCP Director to respond to a request from the Global Fund to develop a document outlining the government's financial commitment to the three key health areas of HIV, tuberculosis, and malaria. On December 12, 2014, the NMCP was notified by the Portfolio Manager of the approval of the concept note by the TRP. The Global Fund provided very positive feedback on the submitted concept note, and the 2015-2017 grant amount totals €64,689,567 (~\$76,623,500 USD).

Coordination of NMCP activities

The LMG/NMCP Senior Technical advisor supported improved internal coordination of NMCP activities this quarter by reviewing the draft internal communications plan and providing feedback to NMCP communications staff. The team responsible for the plan will submit it to the communications team for validation before it is submitted to the NMCP Director for his approval. The LMG/NMCP Senior Technical Advisor assisted with the annual NMCP Task Force Meeting in November by providing technical and logistical support during the quantification workshop, giving a PowerPoint presentation on the plan for securing funds for the mass net campaign to district and regional directors, and leading a discussion with NMCP leadership and partners on LLIN distribution campaign financing.

Following the Task Force Meeting, the NMCP submitted the Progress Update Disbursement Request (PUDR) and dashboard to the Global Fund and CCM. The LMG/NMCP Senior Technical Advisor assisted with the preparation of these reports by leading NMCP staff responsible for organizing the regional data validation workshop to compile the required data, and by reviewing the quality of the dashboard report and PUDR, focusing on programmatic and financial sections. The quarterly Dashboard and PUDR were submitted on time to the CCM on November 13, 2014, and to the Global Fund on November 15, 2015. The NMCP received their most recent tranche of funding for €895,087 (~ \$1,060,210 USD) on December 16, 2014. This is the third disbursement the NMCP has received since signing the phase 2 grant in January 2012; the second disbursement in July 2014 was also secured with LMG/NMCP support.

NMCP LLIN mass distribution campaign

During this quarter, the LMG/NMCP Senior Technical Advisor continued providing technical support to the NMCP Director and staff responsible for coordinating and planning the LLIN mass distribution campaign in 59 districts. Technical support for the campaign focused on two phases: the census phase and distribution phase.

The LMG/NMCP Senior Technical Advisor supported the coordination committee members during the household census phase (October 9-18, 2014) by proposing appropriate solutions and guidance on challenges faced by National Technical Supervisors in the field, and by identifying lessons learned in certain districts that can inform National Technical Supervisors' development of communications strategies in preparation for the distribution phase. The LMG/NMCP Senior Technical Advisor also shared lessons learned with coordination committee

members in order for them to make strategic decisions based on past distribution experiences and to better analyze and interpret the census data that was validated during the district workshop. These lessons learned allowed the data management team to better resolve data quality issues in areas where low population rates were counted, as well as allowed the NMCP Program Director and the census phase coordination committee to develop a preliminary report for the Global Fund and RBM on how the census was carried out. This report was sent on October 22, 2014, and aims to improve communication between the NMCP, RBM, and Global Fund on the status of the campaign. Finally, the LMG/NMCP Senior Technical Advisor acted as a point person to whom members of the coordination committee could come with questions or concerns throughout the census phase.

The LMG/NMCP Senior Technical Advisor supported the LLIN distribution phase first by assisting the coordination team to plan how to satisfy conditions precedent placed upon the NMCP by the Local Funding Agent (LFA), which needed to be met prior to their authorization of the disbursement to finance the census phase. Following this, the LMG/NMCP Senior Technical Advisor assisted the coordination team to prepare and organize to launch the distribution campaign in 59 districts. Throughout the distribution, the LMG/NMCP Senior Technical Advisor helped the NMCP to appropriately document actions and costs, and participated in the technical oversight committee. The LMG/NMCP Senior Technical Advisor was able to participate in the campaign launch in Yamoussoukro on December 10, 2014. By the end of the distribution campaign on December 23, the NMCP had distributed 9,540,300 LLINs.

Improved NMCP human resources management

During this reporting cycle, the heads of five of the six NMCP departments reviewed and revised staff job descriptions for their departments, following the guide and template for job descriptions created by the LMG/NMCP Senior Technical Advisor. This human resource

strengthening activity is linked to LMG/NMCP's OCAT findings and corresponding workplan, and was supported by the USAID Health Director's recommendation that the LMG/NMCP Senior Technical Advisor work with the NMCP to align all NMCP job descriptions to the Ministry of Health



NMCP participants in the LDP+ training of trainers from November 18-19, 2014.

format. As of the end of December, 43 job descriptions for staff in five departments have been revised. The job descriptions will be submitted to the NMCP Program Director for validation.

Leadership Development Program Plus (LDP+)

The LMG/NMCP Senior Technical Advisor began preparing for next quarter's LDP+ with the NMCP. On November 17, 2014, seven members of the NMCP participated in an alignment meeting, which focused on the overall description of the program and encouraged buy-in from stakeholders. These members were chosen in coordination with the Coordination Director and Deputy Coordination Director. The Deputy Coordination Director will take on the role of lead LDP+ coordinator, and the five other alignment meeting participants will make up the coaching team. Following this alignment meeting, the Ministry of Health as well as the NMCP expressed strong commitment to the program.

The Technical Coaching Team training was held from November 18-19, and was supported by the deputy director of LMG/Côte d'Ivoire, who is an expert in the LDP+, the Director General of the Ministry of Health, and the LMG/NMCP Senior Technical Advisor. The LMG/Côte d'Ivoire Project Director felt it necessary to hold a training of trainers to further instill in coaches the methodologies of the LDP+ prior to the first workshop, which is scheduled for February 2015.

COORDINATION WITH PARTNERS

Partner	Timing	Purpose
USAID Health Director	October 16, 2014	4th quarterly LMG project monitoring meeting to review activities and results, progress and challenges of the NMCP
NMCP, UNICEF, MOH, and WHO	October 12, 17, and 30, 2014	Technical coordination meetings for LLIN distribution
LFA, NMCP	October 27 and November 5, 2014	Introductory meeting and presentation of the results of the LFA audit missions focusing on the low spending of the grant funds by the PR
GFA/NMCP	October 30 and November 8, 2014	Monthly NMCP activity monitoring meetings
LFA, NMCP	November 4, 2014	Presentation of the results of the task quality review of the delivery of Artemisinin-based combination therapy (ACT) and on-site data verification by the PR
Global Fund, NMCP, UNICEF, and RBM	December 2, 2014	Removing barriers to the implementation of the LLIN distribution campaign
Global Fund, NMCP, UNICEF, and RBM	December 12, 2014	Mobilization of LLINs to fill the gap in 53 health districts

RESULTS

Key project results and deliverables from this quarter include:

- Global Fund malaria concept note submitted by the October 15 deadline
- Internal communication plan finalized and being implemented
- Bi-annual NMCP Task Force meeting held
- Quarterly PUDR and dashboard submitted on time to the Global Fund on November 15, 2014
- Census of 59 health districts successfully completed as a part of the national LLIN distribution campaign, with a total of 18,124,165 people counted
- Job descriptions for most NMCP staff completed
- LMG/NMCP first LDP+ alignment meeting held
- LMG/NMCP first coaching sessions of LDP+ improvement teams held

CHALLENGES

The most obvious challenge faced by the NMCP this quarter was the successful distribution of LLINs to the identified beneficiaries in 59 health districts. At the time of writing, it appeared that the NMCP was on track to meet its goal of 90% coverage, although this will be confirmed next quarter after the distribution is evaluated. In addition, the NMCP has been negotiating the grant with the Global Fund, which, though challenging, has been a key area of support for LMG/NMCP.

In the course of the quarter, the LMG/NMCP Senior Technical Advisor began to guide the LDP+ process with the Cote d'Ivoire NMCP. As they are unfamiliar with the LDP+, clearly articulating the advantages of the program to NMCP leadership and staff and securing their commitment and buy-in has been an important step in ensuring that the program is successful.

NEXT STEPS AND PRIORITY ACTIONS FOR THE NEXT QUARTER

Priority actions and priorities for the next quarter include:

- Support the NMCP mass distribution campaign in Abidjan before the end of the next quarter
- Support the grant negotiation phase for the New Funding Model (NFM)
- Complete Training of Trainers (TOT) for the LDP+
- Hold the first LDP+ workshop

LMG/NMCP – Cameroon

Senior Technical Advisor Maurice A. N'Djoré

The LMG/NMCP project supported the Cameroon NMCP during this quarter to implement its national strategic plan and to identify capacity building activities that will address weaknesses revealed by the organizational capacity assessment conducted from July to September 2014.

ACTIVITIES

Organizational capacity assessment and Year 1 Workplan

During this reporting period, the LMG/NMCP Senior Technical Advisor conducted a review of the data originally collected in the capacity assessment of the NMCP which was conducted from mid-July to mid-September 2014. The assessment, which used the same tool (OCAT) that was also applied to evaluate the NMCPs in Liberia and Côte d'Ivoire, evaluated the capacity of the Cameroon NMCP in the following areas:

- Governance
- Organizational planning and resource mobilization
- Financial and administrative management
- Grant management and planning
- Human resource management
- Project management
- Advocacy and networking
- Communication, information, and records management
- Institutional strengthening.

The NMCP held a review session of the documents consulted and added several additional documents which strengthened the OCAT findings. The LMG/NMCP Senior Technical Advisor organized a workshop with the NMCP staff and partners from December 8-11, 2014, to review the purpose and objectives of the capacity assessment, the methodology used, and to share the results and recommendations of the assessment with NMCP staff. The workshop enabled the project to gather additional contributions to enrich the data and analysis of findings by institutional areas and review the country-specific workplan developed for LMG/NMCP Cameroon based on the OCAT findings, in coordination with NMCP leaders and NMCP strategic priorities.

Global Fund concept note development

The NMCP received the Global Fund's official notification of approval of the malaria concept note for a total of approximately €62,001,707 (~\$78,122,150 USD) for 2015-2017 during the previous reporting period, and the final grant is expected to be signed on January 1, 2015. Due to the high quality of the concept note, the Global Fund plans to allocate an additional €12 million (~\$14,213,800 USD), increasing the total grant amount to approximately €74 million (~\$87,651,500 USD). These additional funds will be used to finance "hang up" activities during the LLIN distribution, the acquisition of other malaria commodities (ACTs, RDTs, and additional LLINs), distribution operational costs, and the implementation of innovative data collection strategies, such as SMS for Life. Grant negotiations were launched with the Global Fund on October 10, 2014, and are ongoing.

The LMG/NMCP Senior Technical Advisor also assisted the NMCP to review the concept note budget, pharmaceutical stock management plan, and performance framework, and identify effective modern innovative approaches to payment (mobile money, money transfer) to use during the campaign to prevent security risks and fraud. The project also worked with the

NMCP to provide details on management fees for the PR and SR for both local and international NGOs and public structures.



The NMCP team and partners during Global Fund concept note grant negotiations in November 2014.

Coordination of NMCP activities

During this reporting period, the LMG/NMCP Senior Technical Advisor continued to provide recommendations to NMCP staff to improve coordination and monitoring of NMCP interventions including prevention, care, information, education, and communication (IEC), behavior change communication (BCC), research, and monitoring and evaluation. Project staff held regular working sessions with the NMCP's Permanent Secretary and leadership team to discuss human resource management and the NMCP's capacity building needs in line with program priorities. The LMG/NMCP Senior Technical Advisor emphasized the importance of strong internal and external communication for successful program implementation, and shared tools and approaches to encourage these practices among NMCP staff. To encourage sound financial management and accounting practices, the LMG/NMCP Senior Technical Advisor also recommended holding regular meetings with NMCP staff at both the central and regional levels. Lastly, the project helped the NMCP prepare key program documents for submission to the LFA for review in November 2014, including the commodities management plans, the LLIN campaign organizational chart and strategy, and the concept note budget (namely reviewing cost rationalization and explanations of management fees).

NMCP mass distribution campaign

During the various rounds of negotiations conducted with the Global Fund and the LFA in October and November 2014, the LMG/NMCP Senior Technical Advisor helped the NMCP formulate and submit responses to Global Fund questions regarding the proposed

implementation plan for the mass distribution campaign of 12,322,061 LLINs and quantification of LLINs and other malaria commodities. As part of preparation for the mass LLIN distribution campaign, the NMCP participated in meetings with the Global Fund, LFA, and relevant technical and financial partners to coordinate and plan the 2015 distribution campaign. The LMG/NMCP Senior Technical Advisor supported this process by helping the NMCP to develop a phased campaign strategy with LLIN distribution activities taking place in Central, South and East regions in May; far North, North, and Adamaoua regions in July; and Littoral, Center, and West regions in November 2015. As part of the planning, the LMG/NMCP Senior Technical Advisor worked with NMCP staff to review the pharmaceutical stock management plan, which took into account the quantification of LLINs, customs and security concerns, and the transport and storage of malaria products to the counties. Other campaign planning included a review of the overall distribution campaign budget and allocated funds for various campaign activities (including macro planning, micro planning, training, delivery, and supervision), discussions with the Government of Cameroon regarding national counterpart financing for the LLIN mass



LMG/NMCP Senior Technical Advisor, Dr. Maurice N'Djoré, left, with Dr. José Nkuni, RBM Partnership Focal Point for Central-African Regional Network (CARN), at a coordination meeting on October 30, 2014.

distribution campaign, a review of lessons learned from past campaigns, and a review of innovative and transparent payment methods, such as mobile money and money transfers, for use during the LLIN distribution campaign to minimize security risks and prevent fraud.

Coordination of NMCP Human Resources Management:

The NMCP was negatively affected by staff departures during this reporting period, including four staff from the M&E unit and four staff from the Administrative and Finance unit. The LMG/NMCP Senior Technical Advisor held lengthy discussions with the NMCP Permanent Secretary and leadership team to better understand the causes of these departures and assist the NMCP in identifying solutions. The project shared the results of the NMCP capacity assessment with NMCP leadership, using the results to encourage implementation of recommendations such as the recruitment of a director of the human

resources management unit. To address these challenges, the project will continue to encourage the NMCP to implement specific recommendations for human resources management, such as fill vacancies identified in the NMCP's organizational chart, improve the work climate within the NMCP, and equip all NMCP staff with a functional office environment. Many of these recommendations will be financed by the additional funding allocated in the

Global Fund grant, and the Government of Cameroon will be responsible for paying portions of per diems not funded by the Global Fund.

COORDINATION WITH PARTNERS

Supporting the NMCP to improve communications with partners and strengthen the national coordination committee is a priority for the LMG/NMCP project, and during the reporting period LMG/NMCP facilitated communication with malaria partners in order to assist the NMCP to prepare for quarterly coordination meetings. In October and December, the LMG/NMCP Senior Technical Advisor met with the Executive Director of Malaria No More to discuss the NMCP's organizational capacity assessment and the role of the private sector in the fight against malaria in Cameroon. Meetings with regional RBM representatives in October and November focused on preparing for negotiations with the Global Fund, potential implementation challenges, and the mobilization of national counterpart financing. At the quarterly coordination meeting on December 12 with the USAID Senior Regional HIV/AIDS advisor (who is backstopping while the current USAID malaria advisor is out of the office), the LMG/NMCP Senior Technical Advisor discussed the recent Global Fund grant award and the positive impact it will have on malaria indicators in Cameroon.

RESULTS

Key project results and deliverables from this quarter include:

- Development and approval of the malaria concept note by the Global Fund support for approximately €62 million which was increased to approximately €74 million upon award of the grant from the Global Fund
- NMCP assisted in the development and submission of key grant documents (concept note, strategic plan, cost rationalization, descriptions of innovative strategies, community-level prevention activities) in preparation for negotiations with the Global Fund
- Workshop held with NMCP staff and partners to review results and recommendations from the capacity assessment of the NMCP
- LDP+ presented to NMCP senior leadership

NEXT STEPS AND PRIORITY ACTIONS FOR THE NEXT QUARTER

Priority actions and priorities for the next quarter include:

- Finalize the narrative report of the NMCP OCAT assessment results to share with partners
- Finalize the memorandum of understanding (MOU) between MSH and the NMCP
- Launch the LDP+, scheduled for January 2015
- Review activities and targets in the PY1 LMG/NMCP Cameroon workplan to track progress
- Support the implementation of capacity building recommendations presented in the capacity assessment of the NMCP

The LMG/NMCP Senior Technical Advisor arrived in Burundi on October 5, 2014, and immediately began working with the Burundi NMCP to secure their selection as a Global Fund PR, draft the concept note, develop a transition plan, and carry out the initial organizational capacity assessment of the NMCP, which will inform the LMG/NMCP Burundi workplan.

Concept note development and selection of NMCP as a PR

In September 2014, the NMCP in Burundi was selected by the CCM as the PR for the malaria component. This nomination was confirmed by the Global Fund in December 2014. Under the supervision of the CCM, a development committee has been put in place to draft the concept note, which will be submitted to the Global Fund on January 30, 2015. In anticipation of its new role as PR, the CCM requested that the NMCP take the lead in the development of this concept note.

The development of the concept note was underway before the launch of the LMG project in Burundi, and immediately after arriving in Burundi the LMG/NMCP Senior Technical Advisor began supporting this process. During the past three months, the LMG/NMCP Senior Technical Advisor has supported the editorial board to develop all four sections of the concept note and to review the detailed budget and budget summary. The LMG/NMCP Senior Technical Advisor also supported the editorial board to identify and review risks associated with the implementation of the Global Fund project.

The LMG/NMCP Senior Technical Advisor participated in the drafting committee to identify priority modules for community health system strengthening and monitoring and evaluation. While these two modules are not required by the Global Fund to be included in the concept note, the LMG/NMCP Senior Technical Advisor explained their importance in increasing the value that the NMCP plans to add to grant activities, and advocated that the NMCP include them. To address these priorities, the LMG/NMCP Senior Technical Advisor supported the editorial board to develop these modules and include them in the NMCP's implementation strategy.

Roll Back Malaria concept note review meeting in Kampala, Uganda

The LMG/NMCP Senior Technical Advisor and NMCP staff attended a regional peer review meeting organized by the Global Fund and RBM in Kampala, Uganda, from November 18 – 22, 2014. This workshop facilitated a peer review of current concept notes under development by Global Fund recipients in the region. The peer review of the Burundi concept note resulted in the following suggestions for improving the concept note:

- Strengthen the analysis of activities targeting key populations
- Redefine key groups while analyzing factors and contexts that impact vulnerable populations
- Strengthen the analysis of the involvement and contribution of the private sector
- Specify the advantage of strategic objectives that will be targeted with grant financing
- Develop a priority intervention by strengthening the community system and analyze its impact
- Develop a priority intervention model for monitoring and evaluation.

Following his return to Bujumbura, the LMG/NMCP Senior Technical Advisor held a debriefing meeting with USAID to discuss the feedback received, and he is now assisting the NMCP to address the USAID and Global Fund feedback.

PR Transition Plan

The NMCP in Burundi is the new PR; however, the first wave of funding is not expected to be disbursed until August 1, 2015. The LMG/NMCP Senior Technical Advisor is currently supporting the NMCP to develop a transition plan, which will outline the transition of the grant from the previous PR, which was the National AIDS Council (CNLS), to the NMCP. Ensuring the continuity of services and consolidation of any progress made by the Global Fund since the first series of grants has been a main priority throughout the development of the transition plan. The transition plan will allow the NMCP to have a clear understanding of the Global Fund grant history in Burundi and enable it to articulate its own strategy for the implementation of the new funding model grant. The LMG/NMCP Senior Technical Advisor, working with NMCP staff, will submit the transition plan to NMCP leadership before the end of the first quarter in 2015.

Development of financial and administrative assessment tool for Sub-recipients

The Senior Technical Advisor supported the NMCP to develop a financial and administrative assessment tool for SRs with whom the NMCP will be working with under the new Global Fund funding model.

In adherence to the Global Funds guidelines surrounding financial management of Global Fund recipients, the NMCP requested the technical assistance of the LMG project in the development of this tool to evaluate the current financial and administrative capacities of SRs. Following the assessment of the SRs at the district level, the Senior Technical Advisor will then develop a draft capacity building plan. This will be the first time the NMCP in Burundi has been named as the PR, and this tool will give them an advantage of having a capacity baseline of their SRs with which to begin their work.

The tool that was developed by the Senior Technical Advisor will evaluate the SRs in the following key domains:

- Profile of the administrative and financial team
- Internal control systems
- Financial transaction control systems
- Accounting system
- Budgeting procedures and financial reporting
- Payroll system
- Documentation and filing system
- Grants and sub-grant management

This assessment tool has been finalized and the evaluation is expected to take place in the first quarter of 2015.

Coordination of NMCP activities

The LMG/NMCP Senior Technical Advisor helped plan NMCP activities for December 2014, remaining cognizant of available funds as well as the involvement of the NMCP Director. The

LMG/NMCP Senior Technical Advisor also provided technical input and support to the NMCP as it prepared its 2015 annual workplan. The first step of this process was to identify the activities that were planned for 2014 that were either delayed or not yet started. The next step was to identify available funding and set priority activities. The LMG/NMCP Senior Technical Advisor supported this entire process, and the workplan has since been finalized and submitted to the appropriate senior staff for approval prior to its dissemination to NMCP partners.

Validation of NMCP communications plan

The LMG/NMCP Senior Technical Advisor supported the NMCP in improving its communications plan by recommending three essential components that he found were not currently integrated: the preventive intermittent treatment component, the iCCM component, and internal communications at the NMCP. Nearly the entire communications plan was focused externally; therefore, the LMG/NMCP Senior Technical Advisor worked to direct the focus on internal communications and the challenges that the NMCP was facing. The team working with the LMG/NMCP Senior Technical Advisor on improving this plan appreciated the feedback and will incorporate the recommendations into the final version of the communications plan.

COORDINATION WITH PARTNERS

During the past quarter, the LMG/NMCP Senior Technical Advisor helped the NMCP to prepare for its quarterly partners meeting by developing a presentation on results and activities and developing the meeting's agenda. Prior to the meeting, the LMG/NMCP Senior Technical Advisor circulated a PowerPoint template for all partners to use for their presentations, as well as guidelines to only present on three to four key activities. By creating this type of structure around partner meetings, the LMG/NMCP Senior Technical Advisor was able to focus and shorten presentations in order to leave more time for discussion surrounding results and common challenges.

In addition to the partner presentations, two major themes that were discussed were the user experience of the Artesunate injectable in the treatment of serious cases of malaria and the scalability of the first line of treatment of malaria by the Artesunate injectable, as well as the introduction of a simple second line of treatment of Quinine and Clindamycin. The second day of the workshop included a participatory planning workshop to align all NMCP workplan activities with partners' activities.

During his first meeting with the USAID Implementing Partners (IPs) the LMG/NMCP Senior Technical Advisor presented the project's objectives and priorities in Burundi in relation to the current challenges faced by the NMCP. USAID's recommendations following this meeting were for the NMCP to:

- Strengthen coordination between the IPs, highlighting the need to exchange workplans to ensure no overlap in activities
- Promote innovation in current activities
- Promote public/private partnerships
- Download the USAID indicator toolkit

- Anticipate the relationships between all the IPs and the NMCP. In other words, as the NMCP is new to managing large grants from the Global Fund, USAID has requested IPs supporting the NMCP help identify early on areas in need of additional support before the first grant is disbursed.
- Be aware of the changes and potential overlap in activities between IPs and the NMCP and develop innovative activities to address them. USAID has indicated their flexibility to make modifications to cooperative agreements to take into account these changes.

RESULTS

Key project results and deliverables from this quarter include:

- SR financial and administrative assessment tool completed
- Global Fund grant transition plan developed
- Preventive intermittent treatment, iCCM, and NMCP internal communications were integrated into the NMCP communications plan

CHALLENGES

The LMG/NMCP Senior Technical Advisor has been able to rapidly integrate into the NMCP, and he has been able to effectively advise and counsel NMCP staff and leaders in the development of the key strategies and documents as described above. Overall the LMG/NMCP project has smoothly started in Burundi, with only minor challenges in regards to NMCP appropriation of new tools and strategies and NMCP staff willingness to try new approaches.

NEXT STEPS AND PRIORITY ACTIONS FOR THE NEXT QUARTER

Priority actions and priorities for the next quarter include:

- Support the NMCP to finalize and submit the Global Fund malaria concept note on time
- Complete the OCAT
- Develop the LMG/NMCP workplan
- Finalize the NMCP grant transition plan
- Finalize the MOU between LMG/NMCP and the Burundi NMCP
- Organize the LDP+ alignment meeting and first LDP+ workshop

LMG/NMCP - Sierra Leone

During this reporting period, the project team secured a letter of attestation from the Sierra Leone Ministry of Health and Sanitation, a prerequisite for in-country registration. The team re-launched recruitment for the Sierra Leone Senior Technical Advisor and identified a top candidate, who will be interviewed by the MSH Country Portfolio Director in the beginning of the next quarter. The project team expects to submit the candidate to the mission for approval in early 2015, with in-country activities launching during the next reporting period.

LMG/NMCP – Lao PDR

During this reporting period, USAID/PMI identified the Lao PDR as the seventh LMG/NMCP country, with a Senior Technical Advisor providing malaria supply chain support to the National Center for Malaria, Parasitology and Entomology (CMPE). The LMG/NMCP team began recruiting for this position in early December 2014, and plans to identify a candidate by mid-January 2015, to recommend to USAID/PMI Washington for an interview.

IV. QUARTERLY TRAVEL PLAN

Traveler	Itinerary	Dates	Purpose
TBD Senior Technical Advisor	TBD – Freetown, Sierra Leone	TBD January 2015	Travel to post to begin role as Sierra Leone Senior Technical Advisor
TBD Senior Technical Advisor, Malaria Supply Chain	TBD – Vientiane, Lao PDR	TBD January 2015	Travel to post to begin role as Lao PDR Senior Technical Advisor
TBD LDP+ facilitator	TBD – Conakry, Guinea	February 14-21	Co-facilitate LDP+ workshop 1 with LMG/NMCP Senior Technical Advisor
TBD LDP+ facilitator	TBD – Yaoundé, Cameroon	January 25 – 31	Co-facilitate LDP+ TOT and workshop 1 with LMG/NMCP Senior Technical Advisor
TBD LDP+ facilitator	TBD – Monrovia, Liberia	February TBD	Co-facilitate LDP+ workshop 1 with LMG/NMCP Senior Technical Advisor
TBD LDP+ facilitator	TBD – Bujumbura, Burundi	February TBD	Co-facilitate LDP+ workshop 1 with LMG/NMCP Senior Technical Advisor

ANNEXES

SUCCESS STORY

Teamwork and delegation of tasks facilitates the submission of the Malaria Global Fund Malaria Concept Note in Côte d'Ivoire

Côte d'Ivoire's National Malaria Control Program now uses facilitated teamwork to carry out its key functions.



CCM members debate whether or not to delay submission of the Côte d'Ivoire malaria concept note at an emergency meeting.

Photo: Management Sciences for Health

“While we were already a team, the support provided by LMG/NMCP has allowed us to become stronger and more dynamic.”

-MOH Cabinet Director

As the next Principal Recipient of the Global Fund malaria grant, Côte d'Ivoire's National Malaria Control Program (NMCP) faced a major challenge: on October 1, 2014, the Global Fund sent feedback on its draft concept note, and the revisions required to submit the concept note by the October 15 deadline were significant. The concept note committee had little hope that it could complete this work in fourteen days. Even Côte d'Ivoire's Country Coordinating Mechanism (CCM) doubted the NMCP's ability to meet the October 15 deadline and considered delaying the concept note's submission.

The LMG/NMCP project's Senior Technical Advisor in Côte d'Ivoire advised the NMCP to avoid delaying the submission and assured the CCM and the NMCP Director General that it was possible to overcome this challenge with organization and teamwork. The project organized the NMCP and other stakeholders, working first with the NMCP leadership to identify which staff could be excused from other work to focus on the concept note, then dividing staff and relevant NMCP partners into teams. After identifying main areas for improvement, each team was given a firm deadline to revise and complete a section of the note. The LMG/NMCP Senior Technical Advisor monitored each team's work, providing technical support, feedback, and encouragement as needed. The NMCP successfully submitted the concept note by the October 15 deadline, and in early December 2014, the NMCP received the good news: the concept note had been approved.

The Coordinating Director of the NMCP is convinced that the October 15 submission was made possible through the teamwork led by LMG/NMCP, noting that “the facilitated teamwork allowed us to overcome the challenges that jeopardized the October 15 submission. The LMG/NMCP Senior Technical Advisor's approach allowed each team member to apply their skills in order to produce a high quality concept note. This team-based approach is now being used by the NMCP to ensure that each phase of the national bednet distribution campaign is successful. While we were already a team, the support provided by LMG/NMCP has allowed us to become stronger and more dynamic.”



SUCCESS STORY

Technical groups provide an ideal structure for solving the NMCP's coordination challenges

Strengthening partnerships in the fight against malaria in Guinea



Photo: Management Sciences for Health

The NMCP's Case Management technical group at a meeting on November 27, 2014.

“By establishing technical groups within the NMCP...coordination with partners in the fight against malaria has improved.”

- *Dr. Timothé Guilavogui,
National Coordinator,
National Malaria Control
Program, Guinea*

One of the major pillars for achieving the national objectives in Guinea's 2013-2017 National Strategic Plan is strengthening partnerships. The USAID-funded Leadership, Management and Governance (LMG) Project, implemented by Management Sciences for Health, is providing direct technical assistance to Guinea's National Malaria Control Program (NMCP) to work toward this goal.

The LMG/NMCP Project conducted a thorough situational analysis of the NMCP in partnership with Stop Palu in November 2013. This analysis revealed a lack of involvement of key partners in the NMCP's planning, coordination, implementation, and monitoring of program activities, hindering the NMCP's ability to coordinate efforts and achieve priority targets in the fight against malaria.

Working in close collaboration with the leaders of each NMCP unit and the central coordination unit, the LMG/NMCP Senior Technical Advisor helped the NMCP develop five functional technical groups to address these challenges: Monitoring and Evaluation, Case Management, Information, Education, Communication and Behavior Change Communication, Commodities, and Vector Control. These technical groups, led by NMCP unit leaders, are composed of representatives from Stop Palu, Catholic Relief Services (CRS), Systems for Improved Access to Pharmaceuticals and Services Program (SIAPS), the Ministry of Health, universities, and the private sector. During regular monthly meetings, the LMG/NMCP Project assisted each of the five groups to develop terms of reference and their respective technical group workplans that included plans for coordination with other technical groups and partners.

According to the surveyed NMCP unit managers, the technical groups provide an ideal environment for harmonization of key NMCP interventions. By working synergistically in technical groups, the program has achieved more than 80% of the activities included in the NMCP's six-month workplan. The NMCP now has better coordination of interventions, communication with partners, regular monitoring of workplan implementation, sharing of technical documents, and increased accountability, enabling the program to develop richer interventions and strategies for malaria control.



SUCCESS STORY

Liberia's National Malaria Control Program (NMCP) revises its staff structure for greater effectiveness and efficiency

A clear, organized human resources review results in a more rational, agile NMCP.



Photo: Management Sciences for Health

NMCP staff participate in a staff rationalization discussion led by LMG/NMCP

“The manner in which our supervisors were consulted really encouraged me, and I knew they would not forget my hard work and dedication to the program.”

-NMCP Staff

Like most government entities during the civil war, Liberia's National Malaria Control Program (NMCP) had few capable staff or resources, rendering it powerless to implement its mandate. Once the war ended, international funding for sorely-needed malaria control activities resulted in a massive, rapid growth in NMCP staff. While this scale-up was intended to ensure the implementation of key interventions, a lack of standardized hiring processes resulted in overstaffing, misalignment of skills with job functions, and unclear roles. In 2014, the government of Liberia recognized that out-of-control payroll expenses required an overhaul of government staffing, including the NMCP. At the same time, the Global Fund asked the NMCP to minimize staff numbers to maximize malaria resources.

In this context, the Leadership, Management and Governance NMCP Capacity Building project (LMG/NMCP) in Liberia worked with NMCP leadership and key partners to restructure the NMCP's human resources. Using results from LMG/NMCP's organizational capacity assessment, Roll Back Malaria's recommendations, and examples of other strong regional NMCP structures, the project worked with NMCP leaders to develop terms of reference for the NMCP in line with Liberia's current context, changing its key role from implementer to facilitator. A review team developed an organigram with streamlined units, reporting lines, and revised job descriptions. The project then helped the NMCP to assess existing staff technical competencies, experience, and work ethic. Staff who met a minimum number of checklist items were matched to positions. By the end of the process, the NMCP had streamlined the number of staff from 61 to 39. Those who were not retained were matched to other Ministry of Health agencies, and those of retirement age were given the option to retire.

A broad stakeholder consensus that the human resources restructuring was necessary for moving the NMCP forward helped ensure that this process was transparent and democratic. One staff member noted, “The manner in which our supervisors were consulted...encouraged me...I knew they would not forget my hard work and dedication to the program.”