HIV REFORM IN ACTION

CORPORATE AGREEMENT; HEALTH SYSTEMS STRENGTHENING FOR A SUSTAINABLE HIV / AIDS RESPONSE IN UKRAINE (HSS SHARE)

QUARTERLY REPORT

April 1, 2015 – June 30, 2015

AWARD NUMBER: AID-121-A-13-00007

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TABLE OF CONTENT

Contents

TABLE OF CONTENT **2**

LIST OF ACRONYMS **3**

SECTION A. **6**

Table 1. GENERAL PROJECT INFORMATION 6

Table 2. OVERALL PROJECT PROGRESS AND PERFORMANCE IN REPORTING PERIOD 8

SECTION B. **31**

Table 4. RELEVANT INDICATORS FOR REPORTING PERIOD 31

Table 5. LESSONS LEARNED, AND SUGGESTED DISSEMINATION 31

SECTION C. **33**

Table 6. EXECUTIVE SUMMARY 33

ANNEX 1: PROJECT ACTIVITY MONITORING MATRIX **35**

LIST OF ACRONYMS

Acronym	Description
AIDS	Acquired Immune Deficiency Syndrome
ALOS	Average length of stay
ART	Antiretroviral Therapy
ARV	Antiretroviral (drug)
BCC	Behavior Change Communication
BL	Baseline
B&M Plan	Branding and Marking Plan
CB	Capacity building
CD	Capacity development
CME	Continuous Medical Education
CPD	Continuing Professional Development
CSO	Civil Society Organization
CSSFCY	Center of Social Services for Family, Children and Youth
CMU	Cabinet of Ministers of Ukraine
COP	Chief of Party
C&T	Counselling and Testing (Synonyms often used: HCT, VCT
DCOP	Deputy Chief of Party
DRG	Diagnostic Related Groups
EPI INFO	Public domain statistical software for epidemiology developed by Centers for Disease Control and Prevention (CDC) in Atlanta, Georgia (USA)
ER	Expected results
FCPA	Foreign Corrupt Practice Act
FM	Family Medicine
FSW	Female Sex Workers
GARP	Global AIDS Report
GF or GFATM	Global Fund / Global Fund to Fight AIDS, Tuberculosis and Malaria
GoU	Government of Ukraine
HCF	Health Care Facilities
HCT	HIV Counselling and Testing
HIV	Human Immunodeficiency Virus
HQ	Headquarters
HR	Human Resources

HRH	Human Resources for Health
HRIS	Human Resource Information System
HSS-SHARe	Health System Strengthening for a Sustainable HIV/AIDS Response
ICD	International Classification of Disease
ICT	Information Communication Technology
IDUs	Intravenous Drug Users
iHTP	Integrated Healthcare Technology Package
Intl.	International
IS	Information system
IT	Information Technology
KAP	Knowledge Attitude Practice/Key Affected Population
KM	Knowledge Management
KMCS	Knowledge Management and Communication Strategy
LOC	Letter of Credit
LTTA	Long-Term Technical Assistance
MARPs	Most-At-Risk Populations
MAT	Medication-assisted treatment
MMBT	Maturity Model Benchmarking Tool
MOF	Ministry of Finance
MOH	Ministry of Health
MOU	Memorandum of Understanding
MoV	Means of Verification
MSM	Men who Have Sex with Men
MSP	Ministry of Social Policy
M&E	Monitoring and Evaluation
NAP	National AIDS Program
NASA	National AIDS Spending Assessment
NGO	Non-Governmental Organization
NHA	National Health Accounts
NHP	National HIV Plan
Obj.	Objective
OHD	Oblast Health Department
Ops Manager	Operations Manager
OSA	Oblast State Administration
OVI	Objectively Verifiable Indicators
PBB	Performance Based Budgeting

PEPFAR	President's Emergency Plan For AIDS Relief
PH	Public Health
PHC	Primary Healthcare
PLHIV	People Living with HIV/AIDS
PLWH	People Living with HIV/AIDS
PM	Project Management
PMEP	Performance Monitoring and Evaluation Plan
POC	Point of Contact
PPP	Private Public Partnership
PWID	People Who Inject Drugs
Q&A	Questions and Answers
RAP	Regional AIDS Program
RCC	Regional TB and HIV Coordination Council
RFA	Request For Applications
ROI	Return on Investment
SES	State Epidemiology Service
SLA	Service-Level Allocation
SOW	Scope of Work
SS	State Service of Ukraine on HIV and Other Socially Dangerous Diseases
STTA	Short-Term Technical Assistance
TA	Technical Assistance
TB	Tuberculosis
TBD	To Be Determined/To be done
TOR	Terms of Reference
UCDC	Ukrainian Center for Disease Control
UNAIDS	Joint United Nations Program on HIV/AIDS
USAID	United States Agency for International Development
USG	United States Government
VCT	Voluntary Counselling and Testing
WG	Working group
WHO	World Health Organization

SECTION A.

TABLE 1. GENERAL PROJECT INFORMATION

Country:	Ukraine	**Project:**	HIV Reform in Action
Regions/oblasts:	Dnipropetrovsk, Lviv, Poltava	**short name:**	HIVRiA
		CoAg number:	AID-121-A-13-00007
		Implementer:	Deloitte Consulting LLP
Agreement Officer Representative (AOR)	Paola Pavlenko	**Start Date:**	October 1st, 2014
		End Date:	September 30th, 2018
Alternate AOR	Hanna Blyumina	**Latest modification # and date:**	Mod 1 signed March, 31, 2014
Date of Report Submission:	July 15th, 2015		
Period covered by the report:	April 1st, 2015 – June 30th, 2015		

TABLE 2. OVERALL PROJECT PROGRESS AND PERFORMANCE IN REPORTING PERIOD

Activity	Progress		Comments/ Analysis
	Planned (Sub – Activity) (for reported period)	**Actual** (including comments if required)	**Planned for next period**
Objective 1: Enhance national leadership and capacity for evidence-based and gender-sensitive HIV policy programming and implementation			
Sub-objective 1.1: Support national government institutions in AIDS policy development, programming and implementation			
1.1.1. Facilitate dialogue between MoH, MoF, MSP, Parliament members and regional entities to ensure finance allocation for National AIDS response.	Support interagency working group and dialogue for preparation of annual budget requests and justification of National AIDS Program (NAP) funds allocation	The adoption of RAPs is critical for the comprehensive response to HIV at the regional level and resource allocation planning from local budgets. Project scheduled a national level meeting to discuss issues related to the adoption for late June. However, following MOH and UCDC request, the meeting was moved to July 9-10, 2015	
	Facilitate dialogue between national and regional entities to improve budget planning for HIV	The country had the HIV Sustainability Forum in June where the issues of the HIV services (and associated costs) transfer to the Government ownership where raised to ensure sustainability of ART, prevention and care. At the Forum, the results of Ukraine allocative efficiency analysis presented - Value for Money in Ukraine's HIV response, specifically, Strategic priorities and improved efficiency. HIVRiA project representative who participated in	

		Phase 1 of the Study, supported preparation of the presentation and recommendations to GoU.	
1.1.2. Strengthening MoH capacity in national HIV/AIDS policy development, programming, monitoring and evaluation	Conduct assessment of MoH needs in HIV/AIDS policy development and programming	The Public Health Technical Working completed the situational analysis of key public health operations (WHO) performance. This analysis was conducted by reviewing the terms or reference of various public institutions under the Ministry of Health. This analysis identified gaps in performance of PH operations, as well as duplicative and/or overlapping functions between various government entities. The presentation of the situational analysis was made at the Conference on Public Health organized by MOH in collaboration with WHO (see Annex 10).	
	Provide technical support to MoH in Health Reform Strategy development efforts in HIV/AIDS area	In support of the public health system reform initiated by MOH, the PH TWG proposed a scenario for restructuring of Ukraine's public health system under the single mandate PH institution, with regional entities. This proposal also defined roles and responsibilities at the national, regional and rayon levels. The recommendation included an integration of PH surveillance, policy development and programming functions for HIV and AIDS. Proposed models were	The project staff and PH TWG will continue meetings and discussions with local and international experts and stakeholders to come up with the consensus and finalize the PH system model structure for Ukraine.

		presented at the MOH meeting with regional representatives of the State Epidemiological Services and the WHO meeting.	
	Assist with the organizational development of relevant structure within MoH responsible for policy and programing after SS termination	The Ministry of Health established a public health department based on the TOR and staffing recommendations provided by the project in the previous quarter. This quarter, the project developed a model structure for the national PH entity (center) with the description of functions and responsibilities of its departments and sub-units. The situational analysis of the PH operations mentioned above serves as the background justification for the establishment of the national PH entity.	
	Provide capacity development of relevant MoH structures in usage of evidence-based data for policy development, M&E of NAP and programming (trainings, TA provision based on needs assessment results)	The establishment of the PH department of the MOH has been delayed. The definition of its functional role is largely dependent on the establishment of the national PH entity that is currently being discussed. It delayed capacity development of the MOH department until after the the national entity (center) is established under the new PH system model.	
	Create the National AIDS Program Dashboard	The outline, including functional description and structure of NAP Dashboard is under discussion	To discuss NAP Dashboard with key stakeholders and agree on structure and

		with the UCDC and partners (RESPOND) in order to ensure collaboration of activities carried out by different partners.	technical implementation during the National M&E group meeting in July 13-15, 2015. Dashboard is expected to be finalized and launched in accordance with agreed during the discussion terms.
1.1.3. Learning international best practices and experiences in HIV response	Prepare report on study tour findings and lessons learned	Study Tour took place on May 23-30, 2015 in four localities in Poland. Twelve people from governmental institutions, non-governmental organizations and international TA projects participated in the study tour. Report on the Study Tour is prepared (see Annex 5).	Participants have created individual action plans and aligned with the planned Project activities in their regions. A follow-up meeting is planned for the Study Tour participants (see below).
	Conduct national level Round table to discuss lessons learned and recommendations	Activity delayed until the following quarter. At the moment of the report submission, invitations to the participants were sent.	Workshop to discuss study tour observations and lessons learned will be held in July 14-15, 2015.
Sub-objective 1.2: Strengthen capacity of local government entities in implementing regional AIDS programs with emphasis on key affected population			
1.2.1 Support the development of RAPs, including budget planning.	Support RCCs in RAPs preparation	Development of RAPs in pilot regions (Dnipropetrovsk, Poltava and Lviv) was organized in coordination with SS and UCDC. In 3 pilot regions draft RAPs were developed: **Dnipropetrovsk:** draft RAP was submitted to OHD and advocacy is needed to proceed with further approval by OSA. **Lviv:** draft RAP was developed	Advocacy is needed for Lviv and Dnipropetrovsk to support RAP approval by the Oblast Council. During Y2Q4, the Project team has planned series of meetings with RCCs and public authorities to assist in this process.

		and approved by OHD. RCC meeting is scheduled for June 19 in order to agree upon RAP implementers and role for NGOs. **Poltava:** Draft RAP was developed, agreed with the OHD and submitted to OSA Finance Department. Submission for the upcoming session of the Oblast Council is expected in June – July, 2015.	
	Assist in preparation of RAPs including budget planning and service costing	Upon the request from SS in December 2014, the Project provided technical assistance to draft and thoroughly cost RAPs for 2015-2018 in additional 11 regions. In the regions listed below RAPs were approved by RCCs: • Cherkasy oblast; • Kyiv City; • Lviv oblast; • Poltava oblast; • Zaporizhia oblast; To support transparent and inclusive process of RAP development, some regions, set up the Technical Working Groups under the Health Departments of the Oblast State Administrations: • Chernihiv oblast; • Dnipropetrovsk oblast; • Kherson oblast; • Khmelnytskyi Oblast; • Kirovohrad oblast;	All RAPs in all 14 regions are developed and are at different stages of approval process. Some of the RAPs are still under OHD review, while some were already submitted to the Finance and Economy Development Departments. Those that were already approved by all relevant departments were submitted to the upcoming sessions of the Oblast Councils for approval, which represents the final step in this process.

		• Kyiv Oblast; • Mykolayiv oblast; • Odesa oblast; • Vinnytsia oblast. In two regions RAPs were approved with the resolutions of the Oblast Councils and the Oblast State Administrations, which means that funds for HIV activities should be allocated from local budgets: • Mykolayiv oblast; • Kirovohrad oblast.	
Sub-objective 1.3: Improve and sustain comprehensive service delivery models and financing mechanisms for key affected populations.			
1.3.1. Provide TA for the development of the National strategy on access to HIV prevention services for key populations**.**	Participate in technical working group and provide input to strategy development	Project's representatives took part in the Forum on Sustainability on July 15, during which it was decided to set up a National Sustainability Group with the task to prepare a National Sustainability Plan.	Project intends to provide significant contribution to the National Sustainability Group and provide recommendations for the National Sustainability Plan
1.3.2. Develop specific **service delivery and financing strategies for piloting** in project regions (discuss with key stakeholders at national and regional level).	Conduct regional stakeholder workshops to build consensus on priority problems and needs for service delivery and financing improvement.	On April 24, 2015 the Project held national level workshop to discuss pilots aimed to ensure sustainability of HIV services at the regional level. National stakeholders discussed and agreed upon 6 piloting strategies to be implemented in the regions, such as: • Scale-up access for KAPs to preventive services through the integration of these services at all levels of care	

		• MAT co-payment model • Develop system of the cascade HIV training for specialists • Engagement of local communities in HIV response • Develop mechanism of direct funding of HIV preventive services from local health budgets (social contracting, grants) • Mechanism for identification and referral of HIV patients' partners.	
1.3.3. Prepare piloting of alternative approaches to deliver/finance HIV services for key populations in the Dnipropetrovsk, Lviv and Poltava regions for 2014-2015.	Conduct trainings with key Oblast and Raion partners on piloting options and implementation (RCCs)	Activity postponed due to the preparatory study tour to Georgia and other preliminary planning activities	Pilot implementation trainings will be conducted in August/September for the representatives of Dnipropetrovsk and Poltava oblasts, after final approval of the scope of work with the grantee and local administration
	Facilitate development and enforce OSA orders needed to formalize and support piloting in different settings (RCCs)	Activity postponed	Next quarter, piloting implementation plans will be agreed with local administrations, as well as orders to formalize and support piloting
1.3.4. Conduct the 1st stage of the pilot in Dnipropetrovsk, Lviv and Poltava regions on the alternative approaches to deliver/finance HIV services for key populations at the raion level	Provide guidance and advice to regional stakeholders on the implementation of piloting (monitoring visits and ongoing face-to-face meetings)	For the implementation of pilots on integrated HIV preventive services and MAT co-payment model, the city of Poltava and Poltava rayon as well as the city of Kryvyi Rih and Kryvyi Rih rayon were selected. The Project facilitated regional meetings with the	The Project plans to support ongoing dialogue at the local level to ensure the efficient implementation of pilots.

		representatives of governmental and non-governmental sectors in Dnipropetrovsk (June 4), Kryvyi Rih (June 5) and Poltava (June 10) to present the piloting concepts and discuss implementation of pilots in the region.	
	Collaborate with other partner projects to ensure resource allocation for service provision.	To coordinate efforts under sustainability pilot projects, the Project held a number of meetings with national partners: RESPOND (05/12), Alliance (05/28), Clinton Foundation (06/04), PLWH Network (06/04). The duplication of efforts, coordination of efforts and resource allocation issues were discussed.	
	Organize the monitoring of piloting (conduct M&E training, prepare reporting forms, conduct outcome assessment) and share experience with stakeholders (regional piloting Dashboard)	Development of M&E instruments and requirements for the implementing partners has been initiated. Respective tools and instructions will be disseminated among implementing partners in Q4, as well as training on monitoring and reporting will be conducted in Q4	M&E tools and instructions will be disseminated among implementing partners in Q4. Training on monitoring and reporting will be conducted in Q4.
1.3.5. Revise and improve financial mechanisms for provision of HIV services to key populations	Explore the barriers to: • active utilization of social contracting and PPP for the provision of HIV preventive services; • implementation of risk-adjusted capitation for the provision of HIV preventive services.	To analyze barriers and best practices in social contracting and PPP for the provision of HIV preventive services, the grantee was selected (LHSI), the scope of work and the work plan were agreed upon. The first outcome – study protocol agreed with national partners (06/24)	According to the work plan of the grantee, the data collection will be conducted in Q4, report will be prepared and national consultations on application of social contracting and PPP for the provision of HIV preventive services will be held.

	Conduct a workshop for decision makers on the implementation of social contracting mechanisms for the provision of HIV preventive services		
	Provide proposals to MoH and MSP on active utilization of social contracting mechanisms for the provision of HIV preventive services		
1.3.6. Support national leadership for sustainable provision of HIV services to key populations.	Analyze the international evidence on quality assurance mechanisms for the provision of HIV preventive services	Activity has started and will be continued in the next period.	The analysis will be conducted in Q4.
	Prepare report on the analysis of existing gaps in available standards/protocols for the provision of HIV services to key populations.	Project is in the process of developing a report on gap analysis in available standards/protocols for the provision of HIV services to key population in June 2015 (see Annexes 9.1, 9.2).	The analysis will be conducted in Q4.
	Support MOH and MSP in the development of required standards/protocols for the provision of HIV services to key populations (based on the gap analysis)	Activity postponed.	The working meeting to support MOH and MSP will be conducted in Q4.
Sub-objective 1.4: Improve policy dialogue and ensure transparent policy development environment.			
1.4.1. Engage champions and change agents at all levels (MOH, UCDC, regional AIDS Centers, OHDs and others) and civil society to strengthen the country's	Build capacity of change agents in evidence-based policy making and oversight	Individual capacity building for change agents had occurred during the study tour to Poland. Change agents' were involved in preparation and planning for the	

capacity in evidence-based HIV policy making and implementation		Speaker series events in the regions.	
	Conduct Round tables at regional level to provide platform for HIV/AIDS problems discussion	Activity postponed in order to ensure participation of regional key stakeholders.	Round tables at regional level to provide platform for HIV/AIDS problems discussion will be conducted in September 2015
Objective 2: Improve and optimize resource allocation and financing for the national and selected regional HIV/AIDS programs targeting key populations			
Sub-objective 2.1: Develop evidence pool to create support for funding decisions in HIV response at the national and regional level			
2.1.1. Support government of Ukraine to conduct Investment Case study Phase II (extension of HIV allocative efficiency study) in collaboration with UNAIDS, including analysis of resource allocations and financial sustainability of service delivery to key populations.	Operational and Service Data Collection Related to prevention services for KAPs (MARPs) and social support for PLWH in 25 regions of Ukraine	HF (Investment Case) Grant RFA 2015-03 was announced with the deadline of May 27, 2015. In order to revise and improve financial mechanisms for the provision of HIV services to (KAPs/MARPs), the Project organized Request for Applications to undertake activities named “Preparation of Data for Economic Analysis of HIV/TB Response Programs”, in support of the 2nd phase of Investment Case analysis.	Evaluation has been completed in first week of July and decision on candidate made. It is planned to start negotiations and sign the award agreement with the grantee. Detailed work plan and budget will be approved through negotiation with the selected grantee.
	Conduct of Stakeholders Workshop for decision makers to discuss and finalized methodology of the study	Stakeholder Meeting was held **in Kiev** on May 27, 2015. The purpose of the meeting was to provide an overall roadmap for the Investment Case Phase II analysis. Topics covered in the meeting included the range of data, multiple phases, and distinct questions the investment case intends to investigate, as well as the overall technical structure that	

		will be used to conduct this evaluation. Presentation components included: Study Goals; Study Stages; Region Selection and Areas of Analysis; Database Design; Potential Study; Benefits; and Expected Results (see Annex 3.1).	
	Conduct study and prepare preliminary study Report	The study will start concurrently with the Grant described in 2.1.1, with collection of data in 3 regions. This data collection is the first step in Phase 2.	Report will be printed and presented to partners
2.1.2. Provide technical assistance to UCDC on NASA validation data process for 2011-2012	Prepare Report	First draft of NASA report was prepared and is currently in the process of review and validation with UCDC (see Annex 3.2). The Project also supported UCDC in preparation of matrixes and narrative sections of the country GARPR report (indicator 6.1).	
2.1.3. Conduct cost-effectiveness study of scale usage of rapid tests in prevention programs in collaboration with UCDC.	Develop methodology for the study	SOW for grant is in the stage of finalization and the award is expected to be issued in September.	
	Conduct of Stakeholders Workshop for decision makers to discuss and finalized methodology of the study	Stakeholder Workshop will be conducted upon finalizing the SOW.	
	Conduct study and prepare study Report.	The study will start concurrently with the Grant activities described in 2.1.3	

Sub-objective 2.2: Support the development of HIV strategies and policies at the national and regional level which reflect optimized resource allocation and lead to the most cost-efficient and effective.			
2.2.1. Support MOH/UCDC in institutionalization of National system of expenditure monitoring of HIV.	Provide support in development of GoU Order on HIV expenditure monitoring	The Order has been submitted to MOH in April and has passed all departments responsible for revision. Now it is at its last stage of review – with Legal department.	After it the Order will be signed by Minister of Health.
	Support the development of methodological guidelines for MoH on expenditure monitoring and other relevant documents	Preparation of package of support documents to MOH order has already started. New methodology guidelines for MOH on expenditure monitoring were developed, processes on regional data collection and submission on national level are in the process of stipulation.	After preparation of the final document, it will be sent to MOH lawyers for review and approval. Approval is anticipated in Q3-Q4.
	Develop site and electronic tools for monitoring and data tracking of NAP and RAPs implementation	Drafting the TOR for tools development has commenced in June.	A meeting with UCDC experts is planned for July to finalize the TOR. Service procurement process will star on week of July 20th.
	Train UCDC personnel to use electronic tool for monitoring and data tracking	Training will be conducted after the tools are developed.	
	Conduct trainings for regional M&E experts on process and tools usage	Training will be conducted after the tools are developed.	
Additional activity: Providing technical assistance to the USAID RESPOND project by conducting the costing analysis of the Project	Develop methodology, timelines and get STTA for the analysis.	The methodology has been developed, data collection completed and analyzed, draft Report on costing was prepared and presented on workshop to the	

Start model piloted in Ukraine.		RESPOND team.	
	Conduct analysis and prepare preliminary Report	Primary data collection was conducted in May in 4 sites implementing Project Start in the following regions: Dnipropetrovsk, Mykolayiv and Lviv. Data was validated and consolidated. Subsequently, the cost analysis was conducted and preliminary report drafted (see Annexes 4.1, 4.2).	
	Conduct Workshop for RESPOND staff to discuss and finalized findings and report	The Workshop was conducted in RESPOND office on July 6th, where results of the data collection and findings were presented.	The comments from RESPOND are anticipated by mid-July, to finalize the report.
Sub-objective 2.3: Strengthen capacity of national and regional partners in finance planning, budget preparation and execution to match the needs to optimized HIV/AIDS service-delivery operations.			
2.3.1. Support national and regional stakeholders in operational and budget planning	Two trainings on routine operational planning, including budget formulation, for key regional administration personnel stakeholders conducted (40 people trained	Regional training on allocation of resources for health and social programs by governmental institutions for regional representatives from 3 regions – Poltava, Dnipropetrovsk and Lviv – was conducted on April 27-29.	
	Training on estimation of financial resource needs for regional administration personnel (20 people)	Consultations with MoF, UCDC and MOH are held to determine the priority topics for training	The training for regional administration personnel from 6 project regions is planned for August 2015.
	Training of regional specialists in health economics and financial issues (20people)	Consultations with MoF, UCDC and MOH are held to determine the priority topics for training	The training for regional administration personnel from 6 project regions is planned for August 2015.

Objective 3: Optimize and strengthen human resources for health (HRH) for the delivery and scale-up of gender-sensitive HIV/AIDS services targeting key populations			
Sub-objective 3.1: Provide evidence based data for HRH strategy in HIV response.			
3.1.1. Analyze human resource needs and gaps for HIV/AIDS–services provision.	Organize Stakeholder workshop to present Situation analysis Report	Situational analysis on HRH in HIV results were presented in the following meetings: Main findings and recommendations at the working group on HRH strategy development in April and comprehensive discussion of main results at the HRH stakeholder meeting in June (see Annex 8).	Disseminated final report among partners/ counterparts and present to regions
3.1.2. Estimate capacity of current CME/CPD system in HIV area and its needs for TA and capacity development, analyze needs and gaps.	Conduct a situational analysis on current CME/CPD system capacity in HIV	Preliminary Grant results were presented at the HRH stakeholder meeting on June 30 2015.	Disseminated final report on Grant results among partners/ counterparts and present to regions
Sub-objective 3.2: Support the introduction of systemic and operational changes in HRH for provision of sustainable and integrated HIV/AIDS services at the national and regional level			
3.2.1. Facilitate consultative discussions with core GoU agencies, regional governments departments and other stakeholders to discuss HRH priorities to meet HIV/AIDS service delivery performance needs	Conduct Stakeholder meetings on capacity and TA needs presented to key stakeholders	Identified at the regional level HRH priorities to meet HIV/AIDS service delivery performance needs were converted to rationalization option for presenting at the National piloting meeting the 24th of April, 2015. Joint event “Government role in ensuring effective HRH policy” Conference in collaboration with National Academy of Public Administration under the President of Ukraine on April 22, 2015. (Recommendations for the Conference’s Agenda and the	

		Resolution were provided (see Annex 7).	
	Support interagency working group to discuss HRH priorities to meet HIV/AIDS service delivery performance needs	TOR for interagency working group, list of its members, steps to formalize and selecting tools for HRH planning based on data /information availability analysis were discussed at the planned meeting on April 30, 2015 which organized and conducted by the Project.	Next meeting of the interagency working group is planned for July 2015
3.2.2. Facilitate HRH Strategy development and introduction of relevant changes in the HRH legislation (Order #33).	Provide TA and recommendations to HRH Technical working group under the UCDC (MOH)	UCDC accepted to take leadership in Technical working group on HRH Strategy development and introduction of relevant changes in the HRH legislation. The Project conducted 3 group and individual meetings with UCDC members. Draft of HRH Policy Paper discussed at the interagency working group meeting on Apr 30 2015	This task will be continued by the Project
	Provide capacity development to RCC in strategic planning of HRH in HIV	Regional workshops to support RCC with the HRH strategy development conducted for Lviv Region on June 4 and for Poltava Region on June 17. Due to Governance crisis in Dnipropetrovsk region RCC support on HRH strategy development workshops was postponed to the 4th quarter of the Project implementation.	Regional workshops to support Dnipropetrovsk RCC with the HRH strategy development will be conducted in July 2015

3.2.3. Support the development of Oblast HIV /AIDS Programs, including HRH planning and training	Provide CD to RCCs in HRH planning for RAP	Based on results of Regional workshops to support RCC with the HRH strategy as well as need to finalize HRH planning tool the HIV HRH planning training recommended to be postponed until in September, 2015	Training for RCC in HRH planning will be conducted for representatives from 5 pilot regions in combination in Sep.
	Follow-up TA to RCCs in HRH planning for RAP provided		
3.2.4. Define HRH needs for the implementation of alternative mechanisms (rationalization option) of the delivery/financing of HIV services for key populations at the regional level.	Provide capacity development in calculation of HRH needs in planning piloting of alternative mechanisms (rationalization option) of the delivery/financing of HIV services for key populations at the regional level	Pilot cascade training to ensure piloting of integration HIV prevention services at the PHC level.	
	Support in developing pilot design, including selection of sites, data collection and M&E tools in HRH regards	During Consultative workshop in the Regions data collection for HRH was complete and discussion with wide stakeholders where arranged.	Support will be provided through webinar and individual consultations
3.2.5. Provide TA on HRIS and IS piloting and implementation.	Provide technical and operational support to Working group on HIV IS development.	In absence of working group on HIV IS development, the Project followed up HRIS development with UCDC at the meeting on the 5th of June. Project commitment on HIV area's HRIS development technical support collaboration was discussed with CDC in Ukraine, ACCESS and I-TECH, Projects on June 11 in terms of the Project Y3 planning.	Collaboration on technical and operational support to HIV IS development will be planned together with UCDC (main holder of HIV IS and CDC funded Projects
	Conduct trainings on IS and other relevant capacity	HIV area IS system development previously planned for June was	IS training timeline is dependent on joint CD planning

	development activities in terms of HRIS implementation in the selected region	delayed. The training was rescheduled to joint CD planning with partners (UCDC, ACCESS Project and regional counterparts). Agreement for this collaboration was reached at the meeting on June 11.	with partners
Sub-objective 3.3: Strengthen capacity of Ukrainian institutions in HRH policy development and implementation.			
3.3.1. Strengthening capacity of national and regional level Institutions in proper planning of HRH	Conduct consultative meetings to identify and address CB\TA needs for HRH planning at the national and regional levels	Consultative meetings to Defining TA and CB needs for HRH planning were held At the Conference on Ensuring effective Government role in HRH policy on April 22, 2015 and Situational Analysis results presentation (June 30m 2015). In consequences of the decision to wrap up TA in Lviv Region and lack of commitment to endorse RAP request by the Lviv Medical University and CME/CPD community Round table was canceled.	Conduct consultative meetings to identify and address CB\TA needs for HRH planning at the national and regional levels
3.3.2. Facilitate sensitization of Academic institutions on introduction of prevention, treatment and social HIV issues into pre- and post-graduate education programs.	Conduct a joint workshop for decision makers of relevant regional administrations and educational institutions on CME/CPD needs in HIV in particular, practical skills and interactive methods of teaching	Discussion on CME/CPD needs in HIV was conducted at the HRH development Conference in collaboration with National Academy of Public Administration under the President of Ukraine on April 22, 2015. In this matter Participation in Gala Med forum was replaced with above-mentioned event.	In Sep 2015 workshop for decision makers of MoH, UCDC, relevant regional administrations and educational institutions on CME/CPD needs in HIV in particular, practical skills and interactive methods of teaching.
3.3.3. Strengthening national	Support institutionalization of	Discussion on institutionalization of	Meet educational institutions,

academic institutions in HIV education, including prevention, treatment, care and support.	existing HIV training activities into national academic education programs	HIV trainings under GF programme into national academic education was conducted with UCDC and other partners, including USAID funded Projects (May-June 2015).	including nurse schools, to establish collaboration based on mapping provided though the grant results.
	Provide TA support with grants for academic institutions for revisions of the curricula in HIV education	CME/CPD grant results RFA on curricula revision aimed at enchanting HIV topics and its practicality was postponed till Aug 2015. Although CD training for potential applicants to enhance quality of proposals conducted in May, 2015.	RFA will be released in Aug 2015. All necessary consultations will be done via webinar and /or CD consultations for potential applicants to enhance quality of proposals will be conducted.
Cross-cutting			
Activity	**Progress**		**Comments/ Analysis**
	Planned (Sub – Activity) (for reported period)	**Actual** (including comments if required)	**Planned for next period**
Cross-cutting: Institutionalization and Grants Management	Finalize Grant Program Strategy and update list of topics and general timeframe for grants by May 31, 2015	List of grant topics and timeframe updated to the HIVRiA Project needs.	Development of APS for Y3 – till September 2015, and list of topics for Y3.
Cross-cutting: Institutionalization and Grants Management Policy Grant for Obj.1:	Evaluate application received in response to RFA 2015-04 by April 14, 2015, Select grantee by April 16, 2015 and sign Grant Award #02 by April 30, 2015.	Grantee selected, budget, geographical focus and milestones negotiated. Grant Award #02 signed on May 29, 2015 Preparatory stage finished by June 15, 2015	To monitor grantee performance according Implementation Plan and Milestones. To proceed payments according Grant Funding Disbursement Calendar.
Cross-cutting: Institutionalization and Grants Management HF Grant for Obj.2 “Data	RFA 2015-03 “Data Collection for Investment Case”, according to the grant calendar, updated on March 30, 2015:	RFA 2015-03 released on April 30, 2015. Type of grant is Fixed Amount Award. 12 participants registered for	RFA 2015-03 “Data Collection for Investment Case”: evaluate applications, select grantee, negotiate budget, milestones

Collection for Investment Case": to release revised RFA	• Release RFA, conduct info-webinar on April 2015, • Evaluate applications, select grantee and sign Grant Award #03 in June 2015.	webinar conducted on May 13, 2015 2 applications received on May 27, 2015 from eligible organizations in response to RFA 2015-03 TEC meetings conducted on June 06 and June 16, 2015 Both organizations passed through threshold 70 points. Additional information requested from applicants Applications evaluation for RFA 2015-03 is in process	and other conditions and sign Grant Award #03 - July 2015. RFA 2015-05 "Rapid Tests Cost Effectiveness": develop calendar and launch grant process and procedures.
Cross-cutting: Institutionalization and Grants Management HRH Grants for Obj.3:	RFA 2014-002 "Gap analysis": • Close-out Grant Award #01. • Grant "TA support for academic institutions for revision of the curricula in HIV education" (RFA 2015-06). • Develop calendar, SOW and start grant process in May 2015, • Release RFA 2015-06, conduct webinar for potential grantees in June 2015	Grant Award #01 Recipient - UISR named after O.Yaremenka – requested no-cost extension of Grant Award. Modified Implementation Plan and Budget approved. Additional steps to support Grantee included to Modification.	
Cross-cutting: Institutionalization and Grants Management Grants to support piloting	For grant "Alternative approaches to deliver/finance HIV for key populations" (Obj.1): • Define type of solicitation, develop calendar by April 30,	Engagement of local communities in HIV response – SOW for Call for Concepts Paper is in process CCP announcement – July 2015	

	2015; • Announce grant opportunity, webinar for potential grantee by May 31, 2015; • Select grantee, sign Grant Award by June 30, 2015. For grant "Institutionalization of GF trainings into post-graduation educational system" (Obj.3): • Develop calendar by April 30, 2015; • RFA release, webinar for potential grantees by May 31, 2015; • Select grantee, sign Grant Award by June 30, 2015. • Finalize list of grant topics for each region, define type of solicitation and develop calendar for identified grants by April 30, 2015	Concept papers evaluation – August 2015 RFA for selected concept development – September 2015 Develop mechanism of direct funding of HIV preventive services from local health budgets (social contracting, grants and program target funding) – TBD, SOW should be based on the results of Policy Grant	
Cross-cutting: Capacity building		During the reporting period capacity building activities had started with two grantees of the Project: Ukrainian Institute for Social Research named after O. Iaremenko and LHSI as well as Dnepropetrovsk Regional AIDS Centre. CYPRESS methodology as a framework for capacity building was introduced to partners and they already started compiling	

		a Performance Improvement Plan. Project strategy on capacity building including prioritizing strategic partners for capacity building provision and possible TA focus areas and necessary revisions were discussed during several meetings with the project team in preparation for the strategic planning for YR 3-5 and a need to provide capacity building to multiple partners, especially in view of the soon-to-be-launched pilots in the Project regions. Project's Capacity Building Strategy was formulated as a result of these discussions and considerations. In June 2015 Project team has also held a meeting with RESPOND Project in order to coordinate and harmonize approaches, avoid duplication of efforts in the area of capacity building.	
Cross-cutting: Gender and stigma sensitization		Gender and stigma sensitization is one of the cross-cutting elements of the HIV RiA project, is integrated into the project workplan across all 3 objectives, along with engagement of change agents activities. During the reporting	To prepare strategic approach for this cross-cutting activity HIV RiA team organized series of meetings with partner organizations who have some related activities (both WIFE and USAID funded projects),

		period specific gender\ stigma activities included Speaker Series, organized to sensitize local officials, community and journalists on the core need of KAPs, including PLWHA and particular funds allocation in RAP's for prevention services for HIV. The Speakers Series were held in Poltava and Lviv, with specific focus on advocating for funds allocation for prevention services for HIV in local budget. The project team had a broad discussion with local community and national level speakers on the Healthcare Reform and opportunities for PHC level and expenditure from local budget. In the process of development of Regional AIDS Programs HIVRiA team also advocated for addressing those issues in RAP's, with focus on prevention services for KAP's (specifically IDU's and OST treatment). To assist in this process, all participants of the were provided detailed calculation of costing of services available, to better response to KAP's needs.	including consultation with representatives of LGBT community. We expect that we will be able to prepare strategy to address this issues and fill the gap that may occur in terms Health Care Reform and Global Fund phasing out.
Cross-cutting: Communication and		During the reporting period the progress was made in implementing communication	Starting from Y2Q4 project team will review Communication Strategy with

Knowledge Management		activities with aim of HIV RiA Project visualization and information regarding its activities both at national and regional level. During Y2Q3 the project website was lunched and information on project activities is now available to the national and regional stakeholders. We also provide a Newsletter to stakeholders who prefer to receive this information via email. On June 2nd a new edition of HIVRiA Newsletter (in both English and Ukrainian languages) was issued and distributed to the stakeholder mailing list.	regard to Pilots implementation in order to inform general public and specific stakeholder about the pilot implementation stage. Robust communication with target audiences will be important for the smooth Pilot implementation. The project intends providing communication support to HIV sector reform. Revised Communication strategy will be launched and also available as one of the deliverables of Y2Q4 Report.

SECTION B.

TABLE 4. RELEVANT INDICATORS FOR REPORTING PERIOD

No relevant indicators for the reporting period.

Does Logframe, PMEP or WorkPlan Require Revision?
No

TABLE 5. LESSONS LEARNED, AND SUGGESTED DISSEMINATION

Lessons learned, and suggested dissemination	
(i) Project Level Lessons	The project conducted extensive consultations with regional partners to finalize strategies for the pilots. Additional national consultation was held to receive input from national stakeholders, including international partners, GF principal recipients, academic sector and other stakeholders. To ensure that pilot activities are coordinated with ongoing projects in the regions, the project team held separate individual consultations with GF PRs and other TA projects to avoid duplication and ensure complementarity in project activities. While the project intends to expand to additional five regions with pilot interventions in PY3, the decision was made to invite representatives of targeted new oblasts to national pilot discussions and the OST study tour to Georgia, to move things forward with preparation for the pilots. The project team has utilized STTA from the home office to streamline and support project activities in the areas of human resources, gender, stigma, and discrimination and capacity building. Deloitte home office STTA was also provided in support of the study design for the

	Investment Case phase II study. Since official Beneficiary of the Project, the State Service for socially dangerous diseases was abolished and its functions transferred to MoH and UCDC, HIVRiA signed a new MoU with these organizations, where MoH is assigned as beneficiary of the project and UCDC is recipient of the HIVRiA project results.
(ii) Sector Level or Thematic Lessons	The Project leadership and team continue to be actively engaged in broader discussions on health system reform and provide technical input in all areas of HIV and public health policy discussions. In particular, the project took a lead in assisting MOH in PH system strategic development. The Project team is actively involved and regularly participates in the meetings of CCM and its sub-committees. The project team made particular effort to be strongly engaged in the discussions related to HIV sustainability strategies in collaboration with MOH, GF, UNAIDS and other stakeholders. Lack of progress with initiation of widely anticipated health reforms creates delay in initiation of changes in policy, financing and human resource issues related to HIV.
(iii) General Development Lessons	The economic crisis and war-related burden on government agencies, creates challenge for dialogue with regional administrations, as well as national government regarding funding allocations for HIV.

SECTION C.

TABLE 6. EXECUTIVE SUMMARY

Executive Summary of the progress achieved during the reporting period (not more than 3 pages)
During the performance period, HIV RiA project team completed a number of activities at both national and regional levels and made significant progress towards designing and planning the pilots. The patient pathway analysis that has identified the stages of the highest impact on patients' loss to follow-up provide a solid background for designing pilot options for implementation. The project team conducted series of extensive consultations with regional and national stakeholders that resulted in identification of 6 major piloting options: 1. Co-payment of MAT for injecting drug users. 2. Development of mechanisms of direct funding of HIV preventive programs from local budgets. 3. Scale-up access for key populations to preventive services through the integration of these services at all levels of care. 4. Introduce mechanism for identification, referral and further testing of HIV patients' partners. 5. Develop system of the cascade HIV training for health specialists. 6. Engagement of local communities in HIV response. During this quarter the PH TWG completed draft situational analysis with justification for the establishment of the national center for disease control and public health. The situational analysis with the proposed PH system model was proposed at the stakeholder meeting jointly conducted by MOH and WHO. In addition, the project started analyzing legal barriers for implementation of social contracting and other financing mechanisms for funding HIV prevention services in Ukraine. Main funding of this grant activity will contribute to pilot implementation and will provide background on how to apply for state budget through social contract or public-private partnership mechanisms. Substantial progress was made in developing study design for Investment case II study. The stakeholders' discussion was organized at the national level where counterparts discussed a roadmap for conducting the Investment Case Study Phase II and provided input on how to improve the scenario formulation process. With the aim to support UCDC to calculate Human Resource needs in HIV sector the situational analysis on HRH needs was completed. This contributes to national level discussion led by HIVRiA project in order to agree upon the process how to calculate future HRH needs in

HIV/AIDS area, especially in light of upcoming Health Care Reforms. Series of HRH workshops were conducted in pilot regions (Dnipropetrovsk, Poltava and Lviv) in order to understand regional needs and specifics as background. Further plan is to calculate HRH needs not only in postgraduate but also pre-graduate education in all levels, including Primary Health Care level. Having this assessment complete project will be able successfully contribute to development of national HRH Strategy.

Further progress was made in support of the development of Regional AIDS Programs for 14 regions of Ukraine. It is worth to mention that **in all 14 regions RAP's was developed and discussed with further approval on RCC or TWG meetings.** Some of RAP drafts are currently in revision with the Health Care Department, some already passed reviews by Finance Department of Oblast Administration and are submitted for upcoming session of State Oblast Councils for Approval (see Annexes 2.1, 2.2).

During Y2Q4 it is planned to hold workshop for all regions of Ukraine on situation with RAP's development and approval by decision of Oblast State Administration.

Other plans for the next quarter include preparation of pilots design and implementation plans, which will require capacity building for regional partners and cooperation with other donors projects in our pilot regions. **On national level, project will focus on assistance in support to HRH strategy development and proceeding with Investment case study.**

Since official Beneficiary of the Project – the State Service – was abolished and its functions transferred to MoH and UCDC, HIV RiA signed new MoU with this entities, where MoH is assigned as beneficiary of the project and UCDC is recipient of the HIV RiA project results.

Key Issues/ Points of information

- **Programmatic**

In planning activities for the next period, especially pilot's design project, the team should take into account that reform process in Ukraine may influence not only healthcare sector, but also finance and administrative reform. Subsequently, it may require additional adjustments in pilots' implementation.

Due to the complicated preparatory phase of Investment case, results of the study will be shifted to the Project Year 3, thus first findings will be available at the beginning of 2016.

- **Cross-cutting/ contextual**

To support capacity building of HIVRiA partners and grantees the project team will build a strategy for the approach and the focus of capacity building activities. Further, the team will define how these potential partners may become the Change Agents and assist the project in each objective on national and regional level.

- **Management**

HIVRiA project has hired new Specialist on Communication and Social Change to support additional tasks and challenges that project faces in implementing the Change Agents approach and advocacy to assist regions in lobbying for funds allocation in local budget for HIV services for KP's.

ANNEX 1: PROJECT ACTIVITY MONITORING MATRIX

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
Objective 1: Enhance national leadership and capacity for evidence-based and gender-sensitive HIV policy programming and implementation									
Sub-objective 1.1: Support national government institutions in AIDS policy development, programming and implementation									
A process for preparation of annual budget requests and obtaining information required for justification of funds allocation for the National AIDS Program established	1.1.1. Facilitate dialogue between MoH, MoF, MSP, Parliament members and regional entities to ensure finance allocation for National AIDS response.	Support interagency working group and dialogue for preparation of annual budget request and justification of National AIDS Program funds allocation	Interagency WG to support national dialogue established and 4 meetings conducted 2016 budget requests from relevant ministries are based on NAP activities	# of supported WG meetings # budget requests prepared	4 1	X 	X 	X 	X X
Central-local dialogue improved and regional priorities reflected in national AIDS programming and budget planning in HIV sector.		Facilitate dialogue between national and regional entities to improve budget planning in HIV sector	2 workshops for national and regional government representatives conducted and TA provided A tool/instrument developed for collecting regional data/information	# of workshops and TA provided tool/instrument	2 1	 	X X	X 	

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
			for annual budgeting	prepared					
MOH priority capacity development needs in HIV/AIDS identified.	1.1.2. Strengthening MoH capacity in national HIV/AIDS policy development, programming, monitoring and evaluation	Conduct assessment of MoH needs in HIV/AIDS policy development and programming	MOH needs assessment in HIV/AIDS policy development and programming conducted and report prepared	# of reports prepared	1		X		
HIV/AIDS priorities reflected in national health care reform strategy		Provide technical support to MoH in Health Care Reform Strategy development efforts in HIV/AIDS area	Technical support to MoH in Health Care Reform Strategy development efforts in HIV/AIDS area provided	participation in Health SAG and other relevant WG	1	X	X		
The HIV/AIDS governance and administration function established at MOH		Assist with organizational development of relevant structure within MoH responsible for policy and programing after abolishment of State Service	Assistance in organizational development of relevant structure within MoH responsible for policy and programming after abolishment of State Service provided and recommendations (TOR and org. chart) developed	TOR and org. chart prepared	1	X	X		
Capacity of relevant MoH structures in usage of evidence-based data for policy making, M&E of NAP, programming and other identified areas strengthened		Provide capacity development of relevant MoH structures in usage of evidence-based data for policy developing, M&E of NAP and programming (trainings, TA provision based on needs assessment results)	At least 15 MOH staff (including the new unit and UCDC if needs identified) trained based on the needs assessment	# of people trained	15			X	

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
National and regional stakeholders are provided with the visual evidence-based data on NAP implementation and results		National AIDS Program Dashboard creation	National AIDS Program Dashboard created	Dashboard created	1			X	
Best practices in HIV and TB integration learned and strategic vision for HIV/AIDS response formulated among stakeholders	1.1.3. Learning international best practices and experiences in HIV response	Conduct a study tour to share the strategic vision for healthcare reforms, with HIV and TB integration, among Ukraine's key national policy makers, health systems managers and change agents in coordination with PtP	Study tour to share experience for 10 Ukraine's national and regional policy makers, health systems managers and change agents in coordination with PtP conducted	# of people participated in a study tour	10		X		
		Prepare report on study tour findings and lessons learned		Report prepared	1			X	
		Conduct Round table on national level to discuss lessons learned and recommendations	Round table at national level to discuss lessons learned conducted and recommendations developed	# of Round table	1			X	
Sub-objective 1.2: Strengthen capacity of local government entities in implementing regional AIDS programs with emphasis on key affected population									
Regional AIDS Programs include targeted	1.2.1 Support the development of Regional AIDS	Support regional coordination councils (RCC) in RAPs preparation	Regional AIDS Plan development WG meetings for Regional	# of supported WG meetings	6	X	X	X	

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
interventions with emphasis on KAPs and with appropriate budget calculations	Programs including budget planning.		Coordination Councils conducted in 3 regions						
		Assist in preparation of RAPs including budget plans and service calculations	Three RAP approved by RCCs	# of RAPs prepared	3			X	
			TA for RAP preparation for all regions			X	X	X	
RAPs are based on evidence-based regional information for proper targeting RCCs and other stakeholders are provided with updated data and information	1.2.2. Provide national and local partners with adequate regional data and information	Update and add additional data (facility, HRH, etc) to regional profiles (in coordination with Respond project) and present the most recent data and information for Dnipropetrovsk, Poltava and Lviv Oblasts	Update regional profiles for the key pilot regions on the epidemiology, service coverage and gaps, healthcare facilities, resources and HR data (in coordination with Respond project)	# regional profiles updated	3	X	X		
Sub-objective 1.3: Improve and sustain comprehensive service delivery models and financing mechanisms for key affected populations.									
Recommendations on innovative approaches developed and adopted by the TWG on the development of National strategy on access to HIV prevention services for KAP	1.3.1. Provide TA on development of the National strategy on access to HIV prevention services for key populations**.**	Participate in technical working group and provide input to strategy development	National strategy on access to HIV prevention services for KAP developed including innovative interventions	# of recommendation provided to TWG	4	X	X	X	X
The list of options for service delivery	1.3.2. Develop specific **service delivery and**	Conduct desk review of analytical data on delivery of HIV services in	Desk review of analytical data on delivery of HIV	# report prepared	1	X			

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
and financing mechanisms for KAP identified for piloting in three oblasts	**financing strategies for piloting** in project regions (discuss with key stakeholders at national and regional level).	Ukraine, with specific emphasis on key populations	services in Ukraine, with specific emphasis on key populations conducted						
		Conduct regional stakeholder workshops to build consensus on priority problems and needs for improvement for service delivery and financing.	Regional stakeholder workshops conducted in each region (total 3) to build consensus on priority problems and needs for improvement for service delivery and financing conducted	# of regional workshops conducted	3		X		
		Conduct the national stakeholder workshop to build consensus on priority problems and needs for improvement for service delivery and financing	National stakeholder workshop to build consensus on priority problems and needs for improvement for service delivery and financing conducted	# national workshops conducted	1			X	
Oblast and rayon partners are prepared to implement the pilots	1.3.3. Prepare piloting of alternative approaches to deliver/finance HIV services for key populations in the Dnipropetrovsk, Lviv and Poltava regions for 2014-2015.	Conduct trainings with key Oblast and Rayon partners on piloting options and implementation (regional CC)	Trainings for key Oblast and several Rayon partners in piloting options and implementation conducted and trained in specific piloting strategies	# of people trained	60		X	X	
Oblast administrations ready to pilot alternative approaches to		Facilitate development and put into force Oblast Administration's Orders needed to formalize and support piloting in different settings (regional CC)	Oblast Administration's Orders needed to formalize and support piloting in different settings developed and	# of regions that formalize support for piloting	3			X	X

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
deliver/finance HIV/AIDS services in pilot regions			approved (3 orders)						
Regional stakeholders provided with evidence-based data on pilot implementation for better reprogramming and adaptation	1.3.4. Conduct 1st stage of pilot in Dnipropetrovsk, Lviv and Poltava regions the alternative approaches to deliver/finance HIV services for key populations in the rayons level	Provide guidance and advice to regional stakeholders on the implementation of piloting (monitoring visits and ongoing face-to-face meetings)	1st stage pilots initiated in the selected pilot regions (total 3 pilots)	# of pilots of alternative approaches to deliver/finance HIV services initiated	3			X	X
		Collaborate with other partner projects to ensure resource allocation for service provision.						X	X
		Organize the monitoring process of piloting (conduct M&E training, prepare reporting forms, conduct outcome assessment) and share experience with stakeholders (regional piloting Dashboard)	Regional piloting monitoring tools including regional piloting Dashboard developed and implemented	monitoring process of piloting organized # of people trained	20			X X	X
National and regional policy makers are better informed on barriers for implementation of alternative financing mechanisms	1.3.5. Revise and improve financial mechanisms for provision of HIV services to key population	Explore the barriers to: – active utilization of **social contracting and PPP** for the provision of HIV preventive services; – implementation of risk-adjusted capitation for the provision of HIV preventive services.	The report on barriers to active utilization of social contracting andPPP; implementation of risk-adjusted capitation for the provision of HIV preventive services developed	Report prepared	1		X		
Social contracting		Conduct a workshop for decision	National workshop for	# of workshops	1			X	

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
financing mechanism improved and utilized for provision of preventive services to KAPs		makers on the implementation of social contracting mechanisms for the provision of HIV preventive services	decision makers on the implementation of social contracting mechanisms for the provision of HIV preventive services conducted	conducted					
		Provide the proposals to MoH and MSP on active utilization of social contracting mechanisms for the provision of HIV preventive services	List of recommendations for MoH and MSP on utilization of social contracting mechanisms for the provision of HIV preventive services developed	List of recommendation on active utilization of social contracting mechanisms provided	1			X	
		Conduct trainings for service providers on application process for social contracting for the provision of HIV preventive services	45 people representing service providers trained on application process for social contracting	# of people trained	45				X
National Government equipped with better tools for sustainable provision of preventive services to key populations	1.3.6. Support national leadership for sustainable provision of HIV services delivery to key populations.	Prepare report on analysis of existing gaps in available **standards/protocols for the provision of HIV** services to key populations.	Report on analysis of existing gaps in available **standards/protocols for the provision of HIV** services to key populations prepared	Report prepared	1			X	
Draft orders for MOH and MSP for Y3		Support MOH and MSP on development of required standards/protocols for the provision of HIV services to key populations (based on the gap analysis)	Draft standards/protocols for the provision of HIV services to key populations developed for MOH and MSP	List of standards/protocols for the provision of HIV services delivery to key populations prepared	1			X	

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
Evidence developed for GOU to introduce quality assurance mechanisms for HIV preventive services.		Analyze the international evidence on quality assurance mechanisms for HIV preventive services	Analytical report on international evidence on quality assurance mechanisms for HIV preventive services prepared	Report prepared	1		X		
Sub-objective 1.4: Improve policy dialogue and ensure transparent policy development environment.									
A critical mass of change agents at all levels (MOH, UCDC, regional AIDS Centers, OHDs and civil society) created to promote evidence-based HIV policy making and implementation	1.4.1. Engage champions and change agents at all levels (MOH, UCDC, regional AIDS Centers, OHDs and others) and civil society to strengthen the country's capacity in evidence-based HIV policy making and implementation	Build capacity of change agent in evidence-based policy making and oversight	Forty five change agents trained in evidence-based policy making and oversight	# of people trained	45		X	X	
Regional change agents led transparent policy dialogue and policy development process established		Conduct Round tables at regional level to ensure platform for problems discussion in HIV/AIDS area	Three Regional round tables facilitated by local change agents conducted	# of Round tables conducted	3			X	X
Objective 2: Improve and optimize resource allocation and financing for the national and selected regional HIV/AIDS programs targeting key populations									

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
Sub-objective 2.1: Develop evidence pool to create support for funding decisions in HIV response at the national and regional level									
Financial and economic justification for better resource allocations and financial sustainability of services for key populations provided	2.1.1. Support government of Ukraine to conduct Investment Case study Phase II (extension of HIV allocative efficiency study) in collaboration with UNAIDS, including analysis of resource allocations and financial sustainability of service delivery to key populations.	Operational and Service Data Collection Related to prevention services for KAPs (MARPs) and social support for PLWH in 25 regions of Ukraine	Background information for the study prepared.	Database with collected data from 25 regions for Investment Case study Phase II prepared	1	X	X	X	
		Develop ToR and methodology of study	TOR for Investment Case study Phase II (extension of HIV allocative efficiency study) developed in collaboration with MoE and UNAIDS	# of TOR developed	1	X			
		Conduct of Stakeholders Workshop for decision makers to discuss and finalized methodology of the study	Stakeholder workshop for decision makers on study methodology conducted	# of workshops conducted	1	X			
		Conduct study and prepare preliminary study Report	Investment Case study Phase II (extension of HIV allocative efficiency study) conducted and report preliminary prepared presentation conducted	# of preliminary reports prepared	1		X	X	X

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
		Organize Stakeholder workshop to present study preliminary Report and Recommendations to government of Ukraine and MoH specifically	Stakeholder workshop with preliminary report/data	# of workshops conducted	1				X
NASA report 2011-2012 finalized	2.1.2. Provide technical assistance to UCDC on NASA validation data process for 2011-2012	Prepare Report	TA to UCDC on NASA data validation process for 2011-2012 provided	# of reports prepared	1	X			
Evidence-based data for scale-up usage of rapid tests provided to MOH	2.1.3. Conduct cost-effectiveness study of scale usage of rapid tests in prevention programs in collaboration with UCDC.	Develop methodology for the study	Cost-effectiveness study for scale-up of usage of rapid tests in prevention programs conducted in collaboration with UCDC and report developed	# of methodologies developed	1		X	X	
		Conduct of Stakeholders Workshop for decision makers to discuss and finalized methodology of the study		# of workshops conducted	1		X		
		Conduct study and prepare study Report.		# of reports prepared	1			X	X
		Organize Stakeholder meeting to present study Report and Recommendations	Stakeholder workshop for study date presentation conducted	# of stakeholders meeting conducted	1				X
Sub-objective 2.2: Support the development of HIV strategies and policies at the national and regional level which reflect optimized resource allocation and lead to the most cost-efficient and effective.									

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
National system of HIV expenditure monitoring institutionalized at MOH/UCDC	2.2.1. Support MOH/UCDC in institutionalization of National system of expenditure monitoring of HIV.	Provide support in development of GoU Order on HIV expenditure monitoring	GoU Order on HIV expenditure monitoring developed	# of Orders developed/signed	1		X		
		Support the development of methodological guidelines for MoH on expenditure monitoring and other relevant documents	Electronic tools on HIV expenditure monitoring developed and introduced at UCDC	# of methodological recommendations developed	1		X		
		Develop site and electronic tools for monitoring and data tracking of NAP and RAPs implementation		# of tools developed	1			X	
		Train UCDC personnel to use electronic tool for monitoring and data tracking	Three trainings for UCDC and regional M&E experts conducted	# of people trained	60			X	X
		Conduct trainings for regional M&E experts on process and tools usage							X
Sub-objective 2.3: Strengthen capacity of national and regional partners in finance planning, budget preparation and execution to match the needs to optimized HIV/AIDS service-delivery operations.									

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
Capacity of regional administration strengthened in operational planning and budgeting	2.3.1.. Support national and regional stakeholders in operational and budget planning	Two trainings on routine operational planning, including budget formulation, for key regional administration personnel stakeholders conducted (40 people trained	Two trainings on routine operational planning, including budget formulation, for key regional administration personnel stakeholders conducted	# of people trained	40		X		
		Training on estimation of financial resource needs for regional administration personnel (20 people)	Training on estimation of financial resource needs for regional administration personnel	# of people trained	20			X	
Capacity of regional administration strengthened in health economics and financial issues		Training of regional specialists in health economics and financial issues (20people)	Training of regional specialists in health economics and financial issues	# of people trained	20			X	X
Objective 3: Optimize and strengthen human resources for health (HRH) for the delivery and scale-up of gender-sensitive HIV/AIDS services targeting key populations									
Sub-objective 3.1: Provide evidence based data for HRH strategy in HIV response.									

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
Evidence based information on HRH needs and gaps obtained for GOU decision-makers	3.1.1. Analyze human resource needs and gaps for HIV/AIDS–services provision.	Conduct a situational analysis on HRH for HIV	Report on situational analysis on HRH needs and gaps in current HIV service delivery prepared	Report on situational analysis prepared	1	X			
		Organize Stakeholder workshop to present Situation analysis Report	Workshop to present HRH situational analysis to decision makers conducted	Workshop conducted	1		X		
TA and capacity development needs for educational institutions and cost of addressing gaps HRH in HIV defined	3.1.2. Estimate capacity of current CME/CPD system in HIV area and its needs for TA and capacity development, analyze needs and gaps.	Conduct a situational analysis on current CME/CPD system capacity in HIV	Report with defined TA and CD needs of current CME/CPD system capacity in HIV prepared	Report with defined TA and capacity development needs, and related cost estimation prepared	1		X		
Sub-objective 3.2: Support the introduction of systemic and operational changes in HRH for provision of sustainable and integrated HIV/AIDS services at the national and regional level									
Suggested changes/revisions in HRH policies, the findings and	3.2.1. Facilitate consultative discussions with core GoU agencies,	Conduct Stakeholder meetings on capacity and TA needs presented to key stakeholders	Stakeholder meetings on capacity and TA needs conducted	# of supported meetings/ roundtable	4	X	X		

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
recommendations incorporated into working plan of HRH technical working group under UCDC. National and regional level decision makers demonstrate commitment to find HRH optimization and institutionalization options in HIV area	regional governments departments and other stakeholders to discuss HRH priorities to meet HIV/AIDS service delivery performance needs								
		Support interagency working group to discuss HRH priorities to meet HIV/AIDS service delivery performance needs	Interagency WG meetings to discuss HRH priorities to meet HIV/AIDS service delivery performance needs supported	# of supported WG meetings	4	X	X	X	X
	3.2.2. Facilitate HRH Strategy development and introduction of relevant changes in the HRH legislation (Order #33).	Provide TA and recommendations to HRH Technical working group under the UCDC (MOH)	Conduct four WG meetings on TA and recommendations to HRH technical WG under the UCDC (MOH) supported	# of WG meetings supported	4	X	X	X	X
		Provide capacity development to RCC in strategic planning of HRH in HIV	Three RCC Workshops in strategic planning of HRH in HIV conducted	# of RCC workshops conducted	3	X	X		
		Support discussion at inter-sectorial working groups to recommend grounded list of changes in HRH legislation to meet HIV/AIDS service delivery innovative / alternative performance needs	Inter-sectorial WG to recommend grounded list of changes in HRH legislation to meet HIV/AIDS service delivery innovative / alternative performance needs conducted	# of WG meeting conducted	1				X
Common agreement among stakeholders and partners on HRH legislation (Order #33) amendments reached and communicated to relevant decision		Develop draft of concept paper to support relevant changes into the HRH legislation (Order #33) in collaboration with other partners and USAID Projects	Draft concept paper to support relevant changes into the HRH legislation (Order #33) developed	Draft recommendations for legislative changes	1				X
		Conduct Stakeholder meeting to discuss required changes to HRH	Stakeholder meeting to discuss draft concept	# of Stakeholders meeting conducted	1				X

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
makers (MOH, MOF, MOE)		normative / legislation documents	paper conducted						
HRH issues included in the RAPs and operational planning	3.2.3. Support the development of Oblast HIV /AIDS Programs, including HRH planning and training	Provide CD to RCCs in HRH planning for RAP	Training conducted and follow-up operational support (working group) provided to RCCs in HRH planning for RAP	# of people trained	17	X			
		Follow-up TA to RCCs in HRH planning for RAP provided	Three meetings on HRH needs analysis for HIV response to RCC and their Programming committee conducted	# of supported meetings	3		X	X	
HRH needs for the implementation of alternative mechanisms (rationalization	3.2.4. Define HRH needs for the implementation of alternative mechanisms (rationalization option)	Provide capacity development in calculation of HRH needs in planning piloting of alternative mechanisms (rationalization option) of the delivery/financing of HIV services for key populations at the	One training for 25 people for calculation of HRH needs for pilots conducted	# of people trained	25			X	

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
option) of the delivery/financing of HIV services for key populations at the regional level identified in pilot rayons	of the delivery/financing of HIV services for key populations at the regional level.	regional level							
		Support in developing pilot design, including selection of sites, data collection and M&E tools in HRH regards	HRH plans for pilots (including design, selection of sites) data collection and M&E tools in each region developed (3 plans) and endorsed by the Regional Council	HRH plan for piloting prepared and endorsed by RCCs	3			X	X
UCDC prepared on HRIS and IS implementation	3.2.5. Provide TA on HRIS and IS piloting and implementation.	Provide technical and operational support to Working group on HIV IS development.	List of recommendations for HRIS for WG on HIV IS development (UCDC) provided	List of recommendations on HRIS developed	1	X	X		
		Conduct trainings on IS and other relevant capacity development activities in terms of HRIS implementation in the selected region	Conduct training on IS and HRIS implementation in the selected region (18 people trained)	# of people trained	18			X	
			Conduct piloting of HRIS in the selected region in collaboration with UCDC and RCC		3				X

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
Sub-objective 3.3: Strengthen capacity of Ukrainian institutions in HRH policy development and implementation.									
Capacity of national and regional specialist in HRH planning strengthened	3.3.1. Strengthening capacity of national and regional level Institutions in proper planning of HRH	Conduct consultative meetings to identify and address CB\TA needs for HRH planning at the national and regional levels	Individual and group consultative meeting to identify and address CB/TA needs for HRH planning at national and regional level	# of individual and group meetings conducted	15	X	X	X	X
Educational Institutions and responsible for CME/CPD decision makers gain understanding in improving this system in HIV area	3.3.2. Facilitate sensitization of Academic institutions on introduction of prevention, treatment and social HIV issues into pre- and post-graduate education programs.	Conduct a joint workshop for decision makers of relevant regional administrations and educational institutions on CME/CPD needs in HIV in particular, practical skills and interactive methods of teaching	Workshop for decision makers and educational institutions on addressing capacity needs for effective CME/CPD in HIV conducted	# of workshop conducted	1			X	
Capacity of academic institutions in HIV education, including prevention, is strengthened	3.3.3. Strengthening national academic institutions in HIV education, including prevention, treatment, care and support.	Support institutionalization of existing HIV training activities into national academic education programs	National workshop on institutionalization of existing HIV training activities into national academic education programs conducted	# of national workshops conducted	1			X	
		Provide TA support with grants for academic institutions for revisions of	Grants for academic institutions for	# of grants provided to education	2	X		X	

Expected result/ outcome (End of Year 2)	Activity	Sub - Activity	Key milestone	Indicators (output)	Year 2 Target	Quarters output			
		the curricula in HIV education	revisions of the curricula in HIV education awarded and TA provided	institutions					
			Curricula in HIV education revised/adapted (2 curricula)	# of curricula revised /adapted	2				X