LMG Honduras Annual Report: October 2013 – September 2014

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Date of Publication: October 10, 2014

Development objective: Provide technical assistance to the Ministry of Health (MOH) and local NGOs and other non-public Institutions in organizational capacity building to provide HIV/AIDS education and prevention services to key and priority populations.

Keywords: Leadership, Management, Governance, Honduras, HIV/AIDS, non-governmental organizations, civil society organizations, contracts, grants, results-based financing, capacity development

Funding was provided by the United States Agency for International Development (USAID) under Cooperative Agreement AID-OAA-A-11-00015. The contents are the responsibility of the Leadership, Management, and Governance Project and do not necessarily reflect the views of USAID or the United States Government.

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LEADERSHIP, MANAGEMENT & GOVERNANCE PROJECT

HONDURAS

ANNUAL REPORT

OCTOBER 2013 - SEPTEMBER 2014

October 10, 2014

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Abbreviations

AJEM	Youth in Motion Association (Asociación Juventud en Moción)
ARV	Antiretroviral drugs
BCC	Behavior Change Communication
CDC	United States Centers for Disease Control and Prevention
CGSSI	Gay Community of San Pedro for Comprehensive Health (Comunidad Gay Sampedrana para la Salud Integral, in Spanish)
CHF	Global Communities
COCSIDA	Center for Guidance and Training on AIDS (Centro de Orientación y Capacitación en SIDA, in Spanish)
CSW	Community Sex Worker
DAPS	Department for Primary Health Care (Departamento de Atención Primaria en Salud, in Spanish)
ECVC	Central-American Survey on Sexual Behavior Monitoring and Prevalence of HIV and Sexually Transmitted Infections (Encuesta Centroamericana de Vigilancia de Comportamiento Sexual y Prevalencia de VIH e Infecciones de Transmisión Sexual, in Spanish)
FSW	Female Sex Workers
GHI	Global Health Initiative
GOH	Government of Honduras
JSI	John Snow, Inc.
KAP	Knowledge, Attitudes and Practices
HIV	Human Immunodeficiency Virus
HIV/AIDS	Human Immunodeficiency Virus/ Acquired Immune Deficiency Syndrome
LMG	Leadership, Management, and Governance Project
MOH	Ministry of Health (also known as SESAL or Secretaría de Salud, in Spanish)
MSH	Management Sciences for Health
MSM	Men who have Sex with Men
PAHO	Pan American Health Organization
PEPFAR	United States President's Emergency Plan for AIDS Relief
PMP	Performance Monitoring Plan
PRODIM	Developmental Programs for Women and Children (Programas para el Desarrollo de la Infancia y la Mujer, in Spanish)
PY	Project Year
Redes	Management of Health Networks and Services (Dirección de Redes y Servicios de Salud, in Spanish)
RFP	Request for Proposals
RSD	Regional Offices of the MOH (Regiones Sanitarias Departamentales, in Spanish)
STI	Sexually Transmitted Infections
TW	Transgender Women
TOR	Terms of Reference
ULAT II	Local Technical Assistance Unit for Health II Project (Unidad Local de Asistencia Técnica, in Spanish)
USAID	United States Agency for International Development
UAFCE	Unit for Extension of Coverage and Financing (Unidad de Extension de Cobertura y Financiamiento, in Spanish)

DGD	Unit for Decentralized Administration (Unidad de Gestión Descentralizada, in Spanish)
UNAIDS	Joint United Nations Programme on HIV/AIDS
UPEG	Unit for Management Planning and Evaluation (Unidad de Planeamiento y Evaluación de la Gestión, in Spanish)
USG	United States Government

I. Executive Summary

This annual report describes the main achievements for the Leadership, Management & Governance (LMG) project in Honduras for the period October 2013 – September 2014. This report serves to update the United States Agency for International Development (USAID) Mission in Honduras on project accomplishments and inform of any outstanding issues during this period. Reported activities are based on the revised work plan submitted in August 2014 which was approved by USAID. The major accomplishments of the LMG Honduras program from October 2013 to September 2014 were:

Quarter 1 (October – December 2013)

- Presented the synthesis of the capacity needs assessments of the Management of Health Networks and Services (Redes for short, in Spanish), the Unit for Extension of Coverage and Financing (UAFCE, in Spanish) and the Unit for Decentralized Administration (DGD, in Spanish) to their main authorities.
- Capacity building actions plans were designed for and discussed with the Ministry of Health (MOH) and the corresponding non-governmental organizations (NGOs).
- Provided technical assistance to UAFCE and DGD in their capacity building efforts to develop the approach and framework for the implementation of results-based financing of the contracts, including the process of bidding, selection and contracting of the NGOs that work with key populations.
- Prepared terms of reference for each key population involved in the bidding and procurement process.
- Provided technical assistance to UAFCE to complete reporting requirements established in the USAID Financial Implementation Letters.
- The work plan for the second year of LMG in Honduras was approved by USAID for the period October 2013–September 2014.
- Provided technical assistance to the DGD in developing the "Proposal for Decentralized Management of the Delivery of Services in Health Promotion and Prevention of STI/HIV/AIDS to key populations through non-public providers."
- Provided Technical Assistance to the UAFCE to revise the contract with the NGOs selected in the bidding process.
- Provided Technical Assistance to two previously selected NGOs: The Gay Community of San Pedro for Comprehensive Health (CGSSI) and the Youth in Motion Association (AJEM) on sexual diversity; the aim was to improve their technical and financial proposals based on the educational methodologies of Video Forum and Friends Educating Friends.
- Developed two workshops on the educational methodologies of Video Forum and Friends Educating Friends. One workshop was designed for technical staff from Redes, including DGD, and the UAFCE, and the other was designed for the NGOs on sexual diversity.
- Accompanied the DGD on its visits to perform technical audits of five NGOs.
- Trained the DGD, regional liaisons, and NGOs on the evaluation of the Knowledge, Attitudes and Practices (KAP) assessment.

After the Presidential inauguration on January 27, 2014, Dr. Yolany Batres took office as Minister of Health. Subsequently, the three Units of the MOH at central level with whom LMG works were reorganized. During the remaining part of the second quarter, their work focused on closing up pending contractual obligations with USAID and setting up their new teams. The focus of the LMG team during this time was on supporting both of those processes.

Quarter 2 (January – March 2014)

- Supported the Unit for Extension of Coverage and Financing (UAFCE) in the reconciliation of previous contracts (also referred to as "Letters") between the MOH and USAID. As result, final reports and reimbursements from the MOH to USAID were successfully completed.
- Supported the MOH (UAFCE, DGD, DAPS) new staff in understanding and taking charge of their duties related to the management of USAID funds for services for health promotion and prevention of sexually transmitted infections (STIs) and HIV/AIDS for key populations[1].
- Supported six NGOs with eight projects to prepare for a new phase of implementation of health promotion and STIs, HIV/AIDS prevention services for MARPs under contract with the MOH: supported the NGOs in revising their technical and financial proposals for submission and approval of MOH, in view of major observations and recent changes in PEPFAR indicators.
- Supported the UAFCE and the Unit for Decentralized Administration (DGD) to finalize the technical and financial aspects of the contracts for signature with six NGOs for the implementation of eight projects.
- Supported the UAFCE and the DGD in revising their Action Plans, leading to final clarification of activities to be implemented by each Unit, UAFCE and DGD, and approval of final versions of these action plans by USAID.
- Supported the UAFCE in revising the administrative and financial manual for managing contracts/agreements with NGOs.
- Supported the DGD in revising the technical proposal submitted by the organization Cicatelli for conducting training in identification of hidden populations[2] and provision of education and prevention HIV services with hidden populations. As result, the MOH made relevant decisions accordingly.
- Supported the DGD to develop Terms of Reference (TOR) for a request for proposals to contract with an NGO to provide HIV education and prevention services for hidden populations.

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[1] Key populations refers to populations that are disproportionately impacted by HIV when compared with the general population.

[2] Populations at increased risk, or most-at-risk, for HIV are often referred to as hidden or hard-to-reach. These populations are composed of individuals who engage in behaviors that are sometimes illegal or stigmatizing. So these populations tend to avoid disclosure (Guidelines on Estimating the Size of Populations Most at Risk to HIV, WHO-UNAIDS, 2010). For the sake of this initiative in Honduras "hidden population" refers to women that offer sexual services other than in the street or brothels.

- Provided the eight projects from the six NGOs with monitoring and evaluation (M&E) templates, and adapted the templates to report on achievements and targets based on the newly adapted PEPFAR indicators.
- Developed and published the TOR for a consultancy aiming at strengthening practical knowledge and skills to target and refer HIV-related gender-based violence affecting key populations within NGOs and MOH. As result, seven consultants submitted their proposals and one of them was selected.
- Developed and submitted to USAID the descriptions of eight NGO projects selected by the MOH for implementation of STI and HIV/AIDS education and prevention services with key populations.
- Introduced LMG's technical assistance to the new MOH staff in the counterpart units/departments of UAFCE, DGD, DAPS, as well as reviewed with them the capacity building plans that had been previously developed.
- As of March 2014, the project has expended $950,931, which represents 154% of the total amount obligated to date (note: at the time of this report, an obligation was pending with USAID in Washington in the amount of $698,467).

Quarter 3 (April – June 2014)

During Q3 the Ministry of Health (MOH) was consolidating its departments, and updating its organizational chart. The Extension of Coverage and Financing Unit (UAFCE, in Spanish) became the Unit for Administration of External Cooperation Funds (UAFCE, in Spanish). In a similar manner, the Unit for Decentralized Management (DGD, in Spanish) changed its name to the Department of Decentralized Management (DGD, in Spanish).

Work during Q3 was centered on facilitating processes for the new MOH personnel in the selection and contracting process for hard to reach populations for HIV prevention and education services, as well as for personnel working at the UAFCE and DGD with a direct relationship with the contracts with non-governmental organization (NGOs) based on a management for results model, to carry out these HIV prevention and education services with key populations in Honduras.

The major accomplishments of the LMG Honduras program in Q3 were:

- Support for UAFCE, DGD and the Directorate of Networks and Health Services (Redes) to hold a technical and financial guidelines workshop for all NGOs with signed contracts with the MOH. Support included the preparation of the presentation on financial guidelines and technical assistance during the workshop for technical staff from the regions and for NGO coordinators on carrying out the technical closures corresponding to May.
- The NGOs were motivated and supported for their participation in an Educational Methodologies Fair that took place during the above mentioned workshop on guidelines, in order to respond to Redes' request to learn more about the methodologies being implemented by the NGOs so that the regions would be able to provide better monitor on the NGOs' activities.
- Two new LMG regional staff were contracted in La Ceiba: a Monitoring and Evaluation Field Officer and a Finance Field Officer to provide better support for the NGOs and the Regional Health Offices in the northern area of the country.

- Technical assistance was provided to the regions of Colón, the Bay Islands and San Pedro Sula in relation to technical closures according to needs stated by the NGOs in these regions.
- Technical assistance was provided to the DGD with the preparation of the monthly monitoring meetings and with the quarterly partners meeting.
- Formats were prepared for monthly financial liquidations by the NGOs and UACFE accounting assistants were trained on the use of these formats, as well as on the use and application of the administrative manual applied to contracts with NGOs.
- The UAFCE was accompanied during field visits to the NGOs: Developmental Programs for Women and Children (PRODIM, in Spanish), Youth in Motion Association (AJEM, in Spanish), and the Breastfeeding League to reinforce the administrative personnel.
- Accompanied the UAFCE during the financial audit carried out with the NGO, COCSIDA Roatan during which weaknesses in the acquisition process were identified. Instructions were provided to improve the processes.
- A format developed by LMG was adapted for the preparation of a budget for financial proposals to be submitted by NGOs working with hard to reach populations.
- The MOH was accompanied in the selection process for working with hard to reach populations including: assistance to the DGD with the preparation of the terms of reference (TORs), assistance as observers in the Internal Committee for the opening and evaluation of proposals; assistance to the DGD with the proposal review, providing observations during negotiations as well as during the final review.
- Technical support was provided for the AJEM assessment and development of a capacity building action plan.
- Based on a needs assessment, on-site technical assistance was provided through specific workshops and meetings with the NGOs: the Breastfeeding League, Mennonite Social Action Commission (CASM, in Spanish), AJEM, and PRODIM. Educational activities were also supervised at the NGOs: Ecology and Health (ECOSALUD, in Spanish) and CASM in Cortes.
- The organization and development of three capacity building workshops was facilitated on the prevention of violence based on gender related to HIV and AIDS. Participating NGOs prepared training and referral plans, and participating Regional Health Offices prepared check lists for monitoring NGO activities related to the prevention of gender-based violence.
- Orientations were provided to NGOs implementing the eight projects in order for them to meet the basic guidelines for the rapid testing service and biosecurity standards.

Quarter 4 (July –September 2014)

Work during Q4 has been centered on accompaniment to the NGOs, to carry out HIV prevention and education services with key populations in Honduras based on a management for results model, providing technical assistance to facilitate the achievement of targets as established in their contracts with MOH. Furthermore, facilitation of the contracting process of services for hard to reach populations continued, specifically in the startup of Pilot Project to work with MSM and Garifuna population in Roatan and La Ceiba, as well as assistance for personnel working at the UAFCE and DGD with a direct relationship with the contracts with NGOs. The major accomplishments of the LMG Honduras program in Q4:

- Organized and carried out a capacity building workshop on Managerial Competencies. Participants from UAFCE and DGD organized three teams that identified their main challenges related to the contracts with NGOs and prepared 3 challenge models with their action plans that will be assessed in the month of December.
- Capacity building to UAFCE management team was provided through individual coaching sessions to the General Coordinator, Finance and Administration Coordinator and Technical Administrative Officer.
- LMG Honduras provided technical assistance to the UAFCE and the DGD in the startup of the pilot MSM and Garifuna pilot project in Roatan and La Ceiba, during preparation of the terms of reference, negotiation and contracting of consultants, as well as during the preparation of the formats to be utilized including: census, mapping and readjustment of the survey for MSM. The contracted consultants were trained on the Friends Educating Friends methodology and on the different formats to be utilized in the rapid testing service with pre- and post-test counseling and in the preparation of their monthly plan.
- Preparation of the draft *Manual of Technical Procedures* for management agreements, through information gathering on technical processes, consultations with the national laboratory and lessons learned.
- Advisory services were provided during the review process of the *Manual for Contracting Public and Non-public Institutions with USAID funds.*
- The UAFCE was supported with the financial review of the budget modifications requested by ECOSALUD and AJEM for their respective agreements.
- Technical assistance was provided to the DGD on the gathering of the PEPFAR indicators for the monthly and quarterly presentations. In addition, an analysis of the goals was carried out and three bases were prepared for reporting the indicators.
- Technical assistance was provided to regional Health Region technicians on the monthly closing for July and August for the Maternal Lactation League, ECOSALUD, CASM in Cortés, COCSIDA in Tela and AJEM in La Ceiba.
- Technical assistance was provided to the DGD and UAFCE with the preparation of the monthly monitoring meetings and with the quarterly partners meeting.
- Accompanied and oriented NGOs to prepare their Continuous Quality Improvement Plans as follow up to the workshop facilitated by AIDSTAR-PLUS. This accompaniment was done through on site workshops, preparation of materials, presentations, and virtual technical assistance, resulting in seven continuous quality improvement plans developed by the NGOs contracted by the MOH, as well as their plans for replicating the workshop with their own staff.
- On-site technical assistance was provided through specific workshops and meetings with the NGOs: COCSIDA Roatan, the Breastfeeding League, Mennonite Social Action Commission (CASM, in Spanish), and AJEM. Educational activities were also accompanied at the NGOs: Ecology and Health (ECOSALUD, in Spanish), Breastfeeding League, AJEM, COCSIDA and CASM in Cortes. Virtual assistance was provided based on demand and needs of each NGO.
- Technical assistance was provided to PRODIM on the preparation of formats such as census, for working with hidden populations and the female sex worker (FSW) and a survey was readapted for it to be applied.

- Follow up was provided for implementation of the referral plans for gender-based violence and the three projects that work with the FSW population (COCSIDA in Roatan, COCSIDA in Tela and PRODIM) have carried out referrals for women who are victims of violence.
- Two monthly visits were made to each NGO to provide advisory services on the presentation of the liquidations of expenses and to guarantee compliance with the administrative financial guidelines established by the UAFCE.
- A case study was developed and submitted to the USAID Global Call for Health Systems Strengthening Cases 2014 about LMG Honduras health systems strengthening activities.

II. Program Context and Expected Results

National Context

Honduras is located in Central America and is divided into 18 administrative departments. The population of Honduras is 8,045,990 people (2010), of which 3,965,430 (49.28%) are men and 4,080,560 are women (50.71%). The population under 18 years of age represents 48.7% of the country's population. Honduras' urban population is 4,128,652 (51.31%) and rural population is 3,917,338 (48.68%). Life expectancy is 73.6 years, with 77.2 years for women and 70.1 years for men.

According to the United Nations Development's 2008/2009 Human Development Report, published on December 18, 2008, Honduras ranks fifth among the countries with the lowest Human Development Index (HDI) in the Americas. In 2007, the HDI was calculated to be 0.7, ranking 117 out of 179 globally.

Honduras has one of the highest population growth rates in Latin America, calculated to be 2.3% from 2005 to 2010. The department with the highest population is Cortes with 1,529,826 inhabitants or 19% of the national population, followed by Francisco Morazán with 1,406,769 or 18% of the national population. 37% of Honduras populated in is concentrated in the two most important cities in these two departments, San Pedro Sula and Tegucigalpa, respectively. The household survey held in May 2009 captured an illiteracy rate of 16.2%. The lowest illiteracy rate is for the 15 to 18 year old population with 5.1%, the national average of schooling is 7.2 years.

Honduras is a lower middle-income country that has seen improvements in certain health and economic indicators, but still suffers from serious social inequalities and low rates of several health indicators. In addition, Honduras struggles with a disproportionately high HIV prevalence rate, particularly among certain populations. The Government of Honduras (GOH) and international donors have invested funds to build capacity in the health sector in recent years, resulting in improvements in certain health indicators. However, in order for Honduras to improve further its overall health status, it must reach out to key population groups who are currently underserved, and therefore, whose health status is far worse than national averages would suggest. For improvements in health among these hard-to-reach populations to occur, quality, usage, and financing of critical health services—particularly HIV/AIDS services—must be improved.

It is estimated that approximately 65% of the population lives under the poverty line, 22.1% in relative poverty and 42.4% in extreme poverty. The country continues to experience a difficult structural economic crisis that affects the national health system, particularly the MOH. Honduras had national elections on November 24, 2013. A new Minister of Health was named, Dr. Yolani Batres, who assumed her position on January 24, 2014.

Project Context

The Government of Honduras' Response to HIV/AIDS

Over the past decade, the GOH has taken various steps to respond to the HIV epidemic. The current HIV/AIDS National Strategic Plan (PENSIDA III), 2008 – 2012, prioritizes scale-up of prevention efforts for MSM, Garífuna, sex workers and pregnant women. The Sula Valley, North Coast, and the Tegucigalpa metropolitan area are identified as important geographical focus areas due to their higher prevalence rates, and special emphasis is given to HIV diagnosis and treatment and to monitoring and evaluation of PENSIDA III efforts. The GOH has started the process of drafting PENSIDA IV, and written under the umbrella of the National HIV Strategy that was completed in March 2011. The National HIV Strategy formulates a strategic vision for comprehensive HIV and AIDS promotion, prevention, care and support services within the National Health Sector Reform framework, under which the MOH has separated the stewardship and service delivery functions. Also within this framework, two new units were established to manage the decentralization of health services: the aforementioned UAFCE and DGD.

The National HIV Strategy outlines 14 key activities designed to provide greater access to a basic package of HIV services at the individual, family, and community levels. The strategy includes the definition and operationalization of a basic package of services according to life cycle and type of services (promotion, prevention, treatment, care and support); reorganization of Sexually Transmitted Infections (STI) / Human Immunodeficiency Virus (HIV) / Acquired Immune Deficiency Syndrome (AIDS) (STI/HIV/AIDS) service provision structure; and the definition of a new management model for results-based service provision.

Additionally, the second Central-American Survey on Sexual Behavior Monitoring and Prevalence of HIV and Sexually Transmitted Infections (ECVC, in Spanish) in key populations in Honduras was completed in 2012. The first survey was conducted in 2006. The objectives were to determine the prevalence of HIV and STIs, the risk behaviors in female sex workers (FSWs), men who have sex with men (MSM), and transgender women (TW), the Garífuna, and risk behaviors and STIs in people with HIV, as well as to estimate the size of the population of FSWs and MSM in Tegucigalpa and San Pedro Sula. The results presented in the report will serve as an important source of information for the project and collaborating partners.

US Government Assistance in Honduras

USAID's HIV and AIDS programs in Honduras are implemented as part of PEPFAR in line with the strategic priorities outlined under the Central American Regional HIV/AIDS Partnership Framework, 2009 – 2013. Activities also directly contribute to the Honduras Global Health Initiative (GHI) Strategy, 2011 – 2015. The over-arching GHI country goal in Honduras is to "Improve the health status of underserved and vulnerable populations". In collaboration with the MOH, other United States Government (USG) agencies/departments and private sector partners, the HIV-related component of the

GHI strategy contributes to the achievement of “Priority Area 1: Increased access to quality essential services for underserved and vulnerable populations”, and “Priority Area 2: Improved stewardship and responsiveness of the health system”.

As part of its health portfolio, USAID improves the quality of and access to HIV/AIDS care and treatment services through both civil society organizations and the MOH. In close collaboration with the GOH since 1993, USAID has supported HIV/AIDS prevention activities for key populations through financial and technical support to local NGOs. Since 2005, this support has included a range of capacity building initiatives with community health workers from promoting healthy behaviors, to rapid testing of HIV for vulnerable populations.

Expected Results

All project activities contribute to achieve the following two Expected Results of the LMG Honduras program:

(1) Organizational capacity developed within the MOH to establish and carry out effective funding mechanisms, management and stewardship of HIV prevention services provided by local non-governmental organizations (NGOs).; and

(2) Organizational capacity developed within local NGOs to support the implementation of evidence-based, quality HIV prevention services for key populations in compliance with the new MOH funding mechanisms

3. Intermediate Program Results and Activities

This section of the report serves to inform USAID/Honduras of the results achieved from October 2013 to September 2014, and to report on specific activities. The activities and results are presented in two categories: Project Management and Expected Results. Results are organized by Expected Result and Activity, listed according to the approved project year 2 (PY2) work plan.

3.1 Project Management

Activity 1: Approval of the annual work plan and teamwork with the new Interim Director. During this period much of the project's effort focused on the development and approval of the annual work plan and on the transition of the project's management.

The annual work plan was approved by USAID Honduras on November 15, 2013 (LMG was notified on December 9, 2013). One of the significant changes agreed upon with USAID was the revision of Expected Result 2 to remove the footnote that read, "*In line with country ownership priorities, capacity development of NGOs is to be supported by LMG working jointly with SESAL to take the lead where possible, and to establish priorities for capacity development." The reason for this change was to accelerate processes given the challenge of limited resources at the MOH.

Following the departure of the previous Project Director on October 19, 2013, the team focused on providing support to the new Interim Director, who arrived in Honduras on October 23, 2013, to bring her up to speed with an understanding of the project and the progress it has made. A new Project Director was appointed and started on January 20, 2014.

It is important to note that, with the approval of the PY2 budget and work plan, USAID approved hiring two people: one to support the monitoring and the other to support financing. Both will be based outside of Tegucigalpa in regions yet to be determined, with support and coordination from the head office in Tegucigalpa.

There were no Project Management activities to report in quarters 2, 3 and 4.

3.2 Expected Results

Below are the activities from the program work plan that were conducted (wholly or partially) during the reporting period.

Expected Result 1: Organizational capacity developed within the MOH to establish and carry out effective funding mechanisms, management and stewardship of HIV prevention services provided by local non-governmental organizations (NGOs)

Activity 1.1: Design an action plan for capacity building in Sub Secretaría de Redes including DGD and RSD, and UAFCE

The capacity needs assessments done at the end of project year 1 were presented at a meeting on November 4, 2013 at the LMG office. Attendees at this meeting included Dr. Sandra Pinel, Director of Redes; Dr. Justa Urbina, Coordinator of DGD; and Dr. Mirna Moreno, Coordinator of UAFCE, together with other officials from those entities. Emphasized during the meeting was the need to include other leadership and management topics which had not been identified in the assessments, and to hold a meeting to determine the role that each agency plays in the new results-based contracts with the NGOs. The assessments were approved in Q2 with suggestions for improvement from the previous Coordinators within the UAFCE, Direction of Redes and DGD. Action plans based on the assessments were developed, validated, and agreed upon with the UAFCE, RSD and DGD respectively.

To the extent that DAPS was not considered a separate agency in the previous work plan, an assessment was not done with DAPS, so its needs were not included in the DGD plan. In initial discussions with DAPS and Direction of Redes, the Department Coordinator with his team decided that the main need to relate to the unit is in relation to their overall supervisory responsibility of the Regions. Therefore, there is no need to conduct a specific needs assessment with DAPS, but rather involve them in the capacity building exercise and process with the MOH staff at regional level, directly in charge of the technical follow up of the NGOs' performance. As result, the LMG team conducted a series of introductory and sensitization sessions with the new team in DAPS for that purpose.

The UAFCE, RSD regions of Cortes Atlantida, Colon, Islas de la Bahia, the metropolitan areas of Tegucigalpa and San Pedro Sula, UAFCE, and DGD developed capacity building action plans. These were revised in Q2 with the new teams in UAFCE, DAPS and DGD. As a result, the following priorities were identified: systematization and organization of the experience to date in the administrative and managerial process of contracting and managing the funds granted to the eight selected NGOs for implementation of STIs and HIV/AIDS education and prevention activities with key populations.

One of the needs expressed by the health regions' technical staff during the assessment carried out last year was to have greater knowledge of the educational methodologies implemented by the NGOs with target populations. This need was incorporated in the Redes' action plans, including the DGD, as well as the UAFCE. LMG responded to this need in Q3 by establishing coordination with the General Directorate of Health Services Integrated Networks, Redes, DGD and UAFCE to carry out an "Educational Methodologies Fair" during the technical and financial guidelines workshop in June, as a complement to the discussion of the projects' technical proposals. At the fair, the NGOs themselves presented the different educational methodologies they implement. The methodologies presented include: Friends Educating Friends, Educational Video Forums, Cruise Ships of Love, Theater, Hiñaru Magazine, Telling my Story, Bingomania, Decisions, Be a Woman Magazine. Each educational stand was visited by an average

of 60 persons representing: the Regional Health Offices, DAPS, UAFCE, the Department of STIs/HIV/AIDS, the Department of Guaranteed Quality, NGOs, AIDSTAR-Plus, the National Laboratory, the General Directorate of Health Services Integrated Networks and the DGD.

Among the needs identified in the initial assessment, is the lack of processes and technical guidelines consolidated in a document, therefore, in Q4 as a first step a *Manual for Technical Procedures* was drafted with information gathered on the processes, along with interviews with the national laboratory and lessons learned during the past several years in the technical management of the projects. The next step is to share it with the DGD for them to review and validate the document.

See Annex 1, detailing the technical assistance and actions carried out to address each of the activities included in the intervention plans.

Activity 1.2: Implementation of the plan to strengthen the capacity of Sub Secretaría de Redes including DGD and RSD, and UAFCE toward the selection and contracting local NGOs.

In Q1, an external consultant was hired that, together with the technical and financial staff of LMG and personnel from the UAFCE and the DGD, revised the bid specifications, terms of reference, and proposal templates for the NGO contracting process in the framework of results-based financing. The work was based on similar experiences from around the world, with the understanding that the MOH is undergoing a decentralization process. Support was provided in developing and adapting the schedule of the process for bidding and contracting NGOs. Support was also provided to adapt the scorecard to be used to rate the proposals received.

The review of the proposals received by the UAFCE was performed by forming an internal evaluation committee composed of representatives of the UAFCE, the DGD, the National Program for HIV/STI, and technical staff from the departmental regions as observers. LMG participated actively as an observer, with a voice although without voting rights, offering the internal committee technical assistance in the revision of the proposals. LMG's experience in working with NGOs provided the internal committee with a better understanding of the deliverables, processes, and methodologies that arose in the proposals according to the TOR and the needs of the population.

LMG's technical assistance throughout the process has always been one of accompaniment of the MOH's units so that they themselves may gain experience in the developments of the processes.

The MOH issued a second invitation for bids since the first one did not render the number of NGOs stipulated in the DGD's proposal. The review, selection, and contracting process took place in January 2014.

Specific support was provided to the DGD in developing a Proposal for Decentralized Management of the Delivery of Services in Health Promotion and Prevention of STIs, HIV/AIDS to Key Populations through non-Public Providers. This document outlines the procedures to be followed from the bidding stage to the completion of the approved project, and implies a Handbook of Procedures and Standards for NGO Contracting.

In Q2, new staff in MOH without experience in these processes were supported with technical assistance and hands-on-learning by the LMG team as they supported MOH in finalizing the technical and financial review of 8 projects submitted by 6 NGOs preselected to obtain funds from USAID through the MOH. The revised proposals were also reviewed and agreed to by USAID.

One of the new MOH staff was the Legal Advisor in the UAFCE. Therefore, LMG provided continuous support to UAFCE for revision and modification of the NGO contract model. The final version of the contract was revised and approved by USAID.

Due to the delays in the Ministry of Health setting up its new teams inside the Units that the LMG project supports during Q2, implementation of the capacity building plans was also delayed in favor of other priorities. However, towards the end of Q2, the LMG team conducted initial working sessions with the team in UAFCE to refresh the aim and result of the capacity building assessment of UAFCE conducted the past year, and the subsequent plan for implementation. In consequence, seven UAFCE staff got familiar with the work previously done, and discussed the plan which did not have major changes but the timeline was fully updated to respond to the delays and actual needs of the current year and new team.

A similar exercise was facilitated by LMG in Q2 with the new team in DAPS with the additional objective of introducing the nature of the technical assistance provided by the Project considering that this was a first practical experience with the Department. With DAPS, as well as with DGD, LMG discussed the strengthening plans of the Regions and agreed on aligning the timelines to build their capacity and the Central level Units of the MOH.

In Q3, LMG Honduras provided technical assistance to the DGD with the preparation of two TORs for proposals to carry out HIV prevention interventions with hard to reach populations. The TORs were specifically oriented towards women with a high risk of being infected with HIV and that are hard to reach and their partners, as well as men with a high risk of being infected with HIV and that are hard to reach. The project also accompanied the Internal Committee and the DGD in the evaluation of two proposals received by the UAFCE for interventions with these hard to reach populations. This included LMG's offering observations about the proposals, as well as accompaniment during the negotiations and final review of the proposals.

The project adapted the format for preparing the budget for the financial proposals to be submitted by NGOs for interventions with hidden populations[3]. LMG Honduras also worked jointly with the UAFCE and the DGD on the review and re-adaptation of the documents for contracting NGOs.

In Q4, advisory services were provided during the review process of the Manual for Contracting Public and Non-public Institutions with USAID funds, through a meeting in which the DGD technical officer, an acquisitions officer from UAFCE, and a representative from the national HIV program participated. In addition, throughout the process, the draft document was reviewed and feedback was provided. The reviewed manual will be submitted to USAID for approval.

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[3] Populations at increased risk, or most-at-risk, for HIV are often referred to as hidden or hard-to-reach. These populations are composed of individuals who engage in behaviors that are sometimes illegal or stigmatizing. So these populations tend to avoid disclosure (Guidelines on Estimating the Size of Populations Most at Risk to HIV, WHO-UNAIDS, 2010). For the sake of this initiative in Honduras "hidden population" refers to women that offer sexual services other than in the street or brothels.

A pilot project has been envisaged that consists of contracting consultants and opening an office in Roatan for the purpose of expanding coverage of rapid testing services and educational activities in areas that are currently not served by NGOs in Roatan and La Ceiba. LMG has provided technical assistance to start up this pilot project in Roatan and La Ceiba through the following activities:

- Orientation for the DGD on the preparation of the terms of reference for contracting consultants through the UAFCE, for working with obvious and not obvious MSM populations in Roatan and La Ceiba, and the Garifuna population in Punta Gorda (Roatan). The terms of reference were prepared for contracting rapid test technicians as well as those who will provide educational services.
- Accompaniment and advisory services for the UAFCE on negotiations and contracting of six consultants by providing orientation related to their technical responsibilities.
- Preparation of the formats to be utilized by the contracted consultants, including: the census, mapping and readjustment of the survey for MSMs.
- Orientation for the six contracted consultants on the handling of forms and formats to initiate activities and the preparation of their monthly plans.

Five of the consultants were trained by the UAFCE for the pilot project, to capture the MSM population in La Ceiba and Roatan and the Garifuna population in the Punta Gorda community in Roatan. The training provided was based on the Friends Educating Friends methodology and on the different formats to be utilized in the rapid testing service with pre- and post-test counseling. Support was also provided for the work with the National HIV Laboratory for the three rapid test technicians to be updated on the technique to carry out the Determine and Oraquick brand tests.

Activity 1.3 Strength the capacity of Sub Secretaría de Redes including DGD and RSD, and UAFCE to monitor the contracts signed between the MOH and local NGOs

Beginning in Q2 as per the work plan, LMG supported the new staff at UAFCE to complete the final liquidation of the previous NGOs contracts that ended in December 2013. Manuals and templates were revised and modified by UAFCE with LMG support. Specifically, support was provided to UAFCE in the revision and modification of the Administrative and Financial Manual for NGOs and in the development of financial templates, which were still in process at the end of Q1. The fact that the same MOH staff is allocated to various tasks at the same time made moving forward smoothly difficult.

LMG provided technical assistance to MOH to prepare the technical and financial quarterly report for the Implementation Letters. LMG provided technical assistance to the new staff in the DGD to familiarize them with the NGO proposals, contracts and technical management processes, which was still in process at the end of Q2.

In Q3, LMG Honduras provided technical assistance to the DGD with the preparation and development of the technical and administrative guidelines workshop carried out by the DGD and UAFCE in June 2014, which was oriented towards NGO coordinators and administrators. During this workshop technical assistance was also provided to Regional Health Office technical staff and NGO coordinators to carry out the May technical closures.

In May2014, LMG Honduras travelled with the DGD Technical Advisor to provide technical assistance to the Region of Colon to carry out the technical closures for February, March and April with CASM Colón, and to the Bay Islands region for the COCSIDA Roatan technical closures for March and April.

Technical assistance was provided to the Breastfeeding League in June 2014 for the preparation of monthly technical progress reports, and to complete the M&E form and rapid tests forms in relation to the respective indicators. Technical assistance was provided to the San Pedro Sula region for the June technical closure for the Breastfeeding League.

LMG Honduras provided technical assistance to Redes, the DGD, and the UAFCE for the preparation of presentations for monthly monitoring meetings with USAID and the preparation of quarterly technical and financial reports as well as presentations for the partners' quarterly meetings. The project also trained UAFCE accounting assistants who manage USAID funds, on the use and application of the manual for the administrative and financial implementation of contracts with the NGOs.

Also in Q3, LMG Honduras worked with the UAFCE to prepare the formats for the NGO monthly financial liquidations (formats sent by the UAFCE to the NGOs), and UAFCE accounting assistants were trained on their use and application. The project provided technical assistance for the preparation of the presentation on financial guidelines. This issue was addressed during the technical and financial guidelines workshop organized by the UAFCE in June for the NGOs.

An ongoing activity was the technical accompaniment to UAFCE accounting assistants during the review of monthly financial liquidations sent by the NGOs which has strengthened the basic aspects of the review which are specific for each NGO executing projects according to management for results. LMG accompanied UAFCE staff during field visits carried out in May 2014 to the following NGOs: PRODIM, AJEM and the Breastfeeding League to strengthen the administrative personnel on the use of financial formats.

In June 2014, LMG Honduras accompanied the UAFCE during a field visit to COCSIDA Roatán for the purpose of carrying out a financial audit to verify they are meeting established processes, because during the technical financial workshop and field visits by DGD technical staff, it was detected that this NGO had serious administrative weaknesses. These weaknesses were verified during the visit and instructions were provided to improve their acquisitions processes in particular, since acquisitions were not being carried out as established in the contract or in the administrative manual for NGOs. Follow up was provided by the MOH and LMG for strengthening administrative and financial capacities.

In Q4, technical assistance was provided to the San Pedro Sula, Cortés and Atlántida Health Region technical staff, on the monthly technical closings for the Maternal Lactation League, ECOSALUD, CASM Cortés, COCSIDA Tela and AJEM La Ceiba

Advisory services were provided to the DGD on the preparation of the monthly monitoring meetings with USAID and to the Secretariat of Networks and the UAFCE, as well as for the quarterly partners' meetings.

LMG Honduras supported the UAFCE on the financial review of the budget modifications requested by ECOSALUD and AJEM for their respective agreements.

Activity 1.4: Develop the approach and framework for the implementation of results-based financing of the contracts signed between the MOH and NGOs

Technical assistance was provided in Q1 for the following activities:

- Coordination for the development of the TOR and contracting model
- Revision of the new contracting model and its submission to USAID and the UAFCE
- Revision of the request for proposals that was published in the newspapers, and the proposed correction
- Coordination and participation in working meetings with the Coordinator of the DGD, Dr. Justa Urbina, to review the "Proposal for Decentralized Management of the Delivery of Services in Health Promotion and Prevention of STIs, HIV, AIDS to Key Populations through Non-Public Providers", and final revision of the document and its submission to the DGD
- Aid to the procurement unit in opening and revising the required documentation presented in each of the proposals received
- Provided support to the internal committee in the revision of each of the proposals received.
- Revising the final contract with the NGOs
- Coordination on the development of TOR for contracting with NGOs for hidden populations
- LMG participated as an observer in the selection of the two MSM NGOs that were contracted directly and in their training on the methodologies to be implemented

The contracts signed between MOH and the NGOs included a results based financing approach. In order to strengthen the knowledge and experience of the MOH staff in this mechanism, planning began in Q2 for further training to strengthen results-based-financing supported by USAID and the MOH.

In Q3, in order to strengthen the knowledge and experience of the MOH staff in this mechanism, USAID encouraged LMG to participate in the results-based financing workshop that is being planned by AIDSTAR-Plus, and to follow that workshop with an meeting that LMG Honduras will organize specifically with their counterpart MOH units and the implementing NGOs to review the relevant aspects of the results-based financing work in the MOH contracts with the NGOs for HIV/AIDS prevention and educational services to key populations. Coordination with AIDSTAR-Plus is ongoing to plan for these events.

In Q4, LMG has established coordination with AIDSTAR-Plus in order to participate in the results-based financing workshop that will be carried out, and to follow that workshop with a meeting with MOH units and NGOs.

During this quarter, this process began with the validation of a costing tool that is under development by AIDSTAR-Plus, LMG participated in work meetings with AIDSTAR-Plus technical staff and attended a validation workshop. Coordination with AIDSTAR-Plus is ongoing to collaborate and participate in the next events planned.

Activity 1.5: Strengthen the knowledge and understanding of the Sub Secretaría de Redes (including DGD and RSD) on the topic of prevention of gender-based violence related to HIV.

In Q2, the LMG team developed and published the TOR for a consultancy aiming at strengthening practical knowledge and skills to target and refer HIV-related gender-based violence affecting key populations within NGOs and MOH. As result, seven consultants (six National and one regional) submitted their proposals. Of these, a consultant with extensive experience in gender-based violence related to HIV and key populations was selected. Capacity building activities within the frame of the consultancy will start at the end of April and workshops with the eight NGOs under contract with the MOH and others working with key populations, and the Units of the MOH that are supported by LMG will take place starting by mid-May 2014.

The consultant will be expected to support the NGOs contracted by the MOH to:

- Identify how to obtain and make use of the strategic information related to gender.
- Support the NGOs in learning to detect and follow up cases of gender-based violence in HIV prevention programs, and strengthen or help develop the referral system established by the NGOs to the institutions responsible for managing gender-based violence related to HIV (legal and psychological support).

In Q3, three workshops on the prevention of gender-based violence related to HIV were planned and facilitated. Educators and coordinators participated from the NGOs that currently have contracts with the MOH. The Regional Health Offices that provide follow up and monitoring of the NGOs also participated.

The first workshop was developed with a focus on organizations that work with female sex worker. The second workshop was carried out with organizations that work with men who have sex with men, and included the participation of five Regional Health Offices. The third workshop was carried out with organizations that work with the Garifuna population and included the participation of four Regional Health Office representatives.

The process resulted in each NGO technical team preparing a reference plan for cases of violence, as well as a training plan on prevention of gender-based violence related to HIV to use with their beneficiary populations. The Regional Health Offices developed a check list to provide informed and structured monitoring of NGO activities on the prevention of gender-based violence.

Activity 1.6: Strengthen the Sub Secretaría de Redes' including DGD and RSD, and UAFCE's capacity to manage the technical and financial aspects of the USAID HIV Implementation Letters.

With the UAFCE Accounting Officer for USAID funding, work was carried out to develop a format for budget monitoring of Letter 13 in Q1. Support was provided in the budget revision for the amendment of Letter 13 requested to USAID. Support was provided to prepare financial reports to be presented to USAID (monthly report, and preparation of a fund request).

With the change in Government and new teams arriving to the MOH in Q2, LMG played a key role sharing institutional memory with the UAFCE related to the Letters of Implementation and applying an on-the-job capacity building exercise with the new Contracts Officer and Financial Coordinator of the UAFCE in reconciling Implementation Letters, allowing the Ministry and USAID to move forward with the

new one, Letter 15, and in signing the contract with the selected NGOs for the period. Due to the high level of assistance needed by the MOH during this period, LMG brought on board an experienced short-term financial consultant to assist with these time-sensitive actions.

LMG supported the UAFCE in reconciling Letters 7/11/14 y 13, final reports and reimbursements from the MOH to USAID resulting in financial pending justification completed by MOH. Continuous support was provided to the UAFCE in the process of revising the various Plans of Action of Implementation Letter No. 15.

Most NGOs still had expenses pending to reconcile or return to the MOH from previous contracts, which delayed their closure and ability to move forward with the signature of the new contracts with the MOH. LMG supported UAFCE to work with the NGOs and finalize the pending reconciliation.

In Q3, LMG Honduras provided technical assistance to the UAFCE on the preparation of the financial report for the monthly monitoring meetings held with USAID. In addition, the project provides continual support to the UAFCE with financial follow up related to implementation letter no. 15.

In Q4, LMG Honduras supported the UAFCE with the preparation of the modifications to the Ministry of Health Annual Operating Plans, for submission to USAID.

Technical assistance was provided to the UAFCE for the preparation of the financial reports for the monthly monitoring meetings with USAID and for the preparation of the quarterly financial reports.

The UAFCE was also supported in the verification of the information requested by the Superior Audit Institution (Tribunal Superior de Cuentas in Spanish), related to implementation letters 7, 11, 17 and 13.

Advisory services and support were also provided to the UAFCE for the preparation of the accruals report requested by USAID.

Activity 1.7 Strengthen the management capacity of the UAFCE and the DGD

Initially, this activity was related to the continuous quality improvement at the MOH, then, in discussions with USAID and AIDSTAR-Plus in Q2, it was decided to establish a close collaboration in relation to this area, so that LMG will benefit from the expertise of AIDSTAR-Plus in the quality improvement by participating in the capacity building activities planned for the fourth quarter of PY2, which LMG will then replicate with the NGOs. Activities related to the continuous quality improvement at the MOH were developed by AIDSTAR-Plus in July 2014, with direct coordination with USAID and participation of LMG technical staff.

In the revised work plan submitted in August 2014 and approved by USAID, the continuous quality improvement activity was replaced with the management capacity strengthening of the UAFCE and DGD

In Q4, targeted technical assistance was provided to the UAFCE and DGD personnel through a capacity building workshop on general and leadership competencies, as well as support for the development of improvement plans. Executive and individual coaching was also provided for the General Coordinator, Financial Administrative Coordinator, and Technical Administrative Officer of the UAFCE.

During the workshop, participants recognized their competencies in basic management and leadership practices. In addition, they identified the main challenges that they are facing in the management of the agreements with the NGOs which are providing HIV prevention services to key populations. As such, the

key challenges were selected and the participants utilized a systematic process of problem analysis to identify the causes and to generate alternative solutions. At the same time, the participants utilized management and leadership practices to prepare and implement action plans to address and resolve the identified challenges. Finally, the communication processes that influence the management of agreements were analyzed and they proposed mechanisms for improvement.

Seventeen management level officials participated in the workshop, fourteen from the UAFCE and three from the DGD, including coordinators from both units.

The results achieved when the Workshop for Management Competencies finalized were:

- A shared vision was prepared
- Three challenges were identified and analyzed, and action plans prepared. The results are detailed as follows:
    - Result 1: By December 2014, 8 management agreements signed with NGOs
    - Result 2: By December 2014, NGOs currently contracted by the MOH will have met 80% of the challenges in their agreements
    - Result 3: By December 2014, each of the involved entities from the UAFCE, DGD, regions, NGOs will have met the time frames established in the processes diagram, administratively as well as technically
- Three improvement teams formed and committed to implement the actions plans

Activity 1.8: Strengthen the capacity of the Sub Secretaría de Redes and the UAFCE for evidence-based decision making

This activity was programmed for the second, third and fourth quarters of PY2, in accordance with the work plan. Continual technical assistance was provided to the DGD for the collection of PEPFAR indicators for their monthly and quarterly presentations. In addition, in Q3 an analysis was carried out of the proposed goals for each indicator. In Q4, technical assistance for the collection of PEPFAR indicators continued and three databases for the indicators report were prepared, which include:

- People who complete an intervention related to gender violence;
- Population that will be reached at an individual level and/or in small groups with VIH prevention interventions based on evidence and that meet the minimum required standards;
- Population that completes a standardized prevention intervention.

Expected Result 2: Organizational capacity developed within local NGOs to support the implementation of evidence-based, quality HIV prevention services for key populations in compliance with the new MOH funding mechanisms.

Activity 2.1: Design the intervention plan for capacity building in NGOs

All NGOs had plans for improvement by the end of Q1, developed in consensus with the NGOs themselves. In general, the plans for improvement were developed to meet the needs of each NGO. However, most of the NGOs faced similar difficulties. They had a need to learn innovative educational methodologies; understand how to deal with gender-based violence, and how to address gender issues

with target populations; deepen their understanding of accountability; and tackle their weaknesses in developing technical proposals for projects; as well as strengthen their understanding of results-based financing for HIV projects, among others.

In Q2, the NGOs on contract with the MOH were:

1. AJEM
2. CASM Colón
3. CASM Cortés
4. COCSIDA Tela
5. COCSIDA Roatán
6. PRODIM
7. LLM
8. ECOSALUD

NGO	Population	Geographic Area
PRODIM	Female Sex Workers, their clients and stable partners	• Tegucigalpa y Comayagüela
COCSIDA (2 Projects)		• Tela • Roatán
AJEM	Men who have sex with Men	• Tegucigalpa y Comayagüela • La Ceiba
CASM (2 projects)	Garífuna (ages 9-12 ; 13-15; 16-24 and 25 plus years)	• Cortes(Travesía, Bajamar y Masca) • Colon (Punta Piedra, Cusuna, Ciriboya, Iriona Viejo, San José de la Punta, Sangrelaya, Cocalito y Tocamacho)
Liga de la Lactancia Materna (LLM)		• San Pedro Sula
ECOSALUD		• Atlántida (Corozal, Sambo Creek, Nueva Armenia) • Colon (Rio Esteban)

While the majority of implementing NGOs had developed a plan of action based on the assessments carried out in September 2013, the needs assessment was missing for AJEM. This assessment was carried out in April of Q3 with the participation of five NGO technical staff. Based on the assessment, a technical assistance plan was prepared focused on strengthening the weaknesses found.

In Q4, LMG provided continuous capacity building activities based on the technical assistance plans developed, focusing on strengthening the weaknesses found in the assessments carried out per each NGO as detailed in activity 2.3.

See Annex 1, detailing the technical assistance and actions carried out to address each of the activities included in the intervention plans.

Activity 2.2: Strengthen the capacity of the NGOs (working in collaboration with DGD and UAFCE) for the preparation and submission of project proposal for a results-based financing model

The workshop scheduled for Q1 by the UAFCE to reinforce the understanding of the results-based financing model did not take place because neither the DGD nor the UAFCE were able to commit to it due to time constraints. However, in coordination with the UAFCE and the DGD, LMG provided technical assistance to three of the seven NGOs that were selected because their proposal showed the most marked technical weaknesses. This assessment was based on the assessment made by the internal committee, and the input provided by the external committee which was formed by representatives of different agencies including the Pan American Health Organization (PAHO), Global Communities (CHF), the Unit for Management Planning and Evaluation (UPEG, in Spanish), the Joint United Nations Program on HIV/AIDS (UNAIDS) and USAID.

Similarly, LMG coordinated with the UAFCE to provide technical assistance to all the administrators of the selected NGOs on issues related to financing and accountability within the framework of the results-based financing model. It is worth noting that two NGOs, contracted by direct invitation to perform specific activities with the MSM population, received technical assistance to refine and clarify their technical and financial proposals.

In Q2, LMG supported six NGOs (working with eight projects) to prepare for a new phase of implementation of health promotion and prevention of STIs, HIV/AIDS services for key populations in the contracts with the MOH. This included supporting the NGOs in revising their technical and financial proposals for submission and approval of MOH, in view of major observations and recent changes in PEPFAR indicators.

For that purpose, LMG conducted a three-day workshop with the six NGOs/eight projects to conduct an in-depth revision of their technical and financial proposals, incorporating the new PEPFAR indicators and as a result, adapting their budgets and timelines accordingly. Technical Assistance to the NGOs continued after the workshop on an as-needed basis.

One NGO with two projects in two different regions (COCSIDA Tela and COCSIDA Roatán) were not ready for the exercise since they still had pending financial issues with the MOH. LMG supported this NGO as per MOH request, as this NGO was also the one selected for implementing HIV education and prevention services contracted by the MOH. COCSIDA began implementation of their activities in March.

Activity 2.2 was completed in Q2.

Following the results-based financing workshop that is being organized by AIDSTAR-Plus, LMG will coordinate a meeting with NGOs contracted by the MOH to focus on the results-based financing aspects of their contracts with the MOH. Coordination is ongoing.

Activity 2.3: In collaboration with the Sub Secretaría de Redes including DGD and RSD, and UAFCE, strengthen the technical capacity of the NGOs based on the outcomes of the needs assessments completed in September 2013 and through the course of implementation.

In Q1, a workshop was prepared for technical staff from Redes, including DGD, UAFCE and NGOs on KAP assessment and monitoring with the NGOs in order to ensure the correct application of the tool.
Technical assistance was provided to Developmental Programs for Women and Children (PRODIM, in Spanish) for its visit to the representatives of USAID's Department of Security. They were able to observe an educational activity with FSWs in the Seventh Avenue area, as well as visit a nightclub for sexual trade on Calle Real de Comayagüela.

Pending the start of the activities under contract, the focus of the support to the capacity building plans in Q2 was in preparing the M&E systems of the NGOs to prepare them to start reporting to the MOH as soon as the disbursement are made. The contracts were signed close to the end of Q2, and implementation of the plans was planned for the third and fourth quarters of the year.

In Q3, the following actions were carried out to follow up the technical assistance needs expressed by the NGOs: A three-day workshop was held with the Breastfeeding League technical teams in June, and a two-day workshop was carried out also in June with CASM in Iriona. The following topics were reviewed during both workshops: the transtheoretical model for behavior change, educational methodologies, basic concepts related to STIs/HIV, and a review of the basic guidelines for rapid HIV tests service provided through brigades.

A day and a half capacity building event in April was conducted with the AJEM technical team during which basic guidelines for rapid testing service were addressed with pre- and post-test counseling, the transtheoretical model for behavior change, and basic guidelines for preparing training plans. Because AJEM was not experienced in providing rapid HIV testing through brigades, an exchange of experiences was held between AJEM and PRODIM which helped AJEM to identify the kinds of supplies needed for the brigades, a sharing of work experiences, and the basic guidelines for providing the service. In April, a technical assistance meeting was held with the PRODIM coordinator to review some of the areas around rapid testing that needed improvement, which were identified during the exchange of experiences.

Technical assistance was provided virtually to implementing NGO projects, particularly on the basic requirements for the testing services with pre- and post-test counseling, issues they faced with training, feedback on the preparation of training plans, and orientation on the preparation of educational materials, among others. LMG Honduras also provided technical assistance to the NGOs on their monthly technical progress reports and M&E formats. LMG also supervised educational activities conducted by ECOSALUD and CASM Cortes.

In Q4, The following technical assistance was provided during this period in order to follow up on the needs identified in the NGO technical teams:

- A training event was developed with the COCSIDA Roatan technical team to address the following issues:
    - Condom negotiation and the issue of STIs,
    - Methodology of the *Decisions* training tool.

    - Orientation on the technical guidelines for rapid testing services for HIV with pre- and post-test counseling.
    - Support for the preparation of the environmental mitigation plan, and the plan for promoting the rapid testing service for HIV.
- A training event was developed with the Maternal Lactation League technical team on the preparation of training plans;
- An event was carried out with the CASM Cortés technical team during which the importance of internal coordination for the effective achievement of goals was addressed;
- Technical assistance was provided to AJEM for the accommodation of the physical space for HIV rapid testing services.

Virtual technical assistance was provided to the eight projects, through responding to spontaneous consultations from them on the preparation of training plans, responding to requests for information about prevention of STIs and HIV, and rapid testting for HIV, supporting NGOs with their presentations. Technical assistance was also provided to follow up on that the NGOs are meeting technical requirements for the rapid testing service, to insure they have their environmental mitigation plan, a plan for the promotion of brigades, and temperature controls. The CASM Iriona project received the most virtual technical assistance due to the low achievement of its goals, and to support them in preparing an emergency plan to achieve them. LMG Honduras also supported them to establish coordination with the National HIV Laboratory to update the consultancy proposed by the NGO for rapid testing services for the Determine and Oraquick brand tests.

LMG Honduras advised the NGOs through review of their monthly technical progress reports and on monitoring and evaluation formats.

LMG Honduras accompanied educational activities carried out by the Maternal Lactation League, ECOSALUD, AJEM, CASM Cortes, COCSIDA TELA and Roatan, and provided feedback for identified weaknesses.

Technical assistance was provided to PRODIM on their preparation of formats such as census, for working with hidden populations and for the FSW survey to be applied.

Activity 2.4 Strengthen the capacity of the NGOs on the subject of the prevention of gender-based violence related to HIV

This activity was programmed for the third quarter of PY2, in accordance with the work plan. In Q2, the project developed the terms of reference and successfully identified a consultant with relevant experience to carry out this work starting in Q3.

In Q3, Three capacity building workshops on the prevention of gender-based violence linked to HIV were planned and facilitated by LMG with the technical support of a consultant who was contracted with experience working with high risk populations. Educators and coordinators participated from the eight projects that have a contract with the MOH to implement activities for HIV prevention and education with key populations.

The first workshop was developed with the NGOs working with the population of women sex workers, including the Program for the Development of Children and Women (PRODIM), Center for Orientation and Training on AIDS (COCSIDA) in Tela and Roatán. Technical staff were invited from NGOs developing projects without a contract with the MOH, including: Honduran Woman and Family Association (AHMF), Foundation for Growth and Development of Honduras (FUNDACREHS), Honduran Family Planning Association (ASHONPLAFA) and AIDSTAR-Plus, for a total of seventeen participants.

The second workshop was carried out with educators and coordinators from NGOs working with the population of men having sex with men, with participation of the following institutions: Association of Youth in Movement (AJEM) which has a contract with the MOH. Other institutions without a contract with the MOH also participated because they work with this population. The invited NGOs who assisted were: Pro Union Organization from La Ceiba (OPROUCE), Cozumel Trans Association, Association for a Better Life for Persons Infected by HIV/AIDS (APUVIMEH) and AIDSTAR-Plus representatives. There were eighteen participants, five of which represented Regional Health Offices.

The third workshop was carried out with educators and coordinators from NGOs working with the Garifuna population: ECOSALUD, the Breastfeeding League, CASM from Colón and Cortés, and AIDSTAR-Plus. The USAID focal point for gender issues also attended. Twenty-five participants attended this workshop.

The methodology used during the three workshops was participative and reflexive, and included techniques such as work groups, plenary discussions, practical activities, questions and answers, thoughtful assisted reading, gallery walks, and presentations by the participants and the facilitator.

During the capacity building workshops, NGO technical staff were motivated and trained on guidelines to prepare their own training plans on the prevention of gender-based violence to use with the beneficiary populations of their NGOs. The NGOs began to develop the training plans during the workshop. They also learned about mapping of social actors and the components of a referral plan which they implemented following the workshop to develop a referral plan for cases of gender-based violence. After the workshop, the consultant stayed in contact with the participants to review drafts of their training and referral plans, resulting a finalized training and reference plan for each of the NGOs implementing MOH contracts.

The workshop participants demonstrated interest in the issues of gender and HIV since they had the opportunity to consider and share some of the gender standards they experience on a day-to-day basis in their communities and work activities.

Follow up was provided during Q4 for the implementation of the referral plans for cases of gender-based violence in which the three projects that work with the FSW population (COCSIDA Roatan, COCSIDA Tela and PRODIM) made referrals for female victims of violence. These cases were assisted satisfactorily by institutions with which the NGOs established coordination.

Activity 2.5: In compliance with the UAFCE regulations, strengthen the financial management capacity of the NGOs

During Q1, follow up support was provided on the findings yet to be resolved by the NGOs regarding their monthly financial liquidation reports. Similarly, support has been provided in revising the budgets

presented by two of the NGOs contracted by direct invitation: AJEM and CGSSI. Support was also provided in revising the budgets presented by the League for Breastfeeding and the Center for Guidance and Training on AIDS (COCSIDA, in Spanish) Roatán in their proposals for the new bidding process.

A capacity-building meeting was facilitated with the administrators of the pre-selected NGOs on how to complete the budget format and how to cost out each one of the processes in order to obtain deliverables based on results-based financing.

The focus on this activity in Q2 was on supporting the six NGOs/eight projects reconciling their accounts with the MOH in relation to previous contracts allowing them to sign new contracts under implementation Letter No. 15, and revising and adapting the budgets for the new proposals submitted to the MOH for implementation of HIV education and prevention services under implementation Letter No. 15.

In Q3, support and strengthening activities with NGOs included the following:

- LMG Honduras made two monthly visits with the objective of carrying out preliminary reviews prior to the liquidation that would be sent to the UAFCE to ensure the quality of the liquidations.
- LMG Honduras worked with the NGOs to strengthen their use of the formats for financial liquidations since this is the first time the NGOs used these formats and they need to learn how to them.
- LMG verified that the documents the NGOs attach to each check voucher met the guidelines in the administrative manual for NGOs and the contract signed between the NGOs and the MOH.
- Orientation was provided to the NGOs on the management and compression of their project budgets to address previously found weaknesses when recording expenses by activity.
- During the process of providing financial assistance to the NGOs, limitations in carrying out the preliminary review of the liquidations were experienced with some of the NGOs. In some cases this was because they did not accept the technical assistance, or because it was accepted after liquidations had been sent to the MOH. This was the case with COCSIDA Roatán, AJEM, and COCSIDA Tela. The result was that the assistance provided was limited to the information available when they are visited.

In Q4, LMG Honduras worked with the NGOs that are currently contracted by the MOH, to strengthen and support them as follows:

- Two monthly visits were made to each NGO for the purpose of reviewing financial liquidations before they were submitted for the UAFCE to submit expenses incurred through liquidation in order to guarantee that these would be submitted with the least number of weaknesses and in the established time.
- Verified that supporting documentation for expenses sent to the UAFCE met what was established in the NGO administrative manual and the signed agreement.

This technical assistance process includes the limitation that in many occasions the NGOs do not have all the required documentation for review, indicating that the reason for this is that they have not received funds and have not been able to issue checks for activities. This will continue to be addressed in the technical assistance and feedback provided to the UAFCE and NGOs.

Activity 2.6: In compliance with MOH regulations, strengthen the NGOs' technical capacity to improve the quality of the HIV prevention services they provide for key populations.

This activity is central to the NGOs' intervention plans as well as to the specific capacity improvement plan for each NGO. In Q1, technical assistance was provided to two NGOs that address the MSM population with the Video Forums and Friends Educating Friends methodologies. Technical assistance was also provided to three of the selected NGOs in the bidding process coordinated by the MOH to improve their methodologies in addressing key populations and in gaining greater access to prevention services.

In Q2, the educational material was improved (text revised) and another 50 copies of the material were sent to print for additional distribution among the NGOs contracted by the MOH and also for distribution among the MOH focal points in the regions. In the next quarter, the materials will be distributed and technical assistance will be provided to NGOs who require additional support in use of the materials.

In Q3, as part of the development of capacities of NGOs, each NGO must be able to prepare and develop a plan for continuous quality improvement. This activity has been coordinated with AIDSTAR-Plus with assistance from NGO coordinators and will be carried out during the next quarter, in July.

Orientation was provided to the staff of the NGOs with MOH contracts in order for them to meet the basic guidelines for the rapid HIV testing service as well as the standards of biosecurity. In addition to on-site orientation during field visits, virtual follow-up was carried out with project coordinators from the following NGOs: AJEM, CASM Colón, the Breastfeeding League, and PRODIM.

In Q4, The rapid test brigades in ECOSALUD, AJEM, CASM Cortes, COCSIDA Tela, Maternal Lactation League and COCSIDA Roatan were accompanied and feedback was provided in case biosecurity standards and other requirements were not met.

During this quarter, two LMG technical staff participated in the Continuous Quality Improvement Workshop facilitated by the AIDSTAR-Plus project with the participation of coordinators from seven projects that have agreements with the MOH (PRODIM, COCSIDA Tela, COCSIDA Roatan, Maternal Lactation League, ECOSALUD, CASM Cortés and CASM Iriona). One of the commitments made during the workshop was that each NGO would replicate the workshop with their project teams and would prepare their continuous improvement plans in order for them to identify the opportunities to improve the implementation of their projects.

The seven projects carried out replications of the continuous quality improvement workshop with their teams with support from LMG, which made it necessary to adapt discussions during the replications of the workshop in order to focus on the realities of each NGO. Two of the NGOs (CASM and the Maternal Lactation League) incorporated human resources from other projects in the trainings, due to the importance of the workshop and because they want to implement them in other projects. A total of 36 people were trained through the replications, including educators and administrators.

One of the products of the replicated capacity development events for continuous improvement was that each team prepared its continuous improvement plan, by identifying the opportunities for improvement as follows:

- In the first place, the NGOs CASM Cortés, CASM Iriona, Maternal Lactation League, COCSIDA Tela, and COCSIDA Roatan visualized opportunities for improvement in the area of administration since they are not complying with the submission of administrative liquidations according to their agreements with the MOH. In the second place, they identified that they can improve the Behavior Change Communication (BCC) reports once educational activities are finalized since this has repercussions on the technical closings and therefore, creates delays in the liquidations of expenses.
- ECOSALUD discovered an opportunity to improve in the technical area in relation to the timely submission of the CCC reports
- PRODIM identified the possibility of improving in HIV positive cases that are not arriving at the integrated care services.

A replication of continuous quality improvement was not been carried out with the NGO AJEM since this NGO has prioritized recovery of the project goals because they are not complying with them. A separate workshop has been programmed for them on September 23 and 24, 2014.

4. Monitoring and Evaluation

The Performance Monitoring Plan (PMP) for this fiscal year presents a series of indicators for the project's goal and expected results 1 and 2. See Annex 1 for an updated PMP report.

As a result of delays in contracting the NGOs, there was no information to report in Q1 for indicators in Results 1 and 2 that relate to the MOH monitoring and oversight of NGO expenditures or the financial management capacity of the NGOs to manage the contracts.

According to PEPFAR's updated version of indicators from December 2013 document, disaggregation of key population type for indicator *P8.3.D* reported yearly was modified, therefore, indicator *P8.1.D* has been added to the PMP.

V. Outstanding Issues, Constraints, Delays and Actions Taken

One of the principal challenges in Q1 was that too few proposals were submitted in the request for proposals to the NGOs, leading to a second round of request for proposals (RFPs), causing some delays, though this possibility had been anticipated and planned for in the reference documents for the process. In addition, December 2013 was a full month of activities at the MOH and for the project, given that the prior NGO contracts were closing and a new bidding process was underway. However, working together with the MOH and the NGOs, the project complied with its plans.

The main challenges during Q2 were:

- Complete turnover of staff in the Ministry of Health which focused the period on the induction and introduction to the subject of the new staff, as well as an in depth new revision of the action plans to verify whether the priorities identified in 2013 for capacity building and capacity strengthening is still relevant to the new teams in place for this year 2014. The fact that the majority of the staff in the MOH is new in the Ministry and has little or no experience with these processes has led to the need for a great deal of support from LMG.
- Delayed signature of contracts between the MOH and the eight selected NGO projects:
- Delayed disbursement of funds to the NGOs

The main challenge during Q2 was the delayed establishment of the new staff in the Ministry of Health, the completion of the staff allocated to the different Units with which LMG works (UAFCE, DGD, DAPS, Regions) and the subsequent delays in the signing of the contracts between the MOH and the selected NGOs, leading to a late starting of the activities. The MOH signed the contracts with the NGOs in late March 2014, with authority to begin activities retroactively to February 2014. The NGOs received their first disbursement of funds the first week of April 2014.

A challenge faced by the project during Q3 was the departure of the Project Director, who resigned in April due to personal reasons. This was the project's second Project Director in less than one year. Despite the challenges posed by the turnover in leadership, LMG's technical assistance to the MOH and NGOs was not affected, these partners commented both publicly and individually their appreciation for LMG's continual and high quality technical assistance. During the recruitment process for a new Project Director, leadership coverage was provided by the Management Sciences for Health (MSH) home office through visits by Country Portfolio Director, Ms. Kathleen Alvarez; Senior Project Officer, Ms. Veronica Triana; and returning consultant, Ms. Susana Galdos. The recruitment resulted in a new Project Director that began on July 21, 2014, Ms. Eva Karina Mejia Saravia. Ms. Mejia is a Honduran national with more than 15 years of professional experience, including nine years of direct experience working with international donors and the Government of Honduras to manage and oversee grants programs.

In Q4, the new Project Director, Ms. Eva Karina Mejia Saravia, joined LMG Honduras on July 21, 2014, and during the transition of leadership, a close backstopping was provided by Country Portfolio Director, Ms. Kathleen Alvarez; Senior Project Officer, Ms. Veronica Triana; and returning consultant, Ms. Susana Galdos. Although the period of transition between Project Directors posed challenges, LMG's technical assistance to the MOH and NGOs continued as planned.

LMG Honduras, as a technical assistance provider, delivers orientation, accompaniment and advice during the processes that are being executed by the units at MOH, therefore, the final results of the project are directly related to the decisions and acceptance of the technical assistance by each unit. LMG has provided the required support for the achievement of the outcome indicator 1.3 *Percent of NGOs with approved contracts that have undergone semi-annual results-focused technical audits by the MOH within the past 6 months*, which included the development of guidelines and templates to perform technical audits and orientation of the staff on how to implement them. During this period 8 technical audits were carried out by DGD and the audit reports have been submitted to USAID, who requested a revised version. LMG has offered technical assistance to the DGD for the further revision of these reports for re-submission to USAID.

VI. Financial Report

PY2 October'13-September 2014

Pipeline at the beginning of period	$ 239,199.43
New funds Obligation	$ 1020,000.00
Expenses during the reported period + Accruals	$ 943,673.75
Pipeline at the end of the period	$ 315,525.68
Estimated expense burn rate for next period (Oct'14-Sep'15)	$ 1,200,000.00
Estimated quarters of pipeline	0.26

Note: Please note this is not a final financial balance projection; MSH Accounting has not yet closed the month of September 2014

VII. Lessons Learned

In quarters 1 and 2, the process of shifting to results-based contracting was an ongoing learning lesson on the need to follow clear steps and to have documents and tools for use throughout the process. Although manuals and forms were not always available at the anticipated time, the ongoing technical assistance that was been provided enabled the process to conclude smoothly.

Quarter 3 followed the period of installation of new staff at the MOH, and also included the departure of the LMG Honduras Project Director. Despite these challenges, the LMG Honduras team continued to function well, fulfilling their role as providers of technical assistance to the MOH and NGOs to oversee the NGO contracts to provide HIV prevention and education services to key populations in Honduras. The MOH was also able to navigate the transition between governments by working closely with the LMG Advisors who served as a critical link to bridge the past and current government teams, and ensure that there were no gaps in knowledge transfer. The lessons learned include that, despite difficult circumstances, with persistence, relationship building and maintenance, and close accompaniment, LMG can continue to work with partners to develop capacity that enables them to self-manage and deliver effective services to key populations in Honduras.

The transition to a new Project Director of LMG Honduras took place in Q4 and throughout this transition, the LMG Honduras team supported the transition and continued accomplishing the activities as planned, providing technical assistance to the NGOs and MOH.

The lessons learned include that challenging circumstances can be overcome with effective planning, teamwork, and commitment, which is evidenced in the fact that LMG's work with partners has continued without interruptions, strengthening and developing their capacities required to deliver effective services to improve the health of key populations in Honduras.

Replicas of Continuous Quality Improvement workshop delivered by AIDSTAR PLUS required some materials and facilitation methods to be adapted for NGO's needs and nature, this represented a challenge that was addressed through close coordination and communication with NGOs which lead to the finalization of their plans and replicas with their staff.

Monthly M&E reports indicated that two NGOs had been experiencing gaps in the achievement of rapid tests goals, and through work meetings, support in the preparation of Emergency Plans and coordination with MOH facilitated by LMG important progress has been achieved during this period in order to reduce the gap.

VIII. Coordination with Other Actors

In Q1, LMG Honduras participated in the socialization of a health services costing study conducted by John Snow, Inc. (JSI). In addition, the transfer of inventory to JSI was completed in the past quarter. LMG Honduras also participated in a technical exchange meeting with the other two MSH projects in Honduras - Salud Mesoamerica 2015 and ULAT II - in order to coordinate on areas in which the three

projects are working with the MOH, such as results-based financing. LMG Honduras also coordinated on administrative matters with the MSH ULAT II Project in order to maximize resources.

In Q2, LMG Honduras established collaboration with AIDSTAR-Plus based on specific activities:

a) Prevention of Gender-based Violence in relation with HIV

- LMG will involve AIDSTAR-Plus in the initial discussions with the gender-based consultant who will support the NGOs and the MOH on this topic
- LMG will invite technical staff responsible for this area from AIDSTAR-Plus to the gender-based violence trainings, giving special emphasis to the need to understand complementarity of the projects, as a reference to the MOH.
- The projects will maintain periotic meetings to provide updates on the progress made with the NGOs and the MOH, in order to facilitate incorporation of the experiences with the NGOs and the follow up with the MOH, into the AIDSTAR-Plus activities on monitoring how the public services are viewing and evaluating the coverage of the issue of prevention of gender-based violence in relation to HIV.

b) MOH Monitoring and Evaluation

- Through the M&E experts from both projects, jointly review the tool, harmonizing and agreeing on indicators and the formats to use.
- Maintain meeting between technical experts from the projects so that AIDSTAR-Plus can incorporate the work that LMG is doing with the NGOs into their tool.
- Consider a common activity for updating and capacity building in Excel in order to sufficiently manage the monitoring tool (define if this needed exclusively for NGOs, in which case it would be conducted by LMG, or if the regions will also have a need, then the projects can visualize coordinating efforts for capacity building).

c) Tool for Costing and Managing for Results

- The approach to this subject is similar to that of the previous point: review the costing tool that was developed by AIDSTAR-Plus and explore the possibility of incorporating the work done with the NGOs to said tool, adapting as needed.

d) Continuous quality improvement: methodology and follow up.

- AIDSTAR-Plus will invite the LMG experts and some of their counterparts to participate in the training programmed with an international consultant who is working on this

topic, so that both projects will be knowledgeable in the methodology use by AIDSTAR-Plus to analyze and monitor the progress and results of continuous quality improvement for the services rendered.

Additionally, MSH in Honduras is moving forward in coordinating and ensuring the collaboration and coordination of the Technical assistance to the MOH, in particular in relation to the activities and products related to the health reform. For that purpose, LMG Director held regular meetings with the other MSH project Directors (ULAT and Salud Mesoamérica 2015), as well as participated in various meetings between MSH and the MOH at country level to discuss specific needs in relation to the definition of the function of procuring services from non-state actors.

In Q3, LMG Honduras collaborated with AIDSTAR-Plus on the following key activities:

LMG Honduras invited three AIDSTAR-Plus technical staff to the workshop on the prevention of gender-based violence in the context of HIV, which was carried out in May. AIDSTAR-Plus participated in each of the three workshops.

AIDSTAR-Plus will invite the NGOs and LMG to participate in the workshop on Continuous Improvement of Quality LMG in July.

LMG Honduras provided suggestions to AIDSTAR-Plus on their equipment and furniture inventory currently not in use that could be transferred to NGOs that are implementing HIV prevention and education activities under the MOH contracts.

In Q4, LMG Honduras collaborated with AIDSTAR-Plus on the following key activities:

- LMG Honduras participated in the workshop on Continuous Improvement of Quality, which was carried out in July, and agreed to provide technical support to NGOs for conducting the workshop replica and the preparation of the plans.
- AIDSTAR-Plus invited LMGs technical staff to participate in meetings to review the cost tool for HIV prevention services, additionally, validation workshops for this tool took place during the month of September and LMG participated actively.

In addition, coordination with ULAT Project was established and a meeting between both projects has been agreed to take place at the end of September, in which ULAT's staff will share with LMG the development and progress in the Organizational Development (DO) process that is taking place at the MOH, in order to learn about the restructuring and other changes within the institution. This information will help LMG determine, once discussed with USAID, if any modifications might be needed to LMG's technical assistance and work plan.

IX. Gender Component

The review of the bidding process for the 8 new NGO contracts has shown that gender is an important and cross-cutting issue that must be carefully considered and included in the USAID/MOH approach. The approved LMG Honduras Program Description clearly defines the key populations for this program (i.e. MSM and partners, commercial sex workers (CSW) and partners, and the Garífuna population). By definition, working with these groups requires careful attention to gender issues and a strategy to be sure that gender is addressed. The Program Description also mentions that the NGOs will develop specific approaches and strategies to identify difficult-to-access populations in order to increase NGOs' coverage of services. LMG Honduras will work more intensely on the issue of gender as the new NGO contracts commence, in particular by encouraging and promoting the DGD and the Regions to ensure that the implementing NGOs include a gender approach in their strategies, particularly with hard-to-reach populations.

LMG gave special attention to the subject of during Q2, giving space for discussion and consensus around the definition of the TOR for the consultancy to be implemented during Q3, in support to the NGOs in incorporating gender into HIV and referring the cases of gender based violence in a practical way.

In Q3, NGO technical teams were trained on the prevention of gender-based violence linked to HIV. These NGOs now have the training plans they developed, have initiated training workshops with their target populations, and also have prepared a reference plan for cases of violence.

During Q4 all NGOs implemented the training plans they had developed on gender and the three NGOs that work with FSW (PRODIM, COCSIDA Tela and COCSIDA Roatan) have made case referrals for female victims of gender-based violence. They were assisted due to the satisfactory coordination established between referral institutions.

X. Summary of Key Conclusions

During Q1, the Project Director resigned, and an Interim Director took charge of the LMG Honduras team until near the end of December. During this period, the team provided support to the Interim Director, enabling the project to meet the technical assistance obligations scheduled with the NGOs as well as with the MOH. A competitive recruitment process was carried out in October and November, and a new Project Director was selected with the agreement of USAID/Honduras. The new Project Director assumed her position and responsibilities in January 2014.

Upon concluding the assessment process of the NGOs, Redes, including DGD, and UAFCE, the results were presented to the authorities of these agencies and consensus was reached with them on plans for their improvement.

An important process that took place in Q1 was the bidding process within the framework of results-based financing. Special effort was made considering this the limited prior experience with this approach in the country. For this reason, ongoing technical assistance work was necessary in order to support the development of not only a framework to regulate results-based financing, but also terms of

reference and mutually agreed-to contracts. Within this same process, LMG provided technical assistance in selecting the NGOs as well as in improving their proposals, working in coordination with the DGD and the UAFCE, before, during, and after project selection.
Capacity-building tasks were continued both at the level of Redes, including DGD and UAFCE and the NGOs; and accompaniment was provided to the DGD in its technical audit visits to five NGOs. Regarding the KAP assessment, special workshops were developed both for the DGD and the regional liaisons and participating NGOs.

In November, the country held its national elections. A transition phase will follow over the next several months as new authorities assume their positions which may impact the project as new counterparts are established.

The team has demonstrated professionalism in adapting to the changes in project management and has continued to provide the technical assistance required.

In Q2, the key achievement was the successful signing of NGO contracts which provided for the continuation of services to key populations. This accomplishment by the newly established staff in the MOH following the inauguration of a new Honduran government the 27th of January, with the support of LMG staff, was significant.

The focus of the LMG team was to prepare to support the newly recruited MOH staff, and to being able to adapt to change and be proactive in the new environment, always ensuring that support to the MOH's new authorities and team was the first step in this new phase. At the same time, it has been a priority for the LMG team to ensure a certain grade of stability among the NGOs who were concerned about the impact of the arrival of new MOH staff on their contractual obligations and the continuation of their activities.

The team has demonstrated professionalism in adapting to the changes in project management and the new environment, and continued to provide the technical assistance required.

During Q3, LMG Honduras began in earnest its support to the implementation of the capacity building action plans with both the MOH and the contracted NGOs, including activities such as the prevention of gender-based violence workshops and accompaniment to the process of developing the terms of reference for work with hidden populations. In the next quarter, LMG will provide more focused technical assistance to management and leadership development for the MOH as it related to management of the NGO sub-contracts. With two additional staff based in La Ceiba, LMG is now set up to provide closer accompaniment to the Regional Health Offices and NGOs in the northern regions of the country. In addition, with a new Project Director in place, LMG expects accelerated progress on its planned activities in the last quarter of PY2.

In Q4, LMG Honduras provided targeted technical assistance to management and leadership development for the MOH as it relates to management of the NGO sub-contracts. Regional health offices and NGOs have been receiving closer technical assistance, especially through the addition of two new LMG technical staff based in the northern part of the country closer to many of the NGOs and regional health offices, resulting in reductions of the delays in the submission of reports to MOH.

Targeted technical assistance has been provided to NGOs to support them in achieving their goals and to facilitate the activities required to start up the pilot project in Roatan and La Ceiba. Furthermore, LMG provided close accompaniment and orientation to NGOs to facilitate the replicas of the workshop on continuous quality improvement and the preparation of related plans.

LMG's team has demonstrated commitment and professionalism in supporting the new Project Director and ensuring continuous provision of the technical assistance required to accomplish the results established for this period.

During this quarter, at the request of USAID, LMG Honduras prepared a draft work plan for a third year of activities. That draft is currently under review with USAID.

Pending approval of the PY3 work plan, in the next quarter, LMG will focus its support and assistance on the licitation of health services providers for 2015 using a results-based financing model, and work with the MOH to ensure actions are taken into account to avoid delays in contract signature and disbursements, so that services can be delivered to key populations without interruptions.

Annex 1: Performance Monitoring Plan (PMP)

Honduras LMG Project

LMG Honduras Project Goal: Provide technical assistance to the Ministry of Health (MOH) and local NGOs in organizational capacity building to provide HIV/AIDS education and prevention services to key populations.								
No.	**Indicators**	**Goal Oct 1, 2013 – Sept. 30, 2014**		**Goal reached October 1, 2013 – Sept.30, 2014**		**Average reached**	**Source (s)**	**Frequency**
P.11.1.D	Number of individuals who received Testing and Counseling (T&C) services for HIV and received their test results.	Male:		Male:	7,043	**108%**	NGO monthly reports & quarterly reports	Annual
		Female:		Female:	8,183			
		(‹15 years):		(‹15 years):	30			
		(15 + years):	**14,141**	(15 + years):	15,196			
		Positive:		Positive:	31			
		Negative:		Negative:	15,195			
		MSM:	2,789	MSM:	1,673			
		CSW:	5,024	CSW:	3,756			
		Garífunas:	6,328	Garífunas:	6,802			
		Other indirect groups:		Other indirect groups:	2,995			
		Couples:		Couples:				
		TOTAL:	**14,141**	**TOTAL:**	**15,226**			I
P.8.3.D	Number of key populations reached with individual and/or small group level HIV preventive interventions that are based on evidence and/or meet the minimum Standards required	Male:		Male:		**113%**	NGO monthly reports & quarterly reports	Annual
		Female:		Female:				
		MSM:		MSM:	1,631			
		CSW:		CSW:	2,785			
		TOTAL:	**3,913**	**TOTAL:**	**4,416**			

LMG Honduras Project Goal: Provide technical assistance to the Ministry of Health (MOH) and local NGOs in organizational capacity building to provide HIV/AIDS education and prevention services to key populations.								
No.	**Indicators**	**Goal Oct 1, 2013 – Sept. 30, 2014**		**Goal reached October 1, 2013 – Sept.30, 2014**		**Average reached**	**Source (s)**	**Frequency**
P.8.1.D	Number and percentage of each priority population who completed a standardized HIV prevention intervention including the specified minimum components during the reporting period	Male :		Male :	2,080	**114%**	NGO monthly reports & quarterly reports	
		Female		Female	2,996			
		(‹15 years):		(‹15 years):	1,654			
		(15 + years):		(15 + years):	3,422			
		Garifunas :		Garifunas :	5,006			
		Other indirect groups:		Other indirect groups:	70			
		TOTAL	**4,447**	**TOTAL**	**5,076**			

LMG Honduras Project Goal: Provide technical assistance to the Ministry of Health (MOH) and local NGOs in organizational capacity building to provide HIV/AIDS education and prevention services to key populations.							
Result 1: Organizational capacity developed within the MOH to establish and carry out effective funding mechanisms, management and stewardship of HIV prevention services by local non-governmental organizations (NGOs).							
No.	**Indicators**	**Baseline**		**Source (s)**	**Goal Oct 1, 2013 - Sept. 30, 2014**	**Frequency**	**Goal reached Oct 1, 2013 – Sept. 30, 2014**
		Value	**Year**				
1.	Proportion of NGO contracts managed in compliance with MOH policies, protocols, and guidance for contracting, as measured through the following areas in the past 12 months:	N/A	2013	UAFCE reports DGD reports	100%	Annual	75%
	○ Bidding process based on results				100%		100%
	○ Monthly financial reviews based on results				100%		100%
	○ Semi-annual results-focused technical audits				100%		0
	○ NGO approvals for results-based reimbursements				100%		100%

LMG Honduras Project Goal: Provide technical assistance to the Ministry of Health (MOH) and local NGOs in organizational capacity building to provide HIV/AIDS education and prevention services to key populations.							
Result 1: Organizational capacity developed within the MOH to establish and carry out effective funding mechanisms, management and stewardship of HIV prevention services by local non-governmental organizations (NGOs).							
No.	**Indicators**	**Baseline**		**Source (s)**	**Goal Oct 1, 2013 - Sept. 30, 2014**	**Frequency**	**Goal reached Oct 1, 2013 – Sept. 30, 2014**
		Value	**Year**				
1.1.	Proportion of technical and financial proposals based on results that have been reviewed and negotiated by the MOH in the past 6 months as part of the competitive bidding process.[4]			UAFCE reports	14	Annual	100%
1.2.	Percent of NGOs with approved contracts that have undergone monthly financial reviews by the MOH within the past 3 months.[5]			UAFCE reports	9	Monthly	100%
1.3.	Percent of NGOs with approved contracts that have undergone semi-annual results-focused technical audits by the MOH within the past 6 months.			UGD reports	8	Annual	0%
1.4.	Percent of financial advance requests and liquidations received from contracted NGOs in the past three months that have been reviewed and processed by the MOH.			UAFCE Report	64	Monthly	100%

[4] This indicator will capture the entire bidding process from the design and distribution of the terms of reference per key population to having reviewed, negotiated and approved the new results-based contracts.

[5] This indicator will also capture the development and distribution of the NGO Administrative and Financial Procedure Manual based on the results-based model.

LMG Honduras Project Goal: Provide technical assistance to the Ministry of Health (MOH) and local NGOs in organizational capacity building to provide HIV/AIDS education and prevention services to key populations.							
Result 2: Organizational capacity developed within local NGOs to support the implementation of evidence-based, quality HIV prevention services for key populations in compliance with the new MOH funding mechanisms.							
No.	**Indicators**	**Baseline**		**Sources (s)**	**Goal March 1, 2013 - Sept. 30, 2013**	**Frequencies**	**Goal reached March 1, 2013 - Sept. 30, 2013**
		Value	**Year**				
2.	Proportion of NGOs that comply with financial and technical regulations, measured by:	N/A	2013	NGOs' Management projects reports	100%	Annual	100%
	• Percentage of funds executed quarterly by the NGOs (financial regulation)				100%		100%
	• Percentage of the NGO project targets achieved quarterly (technical regulation)				100%		100%
2.1.	Percentage of funds executed quarterly by contracted NGOs.			UAFCE Report	8	Monthly	100%
2.2.	Percentage of the NGO project targets achieved in the past 3 months.			DGD Report	8	Monthly	100%

LEADERSHIP, MANAGEMENT & GOVERNANCE PROJECT

HONDURAS

SUMMARY REPORT ON IMPLEMENTATION OF TECHNICAL ASSISTANCE PLANS

OCTOBER 2013 - SEPTEMBER 2014

October 10, 2014

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I. INTRODUCTION

In 2013, the LMG project performed an initial evaluation through a SWOT (Strengths, Weaknesses, Opportunities and Threats) analysis, which allowed us to identify the technical assistance needs of the Unit for Decentralized Management, the Unit for External Cooperation Funds Management, Regional Health Offices and Non-Governmental Organizations.

As a result, technical assistance plans were drawn up in order to strengthen the weaknesses found in the various agencies with which LMG has a relationship, which is the reason for submitting a summary of the actions conducted over the 2013-2014 period.

II. SUMMARY OF IMPLEMENTATION OF TECHNICAL ASSISTANCE PLANS

From October 1, 2013 to September 30, 2014

2.1 SUMMARY OF IMPLEMENTATION OF TECHNICAL ASSISTANCE PLANS FOR DGD

Weaknesses Identified	Expected Result	Activities Proposed	Carried Out	Comments
1. There is no clarity regarding the conceptual framework of results-based management - RBM - in relation to the contracting of NGOs.	1. The DGD's technical team assigned to manage NGO contracts is clear on the results-based management model for HIV projects.	1.1 Results-based management workshop for HIV projects.	No.	This workshop will be held in coordination with AIDSTAR-Plus according to its annual planning, at the request of USAID.
		1.2. LMG will provide ongoing guidance to DGD in order to monitor process management, including: • Bidding processes: development of ToRs, technical reviews of pre-selected project proposals and improvement thereof • Monthly technical closings • Technical and administrative guidelines workshop for NGOs and RHOs. • Guidelines for the development of educational and promotional materials	• A meeting was held to share the processes for developing educational and promotional materials with the technician from DGD. • Field visits were conducted jointly with DGD to support Health Office technicians during monthly technical closing processes in 6 regional health offices. • Technical assistance was provided to UAFCE and DGD to develop ToRs for hidden populations, with representatives from UECF (Eduardo Teruel), NETWORKS (Dr. Norma Artiles) and DGD (Dr. Xioleth Rodriguez). • Together with DGD, the project participated in 5 meetings to review the projects' technical proposals, as well as coordinated the meeting to plan the workshop with NGOs to improve the technical proposals received during the December 2013 bidding process. • The workshop to improve the NGOs' proposals was held in conjunction with DGD. As a result 6 projects were completed, and subsequently COCSIDA received technical support for technical and financial	

Weaknesses Identified	Expected Result	Activities Proposed	Carried Out	Comments
			improvements to the two projects it submitted. (8 contracts signed between the MOH - NGOs). • 4 sessions were held with DGD to organize and prepare the technical and financial guidelines workshop for NGOs and Offices. • TA was provided during the development of the technical and financial guidelines workshop.	
2. There is no processes and procedures manual to facilitate the management of NGO contracts.	2. DGD has a systematic process of NGO contracts management processes.	2.1. Hold a meeting with representatives of DGD, NETWORKS and LMG to systematize NGO management processes.	A draft of the technical procedures manual has been drawn up, for which a compilation of information regarding processes was performed, as well as consultations with the national laboratory and of experiences in technical management of projects in recent years.	
		2.2. Have the final document and submit to NETWORKS and USAID for review and approval.	No.	Review by counterparts is still pending. This activity will be completed in the first quarter of year 3 of the project.
3. There is no information system or dashboards to monitor the project	3. An effective information system which allows DGD to identify progress and delays in project implementation, AOP unit for timely decision-making.	3.1 Develop a monitoring chart that reflects technical and financial implementation of NGO contracts.	LMG's Monitoring and Evaluation Advisor provided technical assistance to DGD to enable them to make their monthly presentations based on PEPFAR indicators, targets, monthly achievements, and corrective measures in cases involving delays in project implementation with NGOs.	
4. There are no validated monitoring, supervision and	4. DGD has the tools to perform technical audits and to monitor	4.1. Design and/or upgrade monitoring tools to monitor and perform technical audits to NGOs, as well as to determine the	LMG's Monitoring and Evaluation Advisor drew up the manual for conducting technical audits, which in addition modified the tools to be used to conduct the audits, including: satisfaction surveys	

Weaknesses Identified	Expected Result	Activities Proposed	Carried Out	Comments
evaluation tools for managing results-based management agreements.	results-based management projects.	processes for conducting technical audits.	to rapid test users, satisfaction surveys to mentoring leaders, satisfaction surveys to theater leaders, checklist of plays, rapid test checklist, and process quality verification checklist, among others (technical audit manual)	
5. There is no experience in the implementation of the gender-based violence theme in any of the agencies involved.	5. DGD technicians receive gender violence prevention training provided at NGOs.	5.1. Develop a gender violence prevention workshop.	The gender violence prevention workshop was developed and a DGD technician was invited to attend.	
Other activities to consider				
1. DGD does not know the education methodologies implemented by NGOs.	1. DGD knows the education methodologies implemented by NGOs.	1. Develop a workshop on the education methodologies implemented by NGOs.	During the technical and administrative guidelines workshop, the LMG organized an education methodologies fair where NGOs presented the methodologies that they are currently implementing in projects. The fair was attended by 60 people, including representatives from DGD, UAFCE, NETWORKS, the Quality Assurance Department, the STI/HIV/AIDS Department and AIDSTAR-Plus. Two DGD technicians were trained on the *Amigos Educando Amigos* (Friends Training Friends) education methodology and the Educational Forum Video.	
2. Quarterly reporting to USAID needs to	2. DGD submits quarterly reports according to guidelines	2. Technical assistance to prepare the quarterly reports submitted to USAID.	Each quarter, LMG has held a meeting with the NETWORKS focal point, representatives from the STI/HIV Department, the national laboratory and DGD, where it has provided TA for the	.

Weaknesses Identified	Expected Result	Activities Proposed	Carried Out	Comments
improve in time and form.	required by USAID.		preparation of the quarterly report to be submitted to USAID and TA for the presentation at the partners meeting.	
3. DGD's technical section lacks experience in UAFCE-led bidding processes for the provision of promotion and STI/HIV/AIDS prevention services to MARPs through non-public organizations.	3. DGD, in conjunction with UAFCE, fulfill established bidding procedures.	3.Technical assistance to DGD in their part of the bidding processes (development of ToRs, technical assessment of proposals, improvements to proposals).	Technical assistance was provided throughout the entire bidding process conducted in December 2013 - from the development of the ToRs to the signing of 8 management agreements - for the hidden populations project and for training on the Friends Educating Friends methodologies to consultants hired to develop the pilot project with MSM in Roatán, La Ceiba and Garífuna communities.	

2.2 SUMMARY OF IMPLEMENTATION OF TECHNICAL ASSISTANCE PLANS FOR UAFCE

Weaknesses Identified	Expected Result	Activities Proposed	Carried Out	Comments
1. Processes with and contracting of NGOs for the provision of HIV service are not systematized.	2. UAFCE has systematized the processes and procedures for contracting NGOs.	1.1 Conduct work sessions to systematize the processes for contracting non-public managers. (including Tools).	There is a draft of the contracting manual, for which two review meetings were held with UAFCE, DGD, the STI/HIV Department and LMG.	
		1.2. Conduct a session to socialize processes for selection and contracting of NGOs (including tools), with NETWORKS (RHOs and USAID).	No.	This will be conducted once the manual is approved.
		1.3. Develop the process guide to request and expend funds according to USAID guidelines.	USAID conducted an orientation session to UAFCE technicians on how to request and expend funds, where LMG's financial representative participated as well. UAFCE is expected to incorporate these guidelines into the internal control manual.	
2. There are no dashboards that allow identifying warning signs for timely decision making.	3. An effective dashboard-type information system that enables UECF to make timely decisions.	2.1 Create an information gathering system through dashboards to strategically monitor the AOP's financial performance.	As per the suggestion of USAID, dashboards were not used. They instead received technical assistance so that in monthly meetings they could present charts that reflected disbursements, expenditures to date and percentages of implementation. Over the first three quarters they received guidance to review presentations, and they are currently doing so without technical advice.	
		2.2 Induction session on using dashboards to manage NGO contracts.		
		2.3. Dashboard implementation and maintenance.		
3. There is no administrative manual for NGOs on result-based management.	3. UAFCE has an administrative manual for NGOs.	3.1. Conduct work meetings to update the administrative manual for managing contracts with NGOs.	The existing administrative manual was reviewed and updated together with staff from UAFCE's Finance Department. The following formats were updated: payment requests, performance reporting, expenditures by check, expenditures by item, banking transactions and travel expense vouchers. The manual has been completed.	
		3.2. Develop administrative formats to expend funds from results-based management projects so that these are used by NGOs.		

Weaknesses Identified	Expected Result	Activities Proposed	Carried Out	Comments
		3.3. Conduct an induction session with UAFCE staff to socialize the updated manual.	• The manual was updated together with UAFCE administrative staff, so an induction was not necessary since all participated in the manual's updating process.	
		3.4. Support UAFCE in preparing and developing the technical and administrative guidelines workshop with NGOs.	• UAFCE received technical assistance to prepare the presentation on administrative guidelines that took place during the technical and administrative guidelines workshop. • During the technical and administrative guidelines workshop, UAFCE, with support from LMG-H, provided feedback to each NGO regarding errors found in financial statements submitted.	
4. There are no electronic backups or copies of the changes being made to implementation letters.	4. Every amendment made to the implementation letters on file and deliver, on time, financial performance reports to USAID.	4.1. Provide technical support to UAFCE in the preparation of periodic meetings for the financial REPORT on USAID implementation letters.	• Prior to each monitoring meeting, LMG-H has provided guidance to UAFCE's finance department to prepare the financial statements and monthly presentation.	
		4.2. Provide technical support to prepare quarterly financial reports.	TA was provided each quarter to prepare the financial report and the presentation at the partners meeting.	
Other activities				
1. Lack of experience reviewing financial statements submitted by NGOs.	1. Finance department staff review statements submitted by NGOs in due time and form.	1.1 Guidance sessions to UAFCE to strengthen the capacity to review monthly financial statements with NGOs.	Due to personnel changes at UAFCE, it was necessary to support the administrative area in the process to review the statements of contracts ending in December which had not yet been reviewed.	
2. Lack of experience within UAFCE to conduct bidding processes for the provision of promotion and STI/HIV/AIDS prevention	2. UAFCE conducts bidding processes in due time and form.	2.1 Advise UAFCE, with participation from DGD, on processes regarding bidding, contracting, negotiating financial-technical proposals from NGOs.	Support was provided throughout the entire process of bidding, contracting and reviewing financial and technical proposals for 2014. 8 agreements with NGOs were signed as a result.	

Weaknesses Identified	Expected Result	Activities Proposed	Carried Out	Comments
services for MARPs through non-public organizations.				
3. There is no experience of financial field audits in NGOs.	3. Personnel trained in conducting financial field audits.	3.1 Support the design of tools to conduct financial audits of projects.	UAFCE decided to conduct field visits to each NGO to verify financial transactions, using the current financial control formats.	
		3.2 Training to UAFCE technicians on conducting financial audits of results-based management projects.	Training was not provided given that UAFCE decided to do it in this way.	
4. UAFCE administrative staff is unaware of the STI/HIV prevention methodologies that NGOs implement with MARPs.	4. UAFCE staff is involved in training to NGOs.	4.1 Involve UAFCE staff in the Education Methodologies workshops that will be provided to NGOs.	An education methodology fair was organized within the context of the technical and administrative guidelines workshop, which was attended by UAFCE's focal point. Two UAFCE representatives participated in the Friends Educating Friends and Educational Forum Video education methodologies workshop.	

2.3 SUMMARY OF IMPLEMENTATION OF TECHNICAL ASSISTANCE PLANS FOR THE REGIONAL HEALTH OFFICES

Weaknesses Identified	Expected Result	Activities Proposed	Carried Out	Comments
1. There is neither the funding nor the logistics to perform monthly technical closings and to monitor NGOs at the local level.	1. Management control technicians have the funding to travel to NGOs to perform monthly technical closings and to monitor activities.	1.1. Make arrangements with DGD/UAFCE to ensure that technicians from integrated networks have the funds to travel to NGOs to perform the monthly technical closings and monitoring.	At the request of USAID, this was solved by incorporating expenses related to technical closings in the RHOs' AOPs. LMG's Senior Finance and Operations Officer provided support to UAFCE in the modification of the RHOs' AOPs.	
2. Lack of knowledge regarding the peer methodology and the innovative methodologies that should be used by NGOs.	2. Network technicians assigned to an NGO know the peer methodologies and the education methodologies implemented by that NGO.	2.1. Training to network technicians through an education methodologies workshop.	An education methodologies fair was organized within the context of the technical and administrative guidelines workshop. NGOs presented the methodologies and 12 regional representatives learned about 9 education methodologies. A workshop was developed with representatives from all 6 health offices, where they were trained in the Friends Educating Friends and Educational Forum Video methodologies.	
3. Technicians from the integrated networks do not know the criteria used to select and contract NGOs	3. Increase the office's awareness of the contracts and negotiation of approved project proposals, and know the NGO's profile.	3.1.Make arrangements with UAFCE to involve the technicians from integrated networks in the processes to select technical proposals by NGOs.	A topic brought to the DGD discussion table was the importance of incorporating health offices in proposal selection and review processes and in the latest bidding process (Dec 2013). We achieved the participation of the Atlántida, Cortés, Tegucigalpa and Islas de la Bahia Offices, which participated as internal committee members. (SPS and Colón were invited but did not attend).	
		3.2. Conduct a work session with technicians from integrated networks to analyze results-based management agreements between	Agreements and proposals were discussed in conjunction with NGOs, which was included as part of the technical and administrative guidelines workshop agenda	

Weaknesses Identified	Expected Result	Activities Proposed	Carried Out	Comments
		the MOH and the NGO, as well as the technical proposals from NGOs in the Office's area of influence		
4. There are no defined processes or tools to conduct the monthly technical closings	4. Network technicians have a systematic process to conduct monitoring and monthly technical closings	4.1 Develop a manual that describes the steps to follow for monthly technical closings and visits to monitor NGO activities.	A draft of the technical procedures manual has been drawn up, for which a compilation of information regarding processes was performed, as well as consultations with the national laboratory and of experiences in technical management of projects in recent years.	
		4.2. Conduct a work session with network technicians for the final presentation of the manual's content	NO	This will be done once we have the final document in the first semester of year 3.
5.Offices have at least one person trained to perform monthly technical closings.	5. Increase Train human resources staff in the office to perform technical closings and monitor NGO activities.	5.1. Conduct a training session on technical closings and project monitoring to technicians from integrated networks.	Below are the number of technicians trained to perform monthly technical closings: • Cortés RHOs have 2 trained technicians to perform technical closings. • The TGU metropolitan area has 3 trained technicians • The Islas de la Bahía RHO has 2 trained technicians • The SPS metropolitan area has 3 trained technicians (one of them is the head of integrated networks) • The Colón RHO has 2 trained technicians • The Atlántida Office has 3 trained technicians Total: 15	
		5.2 Provide support to network technicians during their visits to perform monthly technical closings and to monitor project activities.	Guidance has been provided to all 6 Regional Health Offices for their monthly technical closings with NGOs.	
6. The RHO team is not trained in gender and gender-based violence issues to enable it to work with at-	6. Technicians from integrated networks understand and become familiar with gender and gender-based violence issues.	6.1 Develop a gender-based violence prevention workshop.	The gender-based violence prevention workshop was developed and attended by representatives from the following Offices: • TGU metropolitan area: 2 technicians. • Cortes RHO: 1 technician • Colón RHO: 2 technicians • Atlántida RHO:2 technicians • Islas de la Bahía RHO: 1 technician	

Weaknesses Identified	Expected Result	Activities Proposed	Carried Out	Comments
risk groups and thus support, evaluate and monitor the NGO.			• SPS metropolitan area: 1 technician	
Other activities				
1. Health Office technicians possess no knowledge on results-based management	1. RHO technicians learn results-based management	1.1. Train RHO technicians through a results-based management workshop.	No.	As per USAID instructions, AIDSTAR-Plus will provide this training according to their planning.

2.4 SUMMARY OF IMPLEMENTATION OF TECHNICAL ASSISTANCE PLANS FOR NGOs

Weaknesses Identified	Expected Result	Activities Proposed	Carried Out	Comments
1. It is necessary to know more education methodologies for the approach to the Garífuna /MSM/FSW population.	1. Technical teams improve their skills and knowledge of education methodologies framed within the trans-theoretical behavior change model to approach the Garífuna/MSM/FSW population	1.1. Develop an education methodologies workshop for project technical teams to address STI/HIV issues for Garífuna/MSM/FSW populations. 1.2. Develop a workshop on basic guidelines for developing education plans which include means of verification as well as the drafting of BCC reports 1.3 After the workshop, provide technical assistance to the technical team in the process to develop education plans.	A session has been held with AJEM on guidelines for developing education plans. A training session was conducted with the technical team from CASM Colón and the Breastfeeding League, COCSIDA Roatán and AJEM on education methodologies framed within the trans-theoretical behavior change model, basic STI/HIV concepts and training plans. They have received virtual technical assistance in the drawing up of training plans - both in terms of reviewing the plans and providing feedback on them - and to clear up any doubts regarding the topics to be addressed with the target population. Some NGOs, such as COCSIDA Roatán, CASM Colón and ECOSALUD, are strengthened internally during their team meetings by discussing the topics to be addressed in trainings provided to target populations. A training session was held with the technical team from the Breastfeeding League on education plan development. Technical assistance to training plans has been provided according to the NGOs' spontaneous demand, and are the plans that they use for training to target populations.	
2. NGOs have limited capacity to prepare project proposals. There are not enough human resources	2. NGOs have human resources trained to prepare project proposals and submit better proposals when entering into bidding processes.	2.1 Develop a project proposal preparation workshop.	A workshop was held with coordinators and managers from the 8 projects shortlisted in the December 2013 bidding process. As a result, agreements were signed with the 8 improved projects. 2 NGOs which conducted rapid response projects with the MSM population in November and December 2013 received assistance to improve their proposals.	
		2.2 Develop a workshop on the results-based management theme	No.	This workshop will be organized by AIDSTAR-Plus based on its planning, as per the suggestion of USAID.

Weaknesses Identified	Expected Result	Activities Proposed	Carried Out	Comments
trained in this field		according to USAID guidelines for HIV projects		
3. There is no coordination to refer cases involving gender-based violence	3. Effective coordination between the NGO and with institutions providing assistance to victims of gender-based violence.	3.1 Develop a gender-based violence prevention workshop, which will produce a training plan to develop the issue with target populations, as well as a referral plan.	The workshop was developed, and was attended by technical teams from all 8 projects: • PRODIM: 4 technicians • CASM Colón: 5 technicians • CASM Cortés: 4 technicians • AJEM: 5 technicians • Breastfeeding League: 3 technicians • COCSIDA Tela: 3 technicians • COCSIDA Roatán: 3 technicians • ECOSALUD: 5 technicians NGOs drew up the training plans and their referral plans. The implementation of referral plans has been monitored, and the three FSW projects have made referrals. Response from institutions has been favorable due to the coordination that the NGO established with them. Other NGOs were invited to the workshop. These do not have agreements with the MOH, among them ASHONPLAFA, FUNDACRESH, AMA, APUVIMEH, COZUMEL Trans, but they do have experience working with MARPs.	
2. NGOs are not properly settling monthly expenses and statements are not being submitted on time.	4. NGO administrative staffs manage project accounts with transparency and submit monthly statements by the specified due dates.	4.1 Through field visits, provide technical assistance to administrative staffs to settle expenses according to the MOH's administrative manual and to submit financial reports by the dates specified in the agreements.	Following the technical and financial guidelines workshop, ongoing financial technical assistance in the field has been provided to 7 projects through LMG's financial officer in the field.	
		4.2 Develop a transparency and accountability workshop for NGO directors, coordinators and managers.	During this period priority has been given to developing continuous quality improvement plans and gender referral plans. The issue of governance has been left for the 2014-2015 period in order to address it holistically.	This activity has been outlined in the 2014 -2015 work plan.

Weaknesses Identified	Expected Result	Activities Proposed	Carried Out	Comments
OTHER ACTIVITIES				
1. NGOs must meet the minimum standards to provide rapid HIV testing with counseling service.	1. NGOs provide HIV rapid testing with counseling services before and after testing, meeting minimum standards of service.	1. Through field visits, provide technical assistance to NGOs to meet the minimum standards to provide counseling and rapid HIV tests.	• Communication has been ongoing with project coordinators so that they keep updated environmental mitigation plans, rapid testing service promotion plans, records of daily temperature controls, mapping of areas reached with rapid testing, sterilization records and contaminated waste incineration. • With AJEM, the project reviewed the technical guidelines for the rapid testing service. The project has provided guidance on the adaptation of the physical space for the rapid HIV testing service. • An exchange of experience between PRODIM and AJEM was held to share experiences/basic tips to consider for the rapid testing service. • A field visit was conducted to an AJEM rapid testing brigade, providing them with basic recommendations on how to improve the service (privacy, biosecurity). • Brigades from 6 projects - COCSIDA Tela, ECOSALUD, COCSIDA Roatán, AJEM, CASM Cortés, Breastfeeding League - were monitored, providing them with feedback to improve the service. • CASM Colón received support, providing them with guidance for the emergency plan to recover rapid testing targets, and also providing support in arrangements to update the technical staff's knowledge on the rapid HIV testing technique.	
2. NGOs display weaknesses in the technical and administrative implementation of their projects	2. NGOs provide quality services to the target population	2. Information and motivation workshop to the team on the continuous quality improvement process so that they can draw up their own plan	This workshop was provided by AIDSTAR-Plus, which was attended by all coordinators from 7 projects (except AJEM). The workshop was also replicated in each project team during August and September. One of the workshop's outputs was that the projects drew up their continuous quality improvement plans, for which LMG provided technical assistance. Each project has a continuous improvement plan (8 continuous improvement plans).	