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# AIDS CAPACITY ENHANCEMENT (ACE) PROJECT

QUARTERLY REPORT (APRIL–JUNE 2007)

**16 July 2007**

This publication was produced for review by the United States Agency for International Development. It was prepared by Chemonics International Inc.

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**Contract No. GHS-1-00-03-00025  
Task Order 345**

The views expressed by the author do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

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## LIST OF ACRONYMS

ACE	AIDS Capacity Enhancement
ART	Antiretroviral Treatment
BCC	Behavior change communication
CDC	Centers for Disease Control and Prevention
FBOs	Faith-based Organizations
GFATM	Global Fund to Fight AIDS, Tuberculosis, and Malaria
HAU	Hospice Africa Uganda
HMIS	Health Management Information Systems
HR	Human Resources
ICT	Information Communication Technology
IPs	Implementing Partners
IRCU	Inter-religious Council of Uganda
JCRC	Joint Clinical Research Centre
LAN	Local area network
M&E	Monitoring and Evaluation
MIS	Management Information Systems
MoH-RC	Ministry of Health Resource Centre
MPs	Members of Parliament
NSP	National Strategic Plan
OD	Organizational Development
OVC	Orphans and Vulnerable Children
PC	Partnership Committee
PEPFAR	President's Emergency Plan for AIDS Relief
PMMP	Performance Measurement and Management Plan
RCB	Religious coordinating bodies
TREAT	Timetable for Regional Expansion of Antiretroviral Therapy
TRG	Training Resources Group
UAC	Uganda AIDS Commission
USG	United States Government



## EXECUTIVE SUMMARY

In this report, ACE presents a series of dynamic activities that have been undertaken this quarter with partner organizations: Uganda AIDS Commission, Ministry of Health, Inter-religious Council of Uganda, Joint Clinical Research Centre, and Hospice Africa-Uganda.

In order to heighten the role of UAC's national HIV/AIDS coordinating body, ACE has in this quarter been particularly instrumental in the development of country wide frameworks for HIV/AIDS interventions, namely the National Strategic Plan for HIV/AIDS (NSP) and the Performance Measurement and Management Plan (PMMP) for the NSP

This quarter has been characterized by the testing and actual use of various systems that have been developed in the organizations. There is no doubt that the newly tested Navision Financial Systems have brought much relief to organizations that are excited about the prospect of quick and timely reporting.

In the continued development of functional M&E systems ACE has tested reporting tools that have been previously developed. Partner organizations have indeed begun to use these tools for generating reports.

The Ministry of Health Resource Centre has cause to celebrate as all ICT systems installation has been completed and rolling out of the web enabled system to the districts is planned.

To ensure that these systems are fully supported, ACE is initiating activities to look at organizational structures and help organizations align their resources to the newly developed systems. In so doing, Ace will continuously adapt capacity building activities to the needs of the organizations.

## PROJECT SUMMARY

The AIDS Capacity Enhancement project was designed to provide strategic capacity building and technical assistance to targeted Ugandan institutions for improved and sustainable program outcomes in regard to HIV/AIDS prevention, care, and treatment.

ACE's partner institutions include the Uganda AIDS Commission (UAC), the Inter-religious Council of Uganda (IRCU), and its sub-grantees, the Ministry of Health Resource Centre (MoH-RC), the Joint Clinical Research Centre (JCRC), and Hospice Africa Uganda (HAU).

The project provides tailored technical assistance to the institutions in five broad thematic areas: organizational development, monitoring and evaluation, health management and information systems (HMIS), finance systems, and communications.

By supporting these institutions as they improve their organizational structures and service provision capabilities, the project aims to improve the planning, implementation, and monitoring of the nationwide HIV/AIDS program through support for the achievement of the “three ones”—one national coordinating body for HIV/AIDS, one monitoring and evaluation framework, and one national strategic plan (NSP) for HIV/AIDS.

Additionally, the project provides facilitation and coordination of the U.S. Government (USG) President's Emergency Plan for AIDS Relief (PEPFAR) Team in its efforts to plan, coordinate, and manage its HIV/AIDS program in Uganda.

## ACCOMPLISHMENTS BY DELIVERABLE

### A. Strengthened Capacity of the Uganda AIDS Commission

#### Summary of Activities and Accomplishments

In this quarter, ACE has focused on the development of the Performance Measurement and Management Plan (PMMP) and an Operational Manual for the National Strategic Plan (NSP) 2007/08–2011/12. Specifically, ACE supported a consultancy that developed the PMMP describing its objectives, procedures, and indicators in close collaboration with a core team of the National M&E Subcommittee. The draft PMMP has been so far shared and discussed by the M&E Sub-subcommittee, and is now due for presentation to the Partnership Committee for comments and finalization. The PMMP formed the basis of the development of an M&E handbook that is intended to describe the operationalization procedures of the National PMMP. In the next quarter (July–September), ACE will provide technical guidance in the dissemination of the final national PMMP and handbook.

*Strengthened capacity to manage Global Fund grants:* During May–June 2007, ACE assisted UAC in developing a Global Fund for HIV/AIDS proposal for Round Seven.

ACE consultant Jawara Lumumba worked closely with UAC staff and the Partnership Committee in finalizing the proposal process and the implementation of the Long-term Institutional Arrangements. During May, ACE facilitated a special satellite session for a delegation of local governments/districts during the 5<sup>th</sup> Annual Partnership Forum dedicated to developing proposals for Global Fund Round Seven. The major focus of the satellite meeting was to help local government members polish their concept papers in readiness for submission to UAC and subsequent integration into the country's proposal for GFATM Round Seven.

ACE supported two out of a team of five consultants who reviewed 576 concept papers from HIV/AIDS service organizations and used them in developing one HIV/AIDS proposal for submission to the Global Fund. The draft proposal was later reviewed by the Partnership Committee and adopted by the Country Coordinating Mechanism (CCM) before final submission to the Global Fund.

*National comprehensive communication strategy (NCCS):* During April–May 2007, ACE supported and facilitated UAC in selecting and contracting a communication consulting firm to support the development of a national HIV/AIDS comprehensive communication strategy. The consultants submitted an inception report in June, and it was reviewed by the Prevention Committee. ACE expects the assignment to be complete by August 2007.

*PEPFAR:* During the past quarter, ACE continued providing support to the PEPFAR secretariat, including organizing and supporting the PEPFAR Uganda Stakeholders Consultation in Munyonyo. ACE also supplied a laptop computer to the UAC's PEPFAR Secretariat. In addition, ACE facilitated the travel of three delegates to the PEPFAR annual conference held in June in Kigali, Rwanda. These included Dr. Kihumuro Apuli, Director General UAC; Edward Were, Data Manager UAC; and Anne Akia Fiedler, COP ACE Project.

*Hiring of the M&E Coordinator:* UAC recruited a new M&E Coordinator to replace the previous person supported by ACE. ACE agreed to provide some funding during the next six months to the position and will work closely with the new candidate to mentor him in supporting M&E at UAC.

#### Issues encountered and recommendations for resolution

- The NSP writing process has not been finalized, yet it determines the pace of all related activities at UAC. The NSP document has been largely in draft form in the first and second quarters of 2007. The PMMP will be ready as soon as the NSP is finalized in August 2007.
- While ACE is financially supporting the development of the NCCS, UAC has determined that there are additional tasks to be undertaken in this assignment, which ACE cannot cover within the budget at this time. UAC will have to find other sources of funding in order to complete this assignment.

#### Activities Planned for the Next Quarter (July –September):

- Assist UAC to finalize the writing of the PMMP
- Assist UAC to disseminate and operationalize the PMMP
- Provide technical and financial support to the M&E coordinator
- Provide M&E technical guidance to the UAC/Global Fund programs
- Assist UAC to finalize the NCCS

### **B. Strengthen the Capacity of the Inter-religious Council of Uganda (IRCU)**

#### Summary of Activities and Accomplishments

*Review roles and responsibilities of the Council of Presidents (COP) and the Executive Board (EB) and its committees:* During May, the ACE team started assisting the IRCU in reviewing the roles and responsibilities of the Council of Presidents and the Executive Board and its committees, with the aim of enabling them to participate more effectively in the governance and management of IRCU. Jawara Lumumba interviewed a sample of Executive Board members, COP, and the IRCU Secretary General to build an understanding and framework for their ideas about the governance of IRCU. ACE will assist IRCU to organize a two-day retreat in September for the Council of Presidents, Executive Board, and committee members to reflect as a team on their roles and responsibilities. ACE will subsequently provide the required TA to operationalize the functioning of the EB and its committees.

*Support IRCU in the installation and implementation of Navision:* In the second quarter, ACE helped IRCU to install Microsoft Dynamics Navision, a more robust and effective accounting system. The new system enables IRCU to handle the general ledger, purchases and payables, inventory, fixed assets, human resource, and payroll under one integrated system, thus eliminating duplication of data entry and increasing workforce efficiencies. In the same quarter, ACE supervised the Navision provider, Akiliafrica, in training users in the operation of the new system. IRCU will be ready to go live on the new system at the beginning of July.

*Provide financial and grants management Technical Assistance to IRCU:* In April, ACE assisted IRCU to finalize the 2007 annual budget and the related budget notes before USAID approved the budget in May. In May and June, ACE assisted IRCU in the refinement proposals, budgets, budget notes, and grant agreements for 20 grantees in HIV/AIDS prevention. IRCU submitted the grant agreements to USAID at the end of June for final approval. ACE staff has been consulting with the IRCU Finance and Administration Manager on the quality of financial reports received from grantees so that ACE can develop appropriate training materials in financial management.

*Assist IRCU to compile comprehensive operations manual:* In May, with support from local consultants, Mr. Kibuuka assisted IRCU to compile all its management and governance tools into an operations manual. The purpose of the manual is to articulate in

one document all procedures that ensure a strong management and internal control system for proper direction of IRCU. The manual contains eight chapters: Institutional Framework, Governance and Management, Human Resource Management, Finance Management, Grants Management, M&E, Proposed Policies on ICT, and Communication. Starting in the third quarter, ACE will assist IRCU to apply the operations manual, especially during the induction and orientation of the new staff members whom IRCU is currently recruiting.

*Assist IRCU in the development and use of data collection tools, reporting formats, and databases:* In April and May, ACE supported IRCU in development of data collection tools, user manuals, and databases in the OVC area. ACE also conducted training in the use of the data collection tools and databases for IRCU and RCB staff. The training not only enabled IRCU and RCB staff to participate in the development of the tool and User/Training Manual, but also enhanced their ability to facilitate data collection training for the 44 grantees that ACE subsequently assisted to conduct in May. A total of 99 participants from the 44 grantees attended the training.

Throughout the quarter, ACE continued to provide technical support to RCBs and grantees in the pre-testing of data collection tools. The support enabled the grantees to improve on the timeliness and accuracy of the data they submit to IRCU.

*Assist IRCU to establish an effective MIS:* During the reporting period, ACE assisted IRCU in procuring software and hardware for the SQL servers. The servers will host the Microsoft Dynamics Navision as well as the databases for the HIV/AIDS program, namely palliative care, ART, OVC, and prevention. From July through August, ACE will assist IRCU to establish the LAN and create systems for administration, security, disaster recovery, and data replication. Starting in September, the ACE will assist IRCU to assess the implementation of a WAN system.

#### Activities for the Next Quarter

In the next quarter, ACE activities include:

- Conducting an orientation workshop for COP and EB
- Providing TA to operationalize the functioning of the EB and Committees
- Reviewing and revising the human resource manual, organizational structure, and job descriptions at IRCU, and helping IRCU to operationalize the new manual and structure
- Continuing to finalize data collection tools for all program areas and formalizing an M&E framework for IRCU
- Assisting IRCU to design, test, and implement the LAN and LAN servers
- Providing TA in the installment and implementation of WAN
- Strengthening the financial management functions at RCBs and IPs by improving their accounting and financial reporting; orienting grantees on the key provisions of the grant agreement between them and IRCU, supporting grantees in understanding

financial reporting formats and compiling accurate and timely quarterly and other reports

### **C. Strengthen the Capacity of the IRCU Sub-grantees**

#### Summary of Activities and Accomplishments

*Conducted an in-depth training needs assessment (TNA) of IRCU sub-grantees:* In May, ACE assisted IRCU in conducting an in-depth TNA among IRCU grantees. ACE designed the TNA tool in collaboration with the RCB staff and selected grantees. The TNA exercise was conducted in a workshop involving 50 participants drawn from facility-based and community-based IRCU grantees.

Given the wide array of IRCU sub-grantees, the in-depth TNA provided a good indication of the level and type of organizational development training and support necessary for the different categories of grantees. The TNA was also intended to develop the capacity of IRCU/RCBs to carry out participatory needs assessment in the future since TNA is not a one-off activity but a continuous process.

#### **Activities for the Next Quarter**

##### **In the next quarter, ACE activities include:**

- Using results from the TNA to develop a training plan, modules, and training of trainers program.
- Identifying trainers within IRCU and RCBs to undergo the TOT program
- Conducting training in project management and reporting
- Providing financial management Technical Assistance to RCBs and sub-grantees

### **D. Strengthen the capacity of the Ministry of Health Resource Centre**

#### Summary of Activities and Accomplishments

*Provision of local area network (LAN) equipment and installation:* During the quarter, ACE through a local firm finalized the provision of the equipment for the establishment of the LAN at the MoH-RC. All equipment has been delivered, installed, and tested. MoH now has a modern functional LAN able to support the health information systems it is using.

*Development of robust web-enabled HMIS (wHMIS) completed:* ACE, through a local consulting team, finalized the development of robust web-enabled HMIS database (wHMIS). The system has been installed on the servers on newly provided LAN, and the system is now running.

*Development of stand-alone web-enabled HMIS (sHMIS) completed.* ACE has developed a stand-alone version (sHMIS) of the wHMIS. The sHMIS is going to be installed at the districts, and it has capabilities of automatically linking with wHMIS via the Internet to populate the wHMIS. It is also possible to carry out database replication to update either sHMIS or wHMIS with the changes in either of them.

*Planning for HMIS rollout to districts ongoing:* ACE consulted with the MoH-RC on its preferred districts for rolling out Epi-Info and the wHMIS system. ACE also held consultative meetings with CDC to discuss how CDC would like to move forward in extending Epi-Info to additional districts. CDC and ACE agreed that before further rollout, it is important to address the technical difficulties that some districts are having with Epi-Info and to work out a way to deal with these challenges in the long term. It was agreed that ACE will hire one or more local IT firms to help address the technical problems and that ACE will explore establishing these firms as a resource that district offices could use in the future.

*Developed an interactive Web site:* ACE, with help from a local consulting firm, finalized the development of an interactive Web site for the MoH-RC. Key Resource Centre staff received training on using, uploading and updating, maintaining and managing the Web site. This Web site is now part of MoH Web site, and MoH-RC has started using it. It is available at URL <http://www.health.go.ug/rc/>

*Development of a digital library was completed:* ACE, through a local consulting team, finalized the development of a digital library. MoH-RC staff was trained in the use and management of the system. The system has been installed on the servers on LAN, and it is now running.

*District ICT Infrastructure Assessment:* ACE undertook a comprehensive assessment of the ICT infrastructure available in all districts in Uganda, including the computer hardware, availability of power and Internet connectivity, use and type of HMIS systems, and human resource capacity to use these systems. The assessment included research at government offices in Kampala, visits to 25 districts, and communications with the rest of the districts through phone calls. A comprehensive report is available that details all the findings and that will be used to determine the next steps on both rolling out Epi-Info and testing the new web-enabled system.

#### Issues encountered and recommendations for resolution

- LAN installation was affected by delays in the provision of the required hardware and by lack of power in the proposed server room.
- Though the digital library is complete, there are still a lot of data to be entered into it. The MoH-RC had hoped to engage student trainees to complete this work, but some bureaucratic hurdles have delayed implementation of this plan.

#### Activities for the Next Quarter

In the next quarter, ACE activities include:

- Completing further tests on the developed and installed LAN equipment
- Continuing to test the developed Web-enabled HMIS database (wHMIS)
- Monitoring use of the developed interactive Web site and supporting the MoH-RC in devising a plan for using and updating the Web site
- Helping MoH-RC to populate the developed digital library and carrying out further tests on the system
- Working with CDC and MoH-RC to strengthen the 15 districts where Epi-Info HMIS (eHMIS) was installed
- Working with CDC and MoH-RC to roll out Epi-Info HMIS to 10 more districts
- Conducting training in the use of developed stand alone web-enabled HMIS database (sHMIS)
- Testing developed stand-alone web-enabled HMIS database (sHMIS)
- Rolling out sHMIS to 5-10 pilot districts.
- Helping MoH to hold a function to launch to the public all the systems that ACE has supported
- Working with MoH-RC and CDC to integrate as many of the electronic systems as possible in use at the MoH-RC so that all systems can be rolled out to districts simultaneously

## **E. Strengthen the Capacity of Selected NGOs**

### **1. Hospice Africa Uganda**

#### Summary of Activities and Accomplishments

*Communication and advocacy activities initiated:* During the quarter, ACE's communication capacity building manager worked with HAU to develop communication and advocacy strategies, which are currently in draft. During June, ACE facilitated a two-day workshop on communication and advocacy strategy development for the HAU team. At the workshop, the draft strategy matrices, implementation plans, and possible output and outcome indicators were developed. The assignment will be finalized in the third quarter.

*Recruitment for key positions:* In the recent past, various senior and middle-level positions at HAU fell vacant. ACE supported HAU to jump-start the process of filling those positions by advertising in the local press. ACE also supported recruitment for the human resource and M&E managers. Interviews for the HR position were held, and a short list for prospective candidates for the M&E position was developed. ACE will continue to support HAU with recruitment for remaining vacant senior positions in the next quarter.

*Monitoring and evaluation activities initiated:* During the quarter, ACE's M&E capacity building manager worked with HAU to initiate developing a monitoring and evaluation

framework and plan. ACE, together with a team of consultants, undertook preliminary evaluation of the M&E system at HAU, and thereafter started to develop the M&E framework, plan, and data management system. The activity will be finalized later in the year.

*Financial systems capacity strengthened:* During the quarter, ACE started work to strengthen HAU's financial systems. The activity will, among other things, assess the status of the existing financial information systems, and support the development of a system that will facilitate the timely generation of financial reports by HAU. The activity also includes a review of the budgeting and budget management skills of the HAU team. Mechanisms will be put in place to improve budgeting and internal budget controls as well as the management of funds flow to between the HAU branches. The activity will be finalized during the next quarter.

#### Issues Encountered and Recommendations for Resolution

ACE experienced several challenges working with HAU during the quarter. The organizational development and human resource interventions developed by ACE can be implemented only after board approval. However, the HAU board of directors has not yet given the necessary approvals, particularly on the revised HR manual and the organization chart. This has delayed implementation.

Several members of the senior management team, also key in the ACE-HAU working partnership, left HAU during the quarter. Their absence has presented challenges to the continuity of ACE support to HAU. ACE will continue to provide HAU with the necessary support to ensure that the vacant positions at the managerial level are filled.

#### Activities Planned for the Next Quarter

In the next quarter, ACE activities include:

- Implementing the executive mentoring and coaching program for the executive director. Other managers who have expressed interest will be included in the program later in the year
- Orienting middle managers and line staff on key documents such as the HAU Strategic Plan and the revised HR manual
- Continuing to support the improvement of financial management systems and practices
- Continuing to work with HAU to strengthen M&E and provide support in creating a M&E framework, an M&E plan, a performance monitoring plan, and a data collection system
- Continuing to provide support to strengthen the communication and advocacy plan
- Starting the implementation of manuals covering HR policy, organizational structure, and board policy and procedures
- Providing continued support with managing succession

## 2. Joint Clinical Research Centre

### Summary of Activities and Accomplishments

*Organizational development and HR support:* The comprehensive OD assignment that commenced last quarter made significant progress. The local subcontractor, under the guidance of Training Resource Group, conducted extensive data collection within JCRC (including interviews, focus groups, and document review) in order to understand the current structure and functions of the organization. Based on the outcome of the data collection, the group designed an organizational structure (macro level) that would facilitate achievement of the strategic plan, contribute to fulfillment of the vision of strengthened RCEs, and address a number of key issues identified during data collection. The group presented the proposed organizational structure and a process for systematically pushing decision-making down at headquarters and out to the centers of excellence to the ACE for further comments. The presentation to the JCRC director, deputy directors, and heads of department will take place at the beginning of the next quarter. This assignment will be continuing through the third quarter with the detailed micro structures, job descriptions, and the human resources policy.

*Training in ICT applications:* During the quarter, ACE completed the training of JCRC staff in Navision, an innovative accounting package. The training was designed to give a proper understanding of the Microsoft Business-Solution-Navision 3.70 and to impart skills to operate the system. The training course covered the following areas: system overview, general ledger and cash manager, sales and receivables, purchases and payables, inventory management, and clinical management. The knowledge and skills acquired will help JCRC staff to become more effective and efficient in processing transactions and creating relevant management reports. The use of Navision will also be extended to laboratories to ease data processing.

*Improving JCRC's ICT infrastructure:* Following the conclusion of the preliminary exploratory study into the issues impacting the performance of JCRC's information systems and network infrastructure, the subcontractor, through consultation, embarked on the upgrading of the data section of JCRC to a full-fledged ICT department. By the end of the quarter, draft recommendations for a proposed structure of the ICT department with roles and responsibilities of office bearers had been submitted to ACE for review. During the quarter, a network audit took was conducted and the recommendations in the interim report addressed the following areas: server configuration, LAN layout, the Internet, cabling, policy documentation, and personnel. A schematic of the network infrastructure is being designed, and tests for further investigations are still going on.

*Financial systems support:* The SOW for an extensive financial assignment was shared with the JCRC top management as the subcontracting process was progressing. Unfortunately, the responses to the SOW were not received in time for the assignment to commence this quarter. The responses were finally received, and the necessary documentation has been completed to facilitate the assignment to commence in July.

*Monitoring and evaluation support:* The comprehensive M&E assignment that started at JCRC in the first quarter continued through this quarter. The subcontractor continued to hold discussions with key people at JCRC. In addition, the subcontractor visited Mbale Regional Centre of Excellence and one satellite site. The purpose of the field visit was to enable the subcontractor to gain a deeper understanding of the activities at RCEs and satellite clinics with the aim of exploring the methods and practices of data collection and management at these sites. This step was critical to the successful development of the JCRC-wide M&E framework and plan. The subcontractor also prepared workshop materials for the two-day JCRC-wide M&E workshop to be conducted in July and provided support to the TREAT M&E team to compile a report to MEEPP.

#### Issues Encountered and Recommendations for Resolution

Because JCRC staff is very busy, it was difficult for all appointments to be honored by the JCRC staff as planned. For this reason, it took a long time to discuss the need for the M&E workshop and to determine its timing. However, through consistent reminders, JCRC officers were met and key decisions reached.

#### Activities Planned for the Next Quarter

In the next quarter, ACE activities include:

- Continuing with the ongoing OD work on the JCRC structure, decision-making, HR policies, and job descriptions
- Continuing with the ongoing JCRC-wide M&E work in order to establish a JCRC-wide M&E framework and M&E plan; improving the nature and quality of reporting for TREAT; and evaluating the existing database to make recommendations on improvements
- Continuing with technical assistance for improving connectivity, including improving the network and intranet connections
- Strengthening the financial management system through revising the financial and accounting regulations and helping JCRC address system gaps to minimize audit queries

## **F. Improved HIV/AIDS Policies and Strategies**

### Summary of Activities and Accomplishments

This deliverable is integrated across the other deliverables, as many of the activities with the various organizations contribute to its achievement. This quarter, ACE continued to support the finalization of the five-year National Strategic Plan for HIV/AIDS. ACE staff has participated in working groups and is currently commenting on the draft versions of the NSP. In addition, ACE is technically and financially supporting the National Comprehensive Communications Strategy, which accompanies the NSP and sets out the

framework through which all HIV/AIDS communications will be carried out. In addition, by supporting the Global Fund proposal development and by working with district officials to improve their proposals, ACE has been contributing to national HIV/AIDS policy development. Finally, the work that ACE is continuing with HAU on the development of its advocacy strategy will contribute to improved national policies on HIV/AIDS palliative care.

#### **G. PEPFAR Coordination**

In the second quarter, ACE continued to support coordination and planning for the USG PEPFAR team. ACE consultant Jawara Lumumba facilitated the PEPFAR Uganda Stakeholders Consultation in May and returned in June to coordinate the planning process for FY08.

## ANNEX A: PROGRESS AGAINST PROJECT INDICATORS

Indicators	Quarter Two Results						Total Progress to Date					
	UAC	IRCU	JCRC	HAU	MOH RC	Total Q2	UAC	IRCU	JCRC	HAU	MOH RC	Total to Date
<b>PEPFAR Indicators</b>												
Number of local organizations provided with technical assistance for strategic information	0	44	0	0	7	51	1	74	1	1	16	93
Number of individuals trained in strategic information	0	99	9	9	29	128	0	192	18	0	69	279
Number of organizations provided with technical assistance for HIV-related policy development	0	0	0	0	0	0	1	0	0	0	0	1
Number of organizations provided with technical assistance for HIV-related institutional capacity building	0	0	0	0	0	0	1	62	1	1	1	66
Number of individuals trained in HIV related policy development	0	0	0	0	0	0	68	0	0	0	0	68
Number of individuals trained in HIV related institutional capacity building	258	28	0	17	0	303	282	286	60	59	0	687
<b>General Indicators</b>												
Number of timely deliverables submitted by client organizations to USAID	0	0	0	1	0	1	0	2	1	2	0	5
Number of supported organizations implementing improved financial systems	0	0	0	0	0	0	0	0	1	1	0	2
Number of individuals trained in financial management	0	0	0	0	0	0	0	0	134	0	0	134
Number of organizations applying improved governance and leadership structures	1	0	0	0	0	1	1	1	0	1	0	3
Number of organizations implementing improved human resources policies	0	0	0	0	0	0	1	0	0	1	0	2
Number of supported organizations implementing a	0	0	0	0	0	0	0	0	0	0	0	0

communications strategy												
Number of supported organizations entering data on PEPFAR indicators to MEEPP database on time	0	0	0	0	0	<b>0</b>	0	1	1	1	0	<b>3</b>
Number of supported organizations implementing improved M&E systems (data gathering tools, personnel skills, infrastructure)	0	22	0	0	0	<b>22</b>	1	23	0	1	1	<b>26</b>
Number of organizations who have taken steps to diversify their funding sources	0	0	0	0	0	<b>0</b>	0	0	0	1	0	<b>1</b>