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USAID/Santénét2

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USAID/Santénet2

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Acronyms

AIDS	Acquired Immunodeficiency Syndrome
COP	Chief of Party
CTO	Cognizant Technical Officer
EPI	Expanded Program on Immunization
FP	Family Planning
FY09	Fiscal Year 2009
GUC	Grant under Contract
HIV	Human Immunodeficiency Virus
HPN	Health Population Nutrition
MCHW	Mother and Child Health Week
MEP	Monitoring and Evaluation Plan
MOH/FP	Ministry of Health and Family Planning
NGKM	New Generation Kaominina Mendrika
RFA	Requests for Grant Applications
SO	Strategic Objective
USAID	United States Agency for International Development
VAT	Value-Added Tax
WHO	World Health Organization

I. Introduction

The five-year USAID/Santénet2 program is a major component of USAID's fourth phase of assistance to the health sector in Madagascar under Strategic Objective 5 (SO5), "Use of Selected Health Services and Products Increased, and Practices Improved." SO5 includes the following components:

- Improve child survival, health, and nutrition;
- Reduce unintended pregnancy and improve healthy reproductive behavior;
- Prevent and control infectious diseases of major importance; and
- Reduce transmission and impact of HIV/AIDS.

USAID/Santénet2 will strengthen the health system and the capacity of the Ministry of Health and Family Planning (MOH/FP). Also, building on approaches and lessons from previous USAID/Madagascar health sector investments and working alongside the social marketing program and expanded program implementers, the USAID/Santénet2 program will expand demand for and use of services more broadly and deeply into communities. The final goal is to provide quality, pro-poor health services. USAID/Santénet2 will target 500 communes to achieve New Generation Kaominina Mendrika (NGKM)—or "champion commune"—status in addition to the current 303 communes that have achieved Kaominina Mendrika status to date. The USAID/Santénet2 integrated approach will have national impact as activities are brought to scale.

This first semi-annual report describes project start-up activities carried out by RTI International and its partners between July 25 and September 30, 2008. The report describes achievement in the following areas:

- Preparation of our Fiscal Year 2009 (FY09) annual work plan;
- Preparation of our project monitoring and evaluation plan (MEP);
- Selection of 500 intervention communes; and
- Development of our Grants under Contract (GUC) manual.

In addition to the start-up activities, our team continued to provide technical assistance for ongoing health sector activities in support of the USAID/Madagascar agenda.

Section II of this document describes technical start-up activities; Section III describes technical assistance to ongoing USAID health, population, and nutrition (HPN) activities; and Section IV describes achievements in project administrative start-up. FY09 work plan issues and challenges are briefly mentioned in Section V.

II. Technical Start-up

The USAID/Santénet2 core strategy is to promote the sustainability of community-level performance improvements through linkages with health system strengthening interventions at higher levels. These interventions are selectively chosen to address bottlenecks in the health system and promote access to increased and consistent financial and material resources

at the community level to sustain achievements in health care delivery. This strategy consists of three elements:

1. Strengthening key health system components;
2. Expanding and empowering community participation in setting and achieving community health goals; and
3. Linking the two for nationwide impact to reduce maternal, child, and infant mortality; fertility rate; chronic malnutrition in children under the age of 5; and prevalence of malaria (particularly among children under 5 and in pregnant women), as well as maintain a low HIV prevalence rate.

A. Prepare FY09 Annual Work Plan

Santénet2's work plan is organized around three components:

1. Community programs;
2. Health system strengthening; and
3. Strategic result areas.

The team used a three-stage process to develop the first-year work plan.

During the weeks of August 11 and August 18, USAID/Santénet2 organized several internal workshops to assess the current situation, achievements to date, and opportunities and to build consensus among the team.

The core team and subcontractors participated actively in these workshops; the first one was held on August 14. During the first workshop, the scope of work of the task order, the technical proposal, and the MOH/FP consolidated work plan were reviewed.

The second workshop took place on August 26. MOH/FP central and regional decision makers and managers joined the USAID/Santénet2 team to select priority activities in the three components of the program: (1) community-level interventions, (2) health system strengthening, and (3) health program-level interventions.

In the third stage, small informal committees met frequently afterward to discuss in depth each component's activities to be included in Santénet2's FY09 work plan.

A final draft was submitted to USAID/Madagascar during the week of September 29 for review and feedback. First-year activities will start on October 1, 2008, and will end on September 30, 2009.

B. Prepare USAID/Santénet2's Monitoring and Evaluation Plan (MEP)

The project MEP was developed in collaboration with the MOH/FP. The MEP includes USAID/Madagascar HPN indicators for which USAID/Santénet2 has direct accountability within an overall strategy for monitoring and evaluating key elements of the project.

In programmatic start-up meetings during the week of August 18, the project established a monitoring and evaluation task force that worked closely with the MOH/FP and project Cognizant Technical Officer (CTO) and his team to identify a set of indicators.

The draft MEP was submitted to USAID along with the draft FY09 work plan the week of September 29.

C. Select USAID/Santénet2 Intervention Communes

During this reporting period, the Santénet2 team proposed a two-pronged strategy for selecting project intervention communes. As included in the draft FY09 work plan, the strategy included the following activities:

- Delimit the intervention zone to areas where USAID/Madagascar has historically intervened (in health, environment, and other sectors)
- Select communes progressively and with the aim of achieving critical mass in each district. The impact of the NGKM approach can be stronger and deeper if interventions cover a critical mass of communes within each district; thus, rather than being “isolated” entities, communes can influence each other. As part of the phase-in strategy, the project will select a first set of 100 communes and select the remaining communes progressively as the program moves forward from the first phase.

The project will finalize this selection strategy based on feedback from the USAID/Santénet2 CTO and based on this finalized strategy, the project will convene meetings during the first quarter of the FY09 work plan to select the first-wave (100) communes.

D. USAID/Santénet2 Launch Meeting

The project launch was held on September 19 at the Colbert Hotel in Antananarivo. The organization of the project launch ceremony was finalized and organized in close collaboration with the project CTO and MOH/FP. The ceremony was attended by more than 120 persons, including key stakeholders in the Malagasy health sector.

III. Technical and Administrative Assistance to Ongoing Activities

During the project start-up period, USAID/Santénet2 continuously provided technical assistance to the Malagasy health sector. While developing the FY09 Work Plan, MEP, and GUC manual; deploying staff; and creating management systems, the project also contributed to ongoing health sector activities that required technical and administrative assistance. The following describes major activities in this area.

A. Maternal and Child Health Week (MCHW)

USAID/Santénet2 collaborated with the MOH/FP and its partners to prepare for the fifth MCHW (held in October) within the framework of improving the survival of mothers and children, a goal specified in the Madagascar Action Plan (Commitment 5, Challenges 5 and 6).

USAID/Santénet2 took part in all meetings of the three steering subcommittees for the preparation of the fifth MCHW. The project assisted the MOH/FP to use the event as an opportunity to add the *Haemophilus influenzae* type B vaccine to Madagascar’s vaccination calendar.

For the preparation of the fifth MCHW, USAID/Santénet2 provided the following assistance:

- Technical assistance to prepare work tools used in priority themes, including safe motherhood, family planning (FP), Expanded Program on Immunization (EPI), and

nutrition. Tools were then validated and dispatched to decentralized services of the MOHFP.

- Financial support to reproduce and dispatch management tools to the 22 Regional Health and Family Planning Directorates and 111 District Health and Family Planning Services as follows:
 - a. Safe motherhood: 5,717 copies
 - b. FP: 5,717 copies
 - c. EPI: 5,340 copies
 - d. Nutrition: 6,214 copies
 - e. Guidelines on social mobilization: 3,014 copies
 - f. Technical instructions: 3,014 copies

The fifth MCHW will be held from October 20–26, 2008. USAID/Santénet2 will participate in its field supervision through its regional team in Fianarantsoa.

B. Health System Strengthening

USAID/Santénet2 participated in the Inter-Agency Coordination Committee's meeting for the start-up of the MOH/FP's health system strengthening program financed by the Global Alliance for Vaccines and Immunization.

The agenda and budget proposals for the MOH/FP's health system strengthening program to start the activities were accepted by the committee's members. USAID/Santénet2 also took part in the elaboration of a quarterly plan for the implementation of the MOH/FP's health system strengthening program.

C. Polio-Free Certification for Madagascar

The Government of Madagascar has presented its application for polio-free certification to the World Health Organization (WHO). USAID/Santénet2 provided assistance for the technical writing of the application. The document has been forwarded to WHO's Regional Bureau for Africa for submission, and it is also available for consultation.

D. Elimination of maternal and neonatal tetanus

Madagascar began addressing maternal and neonatal tetanus in 2005 and continues its efforts to eliminate it. USAID/Santénet2 provided technical assistance to the MOH/FP in completing this year's campaign for the elimination of maternal and neonatal tetanus, which started its first round in August 2008; a second round began in September 2008. Data collected during the campaign are currently being analyzed by the MOH/FP and the United Nations Children and Education Fund, who will provide a report in November 2008.

E. Community Case Management Workshop

An international experience-sharing workshop on community case management of acute respiratory infections, diarrhea, and malaria among children under 5 years old was held in Antananarivo, August 18–22, 2008. USAID/Santénet2 staff attended this workshop to learn from other countries the best practices for scaling-up community-based health systems that

address child survival. The USAID/Santénet2 COP chaired the plenary session on the use of information in program management.

USAID/Santénet2 staff also participated in the workshop on the follow-up of formulated recommendations.

IV. Administrative and Financial Start-up

During August and September RTI deployed staff and resources and established the majority of management systems to ensure swift implementation of the first-year work plan. The following activities were implemented.

A. Human Resources

As of September 30, nearly all project positions have been filled; 30 professional and 7 nonprofessional staff were on board. As of September 30, the following positions were open, though recruitment was well under way:

- Supply Chain Logistics Manager;
- Quality Assurance Specialist; and
- Some regional office positions (i.e., Technical Coordinators and Financial/Administrative Aides).

All these positions will be filled during the first quarter of the FY09 work plan period.

B. Administration

Progress was made during August and September in the completion of the official RTI registration process. Signatures from several Government of Madagascar ministries remain outstanding as of September 30; however we anticipate that the registration will be completed by December 1, 2008. The project start-up effort received valuable short-term technical assistance from RTI's staff, including Jennifer Leopold (recruitment), Linda Hradilek (program assistant), and Jeffrey Sine (project Home Office Technical Manager) during August and September.

C. Logistics

USAID/Santénet2 staff began operations by using office space provided by RTI's existing project in Madagascar—the Indoor Residual Spraying project. A large number of long-term office lease locations/office rentals were viewed and evaluated in August. The best choice given the goals of good location, adequate and well-designed space, and value for money was determined to be a stand-alone office at Fort Duchesne in Antanimora. The space layout is quite functional and will allow for co-location opportunities with partner organizations with desk spaces available for up to six individuals.

A large amount of office equipment and furniture was accessed from the USAID warehouse and has allowed USAID/Santénet2 operations to get under way quickly. These items are expected to be supplemented with a mixture of U.S.-sourced and local procurement.

Internet connection and landline telephone communications have been established at our offices in Antanimora.

The project received four vehicles from USAID and expects to order a number of new vehicles in the first quarter of the fiscal year to enable implementation of project activities from Antananarivo and the five regional project offices.

The project has received a value-added tax (VAT) exemption letter from USAID and is currently finalizing the official paperwork for VAT exemption. The project has also contacted a number of vendors (including vehicle fuel providers) to ensure that goods and services will be procured free of VAT.

D. Finance Removed from this copy of the report.

E. GUC Manual

During September the Santénet2 team modified RTI's standard Grants Manual to produce an initial draft manual for the project's grants program. The most critical forms (application form, award form, reporting formats, etc) will be further refined in October as part of a visit by RTI's home office Grants Manager. The USAID/Santénet2 Grants Manager will also discuss and train RTI staff in grants topics such as proper selection of award instruments and compliance. Work will also begin in October to draft the project's first request for grant applications (RFA). The project's intervention communes have been selected, and the NGKM model has been designed; the first RFA will be released in the first quarter of FY09.

V. Issues and Challenges

The first six months of FY09 work plan implementation present the following challenges:

- **Community activities**
 - Design of the NGKM approach;
 - Determination of the first phase of intervention communes;
 - Identification and design of the NGKM toolkit;
 - Submitting the GUC Manual to USAID;
 - Posting RFA for NGKM and other grants;
 - Awarding grants to cover training in 40 NGKMs on Malaria Community Case Management; and
 - Supporting the MOH/FP in the existent health mutual monitoring to increase the population enrollment rate.
- **Health Management Information System**
 - Integration and harmonization of community health workers' reports in the Health Management Information System.
- **Strategic results**
 - Completion of the vaccine management assessment;
 - Completion of the Family Planning logistic survey;
 - Supporting the Family Planning's National Workshop Coordination; and
 - Supporting the National AIDS Control Program's (Conseil National de Lutte contre le SIDA [CNLS]) regional coordination in the elaboration of their annual work plan;
- **Regional offices**
 - Bringing the five regional offices of USAID/Santénet2 to full operation.