



**USAID** | **BOLIVIA**  
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# Annual Report September 1, 2005-September 30, 2006

## PROCOSI Network Technical Assistance Project

Contract # 511-C-00-05-00200-00



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## Acronyms

AIN-C	Atención Integral a la Niñez – Comunitario/Integrated Care of the Child in the Community
CBGP	Community-based Growth Promotion
CHP	Community Health Project/Proyecto de Salud Comunitario (PSC)
CHW	Community Health Worker
CQI	Continuous Quality Improvement
CY	Calendar year
IMCI	Integrated Management of Childhood Illness
LOW	Line of Work
M&E	Monitoring and Evaluation
MOU	Memorandum of Understanding
NGO	Non-governmental Organization
PMP	Performance Monitoring Plan
PROCOSI	A NGO serving 36 member NGOs in Bolivia
PY	Project year
SIGPRO	PROCOSI's management information system
TOR	Terms of Reference

## **I. Program Description**

USAID/Bolivia has developed a strategy and program portfolio to strengthen the Government of Bolivia's decentralized public health system and provide critical technical and managerial capacity-building support to major partners. The strategy, objectives, and desired results are aimed at expanding, integrating, and improving the quality of health services in targeted geographic areas. A high priority under the USAID strategy is to strengthen the coverage and quality of community-based health services offered through the Bolivian and international NGO members of the PROCOSI network.

On August 27, 2005, USAID/Bolivia awarded a three year contract for the PROCOSI Network Technical Assistance Project to The Manoff Group. This contract provides assistance to strengthen the technical and managerial capacity of both the PROCOSI team and member NGOs to carry out health programming more efficaciously and in a manner that bolsters their own sustainability as health development partners. The project has two distinct objectives and three related results.

- Objective 1 seeks to strengthen the technical capacity of PROCOSI and its members to deliver a standardized package of community-based health interventions. This objective focuses support on the USAID-supported PROCOSI Community Health Project (CHP). Under Objective 1, there are two anticipated results: Result 1.1 will be strengthened technical capacity within PROCOSI to design and implement community-based health activities using the best national and international practices and quality standards. Result 1.2 will be the development and implementation of an institutional approach for continuous quality improvement (CQI) monitoring and evaluation within the PROCOSI network.
- Objective 2 focuses on strengthening management capacity within PROCOSI and the network to improve health program administration and institutional sustainability. Under Objective 2, Result 2.1 will be development and implementation of an institutionalized approach for assessing and strengthening health program management capacity among NGO members of the PROCOSI network.

What follows is a summary of progress and achievements during the first project year (13 months) August 27, 2005 – September 30, 2006. The annexes to this report contain detailed workplan information and a summary of project expenditures against the year one budget.

## **II. Project Staff and Start-Up**

During year one the PROCOSI Network Technical Assistance team was comprised of two full-time resident advisors, and two part-time US-based advisors. During most of year 1, there was an additional part-time resident advisor who continued working with the project on a consulting basis after moving to the US. In addition to resident staff,

188 days of short-term technical assistance were provided to PROCOSI. Annex A lists the names and positions of the PROCOSI Network Technical Assistance team and the people responsible for The Manoff Group headquarters activities on the project.

During the first months of the project, a series of administrative start-up activities was accomplished. By September 1, the Chief of Party was contracted and began work. The Community Health Technical Advisor came to Bolivia on temporary duty prior to moving from Honduras to Bolivia in November, 2005. A series of project initiation meetings were held with USAID/Bolivia and PROCOSI in mid-September, 2005 and a workplan for the first three months of the project was developed and implemented.

The Manoff Group technical assistance team began working in temporary space in the PROCOSI office and by March 2006 had a remodeled suite of offices within PROCOSI. A subcontract was signed with PROCOSI on November 17, 2005. This agreement allows for PROCOSI to assist The Manoff Group team with a variety of administrative and basic office services.

During the first quarter, the technical assistance team worked closely with PROCOSI leadership and the CHP team to finalize the technical assistance workplan for calendar year 2006. The technical assistance workplan is derived from the PROCOSI institutional workplan that is approved by their constituent assembly and the CHP workplan which is approved by USAID/Bolivia. In addition to the workplans, templates for all project communications materials were developed in accordance with USAID branding and marking requirements and were submitted to USAID/Bolivia and approved for use.

Annex B contains both the three month, initial workplan (September –December, 2005) and the first nine months of the CY 2006 workplan. In this presentation the status of the activity is noted along with comments on accomplishments, delays or reprogramming.

### **III. Progress and Achievements by Objective/Result**

As summarized above, the PROCOSI Network Technical Assistance Project has two objectives and three related results. When the workplan for CY 2006 was developed a number of lines of work (LOW) were established under each result as a way to group activities in order to keep a focus on the expected results. Not all lines of work had activities in year one and not all planned activities under a few lines of work were carried out. Therefore, the report below includes only those lines of work with activity in PY 1.

Of special importance related to progress and achievements during PY 1 is the shift that USAID/Bolivia announced in their health strategy at the end of June 2006. This change affected scheduled activities for the CHP primarily because the focus geographic areas changed. Although the priority actions in the Basic Package remain, the shift in the focus geographic areas requires minor adjustments to the Basic Package and the repetition of certain activities such as the project baseline and the procurement of NGO

services to implement the CHP. Considerable effort was spent in the final quarter of PY1 making adjustments in order to move forward under the new guidance from USAID/Bolivia.

***Objective 1. Strengthen the technical capacity of PROCOSI and its members to deliver a standardized package of community-based health interventions.***

***Result 1.1. Strengthened technical capacity within PROCOSI to design and implement community-based health activities using the best national and international practices and quality standards.***

**LOW 1: Support the definition of the community health Basic Package, implementation methodology, and supporting materials:**

ACHIEVEMENTS
<ol style="list-style-type: none"><li>1. Helped achieve an approved definition of the Basic Package that includes state-of-the-art actions such as community-based growth promotion for children under 24 months and a focus on activities in the hygiene improvement framework of USAID.</li><li>2. Carried out a study tour to Honduras in November 2005 to expose the PROCOSI team to one of the best large-scale child health programs in Latin America, AIN-C.</li><li>3. Assisted in the completion of a draft Operations Manual for the CHP.</li><li>4. Completed a behavior change communication strategy for the CHP with draft materials.</li><li>5. Procured SEARCH (community newborn care) training manuals from India.</li></ol>

The Basic Package that forms the technical basis for the USAID Rural Health Strategy was already partially agreed to when this contract began. The role for the technical assistance team was to ensure that several best practices were incorporated in the community part of the Basic Package and that growth promotion formed the platform from which the basic child health actions would evolve in the community package.

The technical assistance team, particularly the Community Health and Nutrition Advisor was able to share a wide variety of successful experiences in Latin America with the CHP and with PROCOSI-member NGOs at the annual Asamblea that took place in November 2005. In addition, to promote an understanding of how utilizing a growth promotion approach can integrate child health actions programmatically, The Manoff Group organized a one week study tour for PROCOSI and CHP executives and a representative from the Ministry of

What is Community-based Growth Promotion?

It is a preventive health and nutrition strategy that relies primarily on workers chosen by the community to pro-actively engage both the families and the communities of children under two years of age to monitor and to maintain the adequate growth of their young children. The strategy is based on the use of child growth as a composite measure of child well-being. Inadequate monthly weight gain is a targeting device for applying a diagnostic decision-tree analysis to identify the causes of inadequate weight gain and to correct them.

Health to visit the AIN-C project in Honduras which has benefited from USAID support for over a decade. This visit allowed these key program development specialists to see first hand how NGOs were cooperating with the government of Honduras's public health services in an integrated child health program that is both preventive and curative (combines preventive actions with the key elements of IMCI). The tour included an orientation to the program at the national level, followed by visits to Title II/AIN-C implementing NGOs and to government health facilities and finally to communities to see the program in action, the volunteer personnel (monitoras), a weighing session and the information and communication systems. The study tour was successful in assisting PROCOSI and CHP managers to visualize how the different elements of the Basic Package could be integrated in an operational program. This visit to Honduras was invaluable in ensuring that growth promotion formed the basis for the development of the child health component of the CHP when the Operations Manual was written.

Together with the introduction of growth promotion experiences and the best practices, the Household Hygiene Behavior Change Technical Advisor shared with the PROCOSI CHP team experiences gathered during the implementation of three hygiene projects in Latin America under USAID's Environmental Health Project. These projects show the importance of close collaboration with and monitoring of household hygiene behavior. As a result of the technical workshop that was held to discuss hygiene activities, the CHP will integrate hygiene activities into the job description of the community surveillance worker.

A major part of the work of the Community Health and Nutrition Advisor has been developing, with the CHP team, a manual that explains exactly how the CHP will be organized and run. This type of manual is needed if all of the NGOs that will be contracted to implement the CHP are going to have a standardized approach, know what is expected of them and know how they are to interact with the PROCOSI CHP team, with the government health services, and other partners. The draft operations manual which was submitted to USAID/Bolivia on September 18, 2006 includes the conceptual framework for technical content of the programmatic model, strategies and steps for implementation, technical parameters of interventions, and general implementation guidelines. The manual has been through multiple revisions as it was discussed among the team and with external partners. The final review step included a four day internal workshop, during which the manual was renamed "Conceptual and Operational Framework for the Community Health Project". Although The Manoff Group advisors had worked on sections of the manual, they expressed to the CHP director and to USAID/Bolivia the following reservations about the final version of the manual: a) the manual contains too much theory, especially in the beginning which distracts from the main operational understanding of the program, and, b) it depicts the CHP as having two distinct projects—the Basic Package and Reprosalud (later renamed "community participation") rather than one integrated program focused on the basic package. It is the technical assistance team opinion that the CHP does not have enough financial or human resources to implement both projects and that Reprosalud should be integrated into the reproductive health component of the Basic Package.

At the same time that the Community Health and Nutrition Advisor was working with the CHP team on the integration of the Growth Promotion strategy into the CHP, the Household Hygiene Behavior Change Technical Advisor was working with the CHP, particularly their subcontractor, CPC (Centro Para la Comunicación) on the development of a strategic approach to behavior change communications for the set of Basic Package activities. To begin this work, the advisor shared many examples of best practices for behavior change communications in programs like CHP. From the discussions of best practices he proposed a strategic approach and presented draft materials for discussion. These discussions were followed by an extensive review and revision of proposed materials and some adaptation of existing materials that were chosen to be used in the standard package of communication materials. All products proposed for the standard package were carefully enumerated and the technical specifications for each and the required quantities were developed so that a preliminary budget for materials could be calculated. The core material in the package is a set of counseling cards that will aid the CHW in his/her job of negotiating new practices with the child caretaker or with the woman or the family, depending on the circumstances.

All of these counseling aids have been developed in close collaboration with the technical team to ensure that the practices promoted during the counseling are correct and to ensure that all of the key behaviors have been covered. It is critical that the counseling materials are tested before their production and to this end the Behavior Change Communication Advisor has developed draft protocols for the pre-testing and shared them with CHP

Why chose negotiation counseling as a key behavior change method?  
 Implementing negotiation counseling will require significant skills building of program workers in counseling techniques and in making some health and nutrition related judgments, and perhaps will require closer supervision than is usual. But, mothers who learn to solve problems, rather than just follow orders, will be more likely to adopt the new practice as part of daily life and will become effective change agents in the family and the community

**LOW 2: Sub-agreements, training and NGO technical capacity building:**

- ACHIEVEMENTS
1. Finalized technical requirements and evaluation criteria for the Request for Agreement.
  2. Developed a methodology and a plan for sub-agreement budget ceilings by geographic focus area.
  3. Assisted with the initial orientation of PROCOSI NGO members regarding community-based growth promotion.

The sub-agreement procurement process was completed during the year for the initial group of priority municipalities. Given the shift in the geographic focus of USAID’s Rural Health Strategy, the procurement process must be repeated. For the first round, the technical assistance team assisted in writing the technical scope of the RFA and the

technical criteria for judging the submissions. A Manoff Group representative participated in the proposal review process. At the end of PY1 the Chief of Party assisted the CHP to analyze the first RFA response and to update the original RFA and strengthen the evaluation criteria. After extensive discussion with the CHP team, the new version of the RFA was agreed upon and submitted to USAID. In addition, as part of the preparation of the RFA, the Chief of Party calculated the ceilings for the budgets that will be available to the NGOs for each group of municipalities. These ceilings were calculated based on the total number of people in the municipality, the population density and the level of unsatisfied basic need.

***Result 1.2.: Development and implementation of an institutional approach for continuous quality improvement (CQI) monitoring and evaluation within the PROCOSI network.***

**LOW 1: Completion of the baseline study:**

ACHIEVEMENTS

1. Completed a baseline study and report on for the original CHP focus geographic areas. This work included: development of a baseline study protocol with a sampling plan, instruments, and an analysis plan; follow-up of the field work; data quality control; and, final report oversight.
2. Developed a RFP for procuring the services of a company to implement the baseline study along with selection criteria.
3. Completed a proposal for implementation of the baseline in the new focus geographic areas.

The Monitoring and Evaluation (M&E) Advisor provided technical assistance to the CHP team and particularly the CHP Evaluation Manager in the determination of the key CHP indicators and their measurement in a baseline study. In addition, he discussed with the other USAID partners the more global indicators and methods that should be used to evaluate the entirety of the USAID Health Strategy. In the first half of 2006, the M&E Advisor oversaw the development of the questionnaires and other interview tools, the sampling and the rest of the baseline protocol, selecting and supervising the agency that implemented the baseline, data control and report editing. A report, "Resultados Principales de la Linea de Base 2006" was produced to be shared with the authorities and partners. This study was carried out in the departments of La Paz, Potosi and Chuquisaca. Again because of the change in the focus geographic areas of the USAID Rural Health Strategy, the CHP baseline study will have to be repeated. The M&E Advisor has made recommendations related to the methodology (to use a randomized cluster sample rather than a LQAS method) for the repetition of the baseline in the new CHP areas.

### **LOW 3: Develop and support a system for monitoring and quality control:**

#### ACHIEVEMENT

1. Developed a proposal/terms of reference for a monitoring and quality control system for the CHP.

The M&E Advisor worked closely with the CHP team on the design of the CHP monitoring, quality control and evaluation system. The design of the CHP M&E system assumes that the baseline indicators will be measured during a mid-term and final evaluation. For more routine monitoring, 50 indicators have been defined for tracking. The system description includes the definition of indicators and the software to enter, manage and analyze all CHP data. The 50 indicators come from the baseline study and measure infant health (28), maternal health (10), infectious disease (7) and hygiene (5). Sixteen epidemiological indicators will be reported annually, and another 19 indicators will be reported on a monthly basis. The software system for data entry and management will be part of the Sistema de Información Gerencial (SIGPRO) currently under development by the PROCOSI Information Technology Department. The software was designed to be web-based, allowing the participating communities and NGOs to enter data and view reports periodically. This rapid response should give local managers the ability to quickly identify problems and to monitor progress towards established goals. The software will also have the capability to export data into both Excel and SPSS for additional analysis to identify critical trends in key CHP indicators. At the end of PY1, the general design of the software has been completed and CHP indicators have been incorporated into the system for testing.

***Objective 2: Strengthen management capacity within the PROCOSI network to improve health program administration and institutional sustainability.***

***Result 2.1: Development and implementation of an institutionalized approach for assessing and strengthening health program management capacity among NGO members of the PROCOSI network.***

### **LOW 1: Improve the management capacity of network NGOs:**

The NGO assessment was planned initially to be done in close collaboration with the CHP institutional development team. However, as PROCOSI began to develop their institutional strengthening team outside of the CHP, leadership responsibility for a management review of the member NGOs shifted to this group. At the end of PY1 this group had just begun the review of NGO capacity. During the discussions regarding the type of technical assistance that PROCOSI would like related to the topic of management strengthening of member NGOs, the Institutional Strengthening Unit shared their long term plan and presented the technical assistance team with a request for help in: a) improving the quality of their member organizations in management and several other areas and b) the definition of best practices and their dissemination. These requests will be addressed during project year 2.

## **LOW 2: Support PROCOSI's institutional sustainability:**

### ACHIEVEMENTS

1. Outline of Three Chapters of the PROCOSI Policy Manual
2. Memorandum on Opportunities for Board Strengthening
3. Memorandum on the Status of the Board Manual and recommendations regarding the orientation on new Board members
4. Communication Strategy for PROCOSI
5. List of conferences and meeting of interest to PROCOSI

The primary focus of the Program Management and Organizational Development Advisor was on assisting the PROCOSI Executive Director and Chair of the Board in strengthening the PROCOSI Board. This work began under BASICS and was assumed under this contract because it is critical to the future of PROCOSI. The areas in which the advisor offered specific recommendations or draft policies were: governance, membership and conflict of interest. The advisor worked closely with the PROCOSI Executive Director when she finalized the following documents related to Board activities and PROCOSI policies:

- Memorandum on Opportunities for Board Strengthening
- Memorandum on the Status of the Board Manual and recommendations regarding orientation of new members
- Memorandum Outlining Three Chapters of the PROCOSI Policy Manual— Finance, HR and Membership
- Communication Strategy for PROCOSI.

At the beginning of the project when the technical assistance team worked with the PROCOSI Executive Director to develop a workplan for the year, the need emerged for a communication strategy to better enable PROCOSI to share the work of its members with others and to build recognition for its ability to achieve results through the combined efforts of NGO members. Over the year through multiple consultations with PROCOSI, the Institutional Strengthening Unit and with the communication committee formed of various PROCOSI members, a communication strategy was developed which addresses the three major areas in which PROCOSI wants to build recognition. The strategy which was finalized and presented to PROCOSI in September is divided into six parts: 1) an analysis of the key stakeholders, 2) an analysis of existing communication materials, 3) charts of communication objectives and foci based on the audience, 4) a discussion on communication objectives and key message themes, 5) an overview strategy with key activities and priorities based on the three goals of the PROCOSI institutional strengthening plan, and, 6) recommendations for implementation. As a supplement to the communication strategy, The Manoff Group developed a list of conferences and meetings taking place in the course of the year that could be of interest to PROCOSI.

### LOW 3: Support PROCOSI's financial sustainability:

#### ACHIEVEMENTS

1. Memo regarding the Costs and Benefits of Establishing a 501 (c)(3) in the United States. The PROCOSI Board approves the establishment of Friends of PROCOSI.
2. Stakeholder's Perceptions, Phase I: Donor Trends

An important part of institutional sustainability is financial sustainability. The PROCOSI Executive Director requested assistance in this area as part of the scope of work of the Program Management and Organizational Development Advisor. The activities in this area were varied and included consultations on establishing the "Friends of Organization" in the United States. This organization would have 501(c)(3) status allowing for tax-exempt fund raising and opening many new opportunities for PROCOSI. The pros and cons of taking this step were outlined for the Board and the Board agreed to take the necessary steps to establish Friends of PROCOSI.

The Program Management and Organizational Development Advisor conducted research that benefited the communication strategy described above, but that also gave PROCOSI an idea of the directions that various donors are taking with regard to their programs in Bolivia. This report, *Stakeholder Perceptions, Phase I: Donor Trends* was finalized in September 2006. In addition, the advisor reviewed financial planning activities at PROCOSI particularly with the Institutional Strengthening Unit, provided individualized training on the use of tracking systems for various government's and cooperating agencies' project procurement information, identified potential revenue sources and arranged meetings with potential donors for the Executive Director during her visits to the United States.

## IV. Performance Monitoring Plan (PMP) Progress

The Manoff Group submitted a Performance Monitoring Plan (PMP) at the end of the first project quarter, December 29, 2005. The PMP includes performance indicators, milestones, data sources, frequency of data collection, and performance targets for the duration of the contract. The PMP is organized around general products and milestones or performance targets. The PMP was approved by USAID on March 14, 2006. Annex C shows the products and milestones planned for project year 1, and the status of these plans.

The PMP was developed based on the first year workplan, and the overall vision of what could be accomplished during the three year contact. However, during the year, as PROCOSI refined their plans for institutional strengthening and as the CHP entered the phase of operationalizing its design several processes have taken longer than expected. In addition, there have been delays and the need to repeat several activities due to the change in the geographic focus area. The status report in the PMP indicates several milestones that have to be redone and several milestones planned for 2006 that

have to be moved to 2007. In addition, there are several milestones that are not as relevant as anticipated at the beginning of the project, although the key products of the technical assistance contract remain valid.

## **V. Lessons Learned from Year 1 with Suggestions for Year 2**

Implementing the PROCOSI Network Technical Assistance Project has required close collaboration between two USAID collaborating agencies - The Manoff Group and PROCOSI. Each agency has a distinct set of deliverables and different contract demands. While collaboration between agencies is often required, in the case of the provision of technical assistance there is a unity of purpose and a critical melding of local and external expertise that must be achieved for success. Achieving this unity and blending of expertise and experience has proven to be a challenge during PY1. While many tasks were successfully completed during year 1, there were several activities that were not realized and some that could have been done better. As we review the year, there are several lessons learned that will inform our work in project year 2 and there are a few dilemmas still to be resolved in a way that permits each agency to fulfill the terms of their agreements with USAID/Bolivia.

"A lesson learned is knowledge or understanding gained by experience. The experience may be positive, as in a successful test or mission, or negative, as in a mishap or failure. Successes are also considered sources of lessons learned. A lesson must be significant in that it has a real or assumed impact on operations, valid in that it is factually and technically correct, and applicable in that it identifies a specific design, process, or decision that reduces or eliminates the potential for failures and mishaps, or reinforces a positive result" - NASA 1997

### 1. Workplan management

The Manoff Group workplan is based on PROCOSI's and the CHP's annual workplans. However, at the outset of our contract, PROCOSI had not finished their annual plan and so it was difficult for all of the activities in the Manoff Group workplan to be derived from their priorities. As PROCOSI developed their annual plan many technical assistance activities were not in line with their priorities and had to be adjusted. It is critical that PROCOSI and CHP have their annual plans well developed prior to finalizing the technical assistance team's annual plan or that the technical assistance team participate in the completion of the annual plans, especially for CHP, while completing their own workplan.

In addition to coordinated annual planning, the technical assistance team cannot achieve its results if the work, for example, in the CHP, continues to fall behind schedule. The CHP is currently behind schedule by at least 6 months in relation to their initial chronogram, due only in part to USAID's modification of the Rural Health Strategy. In PY2 the technical assistance team will propose to work with CHP to put mechanisms in place to allow for a better tracking of workplan achievement.

## 2. The balance of contract expectations and counterpart's desires

The Manoff Group's role is to provide technical assistance to both PROCOSI, and to the CHP in accordance with specific priorities that USAID has identified based on its prior work with PROCOSI. Part of this assistance is to ensure that the PROCOSI Network delivers on its agreement to implement the integrated community health component of the Rural Health Strategy. It has been a challenge during year 1 to align certain USAID priorities with what is being developed by CHP. This has become of particular importance because of the limited resources available for implementing the very robust Basic Package of services. Competing activities need to be prioritized. Decision making about the priorities and how to phase or combine particular activities has become a dilemma. This is often the case when experience dictates the need to prioritize because of the difficulty of getting a program like CHP operating in the community, especially when it will have many implementing partners, and what seem to be important elements during project design. It will be essential during PY2 that representatives of the technical assistance team and the CHP are able to work with USAID to set priorities—balancing the resource limitations with the key actions and putting other elements into later implementation phases or otherwise combining them in innovative ways with priority activities. There is an urgent need for prioritization.

## 3. The role of technical assistance

The Manoff Group's contract is for the provision of technical assistance to PROCOSI. By and large we have chosen to provide this assistance by working, day to day, in a team with our PROCOSI counterparts. We have attempted to identify critical areas to strengthen the work of the PROCOSI team and offer what is needed. Examples under the CHP include the introduction of the community-based growth promotion approach, development of the baseline and the evaluation plan, and formulation of a framework for the behavior change work. Under institutional strengthening the work has included Board strengthening, communication planning, and help with a diversified funding base through the establishment of a 501(c)(3) in the US. While these technical assistance contributions are recognized, The Manoff Group team receives many requests to do jobs that do not fall within the definition of technical assistance. During PY 1 USAID has been clear about what is included in the technical assistance package and what is not. Early in PY 2 through the workplan development and approval processes the definition of what constitutes technical assistance must be recognized by all major stakeholders in the work.

"Technical Assistance:  
The provision of know-how in the form of personnel, training, and research, along with support for associated costs, to augment the technical knowledge, skills, or productive capacity of the recipient country."

-"USAID Primer: What We Do and How We Do It,"  
January 2006

## 4. Broader understanding of the operational context

The successful technical advice work by The Manoff Group depends upon a good understanding of the context in which the technical assistance is occurring. During PY 1 the technical assistance team has worked hard to be recognized as a partner in the USAID Rural Health Strategy and to be able to attend meetings and work with partners in a way that allows for the fullest understanding possible of a relevant situation. As the

team reviews year 1, we realize that there has been minimal interaction with the NGO members of PROCOSI and there has been virtually no opportunity for the Community Health and Nutrition Advisor to get to know the realities of Bolivian communities. She has not been free to program her agenda which might include trips to communities with NGOs. While this situation will undoubtedly improve as the CHP enters an implementation phase, it will be important that in PY 2 the resident technical assistance team, and consultants who come for shorter periods are able to explore different situations on their own in order to offer the best guidance possible.

## **Annexes**

- A. PROCOSI Network Technical Assistance team and support staff
- B. Workplan Activity Timeline for Year 1 with end of year status
- C. PMP Year 1 Milestones and Status
- D. Financial Summary September 1, 2005 – September 30, 2006

## **Annex A: PROCOSI Network Technical Assistance team and support staff**

### In-Country Team and Long-Term Consultants

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**Annex B: Workplan Activity Timeline for Year 1 with end of year status**

**ADMINISTRATIVE TASKS**

Products from POAs PSC/PROCOSI	Focal point	Activities	Sep	Oct	Nov	Dec	Status	Comments
		Setting up Manoff Group team	X				Accomplished	
	Cecilia Espinoza	Establishing the Manoff Group office in Bolivia in PROCOSI building					March 2006	
	Cecilia Espinoza	Development of MoU/subcontract and operational arrangements with PROCOSI		X			Accomplished	
	Erika Silva	Familiarization with PROCOSI team, CHP team and with other actors in the health sector - develop 2006 workplan	X	X	X	X	Accomplished	

**OBJECTIVE 1:** Strengthen the technical capacity of PROCOSI and its members to deliver a standardized package of community-based health interventions

**RESULT 1.1** Strengthened technical capacity within PROCOSI to design and implement community-based health activities using the best national and international and quality standards

Productos de POAs PSC/PROCOSI	Punto Focal	Actividades	Sep	Oct	Nov	Dec	Status	Comments
PROCOSI has basic package (BP) of community-based health interventions including guides and materials, that allow for health impact	C Renteria F Navarro O Gonzales	Support development of basic package content with SOTA actions	X	X	X		Accomplished	
Processes identified for the implementation of the basic package	C Renteria F Navarro O Gonzales	Presentation of experiences for implemeting of basic package at community level in an integrated manner	X		X		Accomplished	
Technical Committee set and working		Be part of the interinstitutional Committee for USAID supported health projects		X	X	X	Accomplished	As required
	E Silva	Be member of the CHP Technical Committee					Postponed	Until the set up of the Committee when NGOs selected
	A Perez P Urquieta (CPC)	Be an active member of the interinstitutional Committee of Communication					Postponed	Until the set up of the Committee
Municipalities selected for the first phase of the implementation	JC Carrazas	Support the defintion of the criteria to include/plan the phases and coverage	X	X	X		Partially accomplished	In progress Needs to be repeated
Sub-granting criteria defined	JC Carrazas	Support the process of developing RFA for the NGO subgrants		X			Partially accomplished	In progress Needs to be repeated

**OBJECTIVE 1:** Strengthen the technical capacity of PROCOSI and its members to deliver a standardized package of community-based health interventions

**RESULT 1.2:** Development and implementation of an institutional approach for continuous quality improvement (CQI) monitoring and evaluation within the PROCOSI network

Products from POAs PSC/PROCOSI	Focal point	Activities	Sep	Oct	Nov	Dec	Status	Comments
Protocol for the Base Line designed	W Velazques	Support the development of the monitoring and evaluation plan for CHP	X	X	X		Partially accomplished	Until baseline implementation
	W Velazques	Support the development of baseline protocol	X	X	X		Accomplished	
Assessment of PROCOSI NGOs management capacity	JC Carrazas	Support the development of protocol to assess NGOs capacity	X	X			Postponed PROCOSI shifting responsibility	

**OBJECTIVE 2: Strengthen management capacity within the PROCOSI network to improve health program administration and institutional sustainability**

**RESULT 2.1. Development and implementation of an institutionalized approach for assessing and strengthening health program management capacity among NGOs members of the PROCOSI network.**

Products from POAs	Focal point	Activities	Sept.	Oct.	Nov.	Dec	Status	Comments
<b>CHP/PROCOSI</b>								
For NGOs members of PROCOSI								
Assessment of NGOs capacities	JC Carrazas C Espinoza	Support the assessment of managerial capacity of NGOs		X	X	X	Postponed	PROCOSI shifting responsibility to other people
For Executive Directorate of PROCOSI								
	Wendy McFarren	Support for development of communication strategy		X	X	X	Partially accomplished	In progress
	Wendy McFarren Garry Shaye	Support the development of the PROCOSI Board: manual, membership			X		Partially accomplished	In progress
	A Alvestegui	Contribute to the plan for Strengthening PROCOSI			X	X	Partially Accomplished	In progress
For the Community Health Project								
	E Silva	Support to long term planning			X		Accomplished	
	E Silva	Support to the communication plan for the project (CHP)			X		Partially accomplished	This task is a part of the strategy of communication for PROCOSI and is currently in progress
	JC Carrazas	Preparing NGOs before their designing of sub-granting proposals					Postponed until 2006	

**OBJECTIVE 1:** Strengthen the technical capacity of PROCOSI and its members to deliver a standardized package of community-based health interventions

**RESULT 1.1:** Strengthened technical capacity within PROCOSI to design and implement community-based health activities using the best national and international practices and quality standards

Products from POAs	Focal point	Activities	Status									Comments	Products	
			Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep			
CHP/PROCOSI			Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep			
<b>LOW 1: Support the development of definition of basic package of community health services, methodology for its implementation and supporting materials</b>														
<b>Model and community services of Basic Package defined</b>	Coordinators of components 1, 2, 3 and 4	Technical Assistance for defining the strategy for implementation of basic package	X	X	X	X						Accomplished	Definition of technical contents per type of agent (CHW) methodology, timeline and materials to be used.	Implementation strategy defined.
<b>Implementation strategy</b>		Development of the operation manual for community basic package				X	X	X	X	X	X	Accomplished	The draft operation manual was submitted to CHP Director for approval, some adjustments in progress.	Links with health services from CHP 42 municipalities established
		Support definition of community actions and use of routine information				X						Accomplished	Presentation from Guatemala Neonatal care workshop to CHP team. All information obtained, shared and reviewed with the team and adopted for operation manual and CHW manual.	Presentation and samples of materials
		Support for definition of CHW manual			X	X			X	X	X	Accomplished	All materials available in the country were reviewed as input for the CHW manual.	Instruments and manuals defined
		Second Study Tour to observe integrated community health programs					X					Postponed until 2007	Postponed with the change of strategy	Findings about management of community health programs and models of instruments used
	Erika Silva, Ariel Perez	Support to development of website for dissemination of CHP materials					X	X				Postponed	Until the definition of PROCOSI website.	The CHP website
<b>Package of educational materials produced and/or reproduced (in support to the basic package)</b>	Ariel Perez, Patricia Urquieta. Daniela Silva	Support in definition of communicational contents of Basic Package			X	X	X	X	X			Accomplished	Communication contents corresponds to technical contents. The final list of behaviours agreed was shortened due to insufficient funds for an adequate communication strategy.	Overall design of strategy and key materials for behaviour change

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Products from POAs Focal point	Activities	Status									Comments	Products		
		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep				
CHP/PROCOSI														
		To participate in the review of existing materials (in Bolivia and in the region), which will be used for implementing of basic package			X	X						Accomplished	Materials were reviewed and are in the process of estandarization for about 40% Other existing packages like IMCI were integrated in the new proposals and great part of its graphes and messages are being used.	Recommendations about basic package materials in order to reinforce behaviour change practices.
<b>Material prepared for public-private aliances</b>	Ariel Perez, Patricia Urquieta, Daniela Silva	Support in the search fo opportunities of collaboration with private sector				X						Not met	Activity pending on subgranting process progress.	Recommendations to implementing NGOs on the aliances opportunities
<b>LOW 2: Sub-granting process, training and NGOs technical capacity</b>														
<b>Sub-agreement to NGOs</b>	Erika Silva, Juan Carlos Carranza, Cecilia Boada	Support to twe sub-agreement process to NGOs for implementation of basic package	X	X	X					X	X	Accomplished		RFA ready
<b>NGOs teams trained in the prevention module, interpersonal communication and community participation.</b>	Components 1, 2 and 3 coordinators	Training of NGOs technicians and MoH technicians in basic package management and in training of CHWs							X	X	X	Postponed	Postponed due to delay in sut agreement process because of USAID cooperation in health adjustments.	Technicians trained and with uniform understanding of community basic package services and with habilities required for the starting level.
		Traing for facilitators from NGOs on information system, monitoring and supervision				X	X					In progress	Monitoring system 50% complete	Facilitators trained in information system, monitoring and supervision
		To work in coordination with JSI in developing its child health trainig course							X				Postponed	JSI has postponed course and may cancel it.
<b>The NGOs receive supervision in implementing community participation methodology</b>	Wilma Velasquez, Cristina Renteria, Elsa Sanchez, Ariel Perez	Participation in bi-monthly meetings with NGOs technical staff in order to support the analysis of information, discuss adjustments and receive monitoring data.						X		X		Postponed	Delay in the sub-granting process	Guides, instruments designed produce useful data for improvements.

Products from POAs Focal point	Activities	Status									Comments	Products	
		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep			
CHP/PROCOSI													
<b>LOW 3: Training and support to community health workers</b>													
<b>CHWs improvement and standarization plan defined and agreed</b>	Components 1, 2 and 3 coordinators	Proposal that includes increase and diversification of CHWs and plans for standarization and training agreed with coordinators.		X	X	X					Partially accomplished	Training guides have been initiated in agreemnt with job descriptions of CHWs	Integrated plan including profiles, training, CHWs diversity, description of roles and expectations of performace
<b>CHWs training package support</b>	Elsa Sanchez	Support to the training system and adoption of best practices			X	X					Accomplished	Pending final definitions on training modules and materials a proposal of the guide for trainer will be issued	Recommendations for training and refreshment training
		Prepare training plans in order to train the CHWs at the basic standarized level.					X				Partially accomplished	The CHP team continues to work on development of those materials.	The packge includes: guide for the facilitator, guide for the CHW, guides for development of interpersonal communication, negotiating skills, use of materials, monitoring pf print and audiovisual.
		Technical assistance in definition of curricula and methodology of training for facilitators (NGOs technicians) and CHWs in community participation.				X	X				Accomplished	Available curricula reviewed and format agreed to.	Curricula for training of facilitators and CHWs finalized.
<b>Rapid monitoring assessments of CHWs performance</b>	Elsa Sanchez , Cristina Renteria, Wilma Velasquez	Support processes monitoring system									Postponed		Improving corrections and NGOs stimulation
<b>LOW 4: Contributions to particular aspects of implementation</b>													
<b>Local Baseline report with findings and recommendations to be applied on NGOs projects (Implementing NGOs)</b>	Elsa Sanchez, Cristina, Ariel Perez and team	Orientation on issues to research and methodologies in order to complete unknowned aspects in the areas of projects									Postponed		Special studies completed with recommendations for the CHP team on implementation of community Basic Package

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Products from POAs Focal point		Activities	Status									Comments	Products	
CHP/PROCOSI			Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep			
<b>Interinstitutional Committee on Communication organized and working</b>	Ariel Perez, Patricia Urquieta, Daniela Silva	Participation in the Committee										Postponed	To be organized when the sub-agreement process is concluded	Best use of communication support
<b>Rapid assessments of communication and educational impacts</b>	Ariel Perez, Patricia Urquieta, Daniela Silva	Support to definition of rapid surveys on audiences of basic package materials.										Postponed	Pending implementation	Adjustment of materials and/or production of new education communication materials
<b>LOW 5: Special initiatives support</b>														
<b>Proposal for delivery and neonatal care at community level - special proposal</b>	Erika Silva, Cristina Renteria	Support to integration of delivery care and neonatal care to the basic package program and development of "pilot" experiences for learning							X	X		Partially complete	Discussion started, materials ordered related to SEARCH project	Content defined using lessons learned in another countries
Training alternative methodologies (self training modules)	Ariel Perez, Patricia Urquieta, Daniela Silva	Provide examples of alternative methodologies of training (use of radio)				X						Postponed until 2007	At this time there are no funds to use radio for distance training	Short term pilot design experienced and extended afterward
Support EPI promotion in USAID selected municipalities	Erika Silva, Cristina Renteria	Support with experiences from other countries to promote routine immunization						X	X			Postponed	Delay in sub-granting process	Campaigns to boost coverage with private sector support
Support Chispitas promotion in Basic Package	Erika Silva, Cristina Renteria	To design a test at community level.									X	Postponed	Government policy was changed	Sprinkles will be part of Basic Package
		Support initiative for Title II NGOs with Growth Promotion programs	X		X		X					Postponed	Pending USAID approval	Programatic Coherence and coordination

**OBJECTIVE 1 Strengthen the technical capacity of PROCOSI and its members to deliver a standardized package of community-based health interventions**

**RESULT 1.2: Development and implementation of an institutional approach for continuous quality improvement (CQI) monitoring and evaluation within the PROCOSI network**

Products from POAs	Focal point	Activities	Status									Comments	Products	
			Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep			
<b>CHP/PROCOSI</b>														
<b>LOW 1: Complete base line in order to measure the impact of CHP</b>														
Selection of NGO to implement base line	Wilma Velasquez	Review of proposals and documentation and support of the final selection process	X									Accomplished	Ranking based on experience, abilities, skills and analytical capacity. CEPADES selected as best among 3 candidates.	Best candidate recommended.
Base Line completed in 55 municipalities	Wilma Velasquez	Preparing selected NGO		X								Accomplished	Research protocol and instrument for data collection were reviewed with CEPADES in preparation of the field work.	Proposal and contract refined, NGO oriented
		Support training of investigators and do the follow up to their field work			X							Accomplished		Survey quality insurance
		Follow up to the data processing and analysis					X			X		Accomplished	Preliminary data analysis due to delay in final data delivery	Improved data analysis capacity of CHP/NGOs M&E team. Data analyzed.
		Review of final report						X				Accomplished	Meetings in May with CEPADES, and Velasquez and Enge contributed suggestions.	
		Presentations of data according to audiences						X		X	X	Partially accomplished	To continue after submission of final report	Presentations of results ready
<b>LOW 2: Support NGOs in their base lines in order to measure results at community level</b>														
Base Line, diagnosis of area completed by NGOs	Wilma Velasquez, Elsa Sanchez	To work with NGOs M&E persons in order to use best practices for baselines, formative research and community assessment			X			X	X	X		Partially accomplished	Community baseline format suggested. Selection of implementing NGOs has been delayed	Simple base line to be used by community to measure changes
		To transfer the methodology and instruments for assessment and baseline at community level to implementing NGOs in order to ensure quality of results					X					Postponed	NGOs not selected yet	Community baseline completed
	Elsa Sanchez, Ariel Perez, Daniela	To strengthen efforts by CHP to have local information for improving programming							X	X		Postponed	New areas to be finalized	Selected NGOs with capacity and CHP with in-depth studies on operational aspects of basic package

Products from POAs	Focal point	Activities	Status									Comments	Products	
			Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep			
<b>CHP/PROCOSI</b>														
<b>LOW 3: Development and support to monitoring and quality control system (this system uses data and is linked to work lines 1 and 2)</b>														
Monitoring and evaluation system implemented with NGOs. The system integrate all components	Wilma Velasquez	Support development of integrated Monitoring and Evaluation Plan (all components) including design of instruments.				X	X			X	X	Partially accomplished	Work in progress to be accomplished with consultant in 4th quarter of 2006	Proposal of Monitoring and Evaluation plan
Development of epidemiological surveillance system at community level		To train NGOs in collection and data management while implementing monitoring system						X	X			Postponed	Pending final selection of NGOs	Guide developed
		To proces information sent by NGOs								X	X	Not met	Pending final selection of NGOs	CHP reports done, recommendations supported
		Surveillance and data quality control of NGOs in order to ensure that information is useful and used											Not met	Pending final selection of NGOs
<b>LOW 4: Development and support to the monitoring system of financial and administrative capacity of PROCOSI network NGOs. (in coordination with LOW 1, objective 2)</b>														
Collect base information from 36 PROCOSI NGOs	Juan Carlos Carazas y Cecilia Boada	Support instrument development and data collection	X									Partially accomplished		Recommendation on questionnaires made
		Support PROCOSI in data entry and data analysis from 36 NGOs		X									Not met	Activity postponed by CHP and moved to Manoff group obj.2
		Report review				X						Not met	Activity postponed by CHP (see obj.2)	Report from 36 NGOs with recommendations for action for PROCOSI
		To use information to develop a training plan				X	X					Not met	Activity postponed by CHP (see obj.2)	Strengthening plan with responsibilities for Manoff Group
		Follow up plan - data base on NGOs						X	X			Not met		Data base on NGOs capacities

**OBJECTIVE 2: Strengthen management capacity within the PROCOSI network to improve health program administration and institutional sustainability**

**RESULT 2.1: Development and implementation of an institutionalized approach for assessing and strengthening health program management capacity among NGOs members of the PROCOSI network.**

Products from POAs	Focal point	Activities	Status									Comments	Products		
			Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep				
<b>CHP/PROCOSI</b>															
<b>LOW 1: Management capacity building of PROCOSI network NGOs</b>															
Management capacities diagnosis of PROCOSI network NGOs	Juan Carlos Carazas, Cecilia Boada, Alfonso Alvestegui	To identify needs for strengthening in administration and define indicators			X	X							Not met	Responsibilities assumed by PROCOSI Institutional strengthening unit activity to be reprogrammed.	Human Resources identified
Implementing NGOs trained in management skills, leadership, administration and finance	Cecilia Boada Cecilia Espinoza Juan Carlos Carazas, Alfonso Alvestegui	Support to PROCOSI/CHP committee for development of training plan for NGOs					X	X					Not met	Responsibilities assumed by PROCOSI Institutional strengthening unit activity to be reprogrammed.	Plan of strengthening agreed and Manoff Group responsibilities identified
		To support implementation of plan of training for NGOs and initiatives of transfer and development of capacities					X						Not met	Responsibilities assumed by PROCOSI Institutional strengthening unit activity to be reprogrammed.	HR identified
<b>LOW 2: Support for development of PROCOSI institutional sustainability</b>															
	Gary Shaye and Board of Directors	Assessment of the institutional development needs of PROCOSI and the board			X	X	X						Partially met	First round of consultations with the Board and ExDir completed.	Assessment memo
	Gary Shaye and Board of Directors	To facilitate exploration of options for governability	X	X	X	X	X	X					Accomplished	Presentation on alternative models	Consensus on the plan of governability.
	Wendy McFarren Alfonso Alvestegui	Contribution to the design of PROCOSI Strategic Plan and the process of strategic planning				X	X	X					Not met	After discussions PROCOSI determined that assistance was not needed from this contract - PROCOSI has other mechanisms	PROCOSI Strategic Plan approved
	Wendy McFarren Gary Shaye	Support to Board development	X	X	X	X	X	X	X	X	X		Accomplished	Opportunities for Board strengthening memo. Board manual outlined. Recomending upgrading member orientation	Board structured and with procedures
	Wendy McFarren Alfonso Alvestegui	Development of the marketing/positioning plan for PROCOSI			X	X	X	X	X	X	X		Accomplished	Communication Strategy for PROCOSI final draft Stakeholders Analysis document	Assistance in conceptualizing and working documents
<b>LOW 3: Plan for PROCOSI financial sustainability</b>															
	Wendy McFarren Alfonso Alvestegui	Support in developing plan for funding including new sources			X								First phase accomplished	To be continued Memo on 501(c)(3), Donor trends International conferences opportunities	Strategy and Action Plan for fundraising

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**ADMINISTRATIVE TASKS:**

Products from POAs CHP/PROCOSI	Focal point	Activities	Jan Feb Mar Apr May Jun Jul Aug Sep									Status	Comments	Products	
			Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep				
	Cecilia Espinoza	Setting up of Manoff Group office in Bolivia			1								Accomplished		Manoff Group office operating
		Reports				30				30			Accomplished		Quarterly reports
		PMP			x								Accomplished		PMP part of the contract
	Erika Silva, Wendy Mc Farren	Planning future activities and coordination													2007 POA
			15	15	15	15	15	15	15	15	15	15	15	Accomplished	As necessary
	Johnny Lopez (PROSIN)	To be active member of USAID partners		x	x	x	x	x	x	x	x	x	As required		Better coordination among USAID partners

## **Annex C: PMP Year 1 Milestones and Status**

**RESULT 1.1. Strengthened technical capacity within PROCOSI to design and implement community-based health activities using the best national and international practices and quality standards**

<b>General Products</b>	<b>Milestones/Performance Targets</b>	<b>Status</b>	<b>Comments</b>
<b><i>Product 1: PROCOSI (CHP) has a basic package (BP) of community-based health activities including guides and materials, that allows for quality implementation.</i></b>	<b>Nov-Dec 2005</b> Basic Package (BP) including state of the art actions defined with CHP team and USAID.	Completed in June 2006 including materials	Delay due to USAID health strategy adjustments
	<b>May 2006.</b> 100% of NGOs implementing CHP agree with BP and its materials for implementation.	Complete	
	<b>July 2006</b> Materials for implementation ready.	Materials will be ready in January 2007 in accord with new implementation plan, draft design for materials completed	Materials designed and ready for production
<b><i>Product 2: NGOs from PROCOSI Network are capable of implementing a community-based program offering quality BP services, showing improvement in basic health indicators within their areas of influence, and linking with health services.</i></b>	<b>April 2006.</b> Work sessions completed with groups of NGOs in order to transfer the BP implementation methodology.	Will be completed in the 1st quarter of 2007, when the CHP implementing NGOs will be known	Delay due to USAID health strategy adjustments
	<b>August 2006</b> CHP NGOs have transferred the methodology to their communities.	Will be completed in the 2 <sup>nd</sup> quarter of 2007	Delay due to USAID health strategy adjustments
	<b>Sept. 2006</b> Training Plan for Child Health Course(s) agreed to with JSI.	Not met	JSI dropped the activity
<b><i>Product 3: CHP and PROCOSI have information available from operational, qualitative studies (and the capacity to carry out the studies) in order to improve program implementation.</i></b>	<b>July 2006</b> Formation of a group representing NGOs from CHP to be trained in qualitative research for operational studies.	Will be implemented in 2 <sup>nd</sup> quarter of 2007	Delay due to USAID health strategy adjustments
<b><i>Product 4: Network of community health workers in the CHP priority areas with improved performance</i></b>	<b>March 2006.</b> Analysis of different models for the management of CHWs and the identification of the best models for CHP.	Will be implemented in 1 <sup>st</sup> quarter of 2007	
	<b>June 2006.</b> Workshop to agree on a plan for standardizing and successful methodologies for training at scale.	Will be implemented in 1 <sup>st</sup> quarter of 2007	Delay due to USAID health strategy adjustments

**Result 1.2. Development and implementation of an institutional approach for continuous quality improvement (CQI) monitoring and evaluation within the PROCOSI network.**

<b>General Products</b>	<b>Milestones/Performance Targets</b>	<b>Status</b>	<b>Comments</b>
<b><i>Product 1: Tools and a baseline completed/agreed to, to measure the impact of CHP, and for PROCOSI to use as a model for program evaluation.</i></b>	<b>February 2006.</b> Protocol for implementing baseline with objectives, instruments and procedures finalized.	Completed on schedule	
	<b>May 2006</b> Director of M&E for CHP trained in data analysis.	Met and will continue in 2007	Hands-on training
	<b>July 2006.</b> Final Baseline Report.	Complete	1 <sup>st</sup> Base Line Study
	<b>Sept. 2006</b> Baseline results shared with NGOs (sub-grantees of CHP) for use in program and for planning the final evaluation.	Will be completed in 1 <sup>st</sup> quarter of 2007	As soon as NGOs sub-grantees are known. Two reports shared with PROCOSI.
<b><i>Product 2: NGOs (CHP subgrantees) and PROCOSI have protocols and instruments for measuring the quality of implementation of community health programs.</i></b>	<b>April 2006.</b> Compilation of quality "evaluation"/monitoring methodologies to assess the quality of community-based projects.	Partially met, will continue in 2007	
	<b>Sept. 2006.</b> Training workshops in conducting annual program quality assessments.	Postponed until 2 <sup>nd</sup> quarter of 2007	Delay due to USAID health strategy adjustments
<b><i>Product 3: Communities equipped with tools to measure their own progress in community health</i></b>	<b>March 2006</b> Presentation of options for community information systems.	Postponed until 1 <sup>st</sup> quarter 2007	Until the beginning of field activities
	<b>June 2006</b> Information System included in the CHP Operational Guide.	Partially completed, in progress	Pending on the progress of SIGPRO – PROCOSI monitoring system
<b><i>Product 4: PROCOSI/CHP has a monitoring system to track NGOs health program management systems (see Product 1, Obj. 2.1</i></b>	<b>June 2006</b> Revision of data base on NGOs capacities.		

**Result 2.1. Development and implementation of an institutionalized approach for assessing and strengthening health program management capacity among NGOs members of the PROCOSI network.**

<b>General Products</b>	<b>Milestones/Performance Targets</b>	<b>Status</b>	<b>Comments</b>
<b><i>Product 1: PROCOSI NGOs with management capacity improved especially as it relates to health program management</i></b>	<b>March 2006</b> Analysis of NGO Diagnosis conducted by CHP.		Activity assumed by PROCOSI, subject to reprogramming
	<b>May 2006</b> Identification of necessary changes and plan for strengthening management.	Will be included in 2007 work plan	
<b><i>Product 2: PROCOSI has an institutional sustainability plan and concrete results from its implementation</i></b>	<b>June 2006</b> Options about Board functions, communication, decision making, and a manual of functions and a code of ethics presented to the Board of Directors.	Completed	
	<b>March 2006</b> PROCOSI has a framework for its Strategic Plan.	Completed	
	<b>April 2006</b> First round of the stakeholders' analysis presented.	Completed	
	<b>Sept. 2006</b> Stakeholders' analysis completed.	Will continue in 1 <sup>st</sup> quarter 2007	
	<b>June 2006</b> Marketing/communications finalized with information from stakeholders analysis.	Completed	

**Annex D: Financial Summary September 1, 2005 – September 30, 2006**

**FINANCIAL REPORT SUMMARY**

**CONTRACTOR:** The Manoff Group, Inc.  
**CONTRACT NO:** 511-C-00-05-00200-00  
**DATES OF CONTRACT:** 26 August 2005 - 25 August 2008  
**REPORTING PERIOD:** 1 September 2005 - 30 September 2006  
**SUMMARY:** TOTAL

<b>LINE ITEM:</b>	<b>CONTRACT BUDGET</b>	<b>CUMULATIVE EXPENDED</b>	<b>CONTRACT FUNDS REMAINING</b>
SALARIES	\$868,463	\$312,048.16	\$556,415
FRINGE BENEFITS (42.8%)	\$371,702	\$135,474.32	\$236,228
TRAVEL & TRANSPORTATION	\$152,693	\$41,112.11	\$111,581
EQUIPMENT	\$6,610	\$4,286.65	\$2,323
MATERIALS & SUPPLIES	\$7,345	\$808.24	\$6,537
COMMUNICATIONS	\$22,035	\$6,407.99	\$15,627
CONSULTANTS	\$371,571	\$35,867.54	\$335,703
ALLOWANCES	\$150,221	\$41,668.70	\$108,553
OTHER DIRECT COSTS	\$18,113	\$3,452.16	\$14,661
G & A (30%)	\$590,626	\$166,801.68	\$423,824
<b>SUBTOTAL COSTS</b>	<b>\$2,559,379</b>	<b>\$747,927.55</b>	<b>\$1,811,452</b>
FIXED FEE (4%)	\$102,375	\$29,916.52	\$72,459
<b>TOTAL COSTS</b>	<b>\$2,661,754</b>	<b>\$777,844.07</b>	<b>\$1,883,910</b>