

**LMG/Côte d'Ivoire: Program Year 3, Quarter 1 PEPFAR Progress
Report
October-December, 2013**

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Nom de l'Accord de Coopération: Management Sciences for Health, Leadership, Management and Governance Project (LMG)

Numéro de l'Accord de Coopération : AID-OAA-A-11-00015

Domaines programmatiques couverts par l'Accord de Coopération:

- **Human Resources for Health**
- **Strategic Information**

ANNEE FISCALE : 2014

RAPPORT D'ACTIVITES

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I - RESUME SYNTHETIQUE DE LA PERIODE

The following is a summary of the activities carried out October 1 through December 31, 2013, by the Leadership, Management and Governance Project in Côte d'Ivoire (LMG/CI), funded by USAID/Côte d'Ivoire through PEPFAR field support. Since December 2011, LMG/CI has provided technical assistance to the Global Fund Country Coordinating Mechanism (CCM) and Principal Recipients (PRs) to build their capacity in the areas of leadership, management, and governance; monitoring and evaluation; supervision; and resource mobilization. Technical assistance is designed to help clarify the roles and responsibilities of the CCM and the PRs, with the goal of enabling these entities to fulfill their critical functions and be effective players in rallying all sectors to combat HIV and AIDS, malaria, and TB.

In addition to the targeted support for the CCM and PRs in line with the four objectives above, LMG/CI conducted an initial capacity assessment of civil society organizations to gauge their advocacy capacity in April 2013. A new fifth objective is defined in the workplan to take into consideration the expanded continuation of this work. The full workplan package for project year 3 (October 2013 – September 2014) was approved on November 19, 2013.

The LMG/CI-approved workplan for the period October 2013 through September 2014 to support the Global Fund CCM and sub-committees had five objectives, as follows:

- **Objective 1:** The Country Coordinating Mechanism (CCM) understands the updated Global Fund directives and is following a plan to ensure compliance with Global Fund regulations and internal CCM governance, operational processes, and orientation standards are strengthened to ensure transparent, streamlined, and sustainable implementation of CCM activities
- **Objective 2:** Oversight and monitoring and evaluation of grant performance is strengthened by utilizing effective tools
- **Objective 3:** The CCM harmonizes activities with key stakeholders and mobilizes additional resources to carry out basic CCM functions (harmonization of activities and donor function strengthened)
- **Objective 4:** CCM and Principal Recipients' leadership, management, and financial skills strengthened and capacity to implement, monitor, and evaluate programs strengthened
- **Objective 5:** Leadership, management, and governance skills within selected civil society networks strengthened and capacity to play advocacy role in the Ivorian health system reinforced

At the close of this reporting period, which coincides with the first quarter of the new workplan and objectives detailed above, the project team is pleased to report that the work completed this quarter and during the course of the previous workplan period has strengthened the CCM's and subcommittee's capacity to carry out their critical functions, supporting Global Fund proposal processes and supporting the Permanent Secretariat.

As previously reported, PEPFAR has proposed a new field support activity under LMG/CI for a decentralized management pilot project in two health regions. The LMG/Côte d'Ivoire Decentralization pilot project's support to the two regions and their nine districts has three main objectives:

- **Objective 1:** Strengthen governance practices including advocacy, strategic planning, coordination, development of guidelines, and the application of regulations and information within the Departmental Health Directorates (DDs) and Regional Health Directorates (DRs)
- **Objective 2:** Develop and implement leadership, management, and governance practices for leaders and managers of health in the DRs, DDs and in the private sector
- **Objective 3:** Strengthen the capacity and performance of the DRs and DDs

The LMG/CI team, in collaboration with the General Health Directorate and the targeted DRs and DDs, has developed a workplan package including a final program description document for the pilot project. This workplan and program description package was submitted to PEPFAR on December 20, 2013, and is currently pending approval. Once the workplan and Performance Monitoring Plan for the decentralization pilot project is approved in the next quarter, the project will begin to report on these sets of activities separately.

II - NARRATIF DES RESULTATS ATTEINTS

Health System Strengthening / Strategic Information

Support to the Global Fund CCM and PRs: LMG/CI continued to provide capacity building support to the CCM and the technical committees (HIV, TB, malaria and finance). The project worked with the CCM to strengthen and facilitate negotiations with the Global Fund and to ensure that the CCM works consistently towards fulfilling all Global Fund requirements for CCMs. During this quarter a new CCM Permanent Secretary was recruited and approved by the Global Fund team to begin work in November 2013.

Coordination with the CCM: Following the approval of the LMG/CI workplan for activities to support the Global Fund CCM and PRs, the newly-recruited local team met with the President and new Permanent Secretary on November 22, 2013, to review the activities for this coming project year. During this meeting, the LMG/CI Project Director was able to establish the basis for a strong working relationship with the CCM President and Permanent Secretary and ensure that the project's objectives and proposed activities aligned with CCM priorities. The CCM leadership validated the activities in the LMG/CI workplan and highlighted key activities for rapid implementation, including critical operational and technical support to the four committees.

CCM technical committee meetings: The LMG/CI team provided technical and financial assistance to the CCM to ensure that the technical committees began to hold regular meetings. Since the restructuring of the CCM into the four thematic committees in April 2013, committee rosters had not been finalized, meetings were not held regularly or even at all, and the committees' scopes of work, including their roles and responsibilities, were not clarified.

During this quarter LMG/CI staff worked to support the HIV, TB and finance committee meetings and helped each committee to understand its various roles and responsibilities. PRs were invited to committee meetings to present an update on grant implementation and planning for the upcoming quarter's activities; LMG/CI staff provided technical support to the CCM in providing feedback and leading discussions on the PR presentations. With the HIV committee, the LMG/CI team also detailed the scope of work and budgets for site visits and has continued to provide technical and logistical support to the committee in preparing for their first site visits in the upcoming quarter.

CCM oversight support and coaching: Given the restructuring of the CCM committees and significant staffing changes within several of the PRs over the past several months, the LMG/CI team provided a second Grant Dashboard training as a refresher to the session conducted in October 2012. LMG/CI conducted a tailored two-day training on oversight and the Grant Dashboard tool specifically for more than 20 members of CCM technical committees and the Secretariat. To maximize the benefits of the trainings, the project team met with each PR individually to tailor a review of their specific grant dashboards and provide an in-depth orientation for PRs with new staff. This follow-up work allowed new staff members from the CCM and PRs to learn basic oversight and monitoring strategies and how to use the Grant Dashboard tool, and also provided an opportunity for the project team to troubleshoot and provide feedback to the PRs on tools completed since the first training session.

Decentralization pilot project: Based on the situational analysis completed in July, the LMG/CI team drafted the technical approach and program description document for this new activity with input from USAID/PEPFAR in September 2013. Their key message was to consistently ensure that the focus of the activity was on the regional and district levels rather than attempting top-down approaches through the central level, or providing direct support to the site level, as other PEPFAR implementing partners are using this approach. The LMG/CI team incorporated this feedback into a revised program description submitted along with the workplan package on December 20, 2013, for approval.

The full workplan package was developed based on the workplanning sessions held in September with each of the regions' and districts' inputs and tailored support packages. Throughout the finalization of the workplan components (workplan activities, budget, and Performance Monitoring Plan), the LMG/CI team maintained close coordination with the Regional and District Directors to ensure that activities aligned with local priorities and remained within the scope of the project.

To harmonize PEPFAR activities at all levels of the regional health system within the pilot regions and districts, the PEPFAR team organized a series of implementing partners meetings with the LMG/CI, Supply Chain Management Solutions (SCMS) project, and the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF). Through these coordination meetings, the partners were able to share activity plans and ensure that overlaps are avoided and that each partner's activities contribute to the success of the PEPFAR strategy and objectives.

Following the PEPFAR, LMG/CI, EGPAF and SCMS coordination meetings, all partners participated in a joint visit to the Indénié-Djuablin and N'Zi-Iffou Health Regions on December 4-5, 2013, to meet with Regional Directors and detail the whole of PEPFAR interventions for the coming year. PEPFAR and the implementing partners thus clearly defined the role of each project and the scope of their

activities to clarify the differences and synergies among the projects. The main roles for each project were presented as follows:

- **LMG/CI will:**
 - Provide technical support to the regional and district-level directorates on leadership, management and governance within the directorate
 - Provide office equipment and materials to the district-level structures
 - Provide technical and financial support for regular coordination meetings and periodic review meetings.

- **SCMS will:**
 - Support the supply chain at the regional, district, and health service delivery points
 - Provide vehicles (5 to N’Zi-Iffou) for use in commodity distribution and supervision
 - Provide office equipment and materials to the regional structures
 - Provide technical support to regular coordination meetings and periodic review meetings.

- **EGPAF will:**
 - Provide community-level and clinical support
 - Conduct training sessions for health service providers
 - Provide office equipment and materials to the site level
 - Provide technical support to regular coordination meetings and periodic review meetings.

LMG/CI staff also continued discussions with USAID regarding a baseline evaluation. USAID informed the project team that an external baseline will not be conducted as initially discussed. LMG/CI and EGPAF are currently collaborating to develop an assessment methodology and define the assessment indicators in line with both the LMG and EGPAF technical interventions. The baseline assessment tool will be finalized and implemented in the next reporting period.

III - DIFFICULTES ET/OU CONTRAINTES DE LA PERIODE

III.1 : Difficultés et/ou Contraintes

CCM staffing: As previously reported, the CCM Permanent Secretary position was vacant from July 1, 2013-November 2013. While LMG/CI provided interim support to fill the position through the end of September 2013, a permanent replacement was not recruited until November. During the period prior to the final recruitment of the new Permanent Secretary, LMG/CI provided support to the CCM in negotiating and coordinating with the Global Fund to finance interim coverage and obtain recruitment approval. The Permanent Secretary has been a key focal point for LMG/CI activities and project implementation, and the CCM President thus requested that a number of activities be suspended pending recruitment of a replacement. The recruitment finalization with the CCM and the Global Fund was delayed through October and the project was thus unable to move forward with key planning for implementation during much of this quarter.

CCM funding: A disbursement from the Global Fund to finance the CCM and allow for functional operations of the offices was pending for much of the quarter. Without this funding the CCM was not able to move to its new location, and the current office spaces were under construction by new tenants.

III.2 : Solutions apportés aux Difficultés et/ou Contraintes

The Global Fund finalized the recruitment of a Permanent Secretary in November 2013. Having this full-time focal point on board has facilitated LMG/CI's coordination with the CCM. The project is working along with other partners to ensure the smooth onboarding and orientation of the new Permanent Secretary, and has held strategic planning meetings with both the Permanent Secretary and the President to plan and prioritize activities for the coming year.

On December 19, 2013, the Global Fund informed the CCM that the funds disbursement for CCM operations was completed. The CCM was then able to finalize the lease of its new office space and move its operations. With the Global Fund funding details, the LMG/CI project is also able to complement this financing and ensure that the project's support to the operations of the CCM (including office equipment and materials) does not duplicate Global Fund investments.

III.3 : Initial Environmental Examination (IEE)

The Summary of Programmatic Initial Environmental Examination (PIEE) for the global Leadership, Management and Governance Project, PIEE Number 0042, recommends a "Negative Determination with Conditions" based on the premise that training activities could include "Training professional and paraprofessional health workers in methods that result in the generation and disposal of hazardous or highly hazardous medical waste..." At this time, such training has not been undertaken and is not anticipated under LMG/Côte d'Ivoire. Should such training or related activities be anticipated, LMG/Côte d'Ivoire will prepare a request for an amended environmental examination.

IV – BESOINS EN ASSISTANCE TECHNIQUE

In the next reporting period, the project will continue discussions with USAID/PEPFAR on the technical approaches and activity plans for all components of LMG work in Côte d'Ivoire. The priority will be to use the local project staff as much as possible rather than bring in external assistance. USAID/PEPFAR has played a key role in the past year in determining new or modified project objectives, particularly with the recent feedback on the Global Fund CCM and PR support approach, the decentralization pilot project, and the capacity building proposals made following the advocacy capacity of CSOs. Ongoing, regular support and collaboration in response to the shifts in the project and in USAID/PEPFAR strategy will ensure the continued success of LMG/CI.

V – PERSPECTIVES / Activités clés pour la prochaine période

In the next reporting period, the LMG/CI team will continue to coordinate closely with USAID/PEPFAR, stakeholders and implementing partners to prioritize and schedule activities based on stakeholder timelines. The following are key activities currently planned for January 1 through March 31, 2014:

Support to the Global Fund CCM and PRs:

- Provide additional in-depth trainings to CCM members on the newly-revised Global Fund directives, updated CCM eligibility requirements, the policy on managing conflicts of interest, key revised documents, and the importance of gender in designing and implementing activities.
- Provide trainings and technical assistance to orient and support the CCM and PRs on the new Global Fund New Funding Model, including the interim applicant process for the malaria PRs.
- Facilitate intensive trainings and onboarding orientations to GF directives and procedures for the new CCM Permanent Secretary
- Provide regular capacity building support to the CCM secretariat staff and President on the role of the CCM as well as coaching on specific responsibilities, meeting with the CCM leadership both on a regular basis (weekly during the first quarter, and at least bi-weekly thereafter) and on an ad hoc basis, as requested by the CCM leadership.
- Provide technical support to the four CCM committees (HIV and AIDS, malaria, tuberculosis, and finance) to develop and finalize detailed annual workplans and budgets.
- Provide technical and financial support to the three disease committees to hold monthly meetings and for the finance committee to hold quarterly meetings.
- Provide financial support to the CCM to ensure nine programmatic oversight visits in addition to the Global-Fund supported site visits are conducted by the committee focal points to oversee grant implementation.
- In collaboration with the disease committees and technical program managers, conduct an in-depth capacity building needs assessment with each Principal Recipient, identifying all other donors providing support; this detailed assessment will serve as an input into the CCM resource mobilization activities and project technical assistance planning.
- Purchase identified IT equipment (detailed in the procurement budget, including six computers and office printers) for the Permanent Secretariat to allow for effective and efficient operations in the new CCM offices.

Decentralization Pilot Project:

- Conduct project baseline assessment
- Provide technical and financial assistance to the regional health directorate to hold monthly regional senior health team meetings with the DR team, chief medical officer, regional health center director, and regional councils to discuss management priorities.
- Provide technical and financial support to the regional team to hold quarterly coordination meetings with the district health teams to evaluate the status of regional and district-level activities.
- Provide technical and financial support to the regional team to hold semi-annual meetings to coordinate activities with all service providers and regional stakeholders, including the district health teams, implementing partners, NGOs, regional prefect, and regional councils.
- Design and carry out a regional strategic planning and visioning workshop with stakeholders, including the regional health team, departmental directors, mayor, regional prefects, representatives of other ministries, and NGO partners.
- Provide technical and financial support to the regional health directorate to hold a one-day meeting with local stakeholders to disseminate and promote legal decentralization texts.

- Provide technical assistance to the regional health team throughout the development and finalization of the regional health development plan (PRDS).
- Provide technical and financial support to the regional health team to conduct a regional workshop with district teams to develop a regional workplan, integrating components from each district's workplan.
- Develop supportive supervision training curriculum and compile supervision tools for regional and district health teams.
- Purchase identified materials and equipment (detailed in the procurement budget) for the DR to allow for effective and efficient operations of the regional health team in coordination with other implementing partners.

VI – FICHE RECAPITULATIVE DES FORMATIONS DE LA PERIODE

FICHE RECAPITULATIVE DES FORMATIONS DU TRIMESTRE : 1 ^{er} octobre 2013 – 31 décembre 2013										
N ^o	Titre de la formation	Domaines Programmatiques	Nombre de personnes formées sur la période			Date de début	Date de fin	Durée de la formation (en heure)	Lieu de la formation	Profession des personnes formées
			Anciens (déjà formés sur l'année fiscale)	Nouveaux (sur l'année fiscale)	Total					
1	Grant Dashboard Training for the CCM	Information Stratégique : Suivi-Evaluation	0	23	23	10 October 2013	10 October 2013	5 hours	UNAIDS	CCM secretariat, CCM technical committee members, and UNAIDS country manager

• Liste des domaines programmatiques par axe d'intervention

PREVENTION	SOINS et SOUTIEN	TRAITEMENT	RENFORCEMENT DES SYSTEMES
Prévention (PTME, Traitement des IST, Conseil - Dépistage (Non techniciens de laboratoire))	Soins et Soutien (Care and Support incluant les soins cliniques, la PEC nutritionnelle)	Traitement ARV	Information Stratégique : Suivi-Evaluation ; Surveillance et Ethique ; Informatique-Système d'Information Sanitaire (choisir le programme)
Sécurité Transfusion (Blood Safety)	TB/VIH		Laboratoire (techniciens de laboratoire exclusivement)
Abstinence et/ou Fidélité	OEV		Gestion des stocks d'intrants, médicaments et logistiques
Autres Préventions-CCC-Condoms (incluant les MARPS)			Leadership et Gestion des programmes <ul style="list-style-type: none"> Gestion financière, Gestion des ressources humaines Développement de politiques (inclut la démarche qualité)
Sécurité des Injections (Injection Safety)			
Prévention avec les PVIH (PwP)			

VII - INDICATEURS A RENSEIGNER

2 – Health system strengthening / Human Resources for Health

Codes	Indicateurs	*Calcul	Targets	Réalizations					
2	Human Resources for Health	Add/ Cum	Fiscal Year 2014	Q1 Oct-Dec 2013	Q2 Jan-Mar 2014	Q3 Avr-Juin 2014	Q4 Juil-Sept 2014	Total	Taux de réalisation global
H2.1.D	Number of new health care workers who graduated from a Pre-service training institution	Add							
H2.1.D1	Doctors	Add							
H2.1.D2	Nurses	Add							
H2.1.D3	Midwives	Add							
H2.1.D4	Social Workers	Add							
H2.1.D5	Lab Technicians	Add							
H2.1.D6	Others (Autres diplômés à préciser)	Add							
H2.2.D	Number of community health and Para-social workers who successfully completed a Pre-service training program (concerne surtout les conseillers communautaires nouvellement recrutés formés pour la première fois sur une durée de quelques jours à au plus 6 mois pour commencer le travail)	Add							
H2.2.D1	Male	Add							
H2.2.D2	Female	Add							
H2.3.D	Number of health care workers who successfully completed an in-service training program (inclut toutes les formations in-service training des autres domaines techniques)	Add	80	23	0	0	0	23	28.75%
H2.3.D1	Pediatric Treatment (ARV) (subset of H2.3.D)	Add							
L41, L42 & L51	Number of individuals trained in Prevention integrated module (PTMTC, Testing & Counseling and STI) according to national in-service training program standards (subset of H2.3.D)	Add							
L43	Number of individuals trained to provide Preventive and/or Support services (including OVC) (subset of H2.3.D)	Add							
L46	Number of individuals trained to provide OVC services according to national and international	Add							

	standards (subset of L43)								
L44, L45 & L52	Number of individuals trained in Care and Treatment integrated module (Clinical care, ART, PwP) according to national in-service training program standards (subset of H2.3.D)	Add							
L47	Number of individual trained to provide management of TB/HIV co-infection according to national and international standards (subset of H2.3.D)	Add							
L48	Number of individuals trained laboratory related activities (Lab technician) (subset of H2.3.D)	Add							
L49	Number of individuals trained in Blood Safety (subset of H2.3.D)	Add							
L50	Number of individuals trained in Injection Safety (subset of H2.3.D)	Add							
L53	Number of individuals trained to provide preventive interventions that are primarily focused on abstinence and/or being faithful, and are based on evidence and/or meet the minimum standards required (subset of H2.3.D)	Add							
L54	Number of individuals trained to provide preventive interventions that are primarily focused on Condoms and Other Methods of Prevention, and are based on evidence and/or meet the minimum standards required (subset of H2.3.D)	Add							
L55	Number of individuals trained in Leadership and Program Management (subset of H2.3.D)	Add	35	0	0	0	0	0	0%
L58	Number of individuals trained in Strategic Information (includes M&E, Surveillance including Human Ethics, and/or HMIS) (subset of H2.3.D)	Add	45	23	0	0	0	23	51%
L59	Number of individuals trained in Logistics and commodities management (subset of H2.3.D)	Add							
L60	Number of individuals trained in Gender (subset of H2.3.D)	Add							

Liste des institutions de formation initiale (Résultats du Trimestre)									
N°	List of health care workers pre-service institution	Number of new health care workers who graduated from a Pre-service training institution				Localisation (Département/Commune/Quartier)	List of community health and Para-social workers pre-service institutions/ Organizations	Number of community health and Para-social workers who successfully completed a Pre-service training program	Localisation (Département/Commune/Quartier)
		Doctors	Nurses	Midwives	Autres				
TOTAL									
1	N/A								

7– Health system strengthening / Strategic Information

Codes	Indicateurs	*Calcul	Targets	Réalizations					
				Q1 Oct-Dec 2013	Q2 Jan-Mar 2014	Q3 Avr-Juin 2014	Q4 Juil-Sept 2014	Total	Taux de réalisation global
7	Strategic Information	Add/Cum	Fiscal Year 2014						
L58	Number of individuals trained in Strategic Information (includes M&E, Surveillance, and/or HMIS)	Add	45	23	0	0	0	23	51%
L58A	1) Monitoring & Evaluation	Add	45	23	0	0	0	23	51%
L58B	2) Surveillance, Human Ethics	Add							
L58C	3) HMIS or Informatics or GIS	Add							
L59	Number of individuals trained in Logistics and commodities management	Add							

Liste des organisations ayant contribué aux résultats du Trimestre				
N°	Liste des organisations	Nombre de personnes formées par organisation	Domaine de la formation	Localisation (Département/Commune/Quartier)
TOTAL				
1	Global Fund Country Coordinating Mechanism	23	Strategic Information (M&E)	Abidjan

VII – PERFORMANCE MONITORING PLAN

Performance Indicators and Descriptions	Sources of Data	Data collection method	Frequency of data collection	Q1 target	Q1 Actual	Q2 target	Q3 target	Q4 target	End of project year target	Comments
<p>Outcome: By September 2014, the Côte d’Ivoire Country Coordinating Mechanism (CCM) committees have strengthened capacity in the critical functions of a CCM, including grant oversight, and the Principal Recipients (PRs) and civil society advocacy networks have strengthened leadership and management skills to implement, monitor, and evaluate programs and effectively fulfill their roles within the health system.</p> <p>Indicators: # of workshops conducted by content and type during the project period # of scheduled, periodic, oversight visits conducted by CCM</p>										
<p>Objective 1: The CCM understands the updated Global Fund directives and is following a plan to ensure compliance with Global Fund regulations and internal CCM governance, operational processes, and orientation standards are strengthened to ensure transparent, streamlined, and sustainable implementation of CCM activities</p>										
1.1a # of CCM members participating in refresher training sessions on Global Fund directives, updated CCM eligibility requirements, and key revised documents, managing conflict of interest, and gender integration (disaggregated by sector ¹ , sex, and management level)	Workshop registration roster	Document review	At the time of workshop registration	0	0	30	0	0	30	
1.2a # of CCM members and PR managers trained on new Global Fund funding mechanism and interim applicant process	Workshop registration roster	Document review	At the time of workshop registration	30	0	0	0	0	30	Activity postponed to next quarter.

¹ Sector could include public, private, civil society organization, network of people living with HIV, academic institution, multilateral organization, bilateral organization

1.3a CCM Operations Manual updated with revised roles and responsibilities for proposal/concept note development under the New Funding Model	Revised documents	Document review	Once	0	0	1	0	0	1	
1.7a # of CCM technical committee members trained on the roles and responsibilities of the newly-restructured committees	Workshop registration roster	Document review	At the time of workshop registration	50	0	0	0	0	50	Activity postponed to next quarter.
1.8a Budgeted annual workplans for CCM committees developed and internally validated by CCM leadership	Workplan documents	Document review	Once	0	0	4	0	0	4	
1.11a # of participants trained through a 3-day boot camp to provide technical support to the CCM and PRs (disaggregated by affiliation ² , sex, sector and management level)	Workshop registration roster	Document review	At the time of registration	0	0	0	0	30	30	
Objective 2: Monitoring and evaluation of grant performance is strengthened by utilizing effective tools										
2.1a # of CCM members and PR liaisons trained in use of Executive Dashboard tool (disaggregated by sector, sex, and management level)	Workshop registration roster	Document review	At the time of workshop registration	25	23	0	0	0	25	
2.2a CCM committees are reviewing the dashboard and documenting challenges and proposed actions	Committee meeting minutes	Document review	Monthly	0	0	4	4	4	12	
2.3a General Assembly is reviewing the dashboard and documenting challenges and proposed actions on a quarterly	General Assembly meeting minutes	Document review	Quarterly	0	0	1	1	1	3	

² Affiliation, here, includes: independent consultant, university staff members, etc.

basis										
2.5a CCM HIV, tuberculosis, and malaria committees are each holding monthly meetings	Committee meeting minutes	Document review	Monthly	3	2	3	3	3	12	
2.5b CCM Finance committee is holding quarterly meetings	Committee meeting minutes	Document review	Quarterly	1	1	1	1	1	4	
2.6a CCM committee members complete nine supervision visits and document Principal Recipient activity implementation	Supervision visit trip reports	Document review	At the time of trip completion	0	0	3	3	3	9	
2.7a Internal CCM website is online and functional	Intranet website online	Document review	Once	0	0	0	1	0	1	
2.8a Internal CCM website updates are uploaded monthly with PR dashboard information	Intranet website online	Document review	Monthly	0	0	0	3	3	6	
2.9a # of sub-recipient representatives trained in the use of MESST (disaggregated by sector, sex, and management level)	Workshop registration roster	Document review	At the time of workshop registration	0	0	0	20	0	20	
Objective 3: The CCM harmonizes activities with key stakeholders and mobilizes additional resources to carry out basic CCM functions (harmonization of activities and donor function strengthened)										
3.2a Capacity building needs assessment for each Principal Recipient completed with mapping of current technical and financial support provided by other donors	Needs assessment results	Document review	Once	1	0	0	0	0	1	

3.4a Resource mobilization roundtables held quarterly with stakeholders and donors to mobilize resources to address Principal Recipient and CCM technical and financial support needs	Roundtable meeting minutes	Document review	Quarterly	1	0	1	1	1	4	
3.5a National workshop held to validate the standard unit cost sheet for Global Fund proposals and CCM expanded budget	Document	Agenda; Workshop report	Once	0	0	1	0	0	1	
3.6a Standard unit cost sheet is completed and Global Fund costing and budgeting tool is piloted with selected PRs and the CCM for developing Global Fund budgets	Document	Document review	Once	0	0	0	0	TBD	TBD	Target to be determined following unit cost sheet workshop in collaboration with the CCM and PRs
3.8a Concept note submitted under the Global Fund New Funding Model for 2014-2015	Concept note	Document review	Once	0	0	0	0	1	1	
3.8.2a Concept note development and review workshops conducted with national concept note development committee and inputs from multi-sectoral partners	Workshop registration roster	Document review	Once	0	0	0	1	0	1	
Objective 4: CCM and Principal Recipients' leadership, management, and financial skills strengthened and capacity to implement, monitor, and evaluate programs strengthened										
4.7a # of CCM members who complete the first three workshops of the Leadership Development Program workshop series with a detailed Action Plan for implementation and follow-up in PY4	Action plans	Document review; Workshop report	At the time of workshop completion	0	0	0	0	35	35	

4.8a # of Principal Recipients that have fully implemented the MOST action plans developed in PY2	Workshop report	Document review	At the time of workshop completion	4	0	0	0	0	4
Objective 5: Leadership, management and governance skills within selected civil society networks strengthened and capacity to play advocacy role in the Ivorian health system reinforced									
5.1a # of CSO needs assessments completed and clearly defined advocacy role developed and validated internally by CSO staff	Workshop report	Document review	At the time of workshop completion	0	0	3	0	0	3
5.2a # of CSO action plans developed to address gaps identified through assessment tool	Action plans	Document review	At end assessment	0	0	3	0	0	3
5.3a # of technical assistance workshops conducted with CSO networks to build advocacy capacity as detailed in action plans	Workshop report	Document review	At the time of workshop completion	0	0	1	1	1	3
5.4a # of CSOs achieving quarterly objectives as defined in action plans	CSO reports	Document review	Quarterly	0	0	0	3	3	6