

CAPACITY DEVELOPMENT AND SUPPORT PROGRAM (CDS)

QUARTERLY PROGRESS REPORT

APRIL 1, 2015 TO JUNE 30, 2015

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ACRONYMS AND ABBREVIATIONS

AIDS	Acquired Immunodeficiency Syndrome
AOR	Agreements Officer's Representative
APS	Annual Program Statement
CA	Capacity Assessment
CB	Capacity Building
CBIMS	Community Based Interventions Monitoring System
CCP	Community Care Project Trust
CCYC	Community Child and Youth Care
CDS	Capacity Development and Support Program
COP	Chief of Party
COS	Chief of Staff
CSC	Consortium Steering Committee
CSPE	Center of Support for Peer Education
CYCW	Child and Youth Care Workers
DQA	Data Quality Assessment
DSD	Department of Social Development
DUCW	Data Use on Children's Welfare
DVT	Data Verification Tool
ECD	Early Childhood Development
ECHS	Early Childhood Household Stimulation
ESABU	East and Southern Africa Business Unit (FHI 360)
FPD	Foundation for Professional Development
GBV	Gender-Based Violence
JGF	Joint Gender Fund
HIV	Human Immunodeficiency Virus
HSRC	Human Sciences Research Council
ICT	Information Communication Technology
KKC	Karen Krakowitzer Consulting
M&E	Monitoring and Evaluation
M2M	mothers2mothers
MER	Monitoring, Evaluation and Reporting
MERL	Monitoring, Evaluation, Reporting and Learning
NACCW	National Association of Child Care Workers
NCDD	NGO Capacity Development and Training Director
NDA	National Development Agency
NGO	Non-Governmental Organization
OD	Organizational Development
OVC	Orphans and Vulnerable Children
OVCY	Orphans, Vulnerable Children and Youth
PEPFAR	President's Emergency Plan for AIDS Relief
PMF	Performance Management Framework
RFA	Request for Applications
RFP	Request for Proposals
SAG	South African Government
SASSA	South African Social Security Agency

SGJ	Sonke Gender Justice
SOP	Standard Operating Procedure
SPM	Senior Programme Manager
SOW	Scope of Work
SRM	Sustainability and Resource Mobilization
TEC	Technical Evaluation Committee
TLAC	Tshwaranang Legal Advocacy Centre
TOR	Terms of Reference
TSI	Tshikululu Social Investments
UGM	Umbrella Grants Management
USAID	United States Agency for International Development
USG	United States Government
WSUF	Walter Sisulu University Foundation
ZAR	South African Rand

PURPOSE AND STRUCTURE OF THE REPORT

This quarterly progress report is a reporting requirement established in the Cooperative Agreement between United States Agency for International Development (USAID) and FHI 360. The report provides an overview of project activities and accomplishments that FHI 360's Capacity Development and Support project (CDS) has achieved from **April 1 through June 30, 2015**. The report is divided into the following sections:

Section 1: Introduction and Background gives an overview of CDS goal, objectives and strategies.

Section 2: Progress on Project Programing provides details related to the administration of the CDS project, focusing on staffing and stakeholder management and meetings.

Component 1 provides an update on **grants management and partner contracts**, as well as the programming that took place in the reporting period.

Component 2 focuses on the project's achievements in the **institutional capacity development of indigenous organizations**.

Component 3 reviews CDS capacity development **assistance to the South African Government (SAG)**, with a focus on recruitment and placement of Technical Advisors.

Component 4 summarizes the project's **monitoring, evaluation, reporting and learning (MERL)** activities, with updates on evaluations and assessments.

Section 3: Financial Management provides a summary of project finance management data for the period of performance, including expenditures.

Section 4: Challenges discusses issues and obstacles experienced during the reporting period.

Section 5: Planned Activities for the Next Quarter presents a summary of the anticipated activities for the next reporting period.

SECTION 1: INTRODUCTION AND BACKGROUND

Program Overview

The CDS project was awarded to FHI 360 by the USAID on June 10, 2014 under Cooperative Agreement No: AID-674-A-14-00009. The five-year award focuses on developing the organizational management, technical capacity and sustainability of local non-governmental organizations (NGOs) and SAG departments, in order to sustain an improved, expanded, and country-led response to HIV and AIDS. CDS is managed and led by FHI 360 and implemented

with support from consortium partners, Deloitte South Africa and Foundation for Professional Development (FPD). CDS is designed to support the achievement of the goals in the President’s Emergency Plan for AIDS Relief (PEPFAR) Partnership Framework Implementation Plan.

Geographic Scope

The CDS project is implemented in some of the PEPFAR 3.0 high HIV prevalence priority districts within the following four provinces.

Table 1: Geographic Coverage

Provinces	Districts
KwaZulu Natal	<ul style="list-style-type: none"> • eThekweni Metro • Ilembe • uMgungundlovu
Gauteng	<ul style="list-style-type: none"> • City of Johannesburg
Limpopo	<ul style="list-style-type: none"> • Sekhukhune • Mopani
Mpumalanga	<ul style="list-style-type: none"> • Nkangala

Program Objectives and Components

The CDS project has the following strategic objectives:

1. Support the provision of sustainable high-quality services in HIV and AIDS in South Africa through strategic approaches that address specific needs with practical and pragmatic business plans for implementation;
2. Develop sustainable institutional capacity and increase the effectiveness of local partners to achieve expanded and high quality services;
3. Enhance local sub-partners’ capacity in treatment, care (including support of orphans and vulnerable children), and prevention.
4. Strengthen the overall health and social services system; and

Project activities are organized by the following program components:

1. Grant award and management
2. Institutional capacity development of indigenous organizations
3. Capacity development assistance to SAG
4. MERL

Capacity Building Approach and Methodology

The CDS project utilizes a broad and flexible capacity strengthening methodology that incorporates a wide range of tools and approaches that are selected according to their suitability to meet the needs of specific requests received from USAID and SAG. CDS has ensured accountability for results by developing meaningful indicators and benchmarks for measuring project outcomes and results. The CDS capacity development methods include the following:

- Standardized trainings to fill universal capacity gaps among CDS sub-recipients and other NGO partners, incorporating competency-based training principles and follow-up support to ensure application of new knowledge.
- Tailored trainings are customized to focus on a department or organization's specific needs and challenges, and develop skills and competencies to address them effectively.
- Mentoring and coaching provides technical and functional specialists, whether through secondment or regular mentoring visits, to teach and support individuals and units within an organization to respond to current needs and challenges, and develop skills to analyze and respond to future needs and challenges independently.
- Communities of practice include physical and virtual spaces for relevant stakeholders to discuss issues and challenges, share tools and resources, exchange information and lessons learned, and ultimately develop greater capacity for collective learning and problem solving.

Program Monitoring

The CDS program monitoring focuses on the following approaches:

- Measurement of program progress through the collection, management, analysis, and use of data, while also tracking progress on performance indicators for established targets.
- Provision of feedback for accountability, learning and quality through a range of activities and processes that encourage data use for timely, evidence-based decision-making.
- Data quality assurance through the use of a rapid validity check using the Data Verification Tool (DVT).

SECTION 2: PROGRESS ON PROJECT PROGRAMMING

This section focuses on operational activities of the CDS project, such as staffing, grants management and partner contracts, including stakeholder management meetings and activities implemented on components one to three during the reporting period.

Staff Recruitment

During the reporting period, the following positions were filled:

- Senior Program Manager
- Monitoring, Evaluation and Research Director
- Training and Capacity Development Manager (OD)

These additional staff brought the total positions filled to 24 which is 85% of the total positions in the recruitment plan for Year One. Table 3 below summarizes the CDS recruitment status of the remaining staff planned for Year One:

Table 2: CDS Staff Recruitment Status as of June 30, 2015

Position	Roles and Responsibilities	Status
Senior Programme Manager	The Senior Programme Manager will establish and maintain positive relationships with selected NGOs and serve as the main point of contact with CDS. He will serve as the primary point of contact for USAID Activity Managers.	The SPM commenced work on 01 April 2015.
M&E Director	The M&E Director will provide strategic direction, technical expertise and leadership in developing and implementing a comprehensive monitoring, evaluation and reporting (MER) strategy for the project.	The inter-company transfer work permit was granted by Home Affairs. The Director commenced work on 1 June, 2015.
Training & Capacity Building (CB) Manager - Organizational Development (OD)	The Training & CB Manager - OD will be responsible for coordinating the OD technical assistance to sub-recipients and other local organizations as requested by USAID.	The Recruitment was completed in May and the candidate started employment on the 25 th June 2015.
NGO Capacity Development and Technical Director (NCDD)	The NCDD will provide capacity development support to NGOs and lead the capacity assessments of selected NGOs. S/he will develop capacity building systems in a broad range of organizational areas that include strategic planning, human resource development,	Recruitment is underway with an anticipated start

	governance, sustainability, project management and other identified technical areas. S/he will also develop capacity development performance indicators and protocols, review and update capacity assessment tools, develop training manuals in identified areas of need and provide capacity development support.	date of September 1, 2015
M&E Capacity Building Manager	The M&E Capacity Building Manager will take the lead in providing capacity development support to NGOs and SAG units on strategic M&E systems.	Recruitment is underway with an anticipated start date of August 1, 2015.
Knowledge Management and Communication (KMC) Manager	The KMC Manager will coordinate the roll-out, implementation and technical documentation of the CDS' Knowledge Management framework which is been drafted by the Director, MER.	Anticipated start date is 1 October, 2015.
Research Officer	The Research Officer will support the CDS project in responding to internal and external requests to undertake research and evaluation studies. He/she will be responsible for the design, planning, implementation and reporting of high quality research as well as program evaluation studies.	Anticipated start date is 1st September 2015.
Technical Advisor Early Childhood Development (ECD) -- Department of Social Development (DSD)	The Technical Advisor ECD will be seconded to DSD. S/he will be responsible for providing technical management, guidance and coordination of support for the ECD program, DSD and ECD stakeholders in developing and implementing government policies, and MER and knowledge management frameworks and systems to track impact and outcomes of ECD services.	Recruitment is completed with an anticipated start date of 17 July 2015.
Technical Advisor Data Use in Children's Welfare – DSD	The Technical Advisor Data Use in Children's Welfare will be seconded to DSD. S/he will be responsible for advising the Minister of Social Development on children's welfare including HIV and AIDS, and on DSD programs that are responsive to the needs of children, including OVC. S/he will facilitate stakeholder coordination and collaboration on children's welfare including HIV and AIDS.	Recruitment is underway with an anticipated start date of July 27, 2015

Consortium Steering Committee (CSC) Meeting

During this reporting period one CSC meeting was held on 09 June, 2015. This is the third meeting since the inception of the project. The purpose of CSC meetings is to discuss pertinent program and financial issues, review the implementation plan and agree on follow up action points. The meeting was attended by the CDS Chief of Party (COP), CDS consortium partners Deloitte South Africa and FPD and the FHI 360 Senior Management Team. Each partner gave an update of activities undertaken since the last meeting, with a focus on curricula development and capacity assessment (CA) tools development. The following decision were agreed upon:

- FPD will provided technical support on Quality Improvement and Quality Assurance on all CDS sub awardees.
- FPD will develop systems, guides and tools on HIV Prevention for ECHS partners at household level.
- FPD will appoint a technical team to support the ECHS programme with HIV prevention integration.
- KKC will consolidate assessment tools from each domain
- Deloitte will trim down the contents of the finance assessment tool
- Deloitte will follow CDS branding and marking plan in all their documentation and presentations

Agreement Officer's Representative (AOR) Review Meeting

The Agreement Officer's Representative (AOR) meeting was held on 8 June 2015 at FHI 360 offices in Pretoria. The meeting was attended by all CDS Senior Management Team including FHI 360 country Director. All CDS units presented their updates including plans for the next quarter. The outcome of the meeting was as follows:

- NACS will be implemented under CDS with effect from 1 October, 2015. NACS expenditure will be tracked separately.
- USAID submitted the Dreams project proposal and is expecting a response by 20 June.
- CDS will be requested to provide sustainability and private sector linkages to OVCY NGOs transitioning from non-priority PEPFAR 3.0 Districts.
- Tshikululu could assist to broaden the resource base of OVCY NGOs through public private partnerships which CDS will match on 1:1 basis. Child Line Limpopo could be used as a pilot.
- CDS should attend DSD task team meetings including the one scheduled for 22 July 2015.

COMPONENT 1: GRANT AWARD AND MANAGEMENT

The activities of Component 1 are responsive to the CDS strategic objective one that ensures efficient and accountable award and administration of grant funding to support service delivery and scale-up.

A. Solicited and Unsolicited Sub awards

I. Contracts

1.1 Human Sciences Research Council (HRSC) - Baseline Evaluation of the 5 ECHS grantees.

HSRC was issued a fixed price contract to conduct a baseline evaluation of the 5 ECHS sub awardees. The period of the contract is from 26 March to 30 September 2015. A kick-off meeting was held with the contractor on 23 April 2015. The purpose of the kick-off meeting was to explain the terms and conditions of the contract and to clarify the scope of work to ensure that both parties have the same understanding of the requirements of this agreement.

1.2 Data Quality Assessments to OVCY Partners.

Following USAID approval of the terms of reference for the Data Quality Assessments to OVCY partners, an RFP was posted on the CDS website www.capacitydev.org, and on SANGONET on March 30, 2015. One proposal was received and logged in by the 17 April 2015 deadline. The Technical Evaluation Committee (TEC) reviewed the submitted proposal and invited the applicant to make a formal presentation on May 6, 2015. Khulisa was selected to conduct DQAs to OVCY partners based on their technical approach which demonstrated a high probability of successful performance. A fixed price contract was issued to Khulisa to conduct Data Quality Assessments for USAID's OVCY partners from 22 June to 19 September 2015. A kick off meeting was held with the contractor on 29 June 2015 to explain the terms and conditions of the contract and to clarify the scope of work.

2. Consultants

2.1 Sustainability Support to Orphans and Vulnerable Children (OVCY) Partners

A fixed price consulting agreement was issued to KKC for a performance period starting from 26 January to 30 April 2015. During the reporting period KKC requested additional time to complete the work and FHI 360 issued a modification on 04 May 2015. The modification provided KKC a no cost extension up to 15 May 2015. The consultant submitted the following deliverables:

Table 3: Summary of KKC deliverables

Task #	Deliverable
1.	Sustainability assessment tool
2.	Sustainability assessment and prioritized gap analysis report per OVCY partners
3.	Capacity development plan per OVCY partners

4.	Sustainability self-learning guide, strategy and plan per OVCY partners
5.	Performance indicators and tools per OVCY organization

2.2 Database Training and Support for OVC and Youth (OVCY) Partners

A cost re-imbusement consultant agreement was issued to Rob Cairns for the period 1 April to 30 September 2015. The SOW is to provide support to the USAID OVC partners and the ECHS grantees on the use of the OVC Database or CBIMS Desktop. The consultant submitted the following deliverables:

Table 4: Summary of Rob Cairns deliverables

Task #	Deliverable
1.	Inception Report (details
2.	Progress Report 1
3.	Progress Report 2

Details on the deliverables submitted are reported under component 4.

2.3 Evaluation of Vhutshilo 1 and 2 Curricula in South Africa

A fixed-price consultant agreement was issued to Shamima Vawda to evaluate the implementation of the Vhutshilo 1 and 2 curricula in South Africa for the period 11 March to 01 June 2015. During the reporting period the consultant requested additional time to complete the work. FHI 360 issued a modification to provide a no cost extension up to 15 June 2015. The deliverable due dates were revised accordingly. A further modification was issued on 15 June 2015 to Shamima Vawda. The purpose of the modification was to provide a no cost extension to the consultant from 15 June 2015 to 31 July 15 2015. The modification provided CDS more time to review the report.

During this reporting the consultant submitted the following deliverables:

Table 5: Summary of Shamima Vawda deliverables

Task #	Deliverable
1.	Inception Report
2.	Field work Report
3.	Draft Final Report

Details of this consultancy are reported under component 4.

2.4 Coordination of Khulisa Data Quality Assessments to OVCY Partners

Ozius Dewa a consultant, with FHI 360 Communities Forward project, was contracted to provide management oversight and coordination of the Data Quality Assessment to 8 OVCY

partners on 29 April, 2015. These NGOs are working in 52 districts of South Africa. The consultancy is from 04 May 2015 to 11 September 2015 for a maximum of 30 days.

2.5 Gender Mainstreaming Curricula and Training Materials Development

CDS posted an RFP on its website for the Gender Mainstreaming Curricula and Training Materials Development consultant. The RFP was advertised in the Mail & Guardian and SANGONET on 28 April 15. A total of eleven proposals were received and logged by May 08, 2015 deadline. Of the eleven proposals received, only three met the RFP compliance checklist.

The CDS TEC evaluated the three proposals and shortlisted Annelize Roos based on her clear technical approach and methodology. A fixed-price consulting agreement was issued to Annelize Roos on 30 June 2015 with a SOW to develop gender mainstreaming curricula and training materials from 02 July to 30 September 2015.

3 Sub award Monitoring

3.1 Specific award conditions (SACs),

Specific award conditions were included in Wozo, KI, m2m, HWW, TVT and TLAC grant agreements to address the financial management system deficiencies identified during the financial pre-award assessment. March 31st 2015 was set as the deadline to address most of the SACs. Out of the six sub awardees, TVT did not meet the deadline. CDS followed up with TVT and the SACs requirements were finally submitted on June 19, 2015.

CDS reviewed submissions to address SACs from all sub awardees and provided TA where necessary. During the next reporting period CDS will lift all SACs from the sub awardee agreements through a modification process.

3.2 ECHS Grant Agreement Modifications

Following USAID's request to increase the performance targets for Year 1 of all 5 ECHS sub awardees, CDS provided additional funding. All sub awardees were requested to submit revised program descriptions and budgets. The table below shows the revised targets and budget ceiling:

Table 6: ECHS Partners Revised Targets and Ceiling

Sub awardee	Current FY1 targets	Revised FY1 targets	Current FY1 Ceiling (Excluding ETF)	Revised FY1 Ceiling
1. m2m	1,200	2,400	R1,769,757	R2,400,000
2. Wozo	900	1,800	R1,801,659	R2,400,000
3. TVT	900	1,800	R1,790,689	R2,200,000
4. HWW	800	1,600	R1,799,217	R2,400,000

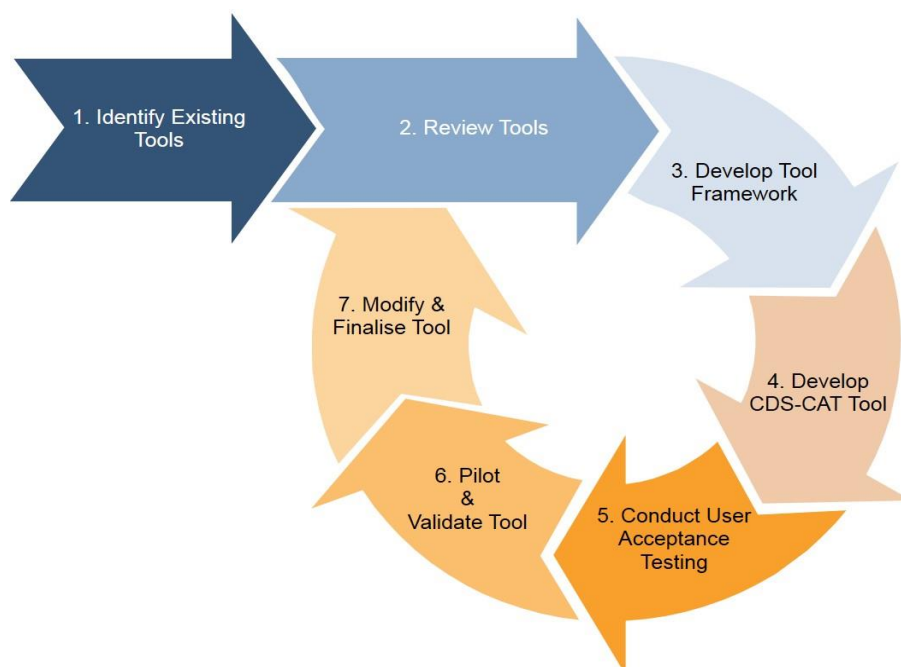
5. KI	1100	2,200	R1,799,969	R2,400,000
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COMPONENT 2: INSTITUTIONAL CAPACITY DEVELOPMENT OF INDIGENOUS ORGANIZATIONS

The activities reported under this Component are responsive to the CDS strategic objectives two and three that aims at developing sustainable institutional capacity that increase effectiveness of local partners to achieve expanded and high quality service and enhance local sub partners' capacity in treatment, care (including support of orphans and vulnerable children) and prevention.

Capacity Assessment Tools Development

During this quarter CDS continued to develop CAT with the aim of assessing sub awardee performance. CAT will form an integral part of a holistic approach ensuring correct identification, relevancy, level and intensity of capacity building interventions suitable for each sub-awardee. This process involves a step by step approach as illustrated below.



Substantial progress has been achieved in this period with the development of CAT. As reported in the previous quarter, steps 1 – 3 have been fully achieved. During the reporting period, CDS focused on step 4 as illustrated in the table below:

Table 11: CAT Progress

Step	Progress
1. Identify Existing Tools	Completed as reported in the previous reports
2. Review Tools	Completed as reported in the previous reports
3. Develop Tool Framework	Completed as reported in the previous reports
4. Develop CDS-CAT Tool	<p>CDS completed the development of the tools for the Leadership, Human resources Management, Governance, Sustainability, Financial Management, Strategic Planning, Monitoring, Evaluation and Evaluation.</p> <p>Consolidation of all tools is underway. Progress made will be reported in the next reporting period.</p>
5. Conduct User Acceptance Testing	To be completed during the next reporting period
6. Pilot & Validate Tool	To be completed during the next reporting period
7. Modify & Finalize Tool	To be completed during the next reporting period

CAT Tool

Karen Krakowiter (KCC) was sub contracted by FPD in May 2015 to develop a digital consolidated CDS capacity assessment tool for all the domains. The tool is an online, concise, evidence based, participatory, consensual tool for capacity assessment that:

- Uses a four point rating scale starting for level with 1 denoting no performance to and 4 denoting maximum performance.
- Provides the ability to review assessments at any time across any of the domains assessed.
- Provides consistency in the look, feel and use of tools across domains
- Provides the ability to create and manage organizations, and
- Will scale for mobile deployment.

A meeting between CDS and KKC was held on the 6th July 2015 to present and review the draft digital capacity assessment tool. Final outcomes will be reported in the next reporting quarter.

2. Finance Capacity Assessments

Baseline Assessment Findings

The finance assessment tool comprised of a series of questions. When a question was applicable to the sub awardee, it was assigned a score of 0, 1, 3 or 5, which is equivalent to 0%, 20%, 60% or 100%. The assignment of the rating was a participatory process. The scores were intended to be broad indicators used to identify areas of weakness. For each individual question the following rating scale was used:

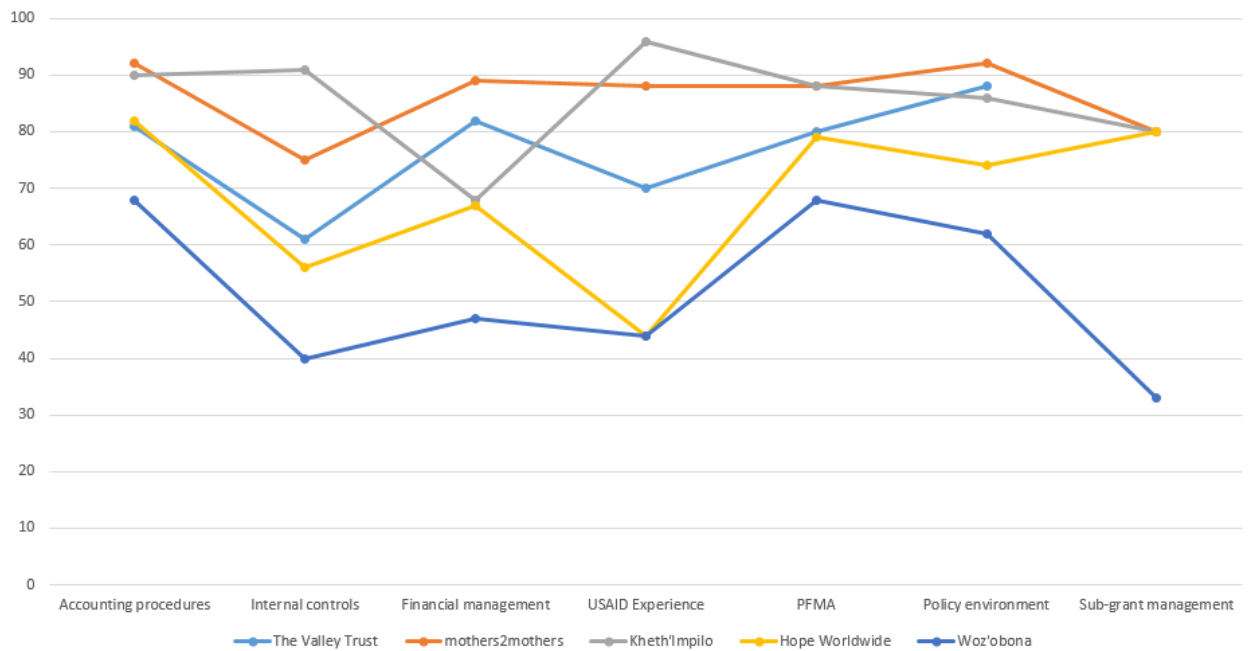
Table 8: Baseline Assessment Rating Scale

Category	Score		Interpretation
Not Applicable	N/A		Question does not apply to organisation and is removed from scoring system.
Never True	0	0%	Capacity is not evident.
Sometimes True	1	20%	Capacity is limited and lacking in critical areas.
Often True	3	60%	Capacity is adequate in most areas, but there is room for improvement.
Always True	5	100%	Capacity is strong.

The goal of the assessment was to help the sub awardee identify a gap. The scoring system facilitated this process by attempting to link a numerical value to the gap, and the width of the gap (i.e. the variance from 100%) then guided the degree of support that could ultimately be offered in terms of action plans.

The assessment tool assigned a score to each of the seven sections (Accounting Procedures, Internal Controls, Financial Management, USAID Experience, PFMA Compliance, Policy Environment and Sub-Grant Management) in order to arrive at an overall score for the organisation.

The diagram below represent a high-level overview of how the individual grantees scored in the seven main sections*:



*It should be noted that sub-grant management was not applicable to The Valley trust and therefore has no score for that section.

In order to assign a score to each of the seven sections, the assessment tool averaged the scores of its sub-section, where each sub-section score carried an equal weight. For example, the score for the Accounting Procedures section is an average of the scores for its subsections, which are general system, receipts and handling of cash, disbursements and recording, bank accounts, petty cash records, ledger, journal and payroll and salary.

The diagram below is an 'Issue Wheel' and represents a snapshot of the average ratings obtained by the sub awardees in the sub-sections:



Overall, the sub awardees mainly require support with USAID requirements, internal controls and financial management. Investment in infrastructure and staff is often difficult as the sub awardees funding is mostly restricted. Due to resource constraints the focus has mainly been on priority items. The finance department comprises of staff that require supervision and rely quite heavily on key man dependencies. Segregation of duties is also difficult and poses a challenge in upholding strict internal controls. Furthermore, limited staff put pressure on organisational capacity, which has caused delays with respect to donor reporting, preparation of budgets as well as the distribution of internal reports.

When resources are spread too thin and the focus is not on strategy. Actions are relatively short-term and the focus is on priority items due to time constraints.

Organizational Development Curricula Development

During this quarter, CDS continued to develop and review different curricula and training materials for all domains. The progress on the development of curricula outlines and materials is shown in the table below:

Table 12: Progress on Outline and Curricula Development

Domain		Outline	Content
	Level	Status	Status
Human Resource Management	101	Completed	Completed
	201	Completed	Completed
	301	Completed	Completed
Leadership	101	Completed	Completed
	201	Completed	Completed
	301	Completed	Completed
Financial Management	101	Completed	Completed
	201	Completed	Completed
	301	Completed	Completed
Gender	101	Completed	Development of Curricula to mainstream Gender into ECHS project commenced during this reporting period. Progress will be reported in the next quarter.
	201	Completed	
	301	Completed	
Governance	101	Completed	Completed
	201	Completed	To be completed FY 15 Q4
	301	Completed	To be completed FY 15 Q4
Monitoring and Evaluation	101	Completed	Completed
	201	Completed	To be completed in FY 15 Q4
	301	Completed	

All completed 101 curricula will be submitted to USAID for a review in the next reporting period.

Organizational Support for Centre for Economic Governance and AIDS in Africa (CEGAA)

During this reporting period, USAID requested CDS OD support to Centre for Economic Governance and Aids in Africa (CEGAA). CEGAA was formed to respond to the needs of African states and organisations requiring skills and support in budget monitoring and expenditure tracking (BMET) of health funding in general, and HIV/AIDS funding in particular.

CEGAA a South African NGO funded by PEPFAR through HERO, is based in Pietermaritzburg, KwaZulu-Natal Province. CEGAA works in East and Southern Africa, and has supported partners in various places around the world as part of its affiliation to the International Budget Partnership's programmes, using its expertise to support partners build their capacity in BMET for evidence-based budget advocacy.

On June 18th, 2015 CDS met with the CEGAA Executive Director. The purpose of the meeting was to discuss the organizational development process, methodology and plans. CDS will conduct a capacity assessment during the second week of August 2015. Results of the assessment will inform the capacity development interventions.

NGO Sustainability Support

Tshikululu Social Investments – Private Sector Linkages

On 24th April 2015, CDS held a meeting with Tshikululu Social Investments which works closely with some of South Africa's largest and highest profile corporate social investment funds and trusts. The purpose of the meeting was to discuss how Tshikululu could assist CDS in developing the capacity of NGOs on the private sector linkages. During the meeting, Tshikululu Investments, presented a proposal that included the following key areas of support:

- **Baseline and Deep Dive Analysis** : Establishing the organizational capacity development needs which will include the "as-is" financial strategy balanced score-card (if in place) and income streams
- **Stakeholder Mapping** : Conducting detailed stakeholder mapping exercises in order to inform the engagement approach that will be actioned with the broader community of local donors and government
- **Twining of Organizations** : Applying the lessons learnt from innovative and high performance beneficiary organizations to inform the development of a peer "twinning" model to facilitate skills and knowledge transfer
- **Private-Public Mentorship Partnership (PPMP)** : The mentorship partnership enables the personnel from the NGOs to be guided by private sector mentors in the transformation of their organizations
- **Social Entrepreneurship Workshops**: Develop and facilitate social entrepreneurship training workshops with the local partners (NGOs) with a view to diversify income streams and foster self-sufficiency of the NGOs
- **Communities of Practice**: Leverage networks within the non-for-profit, public and the private sectors to develop focused communities of practice to foster collective learning and problem solving

- **Corporate Stakeholder Engagement Training:** Using the findings of the organizational baseline and deep dive assessments to inform and implement capacity development around corporate engagement strategies
- **Appraise and review the South African Revenue Services (SARS) Public Benefit Organization(PBO) register :** Develop a trust-based working relationship with SARS in order to establish a credible PBO register and database as well as robust processes and procedures to maintain the register going forward

Following the initial meeting CDS met Tshikululu to discuss their proposal and ensure alignment to USAID’s expectations of supporting some OVCY NGOs that are transitioning from districts that are not on the PEPFAR 3.0 priority list. The meeting was held on 29 June 2015. During the meeting Tshikululu agreed to revise its proposal accordingly and resubmit a revised proposal. The outcome of future discussions on this partnership will be reported in the next reporting period.

Capacity Development Satellite Session

During the AIDS Conference, FHI 360 hosted a satellite session on “Revitalizing capacity development for sustainable outcomes” on 10 June 2015. This session provided a platform for collective reflection, refocusing and renewing ideas to address current concerns in CD and identify innovative ways to improve capacity development for sustainable outcomes. The session enabled dialogue among representatives from Government (DOH & DSD and SANAC) and capacity development partners including PACT, Starfish, MSH, CAP Mozambique, and FHI 360. The discussion was conducted in 3 panels as follows:

PANEL 1: Defining, measuring and sustaining success

PANEL 2: Capacity development in the context of the National Strategic Plan

PANEL 3: Capacity development trends and innovations

The panellists discussed in general some of the practical challenges, including how to:

- Measuring the success and sustainability of our efforts,
- embrace the long-term nature of a change process while also monitoring short-term progress,
- balance service delivery targets against capacity and sustainability objectives, and
- Promote local ownership of the development agenda within the confines of the traditional project framework.
- It was an interactive session which allowed discussions after every end of each panel presentation.

Partner Programme Management Meetings

CDS will hold Programme Management meetings with all its partners. The purpose of the meetings are to monitor programme progress, challenges, emerging issues and trends experienced during implementation. Conducting these meetings consistently will ensure that programmatic progress is closely monitored and areas requiring improvement are identified and addressed. Whenever possible these meetings will be held on a monthly basis and changed to quarterly basis later in the life cycle of the project.

While attending the Performance Management Workshop in June 2015, CDS held one-on-one programme management meetings with the following sub awardees:

Table 13: Programme Management Meeting Dates

Sub awardee	Meeting Date
Mothers2mothers	23 June 2015
HOPE worldwide	24 June 2015
Kheth'Impilo	25 June 2015
The Valley Trust	25 June 2015

During these meetings sub awardees reported on program implementation startup activities, HSRC baseline studies, staffing issues, Education and Training Funds utilization as well as trainings conducted. The CDS team used the forum to share its plans for upcoming activities that include; Routine Data Quality Assessments (RDQA), Organizational Assessments, Sub-award Financial Reporting.

Component 2: Technical

Violence against Women Study

During this reporting period, Tshwaranang Legal Advocacy Centre (TLAC) focused on preparing for the research phase and formalizing the relationship with DOCKDA. The following activities were undertaken:

Table 14: TLAC Implementation Progress

Activity	Progress
Orientation meeting	TLAC received orientation on the CDS program and USAID rules and regulations on 9 April 2015. The orientation covered both programmatic and financial reporting requirements

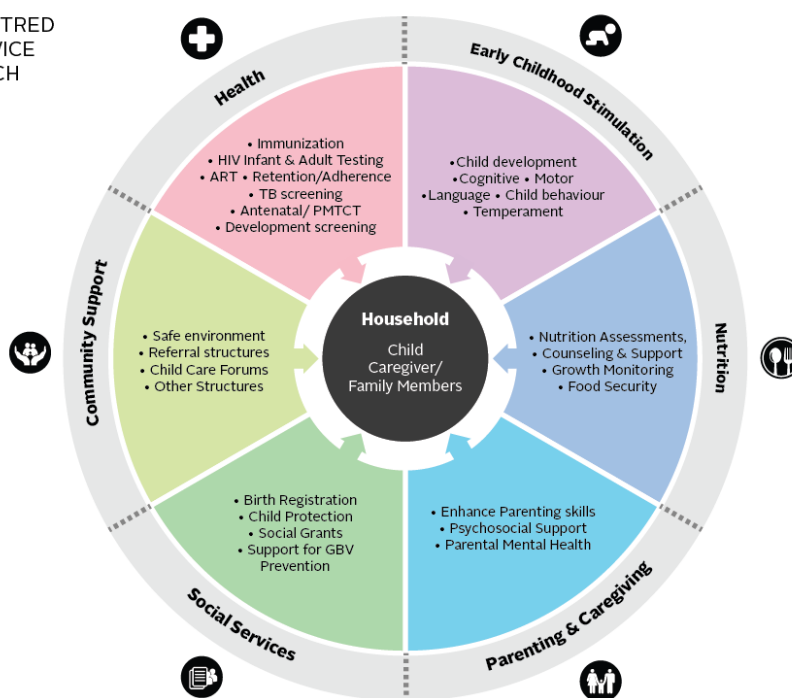
Formalizing relationship between TLAC and DOCKDA	A Memorandum of Understanding was signed in May 2015
Staff recruitment	The project officer and two data capturers were recruited in June 2015
Research process	<p>HSRC granted approval to undertake the research on 17 June 2015 for the study to commence. The study will take place in Gasegonyana Municipality (Bathlamos and Wrenchville communities)</p> <p>Training of data collectors was completed in June and data collection started in June. The research will be completed in the next quarter.</p>

TLAC will officially launch the study during the second week of August. August is a women's month in South Africa. Progress made on the research will be reported in the next quarter.

Early Childhood Household Stimulation (ECHS)

Finalization of the ECHS CAT: In preparation for the technical assessments, refinement and finalization of the tool was done during this reporting period. The assessment tool will cover all key components of the intergrated service delivery ECHS model including health, early childhood stimulation, nutrition, social services, parenting and caregiving and community support as shown below:

ECHS | A HOUSEHOLD-CENTRED
INTEGRATED SERVICE
DELIVERY APPROACH



Technical assessments are scheduled to take place in August 2015, progress on this process will be reported in the next reporting period.

Alignment to the PEPFAR 3.0 strategy: During this reporting period, CDS engaged NGOs to align their ECHS programs to the new PEPFAR direction. Through a workshop held from 23-26 June 2015, emphasis was made on ensuring that implementation focuses on controlling the HIV epidemic by doing the right thing, in the right place and at the right time. An interactive discussion was held and key activities were identified and agreed upon in line with the PEPFAR 3.0 approach. Below is a summary of core and near core activities that are important for the implementation of the ECHS initiative:

Table 15: USAID/PEPFAR Core and Near Core Activities

Service category	Core	Near Core
Health	Promote HIV testing for infants and caregivers Refer and monitor completion of referrals to: Age-specific health care (SRH/FP for adolescents and immunization for <5's) Nutrition/food security Coordinate with counselling and commodity providers to make dual protection is available to adolescents	Strengthen referral mechanisms, particularly cross-referrals between clinics and social services

	Support healthy early childhood development (ECD) and integrate ECD with paediatrics HIV services	
Safety/Protection	Support child abuse and GBV prevention and response activities, including clinic-based support services for survivors Provide psychosocial support to children and their caregivers Promote positive parenting skills in caregivers Support safe spaces for adolescents at high risk, particularly girls Permanency support and succession planning	Strengthen government-managed case management systems Professional development for social and para-social workers Strengthen structures for community-based mediation of child abuse cases Strengthen M&E systems for national child protection/social welfare efforts Supporting advocacy and policy efforts to improve safety from violence
Stable	Facilitate group-based household economic strengthening (HES), such as savings groups Support access and uptake of social protection (e.g. cash transfers, bursaries)	
Child Development	Promote better health, education and social child outcomes through facilitating child development: <ul style="list-style-type: none"> • Cognitive development • Motor development • Temperament • Expressive language • Child behaviour Promote safety from violence in homes and child abuse	
Case Management	Identification of vulnerable children/adolescents Assessment of child/adolescents and family socio-economic status, risks and strengths Development of care plan Making referrals, monitoring of the completion of referrals and the achievement of care plan goals	Training community workers/volunteers in case management Mapping services and developing service directories

During the performance workshop, sub awardees were encouraged to review their program descriptions and ensure that activities are aligned to the 90-90-90 targets.

FPD Technical Support:

To ensure quality implementation of the ECHS intervention and as part of CDS, FPD will provide specialized training and resources to support implementation. The technical areas that were identified and discussed included:

- Reviewing and developing accredited training tools and materials in line with HIV and AIDS
- Developing quality improvement (QI) and quality assurance (QA) systems and tools to support HIV prevention, HIV counselling and testing, treatment, care and support including HIV/TB integration
- Conducting technical site visits

Based on the above scope of work, FPD developed a conceptual framework below that will guide their support for ECHS implementation and TA for sub awardees:



The framework is based on the three ECHS objectives and the household centered integrated service delivery approach. It provides a detailed road map of how ECHS will be implemented and steps to be undertaken to achieve intended results. The framework is organized in 3 parts including; 1) household level processes, 2) engagement with other service providers for effective referral pathways and linkages, and 3) capacity development of other CBO, NGO and FBO in the community that support households.

ECHS Stakeholders Involvement

Participation in the ECD Community of Practice:

Approximately 45 diverse stakeholders in Early Childhood Development (ECD), including practitioners, research organisations, service and training providers, funding agencies, NGOs and the Gauteng Department of Education, came together on 12 May, 2015 for the BRIDGE's second National ECD Community of Practice (ECD CoP) meeting. The purpose of the ECD CoP was to:

- bring together all ECD sector stakeholders
- create space that allows for information sharing, networking and updates
- unite voices and collaborate effectively with government
- be helpful to hear and consider different aspects and angles of ECD
- provide support to communities working on the ground
- Follows policy threads which is helpful as it informs us of policy updates and progress

Through this forum, CDS has had exposure to the work that is being done by other stakeholders as well as getting access to resources that exist on ECD including the knowledge hub and ECD CoP's Quality Reflection Toolkit. CDS and its partners will continue participating and use this platform to promote and share lessons learnt on the ECHS initiative.

National ECD Donor and Development Partners Forum

On 26th May 2015, the CDS team attended the quarterly National ECD Donor and Development Partners Forum. The forum is made up of voluntary members of organizations, funders, corporate entities, development partners and related entities operating within South Africa. The main purpose of this forum is to share best practices on ECD. At the meeting, CDS presented a summary of its ECHS partners' overviews together with their geographical coverage.

Gender Mainstreaming

Gender Equality and Female Empowerment

During this reporting period, CDS finalized the framework for mainstreaming gender into HIV and AIDS. The framework focuses on including women's and men's priorities and needs in all policies and programs, as well as specific interventions designed to empower one or the other sex, generally women as they are more likely to experience gender-based social, political or economic disadvantage. To ensure full implementation of the framework, CDS contracted a gender consultant whose scope of work is to develop content for the Gender curricula. The scope of work includes; 1) developing a curricula toolkit that provides detailed guidelines and support on how to plan, 2) prepare, conduct and evaluate a gender mainstreaming training workshop. The toolkits will be used by the sub awardees to assist them in mainstreaming gender into their HIV and AIDS programs.

ECHS Partners Progress

During this reporting period, ECHS sub awardees continued to implement project activities. The achievements are summarized as follows:

Mother2mothers

- Recruited and trained six family mentors on ECHS Project.
- Conducted community mapping for household identification, complementary services and development of service referral/linkage pathways.
- In partnership with PATH, M2M held the '*Quality care for the first 1 000 days of life*' community awareness campaign in Nkangala. M2M utilized the platform to raise awareness on ECHS project and to identify interested caregivers and children in their care.

HOPE worldwide

- Continued with Home Visitors' Training
- Recruited and an M&E Officer
- Finalized the M&E Plan
- Distribution 3173 pair of TOMS shoes to children and caregivers

Kheth'Impilo

- Recruited a total of 616 children which is 28% percent of the revised target of 2200
- Continued to run circle of Support reaching 243 Caregivers, 309 Children between 0-5 years and 582 household members
- Conducted 730 home visits to households of caregivers
- Distributed TOMS shoes in three districts; Amajuba, ILembe and Amatole

Wozobona

- Recruited and profiled 87 households in both Greater Tubatse and Ba-Phalaborwa sub-districts
- Recruited 40 home visitors to facilitate ECHS activities in both Tubatse and Ba-Phalaborwa sub-district
- Identified seven CBO's and engaged them on ECHS participation.

The Valley Trust

- TVT hosted the official launch of Khulakahle project and introduced ECHS project to all stakeholders who attended
- The Project Manager and one of the Khulakahle project facilitators attended the National Conference of National Association of Child and Youth Care Workers (NACCW) in June.

A detailed report is attached as Annexe A.

SA AIDS Conference

During this quarter, CDS participated at the 7th South Africa AIDS conference which was held at ICC Durban on 9 -12 June 2015. Its theme was on the reflection, refocusing and renewal of efforts to address HIV and AIDS toward creating an AIDS free generation. The focus was on scaling up interventions and strengthening multi-sectoral response to mitigate HIV and AIDS. Some of the knowledge highlights pertaining to early childhood stimulation was the link between HIV exposure and how it contributes to developing delays and failure to thrive as early as the new-born period in the absence of compensatory treatment provided by extra stimulation (Gina Rencken, UKZN). This demonstrated the need for caregivers and their children knowing their HIV status and if positive receiving appropriate stimulation to eliminate complications. In another study on developmental challenges facing children infected with HIV, evidence showed the link between ARTs and development. The earlier the children start ART the better it is for their development (Joanne Potterton, Wits University). It is therefore essential to initiate early infants on treatment and maintain them in care.

COMPONENT 3: CAPACITY DEVELOPMENT ASSISTANCE TO SAG

Recruitment, Monitoring and Support of SAG Technical Advisors

In response to component 3 on capacity development assistance to SAG, SAG through USAID requested the recruitment of eight Technical Advisors (TAs). The Department of Social Development (DSD) requested three TAs on a) Isibindi Project, b) Early Childhood Development (ECD) and c) Data use on Children's Welfare (DCW) in the Minister's Office. Similarly the Department of Health (DoH) requested four TAs on a) HIV Prevention and HIV counselling and testing; b) condom distribution and programming, c) high transmission area mapping and key population programme and d) medical male circumcision (MMC). The

National Treasury requested one TA on conditional grants. Progress on the recruitment process and the provision of technical assistance of the TAs is described below:

Recruitment and Placement of SAG Technical Advisors

The Technical Advisor on Early Childhood Development

The Technical Advisor will provide strategic management and technical support to DSD on ECD over a period of two years and will report to the Chief Director for ECD. The application process for this TA started in the last quarter. In collaboration with DSD Chief Director: ECD three candidates were shortlisted, namely Ms Bertha Mogage, Ms Louie Erasmus and Ms Lucy Thurton and were interviewed on April 21, 2015. Ms Louie Erasmus was identified as a suitable candidate based on her extensive experience in the ECD Sector particularly at DSD and has been involved in the development of the current ECD policy. The Selection Memo recommending her appointment was submitted to USAID on June 4, 2015 and was approved on June 5, 2015. Her orientation programme was finalised in a meeting held with Chief Director: ECD on June 4, 2015. The candidate accepted the employment offer and will commence her duties on July 5, 2015.

The Technical Advisor TA (DUCW)

This TA's role will be to strengthen HIV and AIDS programs for children by applying evidence-based approaches in the Department and its entities such as National Development Agency (NDA) and the South Africa Social Security Agency (SASSA). The application process for this position started in the last quarter. After several attempts to finalise the short-listing with DSD, a meeting was eventually held with the Chief of Staff in the Minister's office on June 4, 2015. Four applicants were shortlisted and in collaboration with DSD, the interviews were held on June 17, 2015. Ms Martha Mphuthi was identified as a suitable candidate because of her understanding of the political environment; extensive experience in the Children Welfare and HIV & AIDS Sectors and in working with the government particularly DSD including the Minister. The Human Resource Department is still conducting background checks on qualification, reference, credit, ID and terrorism after which employment will be offered to her. The anticipated start date is 27 July 2015.

The Technical Advisors for the Department of Health (DoH)

CDS received guidance from USAID on the three prioritised TAs for the DoH which are on a) HIV Prevention and HIV counselling and testing; b) condom distribution and programming and c) high transmission area mapping and key population programme. The TAs will contribute towards achieving the HIV prevention goals of the National Strategic Plan for HIV, STIs and TB (2012 – 2016) of reducing HIV transmission by 50%. The main aim of the TAs on condom distribution and programming will be to strengthen the coordination of condom programming, distribution logistics, promotion and advocacy and to ensure continuous, increased and sustainable supply of male and female condoms including condom compatible lubricants. The TA on HIV Prevention/HCT will upscale, strengthen and coordinate sustainable combination HIV prevention programme with special emphasis on the HCT programme. The

TA on high transmission area mapping and key population programme will strengthen and coordinate HTA programme to ensure a continuous and sustainable programme implementation.

After the confirmation of the prioritised TAs, CDS held a meeting with DoH Director: HIV Prevention on May 4, 2015 to finalise the three ToR and to discuss the recruitment process. Subsequent to the meeting, DoH submitted revised draft of the ToR on May 8, 2015. These were finalised by CDS in consultation with DoH Director: HIV Prevention and were submitted to USAID on June 8, 2015. Approval of these ToRs was still awaited.

In addition, CDS received a request from USAID to second a TA on medical male circumcision (MMC). A job description for the TA was received from USAID on May 19, 2015. A follow up meeting to discuss the recruitment process was held with USAID on May 28, 2015 and later with the DoH Director: MMC on June 5, 2015. This position is temporarily put on hold by USAID until further notice.

Technical Advisors on Conditional Grants (CG) for the Department of National Treasury

The request to recruit the TA on CG for the National Treasury was received from USAID in May 2015. The role of this TA will be to improve the functionality of national and provincial departmental conditional grants for the DSD and DoH. On May 28, 2015 an initial meeting was held with USAID and later with National Treasury on June 4, 2015 to discuss the recruitment process and the development of the ToR.

Progress on these recruitment processes will be reported in the next quarter.

Manage and support seconded Technical Advisors to SAG

Technical Advisor (Isibindi Project)

The role of this TA for the Isibindi Project is to provide strategic management and technical support to DSD to roll-out the Isibindi Project; a model responding to the holistic needs of children and youth who are vulnerable and at risk of HIV/AIDS. The project's aim is to build the capacity of community child and youth care (CCYC) workers. CDS conducted management meetings with DSD Technical Supervisor (Director: OVC) and TA on 5 May and 5 June 2015 respectively. The purpose of the meetings was to monitor the progress of the technical assistance provided to the department and to create an enabling environment for implementation. Progress made on the Isibindi Technical Assistance is tabulated below:

Table 16: Summary of the Progress made on Isibindi Technical Assistance per Key Activities

Key activities	Progress	Effect and Changes
Management, coordination, planning and oversight role for	<ul style="list-style-type: none"> A project plan was submitted to the Deputy Director General: Welfare Services on June 30, 2015 for approval 	

<p>the implementation of the Isibindi model.</p>	<ul style="list-style-type: none"> • The workplan was aligned with the DSD template and was approved by the Director for OVC on May 29, 2015. • A project charter was developed and discussed with all provinces during the Task Team Meetings described below. • Project templates for planning and reporting were developed and disseminated to the provincial offices. • A communication management plan was drafted and disseminated to all stakeholders for input. 	
<p>Review and finalise the Monitoring, Evaluation and Reporting (MER) and Knowledge Management Frameworks and systems.</p>	<ul style="list-style-type: none"> • The Results Framework was drafted in collaboration with CDS M&E unit. • The inception report was drafted. • The review and alignment of the CBIMS and NACCW tool was facilitated. • A database of 4 879 child and youth care learners, 117 mentors, 30 supervisor mentors, 8 senior mentors 337 Isibindi sites, 67 formal, 196 informal safe park, 1 698 grade 12 learners for 2014 were developed on Excel spreadsheet in partnership with NACCW and is updated on a monthly basis. • A draft Terms of Reference for the midterm review of the Isibindi Project was drafted as requested by USAID. 	
<p>Review, upgrade and upscale capacity building initiatives including training, coaching and mentoring for key stakeholders.</p>	<ul style="list-style-type: none"> • A report on the academic performance of 2014 Grade 12 learners was developed and presented to the Minister of Social Development on April 30, 2015. • An initiative was started with the South African Institute for Chartered Accountants (SAICA). The purpose of the partnership is 	<p>With the support of SAICA, a one day career expo will be held in each province targeting 2000 learners from July to September 2015.</p>

	<p>to support Isibindi beneficiaries that have passed Grade 12. A concept paper on the learning and development programme to support the Grade 12 learners was developed on May 25, 2015.</p> <ul style="list-style-type: none"> • A meeting was held with Health and Welfare Sectoral Education and Training Authority (HWSETA) on June 8 – 9, 2015. The purpose of the meeting was to upgrade the status of the Child and Youth Care Qualification from NQF level 4 to 5. 	<ul style="list-style-type: none"> • A strategy to upgrade the qualification was discussed and next steps were taken.
<p>Establish, facilitate and maintain partnerships with all stakeholder.</p>	<p>a) The TA made presentations on the progress of the Isibindi Project to solicit project support in the different forums, namely:</p> <ul style="list-style-type: none"> • Heads of Social Development Sector (HSDS) meeting on 16 April 2015 & 18 – 19 May 2015; • Human Resources Consultative Forum (HRCF) on 16 – 17 May 2015; • Minister’s Council for Social Development (MINMEC) on 28 – 29 May 2015 and • National Child Care Protection Forum (NCCPF) on 10 – 12 June 2015 <p>b) The TA participated in the national networking meeting organised by NACCW on 29 June 2015.</p>	<ul style="list-style-type: none"> • HSDS members agreed to hold a workshop and develop a costed strategy to absorb trained CYCWs for decent jobs and career pathing. • HRCF will devise a strategy to integrate the employment of CYCW in the DSD organisational structure. • The networking meeting created a safe learning space for delegate. It also celebrated success stories and emphasised the integration of the rights of children in service delivery.
<p>Support strategic management and the scale-up of the Isibindi Model to all provinces. This involves:</p>		

<p>Manage a stakeholder forum and meetings and ensure the participation of relevant representatives from the children's sector.</p>	<p>The TA coordinated and facilitated the following meetings:</p> <ul style="list-style-type: none"> • Task Team meeting with DSD officials from national and provincial offices and the implementer (NACCW) on May 12, 2015. • NDS/D/NACCW monthly management meeting on 23 April • NDS/D/USAID monthly meeting on 27 May 2015 and with NDS/D/USAID/NWPDS/D. 	<ul style="list-style-type: none"> • Progress reports on the implementation of the Isibindi project was made by the national and provincial offices and NACCW. • Strategic decisions on the implementation of Isibindi project in the provinces; the planning of the career expo for Isibindi beneficiaries; piloting of Community Based Information Management System (CBIMS) in the North West; signing of outstanding Service Level Agreements with NACCWs; registration of CYCW with the South African Council for Social Services Profession (SACSSP). • The relationship and communication management plan was discussed and enhanced. • Strategic decisions on the general management and monitoring and evaluation of the Isibindi Project and NACCW were made. USAID also requested DSD to draft the ToR on the mid-term evaluation of the project.
<p>Plan for the institutionalisation and sustainability of the Capacity</p>	<ul style="list-style-type: none"> • Through a competitive process KPMG was appointed on June 15, 2015 as a service provider to 	

Building Programme.	develop a costed sustainability plan.	
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The Department is still satisfied with the performance and contribution of the TA on the management of the Isibindi Project.

Development and Implementation of the Performance Management Framework

The Performance Management Framework (PMF) drafted in the last quarter was presented to DSD on May 4, 2015. The purpose of the presentation was to get the Department's feedback on its feasibility and relevance. The contents of the PMF were well received by DSD. The Results Framework is one of the processes of the PMF. The draft Results Framework for the Isibindi technical assistance illustrated in Figure 1 below was developed in consultation and support from the CDS MER unit. It illustrates the goal, indicators, intermediate and sub-intermediate results and activities of the TA. The Result Framework will form the basis for the management, monitoring and evaluation of the TAs. The TAs' project plan, work plan, reports and performance reviews will be based on its goals, intermediate and sub-intermediate results.

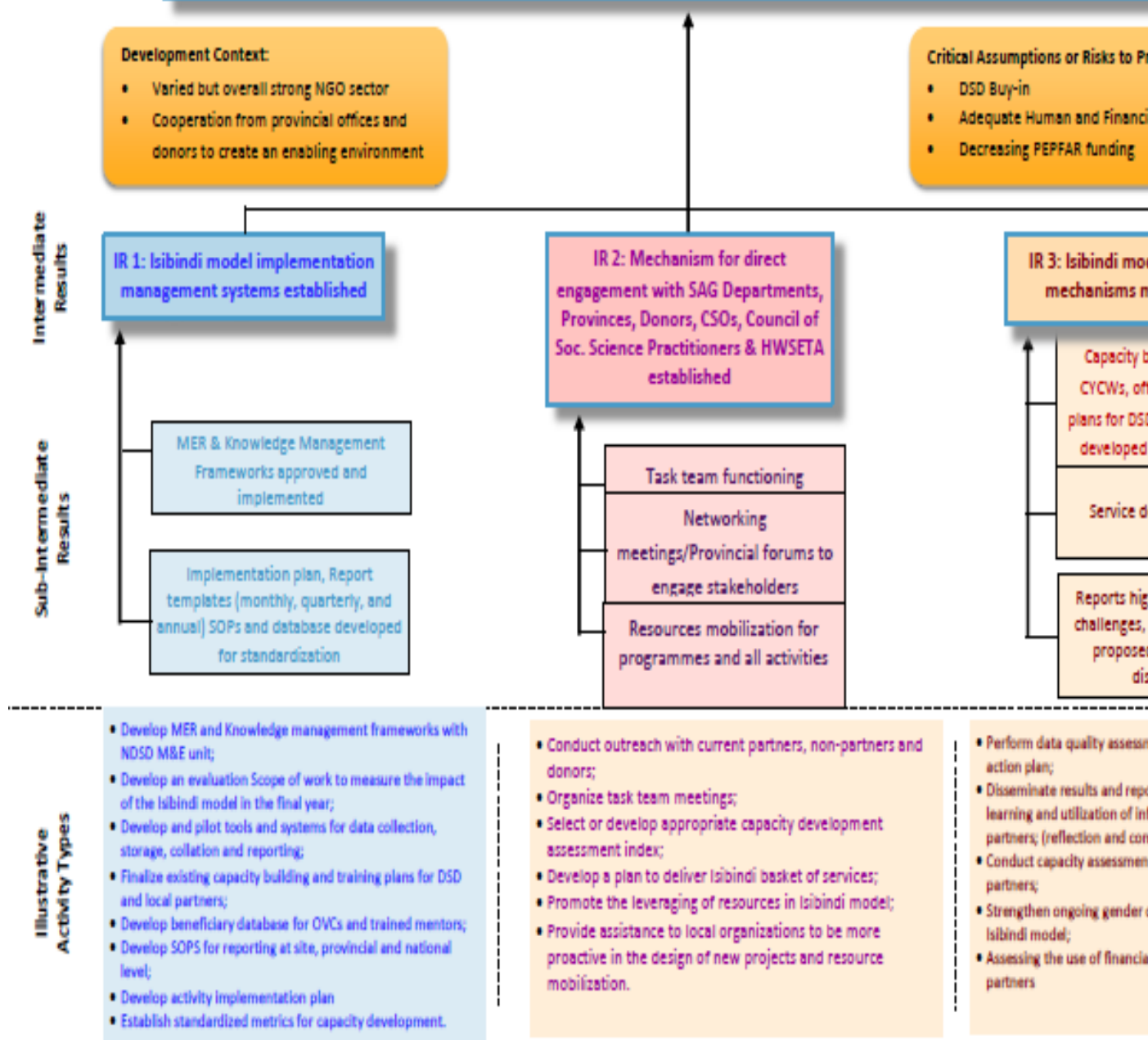
Figure 1:

Isibindi TA Support to DSD Results Framework

Overall goal: Strengthen the rollout of the Isibindi comprehensive model of care for vulnerable children, to improve effectiveness and sustainability the community level.

Indicators (two year):

- 30% increase of OVC provided prevention, early intervention and protection services
- 30% increase of trained CYCWs implementing the Isibindi program
- 20% increase of implementing partners providing prevention, early intervention and protection services to OVCs
- Functional Isibindi Model task team committee
- 3% increase in capacity index for selected local partners



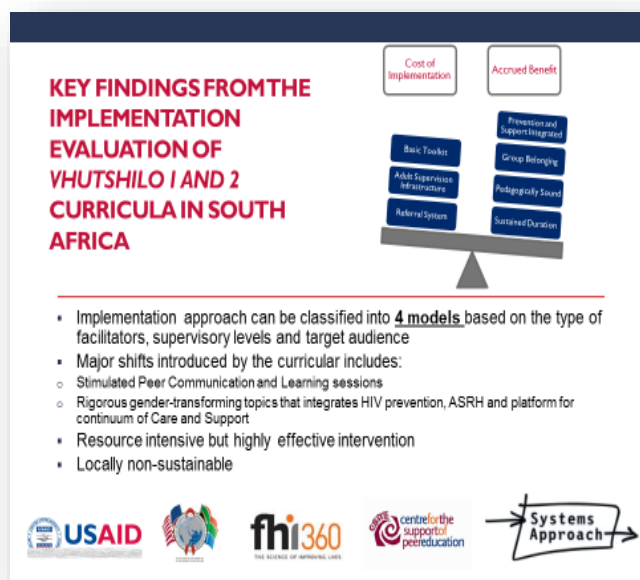
COMPONENT 4: MONITORING, EVALUATION, REPORTING AND LEARNING

Year One Implementation Plan and M&E Plan

The CDS project revised and submitted Implementation and Monitoring and Evaluation Plans covering an 18 month period from April 1, 2015 through September 20, 2016 to USAID for AOR approval. This plan includes an additional component covering NACSCAP project activities. The draft plans will be reviewed by USAID and finalized during the next reporting period.

Vhutshilo Curricula Evaluation

Systems Approach completed field work (data collection and analysis) for the Vhutshilo Implementation evaluation. CDS has shared the USAID's standard evaluation report template. The first draft evaluation report was received and initial comments provided. The revised draft report will be shared with USAID and CSPE prior to its finalization and dissemination. Key findings, recommendations and lessons learned will be shared with all key stakeholders by the next reporting period.



ECHS Baseline Assessment

During this reporting period, HSRC conducted fieldworkers' training workshops in all of the ECHS sites to prepare them for data collection. The semi-structured workshop is intended to:

1. Provide the fieldworkers (and ECHS partner organizations) with an overview on the project, the study design and the survey process.
2. Undertake in-depth review of the survey tools. This included obtaining insights from the fieldworkers on the applicability of the tools in their respective communities.
3. Develop an informed understanding of the context of young children, childhood development and caregiver engagement in the target communities; and
4. Identify study sites and participants
5. Provide fieldworkers (and ECHS partner organizations) with skill set for conducting child assessments
6. Undertake practical sessions in conducting the child assessment; and
7. Develop an informed understanding of child development

Human Sciences Research Council (HSRC) is now in the final stage of completing the quantitative data collection and beginning to undertake the qualitative data collection. The table below summarize the status at various sites:

Table 16: Progress on quantitative and qualitative data collection for the ECHS Baseline (as at the end of June 2015)

Site	Partner Organisation	Overall Status of the Baseline data collection	Assessment type	Status of the Quantitative data collection as at the end of June 2105			Status of the Qualitative data collection so far	Current Challenges
				Expected # of Questionnaires	Total Questionnaires completed	Total Outstanding Questionnaires		
Gauteng	Hope Worldwide	Data collection is in progress and completion is anticipated during the second week of July 2015.	Household Questionnaires	540	600	0	KIs and FGDs completion underway	None
			ASQ Questionnaires	540	505	95		
KZN	The Valley Trust	Data collection process almost done to complete the sample size.	Household Questionnaires	540	536	4	KIs and FGDs completion underway	None
			ASQ Questionnaires	540	536	4		
KZN	Keth'Impilo	Data collection process is still underway.	Household Questionnaires	540	515	85	KIs and FGDs completion underway	Limited number of fieldworkers delayed the process initially but have now been addressed
			ASQ Questionnaires	540	515	85		
Limpopo	Wozobona	All data collection completed. Data quality check and cleaning on-going and would be	Household Questionnaires	540	630	0	All KIs and FGDs done	None
			ASQ Questionnaires	540	630	0		

		completed soon						
Mpumalanga	Mothers 2 Mothers	Data collection process is still underway.	Household Questionnaires	540	708	12	KIs and FGDs underway	None
			ASQ Questionnaires	540	700	20		

An interim report on the quantitative data collection phase will be prepared and shared during the next reporting period. Soon after the quantitative data collection phase, all ECHS partners will commence implementation. A review of the data collection tools used for the ECHS Baseline survey indicate that CDS will be able to utilize the baseline results in reporting on the 2015 baseline data for six (6) out of the nine (9) required PEPFAR MER Essential survey OVC indicator reporting. Systems will be put in place to collect the remaining 3 as the full range implementation commences. Table 1.2 presents those that can and cannot be reported from the ongoing ECHS Baseline assessments.

Table 17: Classification of Essential survey OVC indicators that can or cannot be reported from on-going ECHS Baseline

Essential survey OVC indicators that can be reported from on-going ECHS Baseline	Essential survey OVC indicators that cannot be reported from on-going ECHS Baseline
<ol style="list-style-type: none"> 1. Percent of children whose primary caregiver knows the child's HIV status 2. Percent of children <5 years of age who are undernourished 3. Percent of children regularly attending school 4. Percent of children <5 years of age who recently engaged in stimulating activities with any household member over 15 years of age 5. Percent of households able to access money to pay for unexpected household expenses 6. Percent of caregivers who agree that harsh physical punishment is an appropriate means of discipline or control in the home or school <p><i>Note: Disaggregation will be done by sex and By age group (where relevant): only within the under 5 age group</i></p>	<ol style="list-style-type: none"> 1. Percent of children who have a birth certificate 2. Percent of children who progressed in school during the last year 3. Percent of children too sick to participate in daily activities

Data Quality Assessments for USAID OVCY partners

In response to USAID request, CDS contracted Khulisa Management Services to conduct the DQA on 8 OVCY partners funded by USAID. The partners are Child Welfare Bloemfontein, Childline Mpumalanga, Children in Distress Network (CINDI) and partners, Future Families, HIVSA, National Association of Child Care Workers (NACCW), Networking HIV, AIDS Community of South Africa (NACOSA) and Regional Psychosocial Support Initiative (REPSI). Inception meeting was held to draw out the detailed plan for the DQA. Table 1.3 below provides a snapshot of the sampling frame developed for the DQA exercise.

Table 18: Sampling Frame of sites by Partner, Sub partner, Type of Site, and Province

Partner Sub Partner Type of Site ¹	Province									Grand Total	% of all SDS in Sample
	EC	FS	GP	KZN	LP	MP	NC	NW	WC		
1. Child Welfare Bloem		3								3	
National head office		1								1	
SDS (N=29)		2								2	7%
2. Childline MPU					3	1				4	
National head office						1				1	
ChildLine Limpopo											
Provincial Office					1					1	
SDS (N=6)					2					2	33%
3. CINDI (May'khethele)				10						10	
National head office				1						1	
Community Care Project											
Provincial Office				1						1	
SDS (N=23)				2						2	9%
Lifeline											
Provincial Office				1						1	
SDS (N=15)				2						2	13%
Youth for Christ											
Provincial Office				1						1	
SDS (N=27)				2						2	7%
4. Future Families			3							3	
National head office			1							1	
SDS (N=4)			2							2	50%
5. HIVSA			3							3	
National head office			1							1	
SDS (N=50)			2							2	4%
6. NACCW	3	3	6	9	6	5	3	3	4	42	
National head office									1	1	
Provincial Office	1	1	1	1	1	1	1	1	1	9	

¹ **Error! Reference source not found.** presents the total number of service delivery sites (SDS) operating in the programme by "N=". The percent of all SDS included in the sample is indicated in the last column of the table.

Partner Sub Partner Type of Site ¹	Province									Grand Total	% of all SDS in Sample
	EC	FS	GP	KZN	LP	MP	NC	NW	WC		
SDS (N=316) ²	2	2	5	8	5	4	2	2	2	32	10%
7. NACOSA	2	1		2			2	1	2	10	
National head office									1	1	
Provincial Office	1			1			1			3	
SDS (N=31)	1	1		1			1	1	1	6	19%
8. REPSSI				1	2					3	
National head office				1						1	
SDS (N=28) ³					2					2	7%
Grand Total in SAMPLE	5	7	13	23	9	6	5	4	6	78	10 %

CDS team will continue to provide technical oversight to the process to ensure timely and quality delivery on the assessment. Progress on the DQA process will be reported in the next reporting period.

Performance Management Workshop for ECHS Implementing partners

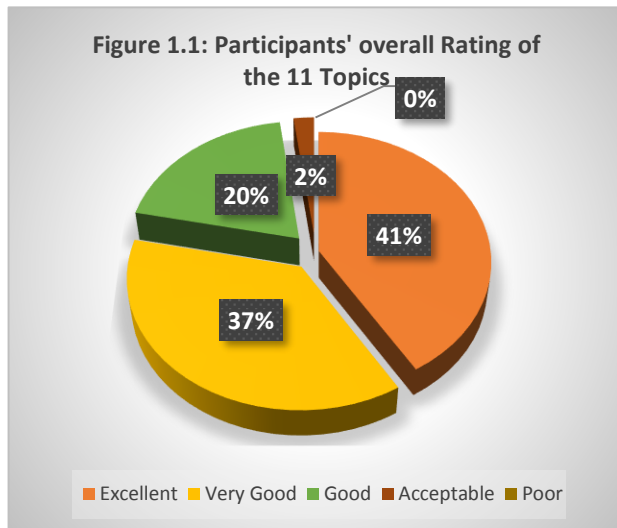
During this reporting period, the CDS project staged a Performance Management Workshop for the ECHS partners. The workshop was held at Garden Court OR Tambo International Airport, from the 23rd – 26th of June 2015. The workshop which consisted of 4 distinct parts had the following objectives:

- To intimate the participants with the granularity of the ECHS program interventions as it link to PEPFAR 3.0 Agenda and the alignment with UNAIDS 90-90-90 strategy
- To acquaint participants with tips for setting up a strong monitoring and evaluation system for the ECHS program as well further develop participants' skills in the drafting/use of M&E planning tools (e.g. PMP/M&E Plan) and
- To improve participants' understanding of the reportable indicators (SAG, USG/PEPFAR and ECHS-customized) and mandatory reporting obligations.
- To expose the participants to the installation, set-up the CBIMS database and data entry into DATIM

² NACCW's 32 SDS are distributed in proportion to the size of the provincial NACCW programme. Thus, more than 3 NACCW sites were selected for KZN, GP, LP, and MP provinces because of their larger programme size, with the remaining provinces allocated only 2 sites each.

³ The SDSs considered for the REPSSI sample are the 28 CBOs who report directly to REPSSI. The district DSD offices associated with the REPSSI programme were not considered for the sample.

Using a combination of excellent facilitation methods, group work and plenary presentation approaches, the workshop had a positive impact on the participants. Figure 1.1 shows that more than 75% of the participants rated highly the 11 topics presented. 41% admitted that it was excellent while 37% agreed that it was very good. Part I of the workshop (4 topics) provided an overview of the ECHS model and key interventions in light of PEPFAR 3.0 covering Case Management approach for ECHS implementation. Part II (with 1 topic) detailed issues around good practice in planning for and setting up strong M&E systems; while Part III (5 topics) delved into ECHS indicators, RDQA and Program Report Template. Part IV provided an introduction, installation and setup of the CBIMS desktop as presented by Rob Cairns, a consultant contracted to the CDS project to provide database support to USAID’s OVCY and ECHS partners. (See attached workshop program in annex 1).

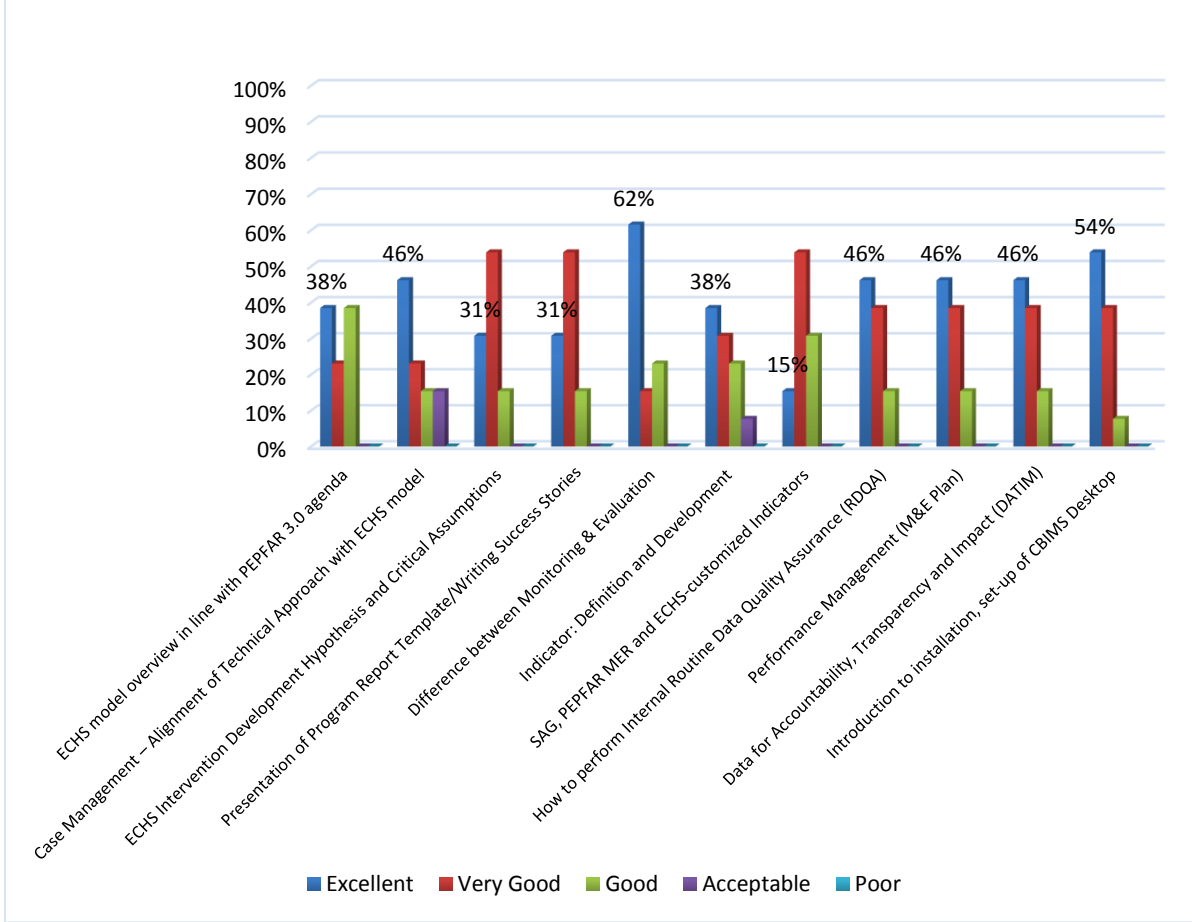


Fifteen (15) member of staff from the 5 ECHS partners participated at the workshop. In addition, Six (6) FPD technical staff also participated in the workshop for a better understanding of the ECHS interventions. These FPD staffs will eventually support ECHS partners in developing appropriate technical competencies in service delivery areas as well as quality improvement.

Figure 1.4 below shows participant rating for each topic covered at the workshop. Based on feedback from the attendees, the workshop was a good stimulation for a clearer understanding of USAID’s expectations and those areas they need to strengthen in order to deliver on the project.

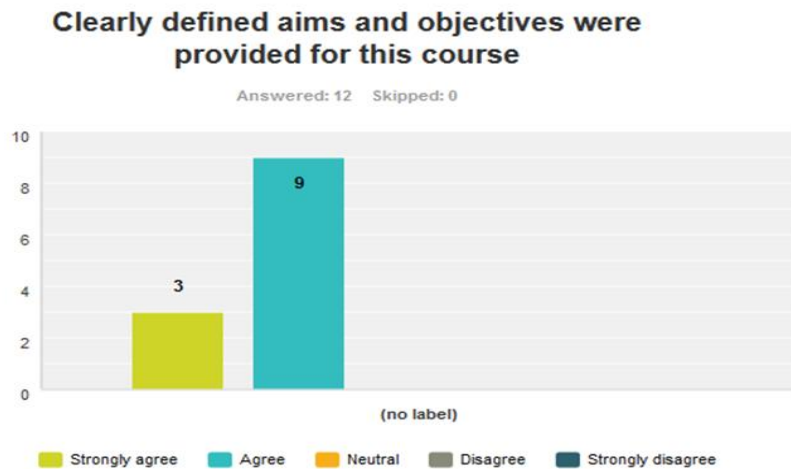
Figure 1.4 below shows participant rating for each topic covered at the workshop. Based on feedback from the attendees, the workshop was a good stimulation for a clearer understanding of USAID’s expectations and those areas they need to strengthen in order to deliver on the project.

Figure 1.4: Participant's Evaluation of the Workshop Topics (N=13)



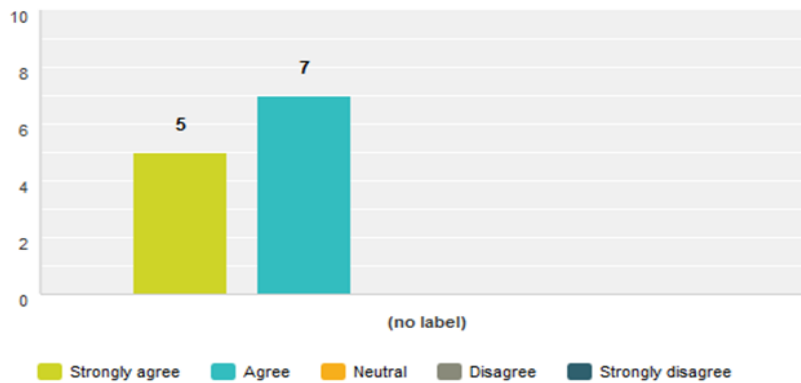
On the 3rd and 4th day of the workshop, CBIMS Desktop training was covered by Rob Cairns. Feedback obtained from participants using an online survey indicated that only 12 Participants responded. The results of the survey are presented below in Figure 1.3:

Figure 1.3 : Evaluation of the 2-day CBIMS training support ECHS partner



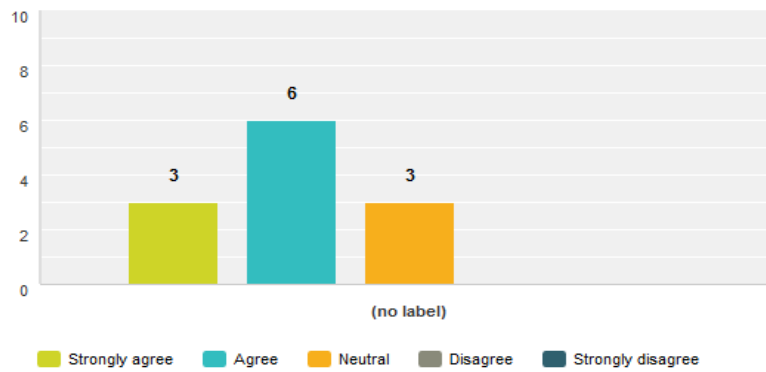
The content of the workshop was relevant to my needs

Answered: 12 Skipped: 0



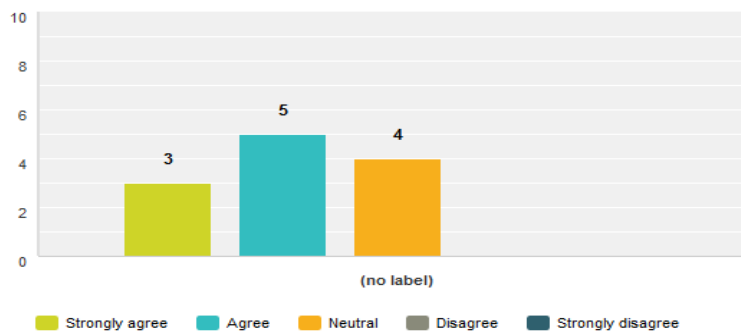
The database user manual was clear and easy to follow

Answered: 12 Skipped: 0



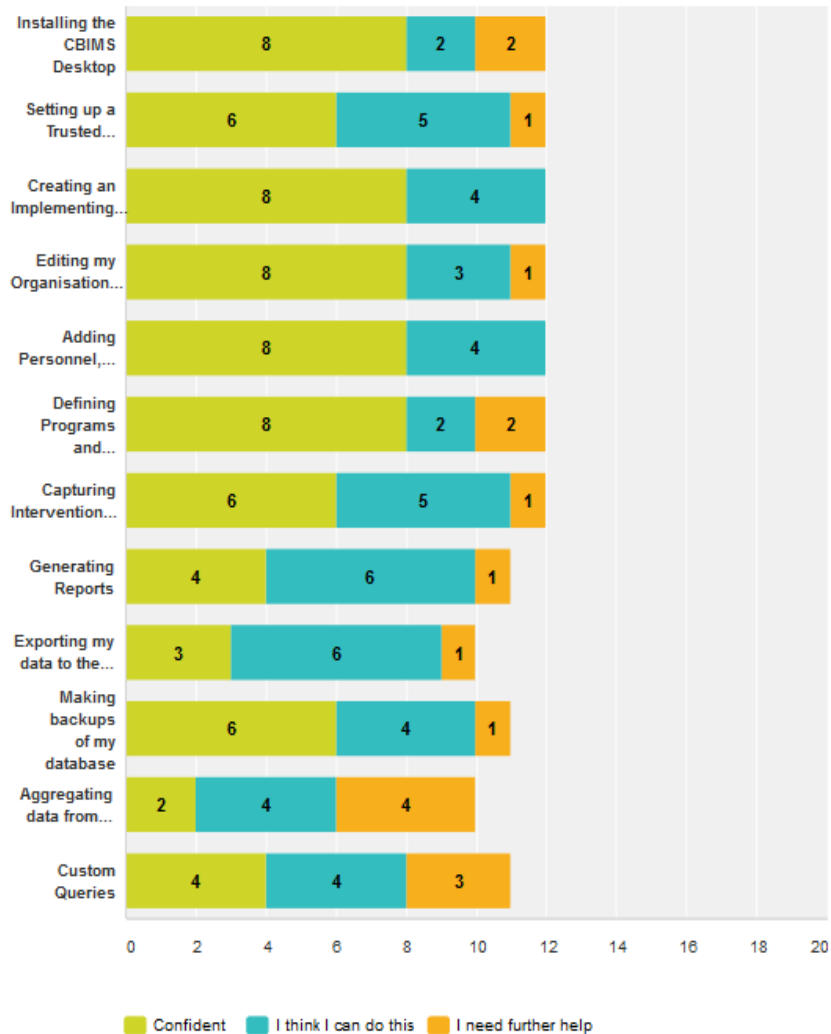
After this workshop I feel confident that I can use the database and export my data to CBIMS

Answered: 12 Skipped: 0



Please rank your confidence in the following topics

Answered: 12 Skipped: 0



Support to the development and roll-out of CBIMS Desktop Database

Rob Cairns’ consultancy continues to provide database support to USAID OVCY NGOs as well as ECHS awardees. This support is gradually yielding tremendous results especially in ensuring that USAID OVCY reporting systems align with SAG DSD’s system. All work itemized for Phase 1 of the consultancy has now been completed with the exception of a 1 day meeting planned with REPSSI and the 2nd round of training with new HIVSA partners. Work completed in the period 1 May to 30 June 2015 is shown on Table 1.5 below:

Table 1.5: Update on Support to the development of CBIMS desktop database and the roll-out

<ul style="list-style-type: none"> • Active Beneficiary Reports and Sub-District Grouping for PEPFAR have been completed for CINDI (who use the schools sub-database). This functionality has been extended to the household and institutions sub-databases in the OVC database.
<ul style="list-style-type: none"> • Export of data from the OVC Database to CBIMS Desktop was successfully completed for HIVSA partners - Mt Olive, Zenzele, Uthuso Sizo, Zenzelani, Radisela, Clean Touch and Thibolola.
<ul style="list-style-type: none"> • Child Welfare Bloemfontein staff were visited on 13-14 May 2015. Informal refresher training was provided to staff over two days, and the Tulane Grief Programme data was successfully imported into their schools database. This involved making a special form for Tulane and recoding and importing data from a spreadsheet – matching data to children already in the database. 2090 records were imported in this manner.
<ul style="list-style-type: none"> • Work on merging Childline MP TCB database into the OVC database and duplicate checks for children has been completed under budget, because the TCB data was able to be incorporated into the OVC database using already existing duplicate checks and without further coding needed.
<ul style="list-style-type: none"> • Approximately 41 out of a total of 60 hours of database support has been logged in the period from 1 April to 30 April (9 hours) and 1 May to 30 June (32.1 hours).

In the next quarter, the consultant will address the following:

- Support HIVSA in a 2nd round of training which was postponed to early August.
- Provide follow-up hands-on support to the ECHS sub-awardees on the use of CBIMS
- Provide refresher training on the OVC Database to NACOSA partners at four sites from July to September and train new partners to be contracted over the next few months.
- Complete the coding on the new DATIM (DHIS2) PEPFAR reports. These reports must be duplicated in the OVC Database and in CBIMS Desktop. This work can only be completed once the DREAMS specific definitions have been released by USAID and Consultant's contract is extended.

SECTION 4: CHALLENGES

Capacity Development Assistance to SAG

The main challenges experienced were:

- The recruitment of the TA (DUCW) for DSD was delayed due to the busy schedule of the Chief of Staff in the Minister's office.
- The recruitment of the TAs for DoH was also slightly delayed due to the delayed approval of the ToR by the Deputy Director General (STI, HIV).

SECTION 5: PLANNED ACTIVITIES FOR THE NEXT REPORTING PERIOD

The table below outlines the activities planned for the next quarter, organized by the four project components and Project Management in the recently submitted 18 month project implementation plan.

Table 20: Planned Activities for the Following Quarter

Project Components	Activities	Timelines (2015)
COMPONENT 1: GRANT AWARD AND MANAGEMENT	• Drafting of any new Grants/Contracts/Consultants document	July – September 2015
	• Contracts/Grants and Consultants Modifications	July – September 2015
	• Budget Negotiations, Pre-award assessments for any new contracts & Grants as and when required	July – September 2015
	• Review of consultants & contracts invoices	July – September 2015
	• FFATA Report & Submission of Sub-awards documents to ESABU	July – September 2015
COMPONENT 2: INSTITUTIONAL CAPACITY DEVELOPMENT OF INDIGENOUS ORGANIZATIONS	TECHNICAL	
	• Conduct Technical Assessments to NGOs	July – September 2015
	• Provide Technical Capacity Strengthening of NGOs in the provision of comprehensive interventions: OVC/ECHS & HIV Prevention	July – September 2015
	• Develop, finalize and Implement the CDS Gender Mainstreaming framework	July – September 2015
	PROGRAMME MANAGEMENT	
	• Finalize CDS annual workplan	July 2015
	• Co-ordinate programme management meetings & site visits to NGOs	July – September 2015
• Co-ordinate AOR Meetings	August–September 2015	

	ORGANIZATIONAL DEVELOPMENT	
	• Finalize development of comprehensive CA tool	July 2015
	• Pilot the CA tool and conduct user acceptance testing	July 2015
	• Develop the CA Facilitator Guide for the training of capacity assessment facilitators	July 2015
	• Train CDS facilitators to conduct CAs at NGO level	August 2015
	• Finalize modular content based on level 201 – 301 outlines on all domains	July – September 2015
	• Conduct Organizational Assessments to NGOs	August –September 2015
FINANCE CAPACITY BUILDING		
\	• FM 101/201 Curricula and Training material development	July 2015
	• FM capacity assessment reports & Gap Analysis incl. Action Plans	July – August 2015
	• FM training to ECHS grantees	August 2015
	• FMCA to NGOs recommended by USAID	August 2015
	• Site Visits/Management Meetings -Sub awardee monitoring	July – September 2015
	• Grantees Pipeline Analysis	July – September 2015
	• ECHS Cost share reports	July – September 2015
COMPONENT 3: CDS CAPACITY DEVELOPMENT ASSISTANCE TO THE SOUTH AFRICAN GOVERNMENT (SAG)	Recruit and place Technical Advisors (DSD, NDOH & Treasury)	
	• Finalise the ToR for the TA (CG) for the National Treasury and facilitate its approval	August 2015
	Advertise the TA (CG) position on newspapers and SANGONET	August 2015
	• Conduct interviews for DSD TA (DUCW), National Treasury TA (CG) and DOH TAs on CP, HCT & KP; and HIV Prevention/HCT programme.	July – September 2015
	• Draft selection memo for the above positions.	July – September 2015
	Manage and support seconded TAs to:	
	• Support new TAs to develop the results framework, project plan, annual workplan, inception report and to deliver on their quarterly workplan.	July – September 2015
	Monitor and evaluate performance of TAs	
• Conduct management meetings with DSD, DoH and National Treasury	July – September 2015	

	<ul style="list-style-type: none"> Perform quarterly review for the TA (Isibindi) in collaboration with DSD 	July and September 2015
MONITORING, EVALUATION, REPORTING AND LEARNING (MERL)	<ul style="list-style-type: none"> Finalize the list of reportable Indicators and DCRTs for the ECHS partners program reporting. 	July 2015
	<ul style="list-style-type: none"> Set-up Routine Data Quality Assessment (DQA) System for the ECHS partners. 	August 2015
	<ul style="list-style-type: none"> Conduct site monitoring visits to the 5 ECHS partners and provide feedback on performance 	August–September 2015
	<ul style="list-style-type: none"> Conduct the Dissemination of the Vhutshillo Evaluation 	August 2015
	<ul style="list-style-type: none"> Submit the final report of DQA for 8 OVCY partners to USAID 	September 2015
	<ul style="list-style-type: none"> Fill in the existing vacant positions in the M&E Unit – Data Capturers, KMC Manager and Research Officer 	August/September 2015
	<ul style="list-style-type: none"> Conduct OD Baseline Assessment of all the sub-awardee M&E system 	August 2015
	<ul style="list-style-type: none"> Develop organization-specific M&E Capacity Development plans for 6 Sub-awarded NGOs and unawarded NGOs 	August 2015
	<ul style="list-style-type: none"> Commence the Implementation of M&E Capacity Development plans through CD methods such as training, mentoring, coaching and supportive supervision. 	August–September 2015
	<ul style="list-style-type: none"> Draft and finalize the M&E 102 training curricular 	September 2015
	<ul style="list-style-type: none"> Finalize and commence the implementation of CDS' Knowledge Management Framework 	September 2015
	<ul style="list-style-type: none"> Finalize the list of reportable Indicators and DCRTs for the ECHS partners program reporting. 	July 2015
FINANCIAL MANAGEMENT	<ul style="list-style-type: none"> Monitor and track sub award financial reports 	July – September 2015
	<ul style="list-style-type: none"> CDS cost share reporting: TOMS cost share analysis and valuation 	July – September 2015
	<ul style="list-style-type: none"> Monitor grantees cost share plans and reporting follow up 	July – September 2015

Partner Name	Update on program activities	Challenges encountered and proposed solutions	Plans for the next Quarter
Mothers2 mothers	<ol style="list-style-type: none"> 1. A total of 6 family mentors were successfully recruited and trained on ECHS Project. 2. Community mapping for household identification, complementary services and development of service referral/linkage pathways was conducted. 3. In partnership with PATH, M2M held the 'Quality care for the first 1 000 days of life' community awareness campaign in Nkangala. M2M utilized the platform to raise awareness on ECHS project and to identify interested caregivers and children in their care. 4. The organization is implementing a two-pronged approach for client/household identification to facilitate client screening and enrolment for eligible clients. 5. Financial Management Capacity assessment was conducted by FHI360 in partnership with Deloitte. 	<ol style="list-style-type: none"> 1. Reaching clients in informal settlements and the safety and security of Family Mentors is a major concern. M2M has engaged with Home-Based Carers and Ward-based Outreach teams, connecting them with our Family Mentors so they can walk through the communities together in groups rather than individually. 2. The Project Manager position remains vacant. An existing staff member has been identified to step in as Acting Project Manager and will be commencing this role from 1 August 2015 while various strategies for recruiting for the position continue. 	<ul style="list-style-type: none"> • Completing household pre-enrolment, assessments and case management interventions • Family Mentor provision of services through household visits to support clients; • Recruitment, training and deployment of a second group of Family Mentors • Placement and orientation of a Family Mentor Coordinator in Nkangala to support Family Mentors as well as identify formal service provider relationships for referral and linkage of ECHS clients
Hope World Wide	<ol style="list-style-type: none"> 1. Continue Home Visitor Training. 2. HSRC Baseline Assessment: 600 Household Surveys conducted ; 532 ASQ Child Assessment Surveys conducted 3. Hiring of an M&E Officer 4. Finalizing the M&E Plan – in progress 5. Commencement of ETF-supported staff training 6. Finalizing and submission of the Revised Technical Approach and Budget 7. Financial Management Assessment conducted by Deloitte 8. Tom's Shoes Distribution: 2115 Children and 1058 Caregivers received the shoes; Total number of beneficiaries = 3173 	<ol style="list-style-type: none"> 1. Delays in startup activities and subsequent underspend. Provide FHI360 with budget to address underspend 2. Delays in starting up of Baseline activities and material for implementation have delayed start-up activities. Ongoing communication with FHI360 3. Identifying age appropriate caregivers and children. Get guidance from FHI360 	<ul style="list-style-type: none"> • Complete Baseline Survey • Identification of Targeted Beneficiaries next quarter • Hiring and training of 10 M2M Home Visitors and a data capture specialist • Establishment of Parent Support Groups • ETF-supported staff training
Khethimpilo			<ul style="list-style-type: none"> • Baseline Assessments of districts by HSRC

	<ol style="list-style-type: none"> 1. A total of 616 children were recruited, which is 28% percent of the revised target of 2200. 2. The Ilembe district, which is a transitioning district, has established of Circles of Support from the program commencement, as a baseline survey was not undertaken. There are 48 circles of Support running, reaching 243 Caregivers, 309 Children between 0-5 years and 582 household members. 3. Over the last quarter 730 home visits were conducted to households of caregivers. 4. Distribution of TOMS shoes was done in three districts, Amajuba, Ilembe and Amatole. A full report compiled to be compiled on the TOMS shoe template and will be sent submitted to FHI360. 	<ol style="list-style-type: none"> 1. Delay on the full implementation of the programme due to the delay on the start of the baseline study, change in the geographic focus and increase targets 2. Retrenchment of staff and exiting from the Amajuba district, over a short period of time did not allow for the development of a sustainable strategy. <i>For future, exiting strategies will have to be put in place well in advance, to prepare staff and communities.</i> 3. Using KI staff for the baseline study was a challenge. Extra costs were incurred and the staff was also not happy about being involved in the study given variation in the remuneration across the field workers. <i>Using our current staff on the following study will be reconsidered.</i> 	<ul style="list-style-type: none"> • Recruit and/ Train of SAWS, C Children • Develop, refine and finalize c material based on context • Training of staff in data collec and data quality improvement • Data base development will b tablet based system, but a pa will be initially used.
Woz'obona	<ol style="list-style-type: none"> 1. An estimation of 87 households are identified and profiled in both Greater Tubatse and Ba-Phalaborwa sub-districts. 2. Recruitment of Home Visitor was conducted successfully with 40 home visitors appointed to facilitate ECHS activities in both Tubatse and Baphalaborwa sub-district. 3. Seven CBO's have been identified and engaged to participate in ECHS program. 	<ol style="list-style-type: none"> 1. Delays in getting the baseline started and completed has led to a loss of valuable time in getting the project started. <i>The package of services and our training schedule have been revised to prioritize the most critical activities first in order to fast-track the flow of services to beneficiaries.</i> 2. The established partnership with Childline Limpopo resulted in high risk of double counting when both organisations report since both Childline Limpopo and 	<ul style="list-style-type: none"> • The following trainings will be pri visitors: HIV Pre- and Post- test co Development, Nutrition, Home Vi • MER training for Home Visitors, t covered include data quality, data and emphasis on data collection t • Agreement between Woz'obona a workers to provide debriefing and sessions to e visitors. Woz'obona play therapy sessions to home vis • An agreement between Woz'obor radio to host weekly radio shows promote ECHS. • Sets of WhatsApp and bulk SMS r promote ECHS will be sent to FHI before we disseminate to benefic

	The CBO's helped Woz'obona to identify Home Visitors.	Wozobona are implementing OVC activities in the same wards in Mopani. An action plan has already been developed which will make sure that by end of September there will be data flowing from the newly identified area and double counting is addressed.	<ul style="list-style-type: none"> • Memorandum of understanding k identified local CBOs in each village in the program. • Organizational audit to CBO's will determine what type of support v to CBO'S. We will also train memb CBOs on ECHS activities
The Valley Trust	<ol style="list-style-type: none"> 1. There were no direct ECHS project activities due to the ECHS baseline assessment by HSRC. 2. On the 21st of May 2015, TVT hosted the official launch of Khulakahle project. 3. The TVT Executive Director, Project Manager and Data Officer attended the Performance Management and Planning Workshop hosted by FHI360. 4. The Project Manager and one of the Khulakahle Project Facilitators attended the National Conference of National Association of Child and Youth Care Workers (NACCW) from late June to early July 2015 	<ol style="list-style-type: none"> 1. The delay in the start of the baseline survey resulted in a delay in the commencement of ECHS activities. 2. The increase in the targeted number of children from 720 to 1800 necessitated the review of the project implementation plan. 	<ul style="list-style-type: none"> • Appoint a permanent M&E Office Capturer from July. This will help work started by the Data Officer t period continues and FHI360's rec regarding M&E are met. • Improve our monitoring and evalu introducing the Mobenzi mobile h instead of hardcopy forms. • Commence ECHS activities as soo study is concluded. • Appoint four more community fac other sub-areas in kwaNgcolosi a the revised work plan to ensure t target of children reached is achie • Commence with psychosocial sup • Commence training of project sta youth care work, to be provided b Association of Child and Youth Ca (NACCW), and register staff with t of Social Development.

Annexure A: ECHS sub awardees progress Implementation