



Technical Assistance for Improving HIV Testing Yield in Scale-up LGAs in Nigeria: Implementation Plan

Program Years 3-4 (October 2016 – December 2017)

Submitted on:

February 7, 2017

Submitted to:

United States Agency for International Development
Cooperative Agreement #AID-OAA-A-14-00028

Submitted by:

Jhpiego in collaboration with
John Snow, Inc.
Save the Children
ICF International
Results for Development
Population Services International
PATH
CORE Group
Institute of International Programs/Johns Hopkins University
Broad Branch Associates
Communications Initiative
Avenir Health

Table of Contents

Table of Contents.....	i
Acronyms and Abbreviations	ii
Summary	1
Background/Approach	2
Project Objectives and Expected Results	6
Project Timeline.....	11
Management Plan.....	14
Short Term Technical Assistance/International Travel Plan	17

Acronyms and Abbreviations

ANC	antenatal care	JHU	Johns Hopkins University
APIN	AIDS Prevention Initiative in Nigeria	LDHF	low-dose, high-frequency
CAPTC	California Prevention Training Center	LGA	local government area
CCFN	Catholic Caritas Foundation of Nigeria	LRP	learning resource package
CDC	US Centers for Disease Control and Prevention	M&E	monitoring and evaluation
CHEW	community health extension worker	MCH	maternal and child health
CHW	community health worker	MCSP	Maternal and Child Survival Program
CIHP	Center for Integrated Health Programs	MNCH	maternal newborn and child health
DOD	US Department of Defense	MER	monitoring, evaluation, and research
FHI	Family Health International	MOD	Ministry of Defense (Nigeria)
FMOD	Federal Ministry of Defense	NGO	nongovernmental organization
FMOH	Federal Ministry of Health	PEPFAR	U.S. President’s Emergency Plan for AIDS Relief
FP	family planning	PHC	primary health center
GBV	gender-based violence	PNS	partner notification services
GON	Government of Nigeria	PY	project year
HCW	health care worker	QI	quality improvement
HF	health facility	SMOH	State Ministry of Health
HMIS	health management information system	SOP	standard operating procedure
HCW	Health care worker	SRH	sexual and reproductive health
HIV	Human Immunodeficiency Virus	STTA	short-term technical assistance
HIVST	HIV self-testing	TA	technical assistance
HTS	HIV testing services	TWG	technical working group
IEC	information, education, and communication	USAID	United States Agency for International Development
IHVN	Institute for Human Virology, Nigeria	USG	United States Government
IP	implementing partner	VCT	voluntary HIV counseling and testing
IPV	intimate partner violence	WHO	World Health Organization
IRB	institutional review board		

Summary

Country: Nigeria: Technical Assistance for Improving HIV Testing Yield in Scale-up LGAs in Nigeria		
Field Representative(s): Dr. Oniyire Adetiloye, Deputy Country Director/MCSP Deputy Project Director, Oniyire.Adetiloye@jhpiego.org		
US-based Contact Person(s): Kristina Grabbe, Senior Technical Advisor, HIV-ID Team, Kristina.grabbe@jhpiego.org ; Koki Agarwal, Maternal and Child Survival Program Director, Koki.Agarwal@mcsprogram.org ; Alishea Galvin, Program Officer, Alishea.Galvin@mcsprogram.org ; Laura Skolnik, Country Support Manager Laura.Skolnik@mcsprogram.org .		
<p>Program Objectives:</p> <ol style="list-style-type: none"> 1. Provide technical assistance to US Government (USG)-funded HIV testing services (HTS) implementing partners (IPs) to improve yield in scale-up LGAs (local government areas) in Nigeria through partner notification services (PNS) and HIV self-testing (HIVST) approaches 2. Develop and disseminate a learning resource package (LRP) to support facility-based implementation and standardization of PNS in Nigeria. Learning resource package may include implementation materials, monitoring and evaluation (M&E) tools, standard operating procedures (SOPs), information, education, and communication (IEC) materials, and tools for ongoing mentorship 3. Develop resources and tools to support HIVST pilot in Nigeria, to be integrated as part of strengthened PNS 4. Provide support for inclusion of PNS and HIV self-testing in national policies and guidelines 5. Evaluate expansion of PNS and HIVST in scale-up LGAs in Nigeria to determine impact on HIV testing yield, successes, and challenges with PNS and HIVST implementation <p>Geographic Focus: 32 scale-up LGAs in Nigeria</p>		
Financial Summary: Project Years 3-4 (October 1, 2016–December 31, 2017)		
Funding Status - Field Support	HIV	Total
A. Total Obligations Received (Mods 1-14)	\$0	\$0
B. Expenditures through 9/30/2016 (Accrual Basis)	\$0	\$0
C. Estimated Pipeline 10/1/2016 (A - B)	\$0	\$0
D. Additional Pending Funds per FS Database (dated 1/10/17)	\$150,000	\$150,000
E. Total Available and Pending Funds for PY03 (C+D)	\$150,000	\$150,000
F. PY03 Budgeted with this workplan 10/1/2016 - 9/30/2017	\$400,000	\$400,000
G. Variance from Available Funding (E - F)	-\$250,000	-\$250,000
Notes: This table shows Mission funding allocated, budgeted and spent for the MCSP Nigeria HTS program only.		
In-Country Partners: Federal Ministry of Health (FMOH); Federal Ministry of Defense (FMOD); Family Health International (FHI360); Institute for Human Virology Nigeria (IHVN); AIDS Prevention Initiative in Nigeria, LTD; Center for Integrated Health Programs (CIHP); Catholic Caritas Foundation of Nigeria (CCFN); Society for Family Health, Nigeria; Heartland Alliance for Human Needs and Human Rights.		

Background/Approach

The Maternal and Child Survival Program (MCSP) is a global U.S. Agency for International Development (USAID) cooperative agreement to introduce and support high-impact health interventions in 25 priority countries with the ultimate goal of ending preventable child and maternal deaths within a generation. MCSP Maternal, Newborn and Child Health (MNCH) activities have been described in a separate workplan. This workplan addresses PY3 MCSP HIV Testing Service (HTS) funds that have been allocated specifically for MCSP to provide technical assistance for improving yield in HIV testing services in 32 scale-up local government areas (LGAs) in Nigeria through partner notification services (PNS), which may include HIV self-testing.

Geographic scope

The MCSP HTS TA project team will provide technical assistance (TA) to IPs funded for comprehensive HIV programs (including testing, prevention, care, and treatment) in 32 scale-up LGAs in Nigeria, to initiate and expand partner notification services (PNS), which may include HIV self-testing (where appropriate). Although it is expected that PNS will be rolled out in all 32 scale-up LGAs, project staff will work with IPs to determine high-potential sites for rapid expansion and pilot assessments, and slower-performing sites, which may take a more tempered approach to PNS rapid expansion.

The MCSP program office is based in Abuja. A list of the 32 PEPFAR-supported scale-up LGAs and the IPs supporting HTS in these LGAs is provided below.

Scale-up LGA	Implementing Partners
ak Ikot Ekpene	FHI 360
	Heartland Alliance for Human Needs and Human Rights
	Society for Family Health-Nigeria
ak Okobo	FHI 360
	Society for Family Health-Nigeria
ak Oron	FHI 360
	Society for Family Health-Nigeria
ak Uruan	FHI 360
	Society for Family Health-Nigeria
ak Uyo	FHI 360
	Heartland Alliance for Human Needs and Human Rights
	Society for Family Health-Nigeria
be Buruku	Catholic Caritas Foundation of Nigeria (CCFN)
	Center for Integrated Health Programs
	Heartland Alliance for Human Needs and Human Rights
	Institute of Human Virology, Nigeria
be Gwer West	Catholic Caritas Foundation of Nigeria (CCFN)
	Center for Integrated Health Programs
	Society for Family Health-Nigeria
be Katsina-Ala	Catholic Caritas Foundation of Nigeria (CCFN)
	Center for Integrated Health Programs
	Heartland Alliance for Human Needs and Human Rights
	Institute of Human Virology, Nigeria
be Konshisha	Catholic Caritas Foundation of Nigeria (CCFN)
	Center for Integrated Health Programs
	Institute of Human Virology, Nigeria

	Society for Family Health-Nigeria
be Logo	Catholic Caritas Foundation of Nigeria (CCFN)
	Center for Integrated Health Programs
	Heartland Alliance for Human Needs and Human Rights
be Tarka	Catholic Caritas Foundation of Nigeria (CCFN)
	Center for Integrated Health Programs
	Society for Family Health-Nigeria
be Ushongo	Catholic Caritas Foundation of Nigeria (CCFN)
	Center for Integrated Health Programs
	Institute of Human Virology, Nigeria
	Society for Family Health-Nigeria
cr Calabar Municipal	FHI 360
	Heartland Alliance for Human Needs and Human Rights
	Society for Family Health-Nigeria
cr Calabar South	FHI 360
	Heartland Alliance for Human Needs and Human Rights
	Society for Family Health-Nigeria
fc Abuja Municipal Area Council	Catholic Caritas Foundation of Nigeria (CCFN)
	Heartland Alliance for Human Needs and Human Rights
	Institute of Human Virology, Nigeria
	Society for Family Health-Nigeria
fc Bwari	Catholic Caritas Foundation of Nigeria (CCFN)
	Institute of Human Virology, Nigeria
	Society for Family Health-Nigeria
la Agege	FHI 360
	Heartland Alliance for Human Needs and Human Rights
	Society for Family Health-Nigeria
la Ajeromi-Ifelodun	FHI 360
	Heartland Alliance for Human Needs and Human Rights
	Society for Family Health-Nigeria
la Alimosho	AIDS Prevention Initiative in Nigeria, LTD
	Catholic Caritas Foundation of Nigeria (CCFN)
	Heartland Alliance for Human Needs and Human Rights
	Society for Family Health-Nigeria
la Apapa	FHI 360
la Ifako-Ijaiye	AIDS Prevention Initiative in Nigeria, LTD
	Heartland Alliance for Human Needs and Human Rights
la Ikeja	AIDS Prevention Initiative in Nigeria, LTD
	Catholic Caritas Foundation of Nigeria (CCFN)
	Heartland Alliance for Human Needs and Human Rights
la Mushin	AIDS Prevention Initiative in Nigeria, LTD
	Heartland Alliance for Human Needs and Human Rights

	Society for Family Health-Nigeria
Ia Surulere	FHI 360
	Society for Family Health-Nigeria
na Doma	Catholic Caritas Foundation of Nigeria (CCFN)
	Heartland Alliance for Human Needs and Human Rights
	Institute of Human Virology, Nigeria
	Society for Family Health-Nigeria
na Karu	Institute of Human Virology, Nigeria
	Society for Family Health-Nigeria
na Lafia	Catholic Caritas Foundation of Nigeria (CCFN)
	Heartland Alliance for Human Needs and Human Rights
	Institute of Human Virology, Nigeria
	Society for Family Health-Nigeria
na Nasarawa	Institute of Human Virology, Nigeria
	Society for Family Health-Nigeria
na Obi	Catholic Caritas Foundation of Nigeria (CCFN)
	Heartland Alliance for Human Needs and Human Rights
	Institute of Human Virology, Nigeria
ri Eleme	FHI 360
	Heartland Alliance for Human Needs and Human Rights
	Society for Family Health-Nigeria
ri Obio/Akpor	FHI 360
	Heartland Alliance for Human Needs and Human Rights
ri Port-Harcourt	FHI 360
	Heartland Alliance for Human Needs and Human Rights
	Society for Family Health-Nigeria

Technical focus

The primary objective of the MCSP HTS TA project is to improve the quality and scope of PNS in Nigeria and to evaluate methods for expanding this service. At the end of the project period (December, 2017), the MCSP HTS TA project will provide recommendations for consideration by PEPFAR and Federal Ministry of Health (FMOH). The primary focus technical area is HIV testing services, which includes linkage to HIV care and treatment. There will be overlap with other technical areas, including gender, key populations, HIV prevention, and HIV care and treatment.

The project promotes several aligned activities to improve yield of HTS through PNS, including:

- Coordinating efforts of IPs in Nigeria through regular meetings (both in-person and virtual) to plan PNS scale-up, monitor PNS service delivery, and share lessons learned;
- Developing and disseminating a learning resource package (LRP) for standardizing PNS in Nigeria, which may include implementation materials, monitoring and evaluation (M&E) tools, standard operating procedures (SOPs), information, education, and communication (IEC) materials, and tools for ongoing mentorship;
- Developing resources and tools for HIVST pilot in Nigeria, to be integrated as part of strengthened PNS;
- Supporting the FMOH to develop or refine favorable policy, strategy, and governance structures for quality and priority technical areas, including advocacy for including PNS and HIV self-testing in forthcoming update National HTS Guidelines;
- Evaluating expansion of PNS and HIVST in scale-up LGAs in Nigeria to determine impact on HIV testing yield, successes, and challenges with PNS and HIVST implementation.

Achievements to date:

The MCSP-HTS project was initiated in PY3 (November, 2016). The initial scoping visit was held December, 2016, which included site visits to Lagos, meetings with key stakeholders from IPs FMOH, and USG HTS technical working group (TWG). A debrief presentation was submitted together with a trip report in December, 2016.

Project Background:

In April, 2016, The USG HTS TWG encouraged implementing partners (IPs) to introduce PNS in their scale-up sites, but most IPs did not consider services to be “at scale” until August, 2016. (FHI and IHVN reported that they conducted their own trainings for clinic staff prior to August, 2016, but other IPs were planning to launch their internal trainings in January, 2017.) The U.S.-based PEPFAR HIV Testing Services TWG held a meeting with IPs in August 2016 to discuss PNS implementation, and CDC-Nigeria facilitated a training for IPs, which was conducted by the U.S.-based California Prevention Training Center (CA PTC) in November, 2016. The CA PTC training largely focused on building the skills of HIV testing providers to support people living with HIV (PLHIV) with disclosure to their sex partners. This MCSP HTS TA project will build on the work of the IPs to date including the trainings and tools that have been shared with IPs, and will allow for an evaluation of the scale-up of PNS services by IPs in Nigeria to determine the impact on HTS yield.

Project Objectives and Expected Results

Expected Life-of-Program Results	Significant Achievements 1 st October 2016 to 31 st December 2016 (PY3, Q1)	PY3 Expected Results/Deliverables
Objective 1: Provide technical assistance to USG-funded HTS IPs to improve yield in scale-up LGAs in Nigeria through PNS and HIVST approaches		
Introduce HTS TA Project to IPs in Nigeria and receive buy-in	<ul style="list-style-type: none"> • Conducted initial scoping visit to Nigeria in December 2016, including site visits and meetings with stakeholders from IPs, FMOH, USG HTS TWG • Conducted baseline assessment of PNS in Nigeria, including IP survey and data request • Reviewed PNS training and data collection materials already in use by IPs • Reviewed national guidelines and other background documents • Held meeting with FMOH and received approval for supporting finalization of national HTS guidelines, to include language on PNS and HIVST 	<ul style="list-style-type: none"> • Maintain positive relationship with IPs throughout the course of the project to ensure their buy-in and full participation • Rely on IPs as pioneers in this approach in Nigeria • Establish PNS working group with IPs, FMOH, and USG HTS TWG, to ensure buy-in and ease communication • Rely on USG team to facilitate strong relationships between IPs and MCSP, including data requests in order to conduct proper evaluation
Coordinate efforts of IPs in Nigeria through regular meetings (both in-person and virtual) to plan PNS and HIVST evaluation and scale-up, monitor service delivery, and share lessons learned	<ul style="list-style-type: none"> • Convened IP meeting in Nigeria, December 2016 to learn about IP efforts to scale-up PNS to date 	<ul style="list-style-type: none"> • Beginning February, 2017, hold monthly meetings (in-person or virtual) with key staff from IPs (PNS working group) to plan evaluation and scale-up of PNS and HIVST, monitor service delivery, and share lessons learned • Facilitate in-person meetings with IPs during visits to Nigeria • Facilitate skype phone calls with IPs during no-travel months
Conduct site visits to IP scale-up sites in Nigeria to assess PNS and HIVST implementation	<ul style="list-style-type: none"> • Visited 4 HTS sites in Lagos, Nigeria in December 2016 	<ul style="list-style-type: none"> • Visit 2-4 scale-up sites per visit to assess PNS and HIV ST implementation; scheduling site visits will be done in collaboration with IPs and USG HTS TWG; sites will be selected based on performance and inclusion in the evaluation
Objective 2: Develop and disseminate a learning resource package (LRP) for standardizing PNS in Nigeria, which may include implementation materials, M&E tools, SOPs, IEC materials, and tools to support ongoing mentorship		
Review existing PPT slides and tools	<ul style="list-style-type: none"> • Reviewed CA PTC training resources and OGAC/PEPFAR SOPs in December, 2016 • Reviewed IP data collection and reporting tools in December, 2016 	<ul style="list-style-type: none"> • Integrate relevant components of existing materials into final LRP for Nigeria • Integrate data collection and reporting feedback from IPs into final M&E tools

Expected Life-of-Program Results	Significant Achievements 1 st October 2016 to 31 st December 2016 (PY3, Q1)	PY3 Expected Results/Deliverables
Develop learning resource package for PNS in Nigeria	<ul style="list-style-type: none"> • Discussed content for learning resource package with IPs, FMOH, and USG HTS TWG in December 2016 • Discussed risks for intimate partner violence (IPV) and need to build provider skills to 1) screen for IPV; 2) ensure index client safety before conducting PNS; 3) link clients reporting IPV with appropriate services; and 4) identify adverse events (including IPV) following PNS and take appropriate actions for these clients 	<ul style="list-style-type: none"> • Develop learning resource package, which may include: <ul style="list-style-type: none"> ○ 2-3 day orientation for site and program managers ○ Facility-based implementation materials such as job aids, SOPs, modular learning exercises, M&E tools, and tools for ongoing mentorship ○ Skills building around supporting patient disclosure and addressing IPV • Develop LRP with input from IPs, FMOH, USG HTS TWG • Pilot test LRP with IPs, incorporate edits and feedback, finalize and disseminate for further roll out • Share learning resource package with FMOH and get sign off on roll-out as needed
Develop M&E tools for PNS in Nigeria	<ul style="list-style-type: none"> • Discussed data collection and reporting needs with IPs, FMOH, and USG HTS TWG in December 2016 	<ul style="list-style-type: none"> • Develop M&E tools, which may include: <ul style="list-style-type: none"> ○ Client intake form ○ Partner follow-up form ○ PNS register ○ PNS monthly reporting form for select indicators ○ Instruction manual • M&E tools to be developed with input from IPs, FMOH, USG HTS TWG • Pilot test M&E tools, incorporate edits and feedback, finalize and disseminate with IPs • Explore integration into national M&E systems, including national level indicators and HMIS options • Share M&E package with FMOH and get sign off on roll-out as needed
Develop IEC materials for PNS in Nigeria	<ul style="list-style-type: none"> • Discussed issues related to stigma, lack of knowledge of partner testing, gender-based violence, with IPs, FMOH, and USG HTS TWG in December 2016 	<ul style="list-style-type: none"> • Develop IEC materials, which may include clinic posters, brochures, palm cards, and referral cards • IEC materials to be developed with input from IPs, FMOH, USG HTS TWG

Expected Life-of-Program Results	Significant Achievements 1 st October 2016 to 31 st December 2016 (PY3, Q1)	PY3 Expected Results/Deliverables
	<ul style="list-style-type: none"> Identified need to supplement PNS program efforts with communications materials to normalize and increase partner testing 	<ul style="list-style-type: none"> Pilot IEC materials, incorporate edits and feedback, finalize and disseminate with IPs Share finalized IEC materials with FMOH and get sign off as needed
Objective 3: Develop learning resource package for HIVST pilot in Nigeria, to be integrated as part of strengthened PNS		
Determine if environment in Nigeria is conducive for HIVST pilot in conjunction with PNS roll-out	<ul style="list-style-type: none"> Held meetings with FMOH and USG HTS TWG in Nigeria in December 2016 FMOH and USG HTS TWG are supportive of HIVST in Nigeria, but many logistical issues remain to be worked out 	<ul style="list-style-type: none"> Continue situation analysis for HIVST in Nigeria
Propose pilot project at high performing scale-up sites to integrate HIVST for partners of PLHIV index clients		<ul style="list-style-type: none"> Together with IPs, develop concept note for integration of HIVST into PNS in select scale-up sites If approved, develop comprehensive proposal for HIVST in Nigeria, to be part of PNS roll-out in scale-up sites
Develop learning resource package for HIVST pilot in Nigeria		<ul style="list-style-type: none"> Develop learning resource package for HIVST (integrate into PNS LRP), which may include facility-based implementation materials such as SOPs and job aids, M&E tools, modular learning exercises and tools for ongoing mentorship Conduct orientation for sites and providers participating in evaluation of HIVST Support facility-based learning for HIVST pilot
Objective 4: Provide support for inclusion of PNS and HIV self-testing in national policies and guidelines		
Review existing national policies and guidelines	<ul style="list-style-type: none"> Reviewed existing versions of national HTS and PMTCT guidelines in December 2016 Reviewed WHO PNS and HIVST Guidelines, released December 1, 2016 	<ul style="list-style-type: none"> Update national HTS guidelines to include language about PNS and HIVST that aligns with international standards and recommendations
Obtain FMOH buy-in for assisting with finalization of national HTS guidelines	<ul style="list-style-type: none"> Met with FMOH in December 2016 and received support for hosting National HIV Task Team Meeting in February, 2017 	<ul style="list-style-type: none"> Acknowledge FMOH leadership in aligning updated national guidance with WHO Inspire urgency in completing national guidelines to support rapid roll-out of PNS in Nigeria
Draft language on PNS and HIVST for consideration by National HIV Task Team for inclusion in updated national HIV testing guidelines		<ul style="list-style-type: none"> Draft proposed language for inclusion in national HTS guidelines Send proposed language to FMOH for national task team review in advance of February meeting

Expected Life-of-Program Results	Significant Achievements 1 st October 2016 to 31 st December 2016 (PY3, Q1)	PY3 Expected Results/Deliverables
Host National HIV Task Team meeting in February 2017 to review proposed PNS and HIVST language and finalize national HIV testing guidelines	<ul style="list-style-type: none"> Discussed meeting objectives and dates with FMOH, received buy-in for meeting to be held in February, 2017 	<ul style="list-style-type: none"> Receive draft budget with proposed attendees, dates, and location from FMOH/USG HTS TWG Work with MCSP-Nigeria office to organize logistics for meeting Work with USG HTS TWG and FMOH to schedule dates and send invitations Convene meeting for 3-5 days outside Abuja with up to 45 people in attendance Leave meeting with agreement on final language for national HIV testing guidelines, to be printed and disseminated by FMOH
Host second Task Team meeting in late 2017 to review final learning resource package, if needed	<ul style="list-style-type: none"> Discussed options for reviewing draft materials in February versus hosting a second meeting in late 2017 once materials have been piloted 	<ul style="list-style-type: none"> Work with USG HTS TWG to determine best approach for Task Team meetings Schedule and coordinate second meeting in late 2017, if needed
Objective 5: Evaluate expansion of PNS and HIVST in scale-up LGAs in Nigeria to determine impact on HIV testing yield, successes, and challenges with PNS and HIVST implementation		
Conduct baseline assessment of PNS in Nigeria	<ul style="list-style-type: none"> Circulated survey for IPs to complete in December 2017, to assess scale and scope of PNS implementation in Nigeria Results from survey shared with USG HTS TWG in December 2017 Submitted data request from IPs in December 2017; no IPs provided data, so a second request will be made in February 2017 	<ul style="list-style-type: none"> Request data from April 2016 – December 2016 from participating IPs Analyze data and use as baseline for PNS implementation before scaled-up TA
Draft concept note outlining objectives and methods for evaluation of PNS expansion and HIVST pilot in Nigeria	<ul style="list-style-type: none"> Received feedback from USG HTS TWG and USAID about importance of evaluating PNS expansion efforts to demonstrate improvement in yield 	<ul style="list-style-type: none"> Facilitate conference call with IPs in February 2017 to introduce the evaluation and get initial ideas Host meeting with IPs in February 2017 in Nigeria to further draft evaluation design Finalize concept note and submit for approvals
Collect PNS data from IPs on a monthly basis to determine progress toward achieving project outcomes	<ul style="list-style-type: none"> Initial request submitted December 2016, second request will be submitted February 2017 	<ul style="list-style-type: none"> Submit second request for baseline data
Facilitate bi-monthly meetings and site visits with IPs to assess implementation progress	<ul style="list-style-type: none"> Initial kick off meeting, December 2016 	<ul style="list-style-type: none"> Hold bi-monthly meetings December 2016 – October 2017
Work with IPs to summarize final project data and write evaluation report and manuscript		<ul style="list-style-type: none"> Hold final data analysis and writing workshop Submit evaluation report to USAID

Expected Life-of-Program Results	Significant Achievements 1 st October 2016 to 31 st December 2016 (PY3, Q1)	PY3 Expected Results/Deliverables
		<ul style="list-style-type: none"> <li data-bbox="1381 217 1997 267">• Host project dissemination meeting to share results with key stakeholders, including FMOH

Project Timeline

Activity	Month														
	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
Objective 1: Provide technical assistance to USG-funded HTS IPs to improve yield in scale-up LGAs in Nigeria through PNS and HIVST approaches															
1.1 Develop draft project SOW															
1.2 Conduct scoping visit to include: 1) baseline assessment of PNS in Nigeria, 2) site visits, 3) review of background documents, 4) meetings with key stakeholders and IPs, 5) in- and out-briefs with USAID and USG HTS TWG															
1.3 Submit scoping visit (visit 1) trip report, including baseline assessment															
1.4 Complete and submit work plan for USAID approval															
1.5 Identify IP representatives to form PNS working group															
1.6 Identify key monthly indicators for IPs to report on during course of evaluation															
1.7 Request IPs to submit past data to inform baseline for PNS in Nigeria															
1.8 Receive monthly data reports from IPs															
1.9 Facilitate bimonthly meetings with IPs to discuss plans for PNS scale-up, design evaluation, review program data, and assess progress towards achieving evaluation outcomes															
1.10 Facilitate bimonthly phone calls with IPs to review program data and identify successes and barriers to PNS implementation in Nigeria															
1.11 Conduct site visits to PNS scale-up sites in Nigeria															
Objective 2: Develop and disseminate a learning resource package (LRP) for PNS in Nigeria															
2.1 Review existing PNS M&E tools used by IPs in Nigeria															
2.2 Review WHO and PEPFAR recommendations for data collection and reporting on PNS															
2.3 Complete draft 1 M&E tools															
2.4 Review feedback on M&E tools and incorporate into draft 2															
2.5 Disseminate draft 2 M&E tools for use by IPs															

Activity	Month														
	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
2.6 Review existing PEPFAR and CAPTC training materials previously used for PNS in Nigeria															
2.7 Outline content and materials for learning resource package															
2.8 Complete draft 1 learning resource package															
2.9 Review feedback on learning resource package and incorporate into draft 2															
2.10 Pilot test learning resource package with IP providers in Nigeria															
2.11 Incorporate feedback from pilot test into draft 3 learning resource package															
2.12 Finalize learning resource package and disseminate for IP step down trainings															
2.13 Provide ongoing mentorship and practical learning opportunities															
2.14 Complete draft 1 IEC materials to accompany PNS scale-up															
2.15 Review feedback on IEC materials and incorporate into draft 2															
2.16 Finalize IEC materials and disseminate to IPs for use in PNS scale-up sites															
Objective 3: Develop Learning Resource Package for HIVST pilot in Nigeria, to be integrated as part of strengthened PNS															
3.1 Determine interest in incorporating HIVST into PNS project															
3.2 Identify sites where HIVST will be incorporated (if approved)															
3.3 Draft SOPs and learning resource package for HIVST pilot in select PNS scale-up sites															
3.4 Train providers in HIVST delivery															
3.5 Implement HIVST in PNS scale-up sites															
Objective 4: Provide support for inclusion of PNS and HIV self-testing in national policies and guidelines															
4.1 Review current draft national HTS Guidelines, WHO HIVST and PNS Guidelines															
4.2 Conduct initial meeting with FMOH to determine buy-in for HIVST and PNS inclusion in updated national HTS Guidelines															
4.3 Draft HIVST and PNS language for inclusion in national HTS Guidelines and send to USG HTS TWG and FMOH															
4.4 Coordinate National HIV Task Team meeting to review updated national HTS Guidelines															

Activity	Month														
	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
4.5 Incorporate feedback from Task Team into final draft national HTS Guidelines															
4.6 Share final draft national HTS Guidelines with USG HTS TWG and FMOH for completion and dissemination by WHO															
Objective 5: Evaluate expansion of PNS and HIVST in scale-up LGAs in Nigeria to determine impact on HIV testing yield, successes, and challenges with PNS and HIVST implementation															
5.1 Host meeting with IPs to discuss evaluation of PNS scale-up activities															
5.2 Draft concept note for evaluating PNS scale-up activities and submit to USG HTS TWG and USAID/W MCSP AOR team															
5.3 Receive and incorporate feedback from USG HTS TWG															
5.4 Submit final concept note to USAID for approval															
5.5 Conduct evaluation activities, including PNS and HIVST scale-up in select sites, facility-based implementation support for providers, monthly data collection as outlined															
5.6 Hold monthly meetings either in-person or virtually to check in with IPs on progress towards achieving evaluation outcomes															
5.7 Hold final project evaluation meeting with IPs to review data and evaluation outcomes, begin outlining project evaluation report															
5.8 Write final evaluation report															
5.9 Present evaluation outcomes at final project wrap-up meeting with key stakeholders															
5.10 Draft manuscript															

Management Plan

Management

The MCSP HTS TA project is under the umbrella of the MCSP Maternal, Newborn, and Child Health (MNCH) program in Nigeria. Jhpiego leads the MCSP MNCH program and provides technical leadership for the MCSP HTS TA project. The MCSP HTS TA project is housed within MCSP HQ, with local activity costs and leadership administered by the main Abuja office, Federal Capital Territory. As a national TA project, activities are focused on the 32 scale-up LGAs where PEPFAR IPs currently support comprehensive HIV testing, care, and treatment sites. The Abuja-based Deputy Country Director works closely with Washington, DC-based staff and provides oversight and leadership for in-country activities, including coordination of implementing partners, engagement with FMOH, and other day-to-day project management activities. Washington, DC and Abuja-based project staff will hold quarterly meetings or calls to ensure technical, program, and finance staff are all working together efficiently in support of project implementation and achievement of deliverables.

At least quarterly meetings will be held with IPs in Nigeria and the USG HTS TWG to ensure the project is on track to achieve expected outcomes. Meetings will be held with FMOH as needed, to share tools and materials and also lessons learned. A project wrap-up meeting will be held with all stakeholders to share the results of the project and inform planning for subsequent year's PEPFAR-Nigeria Country Operational Plan (COP).

The MCSP HTS TA project will continue to coordinate with the other MCSP programs operating in Nigeria (MCSP MNCH, MCSP-HelloMama and MCSP-Routine Immunization).

Staffing

The MCSP HTS TA project will be implemented by Washington, DC-based senior technical staff, who have experience providing TA in diverse settings around the world. Washington, DC-based staff will work closely with the highly qualified and experienced management and technical teams in Nigeria. Main roles and responsibilities of key staff are outlined below:

Kristina L. Grabbe, Senior Technical Advisor and Epidemiologist, HIV Prevention, Care and Treatment, HIV/TB/ID Team, MCSP HQ; (30% Level of Effort – LOE)

- Provide overall project management and technical leadership
- Facilitate coordination between MCSP-Washington DC and MCSP-Nigeria
- Technical lead for development of learning resource packages and tools
- Lead PNS evaluation design and implementation
- Lead facilitation of policy and guidelines support to FMOH
- Compile final report and draft manuscript to share project results

Marya Plotkin, Senior M&E Advisor, Monitoring, Evaluation and Research Team, MSCP HQ; (8% LOE)

- Participate in initial coordination meeting with stakeholders to review data collection and reporting tools
- Contribute to baseline assessment of PNS implementation in Nigeria
- Complete first draft M&E package for PNS in Nigeria, incorporate edits and finalize

Molly Strachan, Senior M&E Advisor, HIV/TB/ID Team, MCSP HQ; (12% LOE)

- Review and contribute to final draft M&E tools for PNS in Nigeria

- Assist with development of evaluation plan of PNS in Nigeria, including participation in evaluation planning meetings with IPs in Nigeria
- Conduct meetings with USAID to review progress toward meeting evaluation objectives on regular basis
- Assist with final project evaluation report
- Assist with manuscript preparation

Kelly Curran, HIV/TB/ID Team Lead, Jhpiego, Washington DC; (3% LOE)

- Provide technical inputs to project and evaluation design
- Support coordination between MCSP-Washington DC and MCSP-Nigeria offices

TBD, Gender Advisor, MSP HQ; (3% LOE)

- Assist with intimate partner violence referral mapping
- Provide input on intimate partner violence and gender considerations for PNS implementation
- Provide input on learning resource package re: intimate partner violence and gender

Nancy Kiplinger, Senior Instructional Designer, Jhpiego, Baltimore, MD; (3% LOE)

- Provide oversight for development of learning resource package for PNS in Nigeria
- Provide input on appropriate training methods and LRP design

Alison Trump, Technical Advisor, Global Learning Office, Jhpiego, Baltimore, MD; (8% LOE)

- Develop learning resource package for PNS in Nigeria
- Provide instructional design support for LRP components, to include SOPs and job aids, facility-based implementation materials, and modular learning exercises
- Participate in pilots to get feedback on learning resource package and incorporate into final product

TBD, Instructional Technologist, Jhpiego, Baltimore, MD; (4% LOE)

- Provide design and messaging support for IEC product development (brochures, palm cards, posters)
- Pilot IEC designs and messages with PNS stakeholders
- Finalize IEC designs and messages

Alishea Galvin, Program Officer II, MCSP HQ; MCSP HTS TA PROGRAM OFFICER (10% LOE)

- Provide support for administration of project
- Facilitate coordination between MCSP-Washington DC, MCSP-Nigeria, and USAID-Washington DC

TBD, Publications Advisor, Jhpiego, Baltimore, MD; (5% LOE)

- Provide layout support for learning resource package, M&E tools, and IEC materials

Caroline Tran, Financial Administrator, MCSP HQ; (7% LOE)

- Develop and review budgets
- Monitor and report on project expenses

Dr. Oniyire Adetiloye, Deputy Country Director, MCSP-Nigeria; (3% LOE)

- Provide in-country leadership for MCSP HTS TA project
- Lead coordination with FMOH, IPs, and USG HTS TWG
- Provide technical input on learning resource package, M&E tools, evaluation design, and policy and guidelines support

- Facilitate logistical support for project through MCSP-Nigeria office

Additionally, the MCSP-Nigeria office has highly competent staff to assist with in-country logistics, including in-country transportation and lodging arrangements for Washington DC-based staff; facilitation of coordination meetings with IPs, FMOH, and USG HTS TWG; managing finances to ensure costs are within budget; and ensuring strong relationships between MCSP-Washington DC and MCSP-Nigeria.

Reporting

MCSP will adhere to USAID/Washington’s reporting requirements and, within the resources available, will provide timely responses to all requests for information from USAID/Nigeria. MCSP’s reporting requirements normally include: quarterly progress updates and pipeline reports, semi-annual and annual progress reports, and end of program reports. Indicators and other reporting requirements will be specified in the PMP.

Branding

MCSP HTS TA Project will use the MCSP name exclusively and will follow USAID’s branding guidelines in all instances. When referred to in publications and in presentations, MCSP and the MCSP staff will be referred to as “USAID’s Maternal and Child Survival Program “or USAID’s MCSP”. MCSP’s overarching branding plan is available upon request. Because there are multiple MCSP programs in Nigeria, the program described in this document will be referred to as “MCSP HIV Testing Services Technical Assistance Project,” or “MCSP HTS TA Project”.

Short Term Technical Assistance/International Travel Plan

The MCSP HTS TA Project largely relies on short term technical assistance (STTA) for carrying out the stated objectives. Below is a rough outline of the anticipated travel for this project:

Who	What	When	Duration of trip
MCSP Technical Assistance			
Kristina Grabbe, Sr. Technical Advisor, HIV Testing Services	Conduct project coordination meetings with IPs, FMOH, and USG HTS TWG at least bimonthly; conduct evaluation planning meetings; conduct IP orientations and learning exercises; conduct IP data review meetings and site visits; conduct meetings with FMOH and national Task Team for national Guidelines and getting buy-in on learning resource package and M&E tools; conduct meetings with USAID to review objectives and accomplishments at regular intervals; facilitate project wrap-up meeting with stakeholders	Bimonthly beginning December 2017	5 trips, 1-2 weeks, depending on scope
Marya Plotkin, Sr. M&E Advisor	Participate in initial coordination meeting with stakeholders to review data collection and reporting tools; conduct baseline assessment of PNS in Nigeria; assist with M&E plans as needed; attend project wrap-up meeting with stakeholders	Q1	1 trip, 1 week
Molly Strachan, Sr. M&E Advisor	Conduct M&E training/orientation as needed; conduct evaluation planning meetings; conduct IP data review meetings and site visits; conduct meetings with USAID to review objectives and evaluation accomplishments; attend project wrap-up meeting with stakeholders	Q3, Q4	2 trips, 1-2 weeks each depending on scope
Kelly Curran, HIV/TB/ID Team Lead	Provide support to in-country work as needed, provide general project oversight and coordination with MCSP office in Washington, DC; attend project wrap-up meeting with stakeholders	Q2, Q4	2 trips, 2-3 days each, will be cost-shared with other regional travel
TBD, Gender Advisor	Provide technical assistance around gender issues and addressing intimate partner violence; review learning resource package to ensure appropriateness of provider skills building activities; support referral mapping for intimate partner/gender-based violence resources	Q2, Q3	2 trips, 2-3 days each, will be cost-shared with other regional travel
Alison Trump, Technical Advisor	Assist with development of learning resource package; participate in facility-based implementation and mentorship; document and share lessons learned around training methodology and mentorship best practices	Q2, Q3	2 trips, 1 week each
Alishea Galvin, Program Officer II	Provide support for administration of project; provide coordination with MCSP office in Washington, DC	Q3	1 trip, 2-3 days, will be cost-shared with MCSP MNCH and HelloMama