Background

UNDP is a partner of the Global Fund (GF) in its fight against AIDS, tuberculosis and malaria, and of the Federal Ministry of Health Sudan in the management of GF grants. In their role of interim principal recipient (PR), UNDP has worked to support the national government and civil society organizations (through support provided by UNFPA) in the delivery of programme activities aimed at early diagnosis and treatment of malaria, distribution of bed nets, indoor residual spraying, timely diagnosis and treatment of TB, including multi-drug resistant (MDR) TB, and testing, counselling and treatment for HIV.
In addition, UNDP has a strong element of capacity development (CD) integrated into the various aspects of grant management including financial management, procurement and supply chain management, and planning and monitoring.

In the early phase of the grants, the implementation was primarily managed by WHO and UNICEF as SRs (sub-recipients) to UNDP. However, in line with UNDPs commitment to sustainable development and CD mandate, UNDP began direct engagement with government SRs. Building on their existing CD work with the General Directorate of Pharmacy, the National Malaria Control Programme, the National Tuberculosis Programme and Continuing Professional Development Directorate (CPDD), the capacity of the national supply chain management systems (CMS), the Directorate General of International Health and the Sudan National AIDS Programme (SNAP), UNDP facilitated a nationally-led process to develop a second Capacity Development Plan (CDP) that was finalised and endorsed by the Under Secretary in October 2015. The main aim of the CDP is to strengthen the functional capacities of national entities, and facilitate the sustainable transition of the PR role from UNDP to national entities.

Partnership between FMOH and UNDP

The long-standing strategic partnership between FMOH and UNDP has been recently strengthened through the signing of several key agreements.

On 10 March 2016, FMOH, UNDP and the Ministry of International Cooperation signed an agreement for Procurement Support to the Federal Ministry of Health in Sudan with a total budget of $60 million over a duration of three years. This agreement provides a strategic approach to strengthening the national public health procurement system and thus to improving the effectiveness of diagnosis and treatment of patients through procuring medicines, medical and laboratory equipment, and consumables for the National Medical Supplies Fund.
On 28 March 2016, the Under Secretary for Health signed a government order establishing a PR Coordination Committee. This committee provides a forum for formal coordination between FMOH and UNDP on Global Fund grant implementation issues. It also provides direction and support to the Capacity Development Operational Team at the Directorate of General International Health, the Communicable and Non-Communicable Diseases Control Directorate, and UNDP.

On 15 May 2016, a Cost Sharing Agreement totaling $1,209,694 was signed between FMOH and UNDP to facilitate health systems strengthening and supply chain management support. Under this agreement, UNDP will facilitate technical support to HSS grant implementation.

CD Plan Implementation Arrangements

An operational team supporting the implementation of the capacity development process, comprising of members from the DGIH, CNCDCD and UNDP, has been established. This team is responsible for communication, prioritization and implementation methods, requesting technical assistance where appropriate and monitoring CD plan implementation. It also addresses how to adjust the plan in response to such challenges as contextual changes or institutional demands. Every two months, this team prepares a periodic review of the CD activities for the PR Coordination Committee.
Activities Completed

Several activities have been completed including:

**Orientation workshop for acceleration of the three disease grants:**
CNCDCD, in collaboration with UNDP, started 2016 with three orientation workshops for the state-level implantation units, one for each disease component, in order to accelerate the grant implementation and to ensure timely and accurate programmatic and financial reporting.

**Orientation of the implementing units and HSS focal points at the federal level on the implementation arrangements of the HSS grant:** The Directorate of International Health, PMU unit has worked closely with UNDP to develop and deliver an orientation programme on the HSS component of the new funding model. This focuses on the activities approved for each IU and their implementation arrangements, in addition to the requirements of Global Fund to ensure successful implementation of the grant.

**Development of comprehensive operations manual for FMOH:** An international consultant was contracted by UNDP to work closely with FMOH on the development of an operations manual. The comprehensive manual covers the programmatic, administrative and financial aspects required to ensure proper management of Global Fund grants. The manual details FMOHs role as future PR for the three disease grants as well as its current PR role for the HSS grant. It is built upon national policies and procedures, and aligned to Global Fund requirements.

An orientation training for the PMU staff on the key elements of the manual is planned for after the completion of the recruitment of the staff in the FMOH – PMU.
**CNCDCD organogram:** The CNCDCD organogram was revised to ensure division of responsibilities and bring more clarity to coordination with Global Fund and other donors. The organogram was presented to and endorsed by the Under Secretary for Health.

**Incentive Plan Development:** A comprehensive consultation process was undertaken to update the incentive plan for the health workforce in Sudan in line with the recommendation of the Grant Approval Committee. After an extensive discussion, the plan was updated and discussed with the Under Secretary FMoH, before being presented to and approved by the Global Fund.

**PRs and SRs Coordination:** In an effort to strengthen coordination between the two PRs and PRs-SRs, an integrated coordination meeting was held by CNCDCD and UNDP in March 2016 and included all SRs involved in GF grants implementation. The meeting discussed the grant implementation progress, the challenges of implementation and how to address these challenges to ensure optimal grant execution. In addition, a decree for the establishment of a PR Coordination Committee was issued by the Under Secretary for Health.

**Opening a single separate bank account in each state MOH for tracking of Global Fund funds:** the Under Secretary for Health officially requested that states have a dedicated bank account in which to receive GF grants. 14 state Ministers of Health have opened separate bank accounts for GF money, and follow-up with the remaining states is underway.

**Automation of a financial system for stronger financial controls:** TALLY software was procured and installed at DGH, CNCDCD, CPDD and Epilab. Short-term technical assistance was contracted by UNDP for configuration and installation of the system, as well as for training federal and state finance staff on how to use the TALLY software. After completion of the training, it was evident that FMoH capacity to use a computerised system was not yet optimal and hence medium-term technical support (for 6 months) was contracted by UNDP to work closely with DGH – PMU with the objective of assisting the PMU with financial reporting, whilst providing support and training to financial staff until they reach the required capacity to run the system independently.

**M&E plan for the HSS/NFM grant:** An M&E plan for the HSS grant has been developed, presented to, and approved by the GFCT. The indicators framework has been revised and is being closely monitored.
Additional Activities Undertaken

In addition to the activities detailed in the CDP, UNDP has worked closely with FMOH to identify and address any capacity gaps that have emerged since the implementation of the GF grants. Recognising the need to support national partners in quickly acquiring the goods and services necessary for the successful implementation of the project, a two-day training was facilitated by UNDP.

A civil engineer in UNDP PMU is providing technical support to FMOH towards the renovation of 120 medical stores in the states as per the work plan of the HSS grant. The UNDP civil engineer is working closely with the FMOH civil engineers to develop the bills of quantity and a system to increase the oversight of civil work contracts and the quality of reports. To improve HIV/TB collaboration in North Kordofan, support has been provided to the TB unit to start preparations for the renovations that will allow HIV services to be provided. Furthermore, work has begun with CNCDCD to renovate their administration and meeting rooms.

Activities in Progress

In addition to the completed actions, several activities are still in progress. These include:

**Standard Operating Procedures (SOPs) and business arrangements for HSS grant implementation:** UNDP has contracted an international consultant to work closely with FMOH for the development of the SOPs. The consultant has conducted in-depth interviews with national counterparts, including DGIH – PMU team (programme, M&E, Procurement and Finance), Directorate of Finance and Administration including the finance and procurement team, and the Internal Audit Office. Currently the SOPs are being finalised and will be shortly presented to FMOH and GFCT for review and approval.
Development of guidelines for lines of communication between CNCDCD & other FMOH Departments, states’ MOHs, donors and UN Agencies, other governmental sectors & partners: CNCDCD team have begun developing a communication protocol. Finalisation is pending discussion and approval at the Under Secretary Council.

Strengthening asset management systems through SOPS and guidelines: Terms of reference for the envisaged national technical assistance have been drafted, for a consultant to be contracted by DGIH to review and strengthen the asset management in FMOH, with a focus on assets procured using GF funds.

Development of a National Integrated Supply Chain Strategy: ToRS for the assignment have been developed and discussed with NMSF, Directorate of Pharmacy, NMPB and DGIH. A national task force has been established to work closely with national and international consultants to review and approve the strategy. The advertisement for the national TA has been posted while the international TA will be advertised in mid-August.

Develop and Implement a National QA Policy: ToRS for the assignment have been drafted and discussed with NMSF, Directorate of Pharmacy, NMPB and DGIH. A national task force has been established to work closely with national and international consultants to review and approve the policy. The advertisement for the national TA has been posted while the international TA will be advertised in mid-August.

Procurement policy revision: ToRs for the envisaged TA to revise and update the procurement policy and align it with national requirements and international standards have been developed. The draft ToRs are currently under review by DGIH.

Challenges, Lessons Learned and Ways Forward

In addition to the limited budget to fund the CD activities, one of the main challenges facing the CD plan implementation is the limited number of staff at FMOH, who are managing heavy workloads and addressing competing priorities. The delay in appointment of staff in the DGIH – PMU is also slowing down the implementation of the CD activities included within the
In order to address the issue, in January 2016, UNDP recruited a consultant for implementation support to TB grant activities in laboratory technologies. This includes assistance with developing specifications for key laboratory products, training, and the installation of GeneXpert machines and digital X-Ray machines. In July 2016, UNDP advertised several Project Implementation Support positions to work closely with CNCDCD and DGIH to support the shortage of human resources.

Furthermore, and in addition to the international consultant for accounting software, UNDP has recruited 3 national finance consultants to support the grant implementation at the federal and state levels. These consultants started work in early July. A further request to recruit additional financial implementation support consultants was received to be positioned within the DGIH – PMU for HSS grant implementation. Terms of reference for this position have been agreed.

Another challenge facing CD activities implementation was the delayed HSS Grant signature that has resulted in delayed execution of the associated CD activities within the HSS grant. In order to accelerate executing some of the CD activities, they were included as part of the Cost Sharing Agreement between FMOH and UNDP. According to the agreement, UNDP will provide technical support for the implementation of the following activities:

1. Strengthening the supply chain to increase access to HIV, TB and malaria testing, treatment and care services to the people of Sudan;
2. Strengthening the national system by implementing the capacity development plan, in collaboration with FMOH;
3. Facilitating needed technical assistance to FMOH on health system strengthening activities.
In addition to the challenges mentioned above, the execution of the M&E activities to support the collection and interpretation of national data is facing several constraints. In order to respond to the overall weakness in the M&E module implementation and to build on the modest progress made with the Health Management Information System (HMIS) rollout, a Monitoring and Evaluation Specialist with significant experience with HMIS has been contracted by UNDP. The Specialist, while working in UNDP, will focus on supporting national counterpart’s capacity development through working closely with FMOH to support the implementation of the CD M&E module. Further, he will work closely with FMOH PMU team for the implementation of the HSS module which is mainly designed for strengthening HMIS and DHIS2 rollout.

**Capacity development and transition activities planned for July – December 2016**

To build on the success and lessons learned from January – June 2016, a review of the plan and reprioritization of activities will be undertaken. Several activities are to be finalised, including strengthening procurement and the supply chain through revising the National Integrated Supply Chain Strategy and Implementation Plan, finalising the QA policy, and reviewing the procurement policy for alignment with National and International Standards. Furthermore, to enable DGIH to benefit from UNDPs experience working with implementing entities, two training sessions are planned. These include training on finance and procurement, as well as support and orientation on completing a comprehensive PUDR.

As part of the transition process, a CD plan tailored for NGOs will be developed through a participatory process aligned to existing national strategies. In collaboration with FMOH and UNFPA, a consultation process that includes all relevant NGOs is planned in the second half of August. The process is expected to identify key performance measures, the current strengths of implementers, gaps and capacity development activities required for NGOs to successfully assume the role of SRs for the HV prevention work in Sudan.

To further accelerate the implementation of CD activities, and identify the critical success factors, UNDP is supporting FMOH to develop a more strategic, prioritised approach linked to transitioning into national entities.