# TABLE OF CONTENT

I. Introduction ................................................................................................................................. Pag. 4

II. The Global Fund in Bolivia in the fight against Malaria ........................................................ Pag. 4

III. Capacity Development Framework for managing Global Fund Gants ................................ Pag. 6

IV. Capacity Development Process – GF Grant Implementing Institutions’ Functional Capacities Analysis and Planning Workshop .............................................................. Pag. 8

V. Capacity Development Plan for the Ministry of Health – National Program for Control of Malaria .................................................................................................................. Pag. 11
I. Introduction

In the Latin America region, the most recent WHO report in 2014 on trends in malaria cases and deaths recorded a total of 427,000 cases during 2013, with a total of 82 deaths. This figure is much lower than the one reported in 2000, a period which saw one million cases of malaria and 390 deaths.

In Bolivia, in recent years the incidence of malaria has fallen (2000: 30,126 cases and 2013: 7,342) and the country has not recorded any deaths from malaria since 2004. In Bolivia, malaria is analyzed in terms of the concentration of cases and with respect to proximity to the Amazon basin. For this purpose, two regions are identified: (1) Amazon region and (2) extra-Amazonian region.

The Bolivian health system has four management levels:

- Fourth management level: Ministry of Health, responsible for issuing health policies and guidelines, and for ensuring implementation.
- Third management level: Departmental health services, responsible for implementing policies and guidelines in health networks for their region.
- Second management level: Health network coordinators, responsible for monitoring and supporting implementation of health programs in the network of health care facilities for which they are responsible.
- First management level: Health care facilities (hospitals, health centers, health posts), responsible for implementing health programs within the framework of ministry policies.

II. The Global Fund in Bolivia in the fight against Malaria

National Malaria Control Program (NMCP)

In 2003 the Ministry of Health and Sport created the National Program to Control Vector-Borne Diseases (PNCETV). The NMCP is operationally decentralized in eight offices and two regional programs (Riberalta and Guayaramerín, due to the high incidence of cases), each of which is directed by a departmental or regional manager who has to work in coordination with the epidemiologist(s) and those responsible for the information system and the laboratory network.

They must also work with the health service network coordinators and the local health directorates (DILOS) to plan, monitor, evaluate and control the actions implemented, including monitoring and oversight of volunteers and community health workers (CHWs).
II. The Global Fund in Bolivia in the fight against Malaria

The Global Fund New Funding Model grant for malaria of USD $10 million is due to commence in March 2016 until the end of 2018.

The grant making process was conducted in November 2015 and a draft Capacity Development and Transition Plan was prepared following stakeholder participation, so it could be considered during the grant making process.

The entry points and the scope of work was determined by the stakeholders during the capacity development planning process in October 2015.

These considered; i) the MoH taking an increasing role in the management of the Global Fund grant; ii) implementation in the Amazon region being carried out by Municipalities; iii) the functional capacities needed to meet national and Global Fund requirements; iv) NGOs providing a technical assistance role where required; and v) the sustainability of service delivery.

This report compiles the results of the collective work carried out by the participants of the workshop, within the framework of the requirements of the GF for Grant management.

III. Capacity Development Framework for Global Fund Grants Management

This section describes the strategic approach that taken to enhance the sustainability of national disease responses, by developing the functional capacities of national entities through strengthening national systems for health including; program management; financial management; monitoring and evaluation; and procurement and supply chain management.

Interim Principal Recipient of Global Fund Grants

UNDP is requested to serve as Interim Principal Recipient (PR) in countries facing a wide variety of special challenges. While managing the grants, UNDP simultaneously works to develop the capacity of governments and/or civil society organizations to serve as PRs when circumstances permit. Beyond its implementation support role and in line with its core mandates, UNDP also provides policy advice and technical assistance on critical legal and policy enablers, human rights, and gender equality to support Global Fund grant implementation.
A Strategic Approach to Capacity Development

As the Interim PR UNDP must meet the operational requirements of the Global Fund and achieve high levels of performance. At the same time the approach to capacity development is central to all UNDP programs. This is achieved through the design of the implementation arrangements ensuring national systems are used for key functions such as programming, Monitoring & Evaluation (M&E), forecasting and supply chain management.

The actual implementation of the Global Fund grants is aligned with national disease responses to ensure that any capacity development interventions benefit the national programs. Greater ownership is built by ensuring the program performance indicators are aligned to national strategies.

To build resilience and ensure greater sustainability the implementation of services to the end users are delivered by government, NGOs, Civil Society and private sector entities. UNDP is not directly involved in implementation with the exception of pooled procurement where international competitive bidding through long term agreements (LTAs) ensures value for money and a reduction in costs.

However, in Procurement and Supply Chain (PSM) national entities normally have central roles in forecasting and quantification to allow orders to be placed, as well as the storage and distribution once the orders have been received.

This focus on sustainable systems for health, helps to ensure infrastructure, information systems, procedures and management are enhanced with the aim of both improving and sustaining the performance of the national programs and Global Fund grants. The comprehensive capacity development strategy of enhancing national systems for health, rather than the more traditional, narrower approach of training and technical assistance (TA), creates greater resilience.

This also involves putting in place structures with appropriate roles and responsibilities to manage national programs and Global Fund grants, as well as performance based TORs, Standard Operating Procedures (SOPs), together with supporting templates and software. This helps reduce the dependence on a small number of core staff and accelerates the recruitment and orientation of new staff.

UNDP’s role is to help facilitate the process, make tools and guidance available to the stakeholders and to support the implementation and monitoring of the capacity development plan.

Functional Capacities

Central to the capacity development strategy is a strong focus on strengthening national systems for health, in particular the following functional capacities:

- Financial Management & Systems, including Risk Management
- Procurement and Supply Chain Management (PSM)
- Monitoring and Evaluation (M&E)
- Project Governance and Program Management, including Sub Recipient (SR) Management

These respond to the minimum requirements of the Global Fund, but are also tailored to meet the requirements of the national disease programs.

The entry point for planning the development of the functional capacities is commonly carried out during the concept note writing and the grant making. The scope is always broadened to include national responses and programs rather than just focusing on the Global Fund grant.

Strengthening functional capacities and national systems for health usually requires: i) a clear vision and leadership; ii) clarification of roles and responsibilities; iii) the development of SOPs; iv) prioritizing actions; and v) developing and implementing a capacity development plan.

III. Capacity Development Framework for Global Fund Grants Management
The timing of the transition will vary, with a longer period of support likely to be needed for procurement of health products including medicines and lab diagnostics.

### Capacity Development Objectives and Transition Milestones

The relationship between capacity development objectives and transition results can be seen in the examples provided in the table below;

<table>
<thead>
<tr>
<th>Function</th>
<th>Capacity Development Objectives</th>
<th>Transition Milestones</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capacity Development</td>
<td>To further enhance the national systems to improve the performance of the Global Fund Sub Recipients and/or new Principal Recipient, to strengthen the delivery of the national HIV, TB and Malaria responses.</td>
<td>The implementation of the Capacity Development Plan achieving 90% of the deliverables by day/month/year.</td>
</tr>
<tr>
<td>Documents and Procedures</td>
<td>To ensure coordination between the newly established national PR Programme Management Unit and the national coordination structures and systems (for planning and implementation).</td>
<td>Timely and accurate completion and submission of PU-DR by new national PR day/month/year.</td>
</tr>
<tr>
<td>Financial Management</td>
<td>To integrate national and Global Fund financial management and reporting requirements within one financial management system.</td>
<td>100% of financial reports being produced through the financial management system by government and NGOs in all sub national areas, with 95% submitted on time by day/month/year.</td>
</tr>
<tr>
<td>Monitoring and Evaluation</td>
<td>To ensure a robust health information system which supports the delivery of health care by providing information that is required for measuring the performance of service delivery in each region in the country.</td>
<td>Monitoring plans in place and being implemented in all sub national areas. Quality data being received from government and NGOs with 90% submitted on time by day/month/year.</td>
</tr>
</tbody>
</table>
IV. Capacity Development Process – GF Grant Implementing Institutions’ Functional Capacities Analysis and Planning Workshop

Under the new funding model of the Global Fund, the Country Coordinating Mechanism (CCM) presented the Concept Note to apply for new funding for the Malaria program.

Once the proposal was reviewed by the GF Technical Review Panel, the GF communicated to the CCM-Bolivia the approval of the proposal. Following the grant making approval of the Board of the GF must be obtained for the signature of the new grant agreement.

Prior to the signing of this agreement, the GF requested that all implementation arrangements, systems and capabilities of the key implementing agencies are adequate to ensure that financial and programmatic management of the grant funds is effective. In this context, the GF requested the analysis of functional capacities of the Ministry of Health, in its ability to perform as SR, and a strategic capacity planning workshop to address the gaps identified from that analysis as a prerequisite for signing the new agreement.

The exercise included the active participation of a representative number of the staff of the Program for the Control of Malaria, from national, departmental, regional and municipal levels.

In addition there was participation of members of Civil Society, representing the Nut Harvesting region from the Bolivian Amazon region, area of high incidence of Malaria and, direct beneficiaries of the program.

The objectives of this exercise were to:

- Increase knowledge on the GF and the requirements for management of the New Grant
- Increase knowledge on functional areas and capacities
- Collectively reflect on the strengths and challenges of the Ministry as SR vs GF requirements
- Collectively review capacity development functional activities in the Draft Capacity Development Plan
- Collectively review and adjust/add actions meant to close capacity gaps identified

The exercise was designed with the intention of being participatory, the participants had the opportunity to reflect on the management strengths and challenges of the implementing entities and develop prioritized capacity actions across the 4 functional areas.

Prior to the workshop, the GF Grant implementing entities completed a Capacity Assessment Tool.

The objective of this activity was to identify the level of capacity and the existence of appropriate systems to meet the role assigned to implementing entities.
IV. Capacity Development Process – GF Grant Implementing Institutions' Functional Capacities Analysis and Planning Workshop

Capacity Development Workshop Strengths and Weaknesses

Program Management

**Strengths:**
- Regional Programs for Malaria Control are reference centres regarding program management
- A proportion of human resources are trained in PM and have job security.
- Medicines and supplies are available in the National Program.
- There are financial resources available for activities.
- The provision of bed nets to prevent malaria.

**Challenges:**
- The need to strengthen in the supply chain, to reduce the risk of shortages of medicines and improve storage and shelf life management of medicines.
- Communication campaigns for sensitization and awareness of population at risk are not conducted throughout the year.
- There is insufficient awareness of the general population for the prevention of malaria. This has resulted in sub-optimal use of bed nets and a risk of patients not completing treatment for malaria.
- The support and service delivery of the municipal authorities needs to be more responsive to the at risk populations.
- Insecticide spraying equipment needs to assessed and upgraded where needed.
- There is the need for a program of more technical research studies e.g. regarding resistance or other issues
- New staff need a comprehensive orientation program.

Financial Management

**Strengths:**
- Provision of equipment and office furniture for areas such as, financial management, statistics, warehouse and headquarters program.
- Staff committed to the program both at regional and at the national level.
- Budget control for the regional programs is managed following national standard.
- Administrative-financial tools have been created to facilitate regional financial control.
- There is internal coordination capacity for the achievement of objectives at regional level.

**Challenges:**
- Lack of provision of adequate computer equipment for administration and financial areas
- The need for investment in basic systems and communication tools such as internet access
- Training is required for financial management and administrative staff
- An accounting system of financial control is required to track Global Fund resources
- Need to invest in the maintenance for physical infrastructure
- Relatively high staff turnover of personnel at management level
- The need for clear roles and responsibilities and Standard Operating Systems (SOPs) to improve coordination between the financial units at all levels.
- The need to improve communication and feedback between the NMCP and the RPCM
IV. Capacity Development Process – GF Grant Implementing Institutions’ Functional Capacities Analysis and Planning Workshop

M&E

**Strengths:**
- Staff trained to perform their duties
- Up to date computer equipment is available
- Notification guide with standardized instruments and templates, as well as validation system
- Software developed
- Periodic evaluations are conducted

**Challenges:**
- Human resource management needs to be strengthened including the contracting of staff by the Ministry of Health
- The need to improve management information systems and communication equipment to reduce delays in sharing information
- To strengthen the maintenance of the equipment, taking into account the climatic conditions
- The need to enhance the availability of office supplies and establish an operational budget
- To further strengthen the paper based and electronic patient management system to enable accurate and timely registration, reporting and management of patients,
- The need to finalize the design and roll out of a common M&E software, guidance and templates for malaria, accessible to all four levels and key stakeholders
- To improve the data collection times, quality, management and reporting taking into account the territory and remote access to primary sources of information.

Procurement and Supply Chain Management

**Strengths:**
- Provision of equipment for residual house spraying
- Service provision has reached places without road access, using the river access. Participants stressed the role of ADRA in providing services to hard to reach areas
- Warehouses/storage facilities have been built in Guayaramerin and Pando. The Pando warehouse still needs to be correctly commissioned for the purposes of the Program
- Procurement is conducted using UNDP’s pooled procurement, which lowers costs
- Warehouses/storage facilities are insured

**Challenges:**
- There is the need to put in place adequate coordination, forecasting and planning of health commodities and medicines and procurement of; rapid diagnostic tests (RDTs); medicines; equipment; etc.
- Human resources and technical operations are divided by program and not integrated. There is the opportunity to take a more comprehensive and integrated approach to PSM.
- Training and implementation of updated SALMISIAL system is required, including all collection centers. This is required, in particular, in all the barracks where the nut harvesting activity is done. Identifying storage best practices from which lessons learned can be drawn.
- There is a need to improve the distribution planning and channels to ensure deliveries takes place in a timely manner
- There is a need to strengthen Logistical Management Information Systems (LMIS) to manage, record and monitor medicines and commodities in each region
- There is the need to include protective clothing and equipment for the operational and administrative technical staff
- To review the transportation of materials, reagents, supplies and goods that is outsourced to local companies. There is the need to consider the means of transportation due to inaccessible areas and long distances to remote locations.
Once strengths and weaknesses of implementing entities were identified, participants in working groups by functional areas identified the priority capacity development activities.

The capacity development planning process involved compiling information from existing documents, the Concept Note process, a self-diagnostic questionnaire, together with information collected through interviews with key stakeholders during a field visit to the Amazon Region.

This information was reviewed by functional working groups in the CD planning workshop, held 28-29 October in Santa Cruz. The workshop included representatives from the Ministry of Health, of the National Program for Malaria, at national and subnational levels, members of the CCM, as well as Civil Society representing key populations.

The Capacity Development Plan outlines and prioritizes capacity development objectives, interventions and output indicators designed to enhance implementers’ capacity to act as the Global Fund Sub Recipient; and to strengthen the delivery of health services more widely.

It includes activities to strengthen SR implementation as well as activities designed to strengthen their ability to act as a PR to enable transition, when the circumstances allow it.

The CD Plan needs to be owned by the national entities, and a monitoring mechanism of the CD Plan needs to be proposed, which will act as the main oversight body. They will also feedback to the full CCM who will provide additional oversight.

The general objectives of the Capacity Development Plan are the following:

<table>
<thead>
<tr>
<th>Program Management</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Review the roles and responsibilities of all levels, the connections between them, and the structure of reporting, to improve coordination and monitoring</td>
</tr>
<tr>
<td>2. Monitoring and accountability mechanisms established for the proper GF Grant management</td>
</tr>
<tr>
<td>3. Capacity Development Plan implementation for effective Grant Management</td>
</tr>
<tr>
<td>4. Generate knowledge exchange mechanisms to identify good practices that benefit the results of the NPCM</td>
</tr>
<tr>
<td>5. Strengthen services in remote rural areas with high incidence of malaria, through joint and coordinated work with key stakeholders (CSOs, NGOs, others)</td>
</tr>
<tr>
<td>6. Establish, review, update and / or improve procedures, guidelines and systems with sufficient training and “on the job” support to meet Global Fund requirements</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Financial Management</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Review and strengthen financial systems and reporting so that they meet the minimum GF requirements</td>
</tr>
<tr>
<td>2. Review and harmonize procedures, manuals, internal control systems, accounting and monitoring of expenditure based on existing systems in the country to comply with the GF requirements</td>
</tr>
</tbody>
</table>
V. Capacity Development Plan for the Ministry of Health – National Program for Malaria

<table>
<thead>
<tr>
<th>M&amp;E</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Strengthen Management Information Systems and tools / M&amp;E software, and ensure that relevant personnel understand and can manage the systems</td>
</tr>
<tr>
<td>2. Review, update and roll out M&amp;E tools that enable better control, monitoring and evaluation of the results of the NPCM</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Procurement and Supply Chain Management</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Review, update and strengthen the operational procedures and systems for managing forecasting, supply chain management and maintenance of equipment, to enable effective management of logistics, transportation and delivery, particularly in areas of difficult access</td>
</tr>
<tr>
<td>2. Review and strengthen the capacity and, infrastructure and storage processes NPCM, to meet the minimum requirements set by the GF</td>
</tr>
<tr>
<td>3. Strengthen community awareness strategies to enable key populations receive essential commodities and medicines, for a greater impact of NPCM</td>
</tr>
</tbody>
</table>

The complete set of activities can be found in the Bolivia Malaria Program Capacity Development Plan 2015.