



STATUS REPORT ON GLOBAL FUND PROJECT

QRA-H-CARICOM 1122

“Removing barriers to accessing HIV and Sexual and Reproductive Health Services for key populations in the Caribbean”



Quarter 8: July – September 2018



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1. Introduction

The Caribbean Community (CARICOM) Secretariat and Global Fund finalized a three (3) year Grant Agreement on 12 October, 2016, entitled “*Removing barriers to accessing HIV and sexual and reproductive health services for key populations in the Caribbean*”: The Grant which bears the Number 1122, falls under the Global Fund to Fight AIDS, Tuberculosis and Malaria programme.

In 2001, the Conference of Heads of Government established the Pan Caribbean Partnership against HIV and AIDS (PANCAP) as one of the two Health Pillars for the Caribbean Region. While CARPHA focuses on general health issues, PANCAP concentrates on unifying the regional response to HIV through coordination of regional stakeholders, resource mobilization and the development of regional public goods.

In January 2016, in keeping with its resource mobilization function, PANCAP (through its Regional Coordinating Mechanism) submitted a Concept Note to the Global Fund to Fight Tuberculosis, Malaria and HIV and AIDS. In response to PANCAP’s request for funding, the Global Fund AIDS approved a budget of **US\$ 5,223,227** for the implementation of a three-year Regional project on Human Rights.

The overarching **goal** of the PANCAP Global Fund Project is to contribute to the removal of barriers that impede access to HIV and sexual and reproductive health services for key populations, thereby promoting the achievement of regional HIV targets.

In order to achieve the goal of the project, PANCAP Coordinating Unit works in collaboration with the Caribbean Public Health Agency and the PAN American Health Organization to achieve the following **objectives**:

1. To reduce HIV-related stigma and discrimination and promote human rights through high-level advocacy for an enabling legal and policy environment; and
2. To increase access to HIV and health services for key populations and improve their retention on the continuum of care.

The **key interventions** of the Project include:

1. Legal and policy environment assessment and law reform;
2. Policy advocacy on legal rights
3. Development and implementation of health legislation, strategies and policies;
4. Routine reporting; and
5. Analysis, review and transparency

The project targets sixteen beneficiary countries which are Antigua and Barbuda, The Bahamas, Barbados, Belize, Dominica, Dominican Republic, Grenada, Guyana, Haiti, Jamaica, Montserrat, St. Kitts and Nevis, Saint Lucia, St. Vincent and the Grenadines, Suriname and Trinidad and Tobago.

The Caribbean Community Secretariat serves as the Principal Recipient (PR) of the Global Fund Project. In order to fulfil its function, the PR established a Project Management Unit to manage the implementation of the project by the sub-recipient and sub-sub recipient. Internally, the PMU is supported by the Project Advisory Group and the Project Management Team, which provides operational oversight to the Project Management Unit. Externally, the **Regional Coordinating Mechanism (RCM)** represents the Pan Caribbean Partnership and it provides policy guidance and strategic management to the project. In fulfilling its functions, the RCM is assisted by the **Priority Areas Coordinating Committee (PACC)**. As part of its functions, the Principal Recipient is required to submit periodic reports to the RCM and the PACC on the progress of project implementation to inform policy development and strategic planning of the regional response to HIV.

This Regional Grant will continue to provide a unique opportunity for collaborating with civil society and state actors, international partners and technical agencies to develop programs that can address the needs of key populations thereby addressing the more general need to rapidly diminish the HIV epidemic in an effective and sustainable manner. Importantly, the collaborative effort between PANCAP and CVC/COIN are aligned

towards achieving the common agenda and shared measures, but also afford the opportunity for formalizing partnerships and institutional strengthening that can sustain these programs beyond the scope and project cycle of Global Fund support.

2. PROGRAMMATIC ACHIEVEMENT BY STRATEGIES

In order to achieve the project objectives, key strategies were identified by the partnership through a consultative process to address the observed gaps in the regional response, see **Table 1**. The project activities target the **sixteen (16)** PANCAP beneficiary countries **six: (6)** *of which are not eligible for country grants from the Global Fund based on the World Bank operational classification of economies based on gross national income per capita*).

The Programmatic achievements are presented below by Modules. The Gaps and strategies as outlined in Table 1 below were identified during Concept Note Development of the CARICOM-PANCAP Global Fund Grant.

Table 1 – Project Strategies by Modules

No	Gaps	Planned Strategy in Response to the Gaps
Module : Removing Legal Barriers		
1	<p>Inadequate political will for law and policy reform among Heads of Government who deferred consideration of the actionable, time-bound commitments contained in the regional Justice for All declaration.</p>	<p>Leverage the influence of high-level CARICOM bodies</p>
<p>Actual Achievements July – September 2018</p> <p>High Level Interventions</p> <ul style="list-style-type: none"> • The PCU prepared a Brief and made a presentation to the 35th Meeting of the Council of Human and Social Development (COHSOD) – Ministers of Health in September 2018. <p>The brief outlined the rationale and objective of PANCAP’s Resource Mobilization Strategy and the proposed approach to achieve the objective of the Strategy. The Paper also described the guiding principles of the Strategy and identified its key priorities. The Strategy was intended to strengthen organizational capacity, mobilise resources to sustain current efforts and improve results for the Region’s HIV/AIDS Programme.</p> <p>The brief also outlined the key components and principles of the PANCAP Migrant Framework for Health and Rights which positions the framework within the context of the Caribbean Single Market and Economy. The Framework is advanced by PANCAP as an evidence-based approach based on assessments and research that have identified <i>which</i> migrants and mobile populations are at higher risk (and why), which migrants face barriers in accessing health services (and why) and the cost of non-inclusion. The Framework recognises that from a public health perspective, opening health prevention programmes to migrants reduces health risks for the general population.</p> <p>The brief also updated the Ministers on the status of the evaluation of the CRSF 2014-2018 which is expected to be completed by the end of November 2018, following which PANCAP would seek the COHSOD’s endorsement of the strategic priority areas for the CRSF beyond 2018.</p>		

No	Gaps	Planned Strategy in Response to the Gaps
	<p>The COHSOD:</p> <p><u>Received</u> the presentations and <u>noted</u> PANCAP’s efforts with the Migrant Framework and sustaining the HIV response and the endorsement by Chief Medical Officers of its Resource Mobilisation Strategy;</p> <p><u>Endorsed</u> the Migrant Framework and PANCAP Resource Mobilisation Strategy 2018–2020; and</p> <p><u>Noted</u> that the evaluation of the CRSF 2014–2018 was ongoing and would be completed by the end of November 2018 to inform the CRSF beyond 2018.</p> <ul style="list-style-type: none"> • The PCU worked with members of the Regional Youth Steering Committee and UNAIDS to prepare an advocacy brief on adolescent access to sexual and reproductive health (SRH) and facilitated youth participation and advocacy at 35th Meeting of the COHSOD - Ministers of Health in September 2018. <p>The brief drew attention to the 2018 UNAIDS Global AIDS Update which reports that youth accounted for 25 percent of new infections in 2017 and that their knowledge of HIV is less than optimal. It also noted that youth continue to encountered difficulty in accessing SRH services in most territories due to the dissonance between the age of consent (16) and the age at which they can access services (18) without being accompanied by a parent or guardian.</p> <p>The COHSOD:</p> <p><u>Encouraged</u> Member States to provide access to youth friendly, client centered sexual and reproductive health services tailored to young people’s needs by addressing policies and laws regarding the age at which minors can independently access health care and by supporting civil society organisations with the capacity to reach and serve youth;</p> <p><u>Also encouraged</u> Member states to mandate and fund the production of higher quality data and ongoing research on youth outcomes which included disaggregating and reporting data by gender, key and vulnerable population and age group to reveal more about young people’s current needs</p> <p>The COFAP</p> <ul style="list-style-type: none"> • The PCU had collaborated with the USAID-Abt Associates-Health Finance and Governance Project to prepare a brief for the Council for Finance and Planning (COFAP) which was convened on 4th July 2018 in Jamaica ahead of the opening ceremony for the Conference of Heads of Government. <p>The COFAP Meeting:</p> <p><u>Having considered</u> the submission by the Honourable Prime Minister of St Kitts and Nevis in respect to Agenda Item 8 entitled “Domestic Resource Mobilization for HIV in the context of Integrated Health in the Caribbean”;</p>	

No	Gaps	Planned Strategy in Response to the Gaps
		<p><u>Acknowledging</u> that the imminent reduction in external aid for HIV programmes across the Member States will require a concerted effort to increase the mobilization of domestic resources and to ensure more efficient investments in Health in the Caribbean;</p> <p><u>Noting</u> the status of implementation of strategies for filling the financing gap and for progress towards achieving the goals of PANCAP's Resource Mobilization Strategy 2018-2020;</p> <p>THE COFAP:</p> <p><u>Encouraged</u> closer collaboration between Ministers of Finance and the Coordinators of the National AIDS Programmes to promote strategies for sustainable financing in an effort to avert a reversal of the gains made in the HIV response;</p> <p><u>Also encouraged</u> Member States' Ministers of Finance to provide the budgetary support required to fill the financing gaps for HIV;</p> <p><u>Agreed</u> to keep the developments and implementation of the sustainable financing strategies under constant review and <u>urged</u> Member States' Ministries of Finance to do likewise.</p> <p>Champions to conduct public advocacy and engage with the CARICOM Conference of Heads and regional mainstream organizations.</p> <ul style="list-style-type: none"> The PCU funded one Champion, the Speaker of the House of the National Assembly of Belize to attend and advocate at various Side Events at the UN General Assembly, including the Spouses of CARICOM Leaders Action Network (SCLAN) and Non Communicable Diseases (NCDs) and Tuberculosis (TB) events. Additionally, another Champion First Lady of Guyana chaired the Side events and engaged with Exxon Mobil and HESS for funding to support the work of SCLAN. <p>Selected priority actions in JFA plans common to countries (Grenada, St. Lucia and St. Kitts Nevis)</p> <ul style="list-style-type: none"> <i>Grenada</i> A meeting of the Justice for All Advisory Committee was convened to review the findings of the Survey of Attitudes towards LGBT people Scale. A consultant was contracted to develop the Training Materials and Conduct the three-day Workshop for the Education Sector in Grenada on Issues related to the Removal of Stigma and Discrimination scheduled for November 2018. Another consultant was contracted to conduct one-hour presentations on HIV response at workshops for Education Sector. The JFA website was completed and launched.

No	Gaps	Planned Strategy in Response to the Gaps
	<ul style="list-style-type: none"> Saint Lucia A consultant was recruited to conduct the Stigma Index and a consultant is being contracted to develop the IEC/BCC materials for radio and television airing in the public education and edutainment programmes. Quotations have been received from suppliers/stations for television and radio airtime. Efforts have been made to accelerate the implementation of the national JFA plans in Grenada and Saint Lucia. St. Kitts A part-time national Justice for All Coordinator has been contracted to implement the JFA plan in Saint Kitts and Nevis. An Inception Meeting was held between the Director of PANCAP, the Chief Medical Officer of St Kitts and Nevis and the part time National JFA Coordinator to agree on reporting, discuss procurement guidelines and procedures and to review the workplan. 	
2	Advocacy efforts have been limited in its reach, effectiveness and strategic focus.	Improve the harmonization and coordination of strategic regional advocacy efforts
	<p>Actual Achievements July – September 2018</p> <p>Migrant Framework</p> <ul style="list-style-type: none"> The Migrant Framework on Health and Rights and action plan were finalised. The framework sets out a roadmap for equitable and non-discriminatory access to health care services across the Caribbean for mobile and migrant populations regardless of age, race, colour, sex, language, religion, political or other opinion, national or social origin, sexual orientation, gender identity, property, birth or other status. The Framework responds to the findings of two multi-country studies conducted by PANCAP over the period 2011 – 2015 which highlighted the barriers to access HIV services by migrant and mobile populations. Following a participatory approach at a regional forum in Trinidad and Tobago from the 26 - 27 June 2018, involving representatives from Government, (Ministry of Health, Chief Medical officers, National AIDS Programmes, Immigration Officers) Civil Society (Migrant groups and other key population groups) and international and Regional Organisations including: PANCAP, UWI, International Organisation for Migration (IOM), UNHCR and UNAIDS. Forum’s mandate was for the development of a more comprehensive roadmap for a right based framework for access to health by migrants and mobile populations. The Framework is rationalized with the vision of regionalism under the CSME and sets out guiding principles and recommended strategies for Regional and National action. 	

No	Gaps	Planned Strategy in Response to the Gaps
	<p>PACC and Executive Board Meetings</p> <ul style="list-style-type: none"> The face-to-face Thirty-Fourth Meeting of the Priority Areas Coordinating Committee (PACC) and was convened virtually on 4th September 2018 in Guyana. The Meeting: received updates from the PCU and partners, provided guidance for the completion of the CRSF evaluation to ensure that it reflected outcomes and impact, discussed and approved the Framework for Migrant Health and Rights. The face-to-face meeting of the PANCAP Executive Board was convened on 5th – 6th September in Guyana. The meeting: received updates on the PCU projects, PCU financial report, received the PACC’s report, the reports of the PANCAP and CVC-COIN Global Fund projects, provided guidance for the finalisation of the CRSF evaluation, endorsed the Framework for Migrant Health and Rights, and agreed on the policy recommendations to be presented to the 35th COHSOD – Ministers of Health on 21-22 September 2018 in Washington D.C., USA. 	
3	<p>Advocacy efforts focused mainly on reaching political leaders</p>	<p>Engage faith-leaders to affirm human rights and gender equality and to advocate for policy reform</p>
4	<p>Key population voices are absent at the highest level of regional advocacy efforts, both as a result of lack of access and because of the need to develop advocacy skills and capacity among Regional and National KP leaders.</p>	<p>Support the participation of CSO and key population advocates in high-level meetings with parliamentarians and faith leaders.</p>
5	<p>On-going advocacy for country adoption of PANCAP Antidiscrimination Model</p>	<p>Strengthen constructive engagement with faith-based leaders by building on on-going work initiated by PANCAP through regional dialogue and in collaboration with the UNSG Special Envoy.</p>
	<p>Actual Achievements July -September 2018</p> <ul style="list-style-type: none"> CSOs, key populations and NAP Managers are continuously engaged in Webinars hosted by the PCU K4Health Project. These webinars included capacity building and information sharing sessions. 	

No	Gaps	Planned Strategy in Response to the Gaps
	<p>Legislation has seen little transactions despite efforts by UNSGSE and the Director of PCU in National and Regional consultations and face to face meetings.</p>	
	<p>Actual Achievements July – September 2018</p> <p>UNSG Special Envoy to directly engage with organizations and individuals throughout the region</p> <ul style="list-style-type: none"> • The PANCAP Special Advisor conducted series of face-to-face direct sensitization engagements with high level government and non-governmental officials and in advocacy at regional and international conferences and fora. 	
6	<p>PANCAP has had limited access in engaging young people in the regional response</p>	<p>Develop and support an innovative approach to mobilize regional youth leaders to actively engage in high-level advocacy and policy dialogues by linking the CYA program with youth leaders of key populations.</p>
	<p>Actual Achievements July –September 2018</p> <p>Participation of CYA and other youth leaders at high level fora</p> <ul style="list-style-type: none"> • The PCU worked with members of the Regional Youth Steering Committee and UNAIDS to prepare an advocacy brief on adolescent access to SRH services and facilitated youth participation and advocacy at 35th Meeting of the COHSOD - Ministers of Health in September 2018. • The brief drew attention to the 2018 UNAIDS Global AIDS Update which reports that youth accounted for 25 percent of new infections in 2017 and that their knowledge of HIV is less than optimal. It also noted that youth continue to encounter difficulty in accessing sexual and reproductive health (SRH) in most territories due to the dissonance between the age of consent (16) and the age at which they can access services (18) without being accompanied by a parent or guardian. <p>The COHSOD: <u>Encouraged</u> Member States to provide access to youth friendly, client centered sexual and reproductive health services tailored to young people’s needs by addressing policies and laws regarding the age at which minors can independently access health care and by supporting civil society organisations with the capacity to reach and serve youth;</p>	

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	<p>Also encouraged Member states to mandate and fund the production of higher quality data and ongoing research on youth outcomes which included disaggregating and reporting data by gender, key and vulnerable population and age group to reveal more about young people's current needs.</p>	
7	<p>Limited capacity of PANCAP to collaborate with other sectors to challenge harmful laws, policies and norms and behaviors</p>	<p>Strengthen the relationship between PANCAP and the broader health frameworks and entities to ensure that there is greater synergy in an effort to improve the integration of HIV issues in the broader health and social development dialogues and policies.</p> <p>Actual Achievements July - September 2018</p> <p>Sensitize departments of the CARICOM Secretariat on the linkages between HIV and human rights and social development programs</p> <ul style="list-style-type: none"> The PCU utilised the opportunity afforded by the annual work programme planning at the CARICOM Secretariat to conduct a series of sensitisation sessions on integration of Human Rights issues into the work programme of all of the Directorates and Units. The PCU provided examples on how and what areas of the PCU's programme of work can be integrated into each of the Directorates and Units.
<p>Module: Health Systems Strengthening</p>		
8	<p>Gaps in leadership resulting from a lack of understanding among key policy and decision-makers, of the linkages between human rights and health outcomes.</p>	<p>Build capacity of National Authorities (NAP Managers, Chief Medical Officers and Permanent Secretaries) to operationalize effective programs to meet with new Global targets.</p> <p>Actual Achievements July – September 2018</p> <p><i>Regional consultation meeting to present the regional sustainability framework from the LAC III Forum and discuss recommendations to support increased access to health and social services as well as the sustainability of the health system response to HIV in the Caribbean</i></p> <ul style="list-style-type: none"> PAHO developed a concept note for a Regional meeting on Ending AIDS in the Caribbean: expanding equitable, effective, innovative and sustainable HIV responses towards the 2020 Fast Track targets on the way to elimination. The meeting has been scheduled for quarter 9 on 1st and 2nd November 2018.

No	Gaps	Planned Strategy in Response to the Gaps												
9	<p>Key population data for the continuum of care are not available for the region and there is inadequate documentation of key population coverage particularly in smaller countries.</p>	<p>Strengthen information systems, reporting, data analysis and information sharing to ensure the effective evidence-based interventions reach key populations</p>												
<p>Actual Achievements July - September 2018</p> <p>Conduct data quality audits</p> <ul style="list-style-type: none"> The activity is scheduled for implementation during the remainder of 2018 and 2019. Data quality audits for the CRSF indicators will be initiated in October 2018 based on country reports received on the CRSF indicators in September 2018. <p>Implement strategic information action plans</p> <ul style="list-style-type: none"> During the period under review, CARPHA conducted a second mission to Guyana to continue the development of the Data Quality Management Guidelines, including Standard Operating Procedures (SOPs). The focus of the mission was to meet with key staff of the NAP and MOH to document the procedures and processes for the development of 5 Standard Operating Procedures to be included in the guidelines, specifically, HIV Prevention Programme, HIV Voluntary Counselling and Testing (VCT) Programme, HIV Care and Treatment, Diagnosis and Management of HIV-TB co-infections, Nutritional Support Programme. The SOPs are currently being reviewed and will be submitted to the NAP, MOH for final review and approval during the next reporting period. <p>Review and expand the regional data repository</p> <ul style="list-style-type: none"> The functionalities of the CARPHA Regional Data Repository for Health has successfully been reviewed and expanded to include reporting on the CRSF indicators to inform the regional S&D and health policy agenda. <p>The table below illustrates the type of folders in the repository and number of thread view and number of downloads during the period under review.</p>														
<table border="1"> <thead> <tr> <th data-bbox="282 1606 837 1703">Forum Folder</th> <th data-bbox="837 1606 1122 1703">Number of Thread Views</th> <th data-bbox="1122 1606 1412 1703">Number of downloads</th> </tr> </thead> <tbody> <tr> <td data-bbox="282 1703 837 1759">M&E Training / Workshop Materials</td> <td data-bbox="837 1703 1122 1759">510</td> <td data-bbox="1122 1703 1412 1759">375</td> </tr> <tr> <td data-bbox="282 1759 837 1816">M&E Training / Workshop Materials</td> <td data-bbox="837 1759 1122 1816">16</td> <td data-bbox="1122 1759 1412 1816">0</td> </tr> <tr> <td data-bbox="282 1816 837 1873">M&E Technical Working Group</td> <td data-bbox="837 1816 1122 1873">126</td> <td data-bbox="1122 1816 1412 1873">57</td> </tr> </tbody> </table>			Forum Folder	Number of Thread Views	Number of downloads	M&E Training / Workshop Materials	510	375	M&E Training / Workshop Materials	16	0	M&E Technical Working Group	126	57
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M&E Training / Workshop Materials	510	375												
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No	Gaps	Planned Strategy in Response to the Gaps	
	M&E Technical Working Group	21	0
	M&E Useful Resources	339	86
	M&E Repository	177	27
	<p>Better utilize PANCAP governance mechanisms for reporting and information sharing, including the dissemination of best practices including those generated by CVC-COIN</p> <ul style="list-style-type: none"> CARPHA continues to utilize PANCAP governance mechanisms for reporting, information sharing and dissemination. CARPHA attended and provided updates to the 34th Meeting of the PACC and the 28th Meeting of the Executive Board convened on 4th September and 5-6 September, 2018 respectively. <p>The Caribbean M&E TWG continues to provide M&E technical support to PANCAP and the PACC and the chair of the Caribbean M&E TWG reports to the PACC.</p> <p>Training workshops in relation to expanded regional data repository</p> <ul style="list-style-type: none"> <i>CARPHA convened a joint workshop in September 2018 to train a total of 44 participants from 16 PANCAP member countries. This included a training on the repository was conducted with a focus on Data Analysis, Dissemination and Use. The repository workshop also emphasized the data analytics component of the repository to analyze data, generate reports (including standard reports) and the creation of national and regional dashboards.</i> <p>Develop training materials in data analysis, dissemination and use for decision makers, NAPs, KP groups and first-line collector and (b) conduct capacity building sessions with decision makers, NAPs, KP groups and first-line data collectors (data analysis, data use, data dissemination)</p> <ul style="list-style-type: none"> The Regional Data Analysis, Dissemination and Use Training was convened in September 2018. A total of 44 participants from 16 PANCAP member states representing decision makers, NAPS, KP groups and first line data collectors. The workshop also included a review of the CARPHA Regional Data Repository for Health and allowed member states the time to log-on to the repository and continue reporting on the CRSF indicators. As a result of this initiative and prior initiatives in supporting project countries to report, all 16 project countries have commenced reporting on the CRSF indicators. The second workshop in scheduled for May 2019. A compilation of the Data Analysis, Dissemination and Use Training Workshop resources was conducted by CARPHA to assist member states. The final training resources are available for dissemination and information sharing in the M&E Forum. 		

No	Gaps	Planned Strategy in Response to the Gaps
10	<p>The integration of HIV into health care has been a neglected area in the regional response.</p>	<p>Strengthen regional approaches for effective evidence-based interventions that address common barriers to HIV and health services for key populations.</p> <p>Actual Achievements July -September 2018</p> <p>Develop, adapt or adopt and document evidence-based high impact and innovative KP interventions</p> <ul style="list-style-type: none"> CARPHA and CVC will review the draft documentation of the SIDney during the next reporting period. The finalized documentation will be available for dissemination during the next reporting period. The PUSH programme in Guyana has also been identified for documentation. Additional recommendations are being sought from CVC and other programmes as identified as a result of the mid-term evaluation of The Global Fund Projects. <p>Evaluate existing key populations focused programmes</p> <ul style="list-style-type: none"> During the period under review, CARPHA visited the Positively United at Davis Memorial Hospital, Guyana to meet with key representatives of the PUSH Project. The PUSH project is comprised of two faith-based organizations, Davis Memorial Hospital and St. Joseph Mercy Hospital providing holistic care through the Positively United to Support Humanity (PUSH) consortium. A comprehensive package of services is offered incorporating aspects of spirituality and psychosocial support. Based on the outcome of the meeting and a review of the criteria for documenting innovative practices, the PUSH project would be documented as an innovative faith-based approach geared towards reducing HIV morbidity and mortality among PLHIV, including Key Populations in Guyana. The HIV clinical cascade (including KP cascade) shows that PUSH has a high enrolment, retention and viral suppression rates. The documentation will include the results of client satisfaction survey previous conducted by the NAP, Ministry of Health. The documentation is to commence during the period of October to December 2018. This activity will be removed from 2.2.3.3 and 2.2.3.4. and will be reported under activity 2.2.3.2. CARPHA has engaged CVC to assists with the identification of key population focused programmes and outcomes for evaluation. The OECS Secretariat has also identified several KP networks within the OECS for engagement regarding the implementation of this activity.2.2.3.4 Evaluate key populations service delivery outcomes. <p>Evaluate key populations service delivery outcomes.</p> <ul style="list-style-type: none"> The PUSH programme in Guyana was engaged however, as a result of the programme review and agreement by the programme manager of PUSH, an evaluation of the programme would not be possible at this time. CARPHA was referred to the recent client satisfaction survey conducted by the NAP, MOH that

No	Gaps	Planned Strategy in Response to the Gaps
		included the PUSH programme. As a result of the programme review and high retention in care, viral suppression etc. a shift in the activity is best suited.
11	There is insufficient attention to critical non-financial sustainability elements including evidence-informed planning and priority setting for sustainability.	Promote sustainability by building capacity for resource mobilization to address gaps including, through better leveraging of regional and national resources
<p>Actual Achievements July - September 2018</p> <p>Conduct face-to-face advocacy meetings with Ministers of Finance.</p> <ul style="list-style-type: none"> • PANCAP Director and PANCAP Special Advisor conducted four face-to-face advocacy meetings conducted with Ministers of Finance in Guyana, Jamaica, St Kitts and Nevis and Suriname. <p>PANCAP's advocacy engagements with Ministers of Finance has revealed that Guyana, Jamaica, St Kitts and Nevis and Suriname are pursuing a series of options. Among them are:</p> <ol style="list-style-type: none"> (a) Development of Transition and Sustainability Plans, in some cases supported by external agencies such as the Global Fund and PEPFAR; Sustainability plan developed for Jamaica and Guyana and USAID's Health Finance and Governance Project in the Caribbean is supporting sustainability of the HIV response: Barbados, Guyana, Suriname & Trinidad and Tobago. (b) Significantly increased HIV funding in some cases to match PEPFAR's contributions; (c) Establishing priorities, targets and timelines to achieve sustainability; (d) Costing a strategic plan for HIV and STIs; (e) Use of fiscal surpluses to invest in HIV and Health related activities; (f) Reallocating and optimizing use if resources, paying attention to service delivery and results based investments; (g) Restructuring expenditure within the Ministry of Health in keeping with Government's commitments to the integrated health targets in SDG#3 which includes fast tracking the end of AIDS by 2030; (h) Benefiting from lesson learned for more effective use of resources and adoption of international best practices; and 		

No	Gaps	Planned Strategy in Response to the Gaps
		<p>(i) Noting some of the emerging Best Practices in Caribbean with implications for cost effectiveness and fast tracking, the end of AIDS.</p> <ul style="list-style-type: none"> • Barbados adopting a policy of Treat All i.e. treating all people living with HIV, regardless of the stage of their disease; • Trinidad and Tobago: Placing the National AIDS Programme in the office of the Prime Minister and signaling that a viability of a multi-sectoral response to HIV; • Belize: Identifying the twin priorities of HIV and TB required to respond to newer Health requirements achieve the end of these diseases; • OECS: Perfecting the pooled procurement (of drugs) system through up-to date techniques for sharing health information to prevent leakages and wastage of medicines • PANCAP: recognizing the importance of reducing 'stigma and discrimination' as an essential complement to sustainable financing; the PANCAP Justice for All initiatives continues to engage multi-stakeholders - parliamentarians, faith leaders, Youth, civil society and key populations - individually and collectively in respectful dialogue on prospects for ending the SIDS epidemic. <p>A brief was prepared for the meeting of the Council of Finance and Planning. The brief on sustainable financing for HIV and health in the Caribbean.</p> <p>COFAP was asked to:</p> <p><u>Collaborate</u> with the coordinators of the National AIDS Programmes to promote their strategies for sustainable financing in an effort to avert a reversal of the gains made in the HIV response;</p> <p><u>Provide</u> the budgetary support required to fill the financing gaps for HIV;</p> <p><u>Keep</u> the developments and implementation of the sustainable financing strategies under constant review by respective Ministries of Finance and by COFAP</p> <p><u>Receive</u> briefs on the status of implementation of strategies for filling the Financing Gap and for progress toward achieving the goals of PANCAP's Resource Mobilization Strategy 2018-2020;</p> <p><u>Use</u> the COFAP system to foster functional cooperation and thereby a consolidated regional position on Caribbean Health and development in the international negotiating theatres.</p> <ul style="list-style-type: none"> • The COFAP endorsed the request and suggested that this should be expanded to include NCDs and ensure more efficient use of funds

Section 3 – Status of Project Milestones

Progress of Planned Milestones for the period

1 January 2018 to 31 December 2018

At the end of December 2018, the Caribbean Community Secretariat will be required to report on the milestones outlined in Table 2 to the Global Fund to fight Tuberculosis Malaria and AIDS. The approved Global Fund Methodology for rating the completion of these milestones is described in **Table 4 below**:

Table 2: Methodology for rating the completion of each milestone

<p>Milestone Not Started: 0%</p> <p>Milestone Started: 33%</p> <p>Milestone Advanced: 67%</p> <p>Milestone completed: 100%</p>
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There are thirteen (13) planned Work Plan Tracking Milestones, which are due for reporting at the end of December 2018. The status of these Milestones based on the programmatic achievements recorded, recommendations and immediate follow-up actions for the period July – September 2018 are detailed in **Table 3 below**.

Table 3 – Status of the Work Plan Tracking Milestones

Milestones	Methodology for rating completion of milestones	Achievement rate (%)
1. 75% of PANCAP countries reporting accurately on CRSF Indicators on Stigma and Discrimination and Key Population Indicators	<p>Not Started – No progress is shown against planned milestone</p> <p>Started – Existing Regional reporting forms are adapted to standardize the data reporting to ensure the capture of essential data for key populations</p> <p>Advanced – Guidelines are developed to build capacity for countries to strengthen strategic information systems to capture, analyze and report on key population data and CRSF, stigma and discrimination and 65% of PANCAP countries</p>	33%

Milestones	Methodology for rating completion of milestones	Achievement rate (%)
	reporting accurately on CRSF Indicators on Stigma and Discrimination and KP Indicators. Completed – 75% of PANCAP countries reporting accurately on CRSF Indicators on stigma and discrimination and Key population indicators	
Actual Achievement: <ol style="list-style-type: none"> 1. A standardized Electronic Reporting Form was developed in Year 1 to facilitate routine reporting on the CRSF Indicators; 2. Reporting Guidelines and Guidelines for the Web-based Platform were developed to facilitate country reporting; 3. A Regional Workshop was conducted in year 1 to introduce personnel from the National AIDS Programmes to the Web-based Platform for reporting; 4. The Data Quality Tool which was developed by USAID was adopted by CARPHA and will be used for the Data Quality Audits. 5. Data from Beneficiary Countries was uploaded to the we-based platform during the Data Analysis, Dissemination and Use Workshop which was held in September 2018. 		
Recommendations: <ul style="list-style-type: none"> ▪ Urgent: As part of the supporting documents, CARPHA is required to submit a summary of reported country data by Indicator to determine the reporting rates Follow-up Actions: <ul style="list-style-type: none"> ▪ CARPHA to submit a narrative report on the milestone (methodology, summary of results and challenges experienced) with country summary reports. 		
2. Comprehensive data repository housed by CARPHA available to all stakeholders via web access	Not started – No progress is shown against planned milestone Started – Data Repository developed and information collated to update repository Advanced – Data repository available to stakeholders Completed – Data Repository accessed by stakeholders via the web	100%
Actual Achievement: <ol style="list-style-type: none"> 1. The existing CARPHA Data Repository was expanded to facilitate the collection, analysis and reporting on the CRSF Indicators. The system also allows for the sharing of M&E related information and resources through the "Forum" platform in the repository; 2. Web link was shared with Officers responsible for reporting on the CRSF Indicators; and 3. The Data Analysis, Data Use and Dissemination Workshop which was held in September 2018 also focused on the analytical features of the Repository. The Participants were granted access to the Repository to view information in the Forum and the Electronic forms to enter country data for the CRSF Indicators. 		

Milestones	Methodology for rating completion of milestones	Achievement rate (%)
<p>Recommendations:</p> <ul style="list-style-type: none"> ▪ Continue to maintain the repository by uploading key regional documents to the Repository; ▪ Continue to work with the Coordinator of the K4Health Project to identify documents which could be added to the repository; ▪ Work with UNAIDS and other Regional Institutions to use the CARPHA Repository as a hub to disseminate and share M&E Resources (reporting guidelines for the GAM, GAM Reports); ▪ Share web links to new resource material on web pages of regional institutions; ▪ Develop a plan for promoting the use of the Repository; and ▪ Urgent - As part of the supporting documents, CARPHA needs to provide a report on the hits and downloads to monitor the trends using the platform. <p>Follow-up Actions:</p> <ul style="list-style-type: none"> ▪ PR to validate the report of hits and downloads which was submitted to PANCAP in the quarterly report for July to September 2018. 		
<p>3. 7 annual face to face meetings held between faith leaders and UNSGSE</p>	<p>Not started – No progress is shown against planned milestone Started – 60% of annual face to face meetings taking place Advanced – 80% of annual face to face meetings taking place Completed – 100% of annual face-face meetings taking place</p>	<p>100%</p>
<p>Actual Achievement:</p> <p>1. The Director of PANCAP and the United Nations Secretary General Special Envoy for HIV conducted a series of advocacy meetings in Barbados, Belize, Guyana, Jamaica, St Kitts and Nevis, Suriname and Trinidad and Tobago with faith leaders, government and UN partners aimed at advancing the Justice for All programme in those countries (The same Cohort of countries was targeted because of their commitment to advance the Justice For All Agenda)</p>		
<p>Recommendations:</p> <ul style="list-style-type: none"> ▪ Monitor and track interventions undertaken by Faith Leaders who were engaged. <p>Follow-up Actions:</p> <ul style="list-style-type: none"> ▪ The PCU to follow-up with Faith Leaders on the interventions/initiatives undertaken during the year as a result of the engagement/sensitization work of the PCU 		
<p>4. 2 sensitization sessions undertaken every year with departments of CCS on the linkages between HIV and human rights</p>	<p>Not started – No progress is shown against planned milestone Started – Sensitization meetings organized Advanced – sensitization meetings taking place with 60% of aimed participants attending</p>	<p>100%</p>

Milestones	Methodology for rating completion of milestones	Achievement rate (%)
<p>and social development programs and identify opportunities for collaboration</p>	<p>Completed – Sensitization sessions completed with 100% of aimed participants attending.</p>	<p style="background-color: #00b050; color: white; text-align: center; font-weight: bold;">100%</p>
<p>Actual Achievement:</p> <ol style="list-style-type: none"> Two Sensitization sessions on the linkages between HIV and Human Rights and Social Development programs targeted the Legal Department and the Human and Social Development Directorate (which consists of different Programmes). However, given the nature of the milestone, these sessions were integrated into the Annual Work Programme Development Process. Additional Departments benefitted from the Presentation which was done to promote the integration of Human Rights Issues into the CCS work programme by the Programme Leads. These sessions were conducted during the Work Programme Development Session for Programme Implementers in September 2018. Based on the examples provided the following Departments included the work of PANCAP immediately in their Work Programmes activities through a joint launch of the sixteen (16) days of Activism to end violence against women and girls. Available at https://dpi.gov.gy/message-from-his-excellency-irwin-larocque-secretary-general-caribbean-community-on-the-occasion-of-the-16-days-of-activism-campaign-against-gender-based-violence-november-25th-december-10/ The Final CCS Results-focused Work Programmes for 2019/2020 will be reviewed by the Community Council in December for approval. Once the approval process has been concluded, the SMU will undertake an activity to highlight the areas of integration of human rights in the CCS Work Programmes 		
<p>Recommendations:</p> <ul style="list-style-type: none"> The PCU should continue to use the annual work programme sessions to sensitise programme leads and other staff. <p>Follow-up Actions:</p> <ul style="list-style-type: none"> PR to review the approved CCS Results-focused work Programme and highlight the synergies established with other departments and programmes of the CCS– PR and PCU 		
<p>5. 2 Strategies and approaches promoting the effective and sustainable response to HIV adopted by the Conference of Heads, Community Council, COHSOD, Ministers of Health, Caucus of CMOs. JFA integrated</p>	<p>Not started – No progress is shown against planned milestone</p> <p>Started- 1 annual meeting of the Conference of Heads of Government, Council, COHSOD, Ministers of Health, Caucus of CMOs that discuss HIV Issues related to key populations</p> <p>Advanced: 1 annual meeting of the Conference of Heads of Government, Council, COHSOD, Ministers of Health, Caucus of CMOs that discuss HIV Issues related to key populations</p>	<p>33%</p>

Milestones	Methodology for rating completion of milestones	Achievement rate (%)
into national responses in 3 countries	Completed - 1 annual meeting of the Conference of Heads of Government, Council, COHSOD, Ministers of Health, Caucus of CMOs that discuss HIV Issues related to key populations and that take commitment	100%
<p>Actual Achievement:</p> <ol style="list-style-type: none"> 1. The PCU prepared a brief on the sustainability of the response to be tabled at Twenty-ninth Intersessional of the Conference of Heads of Government. Unfortunately, the sustainability of the HIV response was not tabled at the meeting; 2. PANCAP Resource Mobilization Strategy was presented to the Twenty-sixth Meeting of the Chief Medical Officers. The Resource Mobilization Strategy was tabled at the meeting and was subsequently endorsed by the Chief Medical Officers 3. A Brief was prepared for the Lead Head for the Thirty-Ninth Regular Meeting of the Conference of Heads of Government. The brief presented a synopsis on the efforts made by PANCAP to sustain the regional response within an environment of declining donor resources. The issue of the sustainability of the HIV Response was not tabled at the meeting; 4. Brief on Sustainable financing of HIV and Health in the Caribbean was presented to the Council for Finance and Planning (COFAP). The Brief advocated for increased domestic financing for the HIV Response. The COFAP which is responsible for economic policy coordination, financial and monetary integration of Member States encouraged closer collaboration between Ministers of Finance and the Coordinators of the National AIDS Programmes to promote strategies for sustainable financing in an effort to avert a reversal of the gains made in the HIV response. 5. A Brief on the Resource Mobilization Strategy 2018-2020 was presented to the 35th COHSOD. The Strategy was endorsed by the COHSOD. 		
<p>Recommendations:</p> <ul style="list-style-type: none"> ▪ Make early requests to table strategies/approaches on the agenda of the remaining Meetings of the Organs and Bodies. ▪ The Strategies presented, although somewhat different, focused mainly on sustainability and financing of HIV and Health. Efforts should be made to present a second Strategy to the Organs and Bodies. ▪ Target the Conference of Heads of Government carded for February 2019 to present strategies related to CSME and Migrants as a second Strategy. The Strategy could address a harmonized public health approach on rights based policies for migrants in all sectors. ▪ Review the calendar of Meetings for Organs and Bodies for 2019. 		
6. Justice For All implementation integrated into national responses in St. Kitts and Nevis, St. Lucia and Grenada	<p>Not started = No progress is shown against planned milestone Started= JFA implementation integrated into national responses in 1 country Advanced= JFA implementation integrated into national responses in 2 countries Completed = JFA implementation integrated into national responses in 3 countries</p>	100%

Milestones	Methodology for rating completion of milestones	Achievement rate (%)
	This will be measured by the approved national Justice for All Plans developed in collaboration with countries and their national annual work plans and budgets. The three countries targeted are St. Kitts and Nevis, Grenada and St. Lucia.	
<p>Actual Achievement:</p> <ol style="list-style-type: none"> Justice for All Plans were developed for St. Kitts and Nevis, St. Lucia and Grenada; Coordinators were recruited in St. Lucia and Grenada and a Part-time Coordinator was recruited for St. Kitts and Nevis to implement the Justice for All Work Plans. Activities are being implemented in Grenada and St. Lucia. For the period under review, St. Kitts was in the Start-up phase which included a meeting with the Director of PANCAP to discuss the procurement guidelines and the work plan. 		
<p>Recommendations:</p> <ul style="list-style-type: none"> The Quarterly Reports from the Coordinators should be accompanied by supporting documents to validate work completed. The Reports from the National Coordinators should detail the involvement of the National AIDS Programs in the implementation of the National Plans. URGENT: PANCAP should secure documentation (Annual Work Plans and Budget of the National AIDS Programme) to demonstrate the level of integration of the JFA plans in the national response. These supporting documents should be submitted before for the next Progress Update Disbursement Request Report to the Global Fund which is due in February 2019. 		
<p>7. 32 participants that receive capacity-building (data analysis dissemination and use) to support regional evidence-based policies.</p>	<p>Not started: No progress is shown against planned milestone. Started: 60% of participants have completed the capacity building activities Advanced: 80% of participants have completed the capacity building activities Completed= 100% of participants have completed the capacity building activities Each training will reach a maximum of 32 participants.</p> <p>There will be capacity building sessions over the grant period. The means of verification will be the Workshop and Capacity building reports. Workshops and customized capacity development sessions will be delivered on the following subject areas (1 workshop each): Data Analysis; Data Dissemination and Use</p>	<p>100%</p>
<p>Actual achievement:</p> <ol style="list-style-type: none"> The Data Dissemination and Use Workshop was conducted by the Caribbean Public Health Agency from the 12th to 14th of September 2018 at the Hyatt Regency Hotel in Trinidad and Tobago. In keeping with the description of the planned activity 2.2.3.2, the workshop aimed to build the 		

Milestones	Methodology for rating completion of milestones	Achievement rate (%)
<p>capacity of National AIDS Programmes to analyze and use data to inform evidence-based policies, strategies and programming to achieve the new global targets. A total of 43 participants from the sixteen (16) Beneficiary Countries. The target was exceeded because CARPHA was able to invite five persons from the Host Country (Trinidad and Tobago). CARPHA also merged the two trainings together (Data Dissemination and Use and the Data Repository Training) under one workshop. This improved the quality of outputs achieved as both activities are interrelated. Data for the CRSF Indicators were used for the data analysis practical sessions.</p> <p>2. A training manual which consists of ten (10) Modules was developed by the CARPHA team. The Modules include Data Management for Health, Introduction to CARPHA Regional mechanisms for Strategic Information for Health, Overview of the CARPHA Regional Data Repository functions, Introduction to Quantitative and Qualitative Data Analysis, Data Analysis, Using EPI Info for Basis Data Analysis, Data for HIV Surveillance, HIV Cascade Analysis, Data dissemination for Use and Data to Action.</p>		
<p>Recommendations:</p> <ul style="list-style-type: none"> The Caribbean Public Health Agency should continue to follow-up with countries to track and monitor use of the skills acquired in promoting evidence-based policy and strategy development. 		
<p>8. 7 face-to-face meetings 1 each with the Minister of Finance in each of 10 countries, where best practice geared toward sustainability and economic evaluations will be discussed</p>	<p>Not started: No progress is shown against planned milestone Started: All economic evaluations are conducted Advanced: All economic evaluations are conducted and 60% of meetings with Ministers of Finance are held Completed= all economic evaluations are conducted and 100% of meetings with Ministers of Finance are held The means of verification will be the Meeting Reports including the agenda, the list of participants and signed registers.</p>	<p>100%</p>
<p>Actual achievement:</p> <ol style="list-style-type: none"> PANCAP Director and PANCAP Special Advisor conducted five (5) face-to-face advocacy meetings with Ministers of Finance in Guyana, Jamaica, St Kitts and Nevis and Suriname and Barbados Additional Ministers of Finance were also targeted at the Meeting of the Council for Finance and Planning (Montserrat, Saint Lucia,) which was held in Jamaica in July 2018. A brief was developed by PANCAP and USAID-ABT Associates on Domestic Resource Mobilization for HIV in the Context of integrated Health in the Caribbean (See supporting documents – Summary of Recommendations and Conclusions of the Eighteenth Meeting of the Council for Finance and Planning) 		
<p>Recommendations:</p> <ul style="list-style-type: none"> URGENT: Pending from Quarter 2 - The PCU is required to submit the Economic Evaluations which were conducted by ABT Associates to ensure that the face to face engagements with Ministers of Finance were evidence-informed. 		
<p>Follow-up Actions:</p>		

Milestones	Methodology for rating completion of milestones	Achievement rate (%)
<ul style="list-style-type: none"> PANCAP to submit the information from HEU and the K4Health Project which was used for the face-to face Meetings with the Ministers of Finance. 		
<p>9. Regional workshop on comprehensive care and treatment for key populations based on the new 2015 WHO guidelines for the provision of services for key populations to improve access to essential services for key populations in an environment of stigma and discrimination. Workshop to discuss and agree on new service delivery models for HIV, with the active participation of civil society organizations, people living with HIV and the wider community</p>	<p>Not started: No progress is shown against planned milestone Started: 60% of aimed participants have completed the trainings Advanced: 80% of aimed participants have completed the trainings Completed: 100% of aimed participants have completed the trainings Regional workshop on comprehensive care and treatment for key populations based on the new 2015 WHO guidelines for the provision of services for key populations to improve access to essential services for key populations in an environment of stigma and discrimination with 16 participants from each country</p>	100%
<p>Actual Achievement:</p> <p>1. Regional Workshop on enhancing and innovating comprehensive HIV/STI Services for adult and adolescent of key populations in the Caribbean based on HIV combination prevention approach and integrated Comprehensive Care. A total of 38 participants attended. The target was 34 participants.</p>		
<p>Recommendations: N/A</p>		
<p>10. Regional workshop on comprehensive care and treatment for key populations based on the new 2015 WHO guidelines for the provision of services for key populations to improve access to essential services for key populations in an environment of stigma and discrimination. Workshop to discuss and agree on new service delivery models for HIV, with</p>	<p>Not started: progress is shown against planned milestone Started: Frameworks for mapping treatment cascade produced in one or more countries, without NAP endorsement Advanced: At least 50% of target for the development and NAP endorsement of frameworks for mapping treatment cascades reached during period. Completed: 100% of target for the development and NAP endorsement of frameworks for mapping treatment cascades reached during period. This activity benefits 6 countries (Jamaica, Trinidad & Tobago, Guyana, Suriname, Haiti, and Belize).</p>	0%

Milestones	Methodology for rating completion of milestones	Achievement rate (%)
<p>the active participation of civil society organizations, people living with HIV and the wider community</p>		
<p>Actual Achievement: No activities recorded against this milestone.</p>		
<p>Recommendations:</p> <ul style="list-style-type: none"> Focus on completing this activity with the targeted project countries (Jamaica, Trinidad & Tobago, Guyana, Suriname, Haiti, and Belize). If the Frameworks for mapping treatment cascade are available without endorsements from the National Programmes, this milestone would be deemed as started with an achievement rate of 33%. <p>Follow-up Actions:</p> <ul style="list-style-type: none"> The PCU to continue to follow-up with the target countries on the Treatment Cascades. 		
<p>11. Regional workshop on comprehensive care and treatment for key populations based on the new 2015 WHO guidelines for the provision of services for key populations to improve access to essential services for key populations in an environment of stigma and discrimination. Workshop to discuss and agree on new service delivery models for HIV, with the active participation of civil society organizations, people living with HIV and the wider community</p>	<p>Not started: No progress is shown against planned milestone Started: 50% of aimed CSO/NAP activities that address gaps within the continuum of care for specific KP populations occur Advanced: 80% of aimed CSO/NAP activities that address gaps within the continuum of care for specific KP populations occur Completed: 100% of aimed CSO/NAP activities that address gaps within the continuum of care for specific KP populations occur The means to verify the completion will be through Activity reports including agenda, registers, sign in sheets</p>	<p>0%</p>
<p>Actual Achievement:</p> <ol style="list-style-type: none"> National Action Consultation towards the elimination of STI and Viral Hepatitis suppression was held in Trinidad and Tobago 21- 23 2018 and targeted both CSO and NAP Representatives. <p><i>(Most of PANCAP's regional activities address the Gap in the continuum of care, however the names of these meetings should be submitted and the supporting</i></p>		

Milestones	Methodology for rating completion of milestones	Achievement rate (%)
<i>documents should be made available to verify joint participation of NAPS and CSO's in these activities).</i>		
<p>Recommendations:</p> <ul style="list-style-type: none"> Use the PANCAP Webinars to promote Joint CSO/NAP Activities. Keep a register of all participants to facilitate the validation of CSO and NAP Participants Urgent: PANCAP to submit a list of all joint CSO/NAP Activities that address the gaps within the continuum of care. <p>Follow-up Actions:</p> <ul style="list-style-type: none"> The PR to develop a list of all CSO/NAP initiatives undertaken by PANCPA for the year based on the supporting documents and reports submitted to date and The Communications Specialist at PANCAP Coordinating Unit to submit information for the Webinars 		
<p>12. 1 faith leaders' network and 6 key population networks engaged in regional dialogues to address AIDS, HIV sigma and discrimination and structural barriers to the epidemic</p>	<p>Not started: No progress is shown against planned milestone. Started: Two-day faith leaders and key population networks face-to-face meeting organized Advanced: Two-day faith leaders and key population networks face-to-face meeting taking place with 60% of aimed participants attending Completed: Two-day faith leaders and key population networks face-to-face meeting taking place with 100% of aimed participants attending</p>	100%
<p>Actual Achievement:</p> <p>1. Three-day dialogue was convened with faith leaders and other leaders (from the Caribbean Conference of Churches) and six (6) key population networks including Caribbean Vulnerable Coalition; Caribbean Sex Workers Coalition; Caribbean Regional Network of Persons living with HIV; the Caribbean Forum for the Liberation and Acceptance of Gender and Sexualities, Aspire Youth Network Guyana and the PANCAP Youth Advocacy Network).</p>		
<p>Recommendations:</p> <ul style="list-style-type: none"> PCU and the PR to Track the outcomes of the three-day dialogue 		
<p>13. Thirty-two (32) senior government officials and policy makers sensitized on policy approaches that are required to reduce health inequalities</p>	<p>Not started: No progress is shown against planned milestone Started: Meeting organized Advanced: Sensitization meeting taking place with 60% of aimed participants attending Completed: Sensitization meeting taking place with 100% of aimed participants attending Thirty-two (32) persons will be trained and sensitized from sixteen (16) countries.</p>	33%
<p>Actual Achievement:</p> <p>This activity is planned for 1 – 2 November 2018. At the time of this report, the activity was completed. Details on this activity will be provided in the Q/4 208 Report.</p>		

Milestones	Methodology for rating completion of milestones	Achievement rate (%)
Recommendations: <ul style="list-style-type: none"> Invite more participants from host country to ensure that the target of 32 is reached 		
14. Framework for migrants rights to be integrated in national responses developed	<p>Not started: No progress is shown against planned milestone.</p> <p>Started: Compilation of legal barriers for migrant's rights undertaken</p> <p>Advanced: Compilation of legal barriers for migrant's rights undertaken and regional forum taken place</p> <p>Completed: Compilation of legal barriers for migrants' rights undertaken, regional forum taken place and framework of migrants agreed upon by authorities This will be verified using the actual framework developed in collaboration with countries</p>	67%
Actual Achievement: <ol style="list-style-type: none"> Desk Review for the development of the Regional Rights-based Framework to increase the access of migrants to health care services was submitted in June 2018. The Draft Regional Framework for Migrants Health and Rights was submitted to PCU in July 2018. Two-day Regional Forum on Migrants and Mobile Health was convened in June 2018. 		
Recommendations: <ul style="list-style-type: none"> URGENT: (Pending from previous reporting period)- Provide supporting documents to show agreement by the relevant authorities (supporting documents submitted – Agenda, and Desk Review Report and Draft Regional Framework). Once the supporting documents provide information to validate the agreement of the relevant authority, the Milestone will be deemed complete with an achievement rate of 100% Follow-up Actions: <ul style="list-style-type: none"> PR to follow-up with Conference Services on the COHSOD Report Target CSME for sensitization session on the Migrant Strategy 		
15. 3 high level fora utilized by trained regional youth leaders for advocacy	<p>Not Started: No progress is shown against planned milestone.</p> <p>Started: At least 1 high level fora utilized by trained regional youth leaders for advocacy</p> <p>Advanced: At least 2 high level fora utilized by trained regional youth leaders for advocacy</p> <p>Completed: three (3) high-level fora utilized by trained regional youth leaders for advocacy The means of verification will be the Meeting report-documenting summary of conclusions and recommendations produced by the Caribbean Community Secretariat (Conference Services) following each meeting.</p>	100%
Actual Achievement:		

Milestones	Methodology for rating completion of milestones	Achievement rate (%)
<p>The trained youth leaders undertook three (2) of the three (3) engagements.</p> <ol style="list-style-type: none"> 1. The 3-day dialogue between Regional faith leaders and regional KP leaders provided an opportunity for youth to advocate for improved services for sexual and reproductive health 2. UNFPA High level Dialogue on integration of Comprehensive Sexuality Education into HFLE 3. 35th COHSOD Meeting of Ministers of Health in September 2018 		
<p>Recommendations:</p> <ul style="list-style-type: none"> • Once the Summary of Decisions for the COHSOD becomes available, PANCAP should submit to the PR as supporting documentation for this Milestone. 		

Conclusion on Milestones:

- The achievement rate of the Planned Milestones for all 13 milestones is **82%**. The Lowest rate of achievement is 0% and the highest 100%.
- The Clustered Milestones (Milestones **9**, **10** and **11**) have achieved a rate of 33% since two milestones are at “Not Started” while one was completed with an achievement rate of 100%. If the clustered milestones are considered as one milestone, then the overall achievement of Milestones for the period stands at **77%**.
- Milestone **15** (as presented in the table) can reach 100% achievement rate once the recommended supporting documents are made available.
- It is anticipated that the project will advance milestone **10** and complete milestone **11** once the supporting documents are provided.

4. FINANCE

Financial Overview for the period Oct 01, 2016 to September 30, 2018:

The total budget for the Global Fund QRA-H CARICOM project is USD\$ 5,075,234. Of this amount, USD\$1,723,267 is allocated to year one and USD\$1,913,022 and USD\$1,438,945 to years two and three respectively. At the end of September 2018, the Principal Recipient had received US\$ 3,133,806.00 which is (61.75%) of the total budget from the Global Fund.

Cumulative Details of the budget, expenditure and variances for the period are presented in tables 1& 2 below:

Summary Financial Report for the Global Fund Grant 1122- QRA-H CARICOM For the period Oct 01, 2016 to Sept 30, 2018 Expressed in United States Dollars

Table 4 – Cumulative Details by Agency

Agency	Original Budget To Q8	Expenditure To Q8	Variance To Q8	Burn Rate
CARPHA	499,895.00	403,584.48	96,310.52	80.73
PAHO	260,822.00	149,724.44	111,097.56	57.40
CRN+	153,400.00	111,592.50	41,807.50	72.75
PCU	1,995,096.00	1,510,695.19	484,400.81	75.72
PR	727,075.00	636,691.95	90,383.05	87.57
TOTAL	3,636,288.00	2,812,288.55	823,999.45	77.34

Table 5 – Cumulative Details by Cost Group

Cost Group	Original Budget To Q8	Expenditure To Q8	Variance To Q8	Burn Rate
HR	988,184.00	818,750.30	169,433.70	82.85
TRAVEL	1,933,183.00	1,535,412.76	397,770.24	79.42
EPS	649,921.00	402,465.64	247,455.36	61.93
NHE	17,000.00	21,165.57	(4,165.57)	124.50
PA Costs	48,000.00	34,494.27	13,505.73	71.86
TOTAL	3,636,288.00	2,812,288.55	823,999.45	77.34

No contribution was received during the quarter just ended (Q8), however, based on the original budget, details of the budget, expenditure and variances for the quarter just ended are presented in table 6 below:

Table 6 – Quarter Eight Details by Cost Group

Cost Group	Original Q8 Budget	Q8 Expenditure	Q8 Variance	Burn Rate
HR	121,665.00	113,265.91	8,399.09	93.10
TRAVEL	97,780.00	159,682.23	(61,902.23)	163.31
EPS	172,964.00	132,321.81	40,642.19	76.50
NHE	0.00	0.00	0.00	0.00
PA Costs	6,000.00	8,936.85	(2,936.85)	148.95
TOTAL	398,409.00	414,206.79	-15,797.79	103.97

Some expenditure in this quarter was charged against allocations in previous Quarters.

To date, the PR has received and reviewed several reprogramming requests; previous reports have provided details of requests prior to 2018. Details of reprogramming for the period Jan - September 2018 are shown in table 7 below:

Table 7 - Reprogramming requests actioned during January to September 2018
NB: Line #s are quoted as per the approved budget and workplan in the financial system.

	FROM			TO
LINE #	LINE#	DESCRIPTION	AMT	LINE#
4295	4295	2311 Annual meetings of the PANCAP Advisory Group on Resource Mobilisation	10,140.00	4400
4291	4291	1342 Regional forum on migrants and mobile population rights	16,212.00	4399
4279	4279	1143 Strengthen advocacy skills of youth leaders	7,308.00	4317
4353	4353	Joint Parliamentarians, Faith Leaders, key Populations and Civil Society Dialogue	22,892.00	4317
4311	4311	2213 Conduct data quality audits	18,561.00	4317
4312	4312	2214 Develop tailored Strategic Information Strengthening Action Plans	21,000.00	4322
4284	4284	1212 Dialogue between regional faith leaders and regional KP leaders	18,801.00	4314
4294	4294	1373 Monitor SSR and collaborating partners	16,687.00	4316
4303	4303	2321 Develop evaluation protocols and undertake data collection and reviews. (Consultant fees)	60,000.00	4401
4304	4304	2322 Develop and disseminate evaluation reports, and recommendations for addressing gaps and challenges, to strengthen programming for KPs. (Consultant fees)	12,000.00	4401
4284	4284	1212 Dialogue between regional faith leaders and regional KP leaders	26,198.00	4401
4306	4306	1375 Office related costs	4,400.00	4305
4307	4307	2237 M & E Specialist	33,472.00	CARPHA M&E
4333	4333	2115 Recruit consultant review country EMTCT validation reports on the progress towards achieving targets	8,000.00	4395
4334	4334	2116 Provide recommendations and guidelines to countries - EMTCT services integrated into MCH (Consultant fees - 9 countries at \$2,000 each)	18,000.00	4395
4325	4325	2111 Regional workshop on comprehensive care and treatment for KPs based on new 2015 WHO guidelines		

Notes:

Human Resource Costs:

PR: recruitment costs were lower than anticipated and salaries against two budget lines are below the budgeted amounts.

SR/SSR: there was no staff costs for the first two quarters for the SSR's (**CARPHA & CRN+**), staff were recruited in the third quarter.

Travel Costs:

PR: the inception meeting cost less than was budgeted and the PR not undertaking any monitoring mission to the SSR due to the late start-up.

SR/SSR: some SR meetings were organized for less than budgeted, and some were rescheduled. The SR did not undertake any monitoring missions during the period, and the SSR's (CARPHA) travel related activities commenced later than planned.

Some budgeted travel not yet undertaken at the end of the period are:

- **1113:** Advocate to Annual CARICOM heads of Government Meetings,
- **1121:** Strategic engagement of regional PLHIV and KPs with highest-level political leadership
- **2235:** Address gaps and challenges identified by evaluations and strengthen programmes for KPs
- **2121:** Develop policy briefs on negative public health outcomes of stigma, discrimination and hostility towards groups affected by HIV.

There was also some expenditure in this cost group, charged against allocations in previous Quarters

External Professional Costs:

PR: The variance is as a result of the consultancy for the baseline evaluation costing less than budgeted.

SR/SSR: Some budgeted activities not yet completed at the end of the period are:

-1362 Fund selected priority actions in JFA plans common to countries

- 2239 Consultancy to develop, adapt or adopt and document evidence-based high impact and innovative KP interventions

There was also some expenditure in this cost group, charged against allocations in previous quarters.

Programme administration Costs:

SR/SSR: Utility bills to PCU is pending and CARPHA's operations commenced later than budgeted and costs incurred so far, are negligible.

4. GRANT MANAGEMENT

Implementation Rate

The overall budget to quarter eight (Q8 - July to September 2018) is **US \$3,636,288.00**. The expenditure to Q8 is **UD\$2,812,288.55**. The overall Burn-rate for the period as an expression of the budget against the actual expenditure is seventy-seven percent (77%). Table 7 below reflects a steady Burn rate and rate of implementation for January to September 2018.

Table 8: 2018 Quarterly Burn Rates

Reporting Quarters for 2018	Q1 (January – March)	Q2 (April – June)	Q3 (July – September)
Burn Rates/%	67	72	77

Achievement of Planned Milestones

The overall achievement of the thirteen (13) Planned Milestones was eighty-nine percent (89%) achievement rate of the key activities that are aligned to the performance framework. This indicates that for four (4) of the recorded milestones that have not yet Advanced (as discussed in Section 3 – Progress of Planned Milestones), there will be an accelerated plan to address the identified recommendations and follow-up actions over the ensuing quarter for the 2018 planned milestones. Additionally, the beneficiary matrix, Appendix 1 is updated accordingly based on countries' participation in activities of the regional grant.

Grant Management Activities

The Principal Recipient completed all the grant management activities for the period under review.

- a) **Mid Term Assessment Draft Report:** The Mid Term Assessment to assess the two (2) Regional Projects was underway during the reporting period. An Evaluation Team led by Dr. Ansari Ameen was retained by the Caribbean Vulnerable Coalition (CVC) and the Centro de Orientacion e Investigacion Nacional (COIN) to conduct the assessment between July to September 2018. To date, the Evaluation Team

has submitted a draft Evaluation Report which was reviewed collectively by the M&E Technical Working Group and the Project's custodians. Recommendations were documented and forwarded to the Evaluation Team for review and integration into the final report.

Prior to the compilation of the draft report the Evaluation Team conducted face to face interviews with stakeholders in Guyana, Suriname, Barbados and Jamaica. The PR has supported the Evaluation Team in scheduling their engagements with Regional Stakeholders. Bi-weekly updates are provided by the M&E Technical Working Group for the joint evaluation. The mid-term Evaluation Report will be submitted to the Global Fund.

- b) **Grant Making Process:** The Global Fund Access to Funding Team notified the Consortium of Applicants (PCU-CVC-COIN) of their approval of the Concept Note for the Regional Multi-Country Caribbean Grant. The Technical Review Panel (TRP) also submitted their issues and recommendations for the Regional Multi-Country grant proposal. The PR is working with members of the Consortium to coordinate efforts towards the Grant Making Process which has engaged the Global Fund Secretariat.

Previously, the PR supported the Concept Note Development, which included the following: Development of the Detailed Budget, Logic Model and the Performance Framework for the New Concept Note was developed and submitted to the Global Fund Access to Funding as part of the Concept in August 2018.

- c) **Monitoring Visits:** Financial and Programmatic monitoring visits were conducted to validate the data submitted by the Caribbean Public Health Agency (CARPHA) and the PANCAP Coordinating Unit (PCU) for the period ending September 2018.

The PR participated in the Data Analysis, Dissemination and Use Workshop to in September 2018 as a spot check. This activity was chosen as CARPHA was experiencing challenges to complete the milestone related to reporting on the CRSF.

- d) **CRSF Evaluation:** Reviewed and provided feedback on the draft CRSF Evaluation Report to the PACC based on recommendations to improve the report submitted by the Consultant. The PR will also participate in the discussion with the PACC on the selection of the Strategic Priority Areas (SPAs) for the new CRSF (2019 –

2022). Thereafter, recommendations will be made by the PACC to the PANCAP Executive Board.

5. PLANNED ACTIVITIES FOR THE PERIOD – December 2018 – March 2019

Table 9: The planned Project activities for the period December 2018 – March 2019 are presented below:

PLANNED ACTIVITIES	2018 – 2019 DATES
Grant Making Activities	Ongoing
LFA Financial Spot Checks of the SR (PCU) and SSRs (CARPHA)	5th - 12th December, 2018
Planning Meeting to Develop Action Plan for addressing recommendations from the Global Fund mid-term evaluation	23rd – 24th January, 2019
7th Meeting of NAP Managers and Key Partners	11th – 13th March, 2019

APPENDIX 1: BENEFICIARY MATRIX

Beneficiary Database for the PANCAP-PCU-Global Fund Grant - QRA-H-CARICOM 1122: Removing Barriers to Accessing HIV and Sexual Reproductive Health Services for Key Populations in the Caribbean For the period of January 2017 to March 2018																					
Work Plan Tracking Measure	Module	Responsible Agency	Collaborative Partners	Target Countries	Antigua & Barbuda	Barbados	Bahamas	Belize	Dominica	Dominican Republic	Grenada	Guyana	Haiti	Jamaica	Montserrat	St. Kitts & Nevis	St. Lucia	St. Vincent & the Grenadines	Suriname	Trinidad & Tobago	Number of targeted countries
Regional Forum on Migrants and Mobile Populations Rights and Health which was held on 26th to 27th June, 2018 in Port of Spain, Trinidad & Tobago				All sixteen (16) beneficiary countries	X	X	X	X		X		X	X	X			X		X	X	11
Workshop on Enhancing and Innovating Comprehensive HIV/STI Services for Adult and Adolescents of Key Populations in the Caribbean, Based on HIV Combination Prevention Approach and Integrated Comprehensive Care which was held on 24th to 25th May, 2018		PAHO-WHO	PANCAP-PCU	All sixteen (16) beneficiary countries	X		X	X	X	X	X	X	X	X		X	X	X	X	X	14
A sub-regional Meeting on National Actions towards the elimination of STIs and Viral Hepatitis in the Caribbean was held on 21st - 23rd May, 2018 in Port-of-Spain, Trinidad and Tobago		PAHO-WHO	PANCAP-PCU	All sixteen (16) beneficiary countries	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	15
Regional Data Analysis, Dissemination Use Training Workshop which was held on 12th to 14th September, 2018 in Port-of-Spain, Trinidad and Tobago		Caribbean Public Health Agency (CARPHA)		All sixteen (16) beneficiary countries	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	16
Regional Meeting for Advancing Recommendations for addressing Gaps in the Human Rights Response under the Justice For All Programme Report which was held in Kingston, Jamaica on the 30th to 31st October, 2018			PANCAP-PCU under the 10th European Development Fund	All sixteen (16) beneficiary countries	X	X	X	X	X	X	X	X	X	X			X	X	X	X	14
Regional Meeting on Ending AIDS in the Caribbean: Expanding Equitable, Effective, Innovative and Sustainable HIV Responses Towards the 2020 Fast Track Targets on the Way to Elimination which was held in Kingston, Jamaica on 1st to 2nd November, 2018		PAHO-WHO	PANCAP-PCU	All sixteen (16) beneficiary countries	X	X	X	X		X	X	X	X	X		X	X	X	X	X	14