



## PARTNERSHIP WORKPLAN

**PARTNER INSTITUTION A:** FOUNDATION A, NEW YORK, USA

**PARTNER INSTITUTION B:** HIV/AIDS CLINIC B, LILONGWE, MALAWI

**WORKPLAN PERIOD:** JANUARY 2006 – DECEMBER 2006

**DATE OF SUBMISSION:** JANUARY 20, 2006

*This workplan was jointly developed and has been agreed to by representatives of the partnership institutions:*

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*Signature of Representative*

**John Doe, Director**

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*Name and Title*

**Foundation A**

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*Institution*

**January 28, 2006**

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*Date*

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*Signature of Representative*

**Jane Doe, Director**

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*Name and Title*

**HIV/AIDS Clinic B**

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*Institution*

**January 26, 2006**

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*Date*

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*Twining Center Approval*

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*Date*

Please refer to [Guidance on Developing Twinning Center Workplan](#) for instructions on how to complete the workplan.

## SECTION 1 DESCRIPTION OF PARTNERSHIP ORGANIZATIONS

### A. Name of Partner Institution: *Foundation A*

**Description of Institution:** Foundation A was established in October 1995 by a group of public health professionals for the purpose of strengthening the capacity of major health facilities in developing countries in providing quality health care services. Main areas of expertise of the foundation are training, quality improvement, pharmaceutical management, and information management. Since its inception, the Foundation has trained over 2000 health professionals in 25 countries and worked with over 400 health facilities in strengthening their managerial systems. The Foundation is currently working in 5 countries in Africa (South Africa, Zambia, Kenya, Nigeria, and Tanzania) and has established a sound reputation in strengthening the managerial capacity of health facilities.

### B. Name of Partner Institution: *HIV/AIDS Clinic B*

**Description of Institution:** The Clinic was established in January 1999 as part of the Lilongwe General Hospital, the largest hospital in the country, in order to serve the increasing number of HIV infected individuals coming to the Hospital from all over the country. The clinic was identified in 2002 as one of the government sites to roll out ART. Its lack of resources and capacity, however, make this a major challenge. As of December 2005, the clinic had on staff 5 doctors, 7 nurses and 5 nurses' assistants who are providing services to approximately 100 clients per month. In addition, the clinic has insufficient operational and management systems, including financial management, logistics, and data collection systems.

## SECTION 2 DESCRIPTION OF PARTNERSHIP PROJECT

### A. Project Goal and Rationale

The project's overall goal will be to strengthen the quality of care and support services provided by HIV/AIDS Clinic B. A recent survey of several major health facilities in Malawi that provide ART services, including Lilongwe General Hospital, found that only 45% of clinicians and 30% of nurses had received any training on delivering ART services and only 10% of clinicians were trained on providing integrated TB/HIV services. In addition, the facilities had inadequate management information systems that impaired their ability to forecast drug requirements, report on key performance indicators and assess the quality of their services. Only 35% of ART clients were referred to other care and support services such as psychological support because staff were overworked, insufficiently trained and the referral mechanisms were missing or not being followed. Lilongwe General Hospital is one of the largest ART providers in the country and on average, has about 200 clients per month. For this reason, a partnership between the hospital and FID was established with the ultimate goal of strengthening the quality of ART services by strengthening the technical, operational and managerial capacity of the hospital to provide quality ART care.

### B. Project Objectives and Strategies for Achieving Them

**Objective 1: *To strengthen the financial, pharmaceutical and information management systems of Lilongwe Hospital's HIV/AIDS clinic B***

**Objective 2: *To strengthen the referral system between the Lilongwe HIV/AIDS clinic B and community-based organizations who provide care and support services***

### **C. Potential Obstacles and Challenges to Achieving Objectives**

The national drug supply is centralized in Malawi and funded predominantly by external channels. Lilongwe General Hospital receives its ART drugs from the central drug store which is currently undergoing major organizational changes. The changes are part of a larger governmental effort to strengthen the national pharmaceutical management system. It is expected that delays in the supply of ARTs will occur which will possibly impede the delivery of treatment services to patients. In order to mitigate this effect, the Project will assess the clinic's pharmaceutical management system, strengthen it accordingly and train logistic staff in order to avoid drug stock out.

A second challenge which the Project faces concerns the information management system. The clinic's current system is at best only rudimentary and requires considerable upgrades, in terms of tool development and human resources. Hiring additional staff, however, is not feasible, given the funding constraints, and the current staff is already overburdened with other responsibilities. At present, no solution to this problem has been identified.

Objective 1		To strengthen the financial, pharmaceutical and information management systems of Lilongwe Hospital's HIV/AIDS clinic B													
Expected Results		1. Improved financial management 2. Reduced number of ART drug stock-out days 3. Improved monthly reporting (timely and complete) to MOH													
Activities		2006												Y2	Lead Person (Position and Agency)
		JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC		
1.1	Establish coordination committee	X													Director (Clinic B)
1.2	Conduct assessment of hospital's (1) financial, (2) pharmaceutical, and (3) information management systems.	X													Project manager (Foundation A)
1.3	Hire project coordinator		X												Director (Clinic B)
1.4	Conduct trainings in: financial management, drug forecasting, and information management and technology.			X	X	X									Project manager (Foundation A)
1.5	Install IT system (computer and software)					X									IT manager (Foundation A)
1.6	Train relevant clinic staff on software					X	X								IT manger (Foundation A)
1.7	Design data flow charts and data collection forms				X	X	X								M&E specialist (Foundation A)
1.8	Train relevant clinic staff and supervisors in use of data collection forms						X	X							M&E specialist (Foundation A)

<b>Objective 2</b>		<b><i>To strengthen the referral system between the Lilongwe HIV/AIDS clinic B and community-based organizations who provide care and support services</i></b>													
<b>Expected Results</b>		Increasing number of ART clients of Lilongwe HIV/AIDS clinic B that receive care and support services.													
<b>Activities</b>		<b>2006</b>												<b>Y2</b>	<b>Lead Person (Position and Agency)</b>
		<b>JAN</b>	<b>FEB</b>	<b>MAR</b>	<b>APR</b>	<b>MAY</b>	<b>JUN</b>	<b>JUL</b>	<b>AUG</b>	<b>SEP</b>	<b>OCT</b>	<b>NOV</b>	<b>DEC</b>		
2.1	Establish a directory of available care and support services in the district, including legal, psychological, spiritual, and wellness services.										X				Director (Clinic B)
2.2	Distribute directory to all staff and conduct brief orientation session on its use.										X				Director (Clinic B)
2.3	Conduct client satisfaction survey of current ART clients to identify needs and gaps in service coverage. Repeat survey every 6 month to monitor client satisfaction.									X				X	Research specialist (Foundation A)
2.4	Disseminate findings of client satisfaction survey													X	Director (Clinic B)
2.5	Develop strategy for establishing referral network, including designing procedures and tools										X	X			Project manager (Foundation A)
2.6	Train relevant staff on referral-related issues (purpose of referral, importance of follow-up, referral tools, etc)												X	X	Project manager (Foundation A)

## **SECTION 4      PLANNED EXCHANGE TRIPS**

<b>Trip No.</b>	<b>Timeframe</b>	<b>Purpose of Trip</b>	<b>Location</b>	<b>Relates to Objective No.</b>	<b>No. of travelers</b>
<b>1</b>	Jan 06	Partnership start-up: Establish coordination committee, finalize work plan, conduct hospital assessment	Malawi	1	3
<b>2</b>	Mar-May 06	Conduct initial trainings in financial management, drug forecasting, and information management and technology.	Malawi	1	3
<b>3</b>	Sep 06	Conduct client satisfaction survey	Malawi	2	2
<b>4</b>	Dec 06	Conduct final training on referral-related issues, assess the use of data collection tools, strategize plans for second year of project	Malawi	2	3

## **SECTION 5      PLANNED COLLABORATION WITH OTHERS**

<b>Name of Organization</b>	<b>Planned Collaboration / Activities</b>
Association of Malawians for Health Promotion (AMHP)	PLWHA support group who will help establish a directory of available care and support services in the district. AMHP has been working for several years in the district and knows all of the relevant services available.
Ministry of Health	The project coordinators will establish contact with the Ministry of Health to discuss any long-term strategies to avoid drug stop-outs in the future for the Lilongwe Hospital's HIV/AIDS clinic.

## SECTION 6 INDICATORS, DATA COLLECTION AND REPORTING

### A. Indicators

**Objective 1: To strengthen the financial, pharmaceutical and information management systems of Lilongwe General Hospital's HIV/AIDS clinic B**

Indicator	Activity No.	Target	Target Date	Data disaggregating	Data source / collection tool	Responsible person/agency
Number of individuals trained in institutional capacity building (this includes financial management, drug forecasting, and IT)	1.4, 1.6, 1.8	FM = 5 DF = 3 IT = 3	Jul 06	Topic of training Participant's gender Participant's job title	Training registration form	Trainer (consultant or Foundation A staff)
Number of individuals trained in strategic information (this includes information management)	1.4, 1.6, 1.8	15	Jul 06	Gender Job title	Training registration form	Trainer (consultant or Foundation A staff)
Number of ART drug stock-out days per month	1.8	0	Jan 07	none	Drug inventory form	Pharmacist (Clinic B)
% of monthly reporting forms that were submitted in complete and timely manner to MOH over past 6 months	1.8	100%	Jan 07	none	Record of submission	Records department

**Objective 2: To strengthen the referral system between the Lilongwe HIV/AIDS clinic B and community-based organizations who provide care and support services**

Indicator	Activity No.	Target	Target Date	Data disaggregating	Data source / collection tool	Responsible person/agency
Number of copies of service directory that were disseminated	2.2	50	Oct 06	None	Distribution form	Director (Clinic B)
Number of staff attending orientation session on use of service directory	2.2	75	Oct 06	Job title	Attendance sheet	Director (Clinic B)
Client satisfaction survey conducted	2.3	1	Sep 06	None	Final report	Director (Clinic B)
Number of persons attending survey dissemination workshop	2.4	75	Mar 07	Job title	Attendance sheet	Director (Clinic B)
Number of persons trained in use of referral procedures and tools	2.6	75	Dec 06	Job title	Training Report	Director (Clinic B)

Number of HIV-infected persons referred to other care and support services	2.5, 2.6		On-going	Gender Age Type of service to which referred	Referral form	Director (Clinic B)
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## **B. Coordination of Data Collection**

Data collection will be coordinated by the Foundation A Project Coordinator and the HIV/AIDS Clinic B Project Coordinator. Data collection forms will be developed or adapted for the following activities:

1. Routine clinic data collection forms will be developed and administered in accordance with activities 1.7 and 1.8.
2. Staff will be trained in the proper application of data collection tools.
3. Hospital Assessment: The Foundation A Project Coordinator will develop an assessment tool that will be administered by the coordination committee to measure the clinic's current financial, pharmaceutical, and IT capacities.
4. Assessment of trainings: Pre- and post-training knowledge tests will be administered during the trainings by the Foundation A Project Coordinator. A follow-up training review checklist will be developed and administered 3-6 months after training events to assess any change in staff around financial, pharmaceutical, and information management.

The Foundation A Project Coordinator and HIV/AIDS Clinic B Project Coordinator will have monthly conference calls to assure that the project timeline is being met and that data collection and reporting is completed in accordance with the work plan.

## **C. Reporting to the Twinning Center**

The Foundation A Project Coordinator will submit quarterly reports to the Twinning Center. The HIV/AIDS Clinic B Project Coordinator will be responsible for submitting monthly progress reports to the Foundation A Project Coordinator in accordance with the monthly conference calls. These monthly reports will be used by the Foundation A Project Coordinator to draft the necessary Twinning Center reports. The TC reports will consist of an Indicator Status Report to report on progress towards partnership indicators and training events during the quarter, and a narrative report to describe partnership activities during the quarter including challenges and best practices.

## **SECTION 7 SUSTAINABILITY OF THE PARTNERSHIP PROJECT**

The partnership will undertake the following steps to sustain the project beyond the completion of the partnership work plan:

- Foundation A will assist Lilongwe Hospital in developing a business plan that describes the long-term vision of the clinic and identifies other potential development partners.
- This assistance will include training relevant staff in proposal writing skills, general fundraising activities, and the use of the internet in the further identification of potential donors.



- Foundation A will assist HIV/AIDS Clinic B to develop a public relations/marketing plan in order to increase local demand for clinic services, and inform local stakeholders of clinic activities and services.
- HIV/AIDS Clinic B will receive technical assistance from the Twinning Center in financial management through a clinic financial assessment and subsequent trainings for clinic staff.

**SECTION 8      CONTACT INFORMATION OF KEY PERSONNEL**

Foundation A					
Position	Name	Address	Telephone #	Fax #	E-mail
Partnership Coordinator					
Research Specialist					
Project assistant					

Lilongwe Hospital HIV/AIDS Clinic					
Position	Name	Address	Telephone #	Fax #	E-mail
Partnership Coordinator					
Project assistant					