

# **ACTIONS FOR DEVELOPMENT PROGRAMMES**

**(ADP MBOZI)**

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## **ANNUAL PLAN 2020**

**P.O. Box 204 Mbozi, Songwe Region, Tanzania**

**Tel. +255 (025)-2580095 Mob. +255 0754 398342, Fax: +255 (025) 2580312**

**E-Mail: [adpmbozi@yahoo.com](mailto:adpmbozi@yahoo.com) Website: [www.adpmbozi.or.t](http://www.adpmbozi.or.t)**

## **TABLE OF CONTENTS**

## LIST OF ABBREVIATIONS

|         |   |
|---------|---|
| ACT     | Agricultural Council of Tanzania              |
| ADDA    | Agriculture Development Denmark Asia & Africa |
| ADP     | Actions for Development Programmes            |
| AGRA    | Alliance for Green Revolution Africa          |
| AIDS    | Acquired Immuno Deficiency Syndrome           |
| AMCOS   | Agricultural Marketing Cooperative Society    |
| ARI     | Agricultural Research Institute               |
| ARV     | Anti-Retroviral Virus                         |
| ASWO    |   |
| BDLs    |   |
| CBHS    |   |
| CCD     |   |
| CCW     |   |
| CEO     | Chief Executive Officer                       |
| CEW     | Community Extension Worker                    |
| CHWs    | Community Health workers                      |
| CMC     |   |
| CMO     |   |
| CQI     |   |
| CRDB    | Cooperatives and Rural Development Bank       |
| CSO     | Civil Society Organization                    |
| CTC     | Counselling and Testing Centre                |
| DD Kits | Dietary Diversity Kits                        |
| DSWO    | District Social Welfare Officer               |
| fehh    | female-headed household                       |
| FGM     | Female Genital Mutilation                     |
| GBV     | Gender -Based Violence                        |
| HBC     | Home-Based Care                               |

|        |   |
|--------|---|
| HHO    |   |
| HIV    | Human Immuno Deficiency Virus                             |
| ICS    | Input Credit Scheme                                       |
| IGA    | Income Generating Activities                              |
| IRDO   | Integrated Rural Development Organization                 |
| IT     |   |
| KP     | Key Population  |
| KT     |   |
| LCWs   |   |
| LGA    | Local Government Authority                                |
| M&E    | Monitoring and Evaluation                                 |
| MNCH   |   |
| MSM    | Men who have Sex with Men                                 |
| MVC    | Most Vulnerable Children                                  |
| MVCC   | Most Vulnerable Children's Committee                      |
| NACS   | Nutrition and Counselling Support                         |
| NBC    | National Bank of Commerce                                 |
| NFRA   | National Food Reserve Agency                              |
| NGO    | Non Governmental Organization                             |
| NMB    | National Micro-finance Bank                               |
| OD     | Organization Development                                  |
| OCS    |   |
| OSFP   | Orange Freshed Sweet Potatoes                             |
| PELUM  | Participatory Ecological Land Use Management              |
| PRIDE  | Promotion of Rural Initiative and Development Enterprises |
| PSG    | Peer Support Group  |
| QDS    | Quality Declared Seeds                                    |
| SACCOS | Savings and Credit Coperative Society                     |
| SBCC   | Social Behavior Change Communication                      |
| SCI    | Save the Children International                           |
| SDG    | Sustainable Development Goals                             |

|         |  |
|---------|--|
| SHARPCo |  |
| SIDO    | Small Industries Development Organization          |
| SILC    | Savings and Internal Lending Community             |
| TACRI   | Tanzania Coffee Research Institute                 |
| TASAF   | Tanzania Social Action Fund                        |
| TB      | Tuberculosis                                       |
| TOSCI   | Tanzania Organization for Seed Certification       |
| ToT     | Training of Trainers                               |
| TRACE   | Training and Consultancy Centre                    |
| TSC     |  |
| Tshs    | Tanzanian Shilling                                 |
| USAID   | United States Agency for International Development |
| VANuPs  | Village Nutrition Promoters                        |
| VICOBA  | Village Community Bank                             |
| WEO     | Ward Executive Officer                             |
| WRP     | Walter Reed Programme                              |

## **INTRODUCTION.**

This document sets out ADP-Mbozi plan of work for the year 2020 financial year. The plan takes forwards implementation of five years (2017-2021) strategic plan, also the plan is based on the commitment already made between ADP-Mbozi and development partners to implement activities that addresses the need of target group in the respective area where ADP-Mbozi is working. Therefore the work plan embeds and reflects the key purpose of the organization that.....

On other hand, the plan is also based on the recommendations made by workshop participants of 2017 Annual Internal Evaluation that was conducted between 05/12 – 06/12/2019 at TACRI Mbimba conference hall. Participants made valuable contributions aiming at improving the work done by ADP Mbozi in ensuing years.

The annual plan document is divided into four main sections as follows;-

Section one contains the introduction, current external environmental issues surrounding the organization, brief history and setup of the organization and working area.

Section two provides the strategic direction of ADP Mbozi. It highlights on the vision, mission and values, the focus areas of the organization as stated in 2017 to 2021 strategic plan including the approaches used by ADP Mbozi.

Section three is the heart of this document showing the main and strategic objectives, and the projects to be implemented under each main focus area. The activities, targets and milestones are detailed in this section.

Section four is the final part containing budget estimates that will facilitate implementation of the planned activities

## **SECTION ONE: GENERAL BACKGROUND INFORMATION.**

### **1.1 EXTERNAL ENVIRONMENT.**

During this year the organization continued to experience cutoff of funds from the projects that are funded by USAID. This is a important time for ADP-Mbozi to work hard and make sure that the organization through the project staff to deliver quality standard of services to the targeted population we committed with donors to assure our existing.

## **SECTION ONE: GENERAL BACKGROUND INFORMATION**

### **1.1 EXTERNAL ENVIRONMENT**

During this year the organization continued to experience emergency of international NGOs opening their offices in the regions. On one hand this is an opportunity for ADP Mbozi of close collaboration with these NGOs but on the other hand there is fear that these organizations may take the positions of local NGO and cause collapse of the same.

During this year in September the government took stock of NGOs all over the country. Moreover regional and district governments directed all NGOs operating within their mandate to submit implementation reports of their activities and financial reports with the aim of monitoring the proper use of resources granted by development partners. If this exercise is done carefully will identify and distinguish fake NGOs and remove them from service delivery and give room for well-performing NGOs.

This season the cereal market has been like a bitter pill to swallow for most of the farmers and cereal-business people. This is mainly due to government directive to ban exporting raw cereal especially maize to neighbouring countries that have cereal shortage. The situation was aggravated by allowing raw cereals to cross border to Tanzania and compete with already saturated cereal market. Although towards the end of the year the government removed the cereal exportation ban there are still some procedural ties to follow before exporting cereal to the outside the country markets.

### **1.2 HISTORICAL BACKGROUND**

Agricultural Development Project in Mbozi came into being in 1986 to solve the problem of hunger that had occurred in Mbozi and Momba districts. The project continued to operate in different phases until 1995 and because of its good performance it was gradually expanding in

terms of geographical coverage as well as number of interventions. By 1995 the project was operating in almost all divisions of Mbozi and Momba districts and new interventions of group organizations, Savings and Credits, irrigation, HIV/AIDS and gender were added.

As this project was coming to an end in 1995 stakeholders considered what would be the way forward as the target communities were still in need of project services. Therefore through the institutionalization process, an option of registering the project as a Trust Fund was chosen and actual registration was effected on 29 November, 1995.

Following the changes in law governing the establishment of Non Governmental Organizations in Tanzania [section 11(3) of Non Governmental Act No. 24, of 2002], ADP Mbozi was re-registered as NGO on 10<sup>th</sup> October 2005, with a registration number 1639. One of the important developments resulting from re-registration is that the organization can now operate throughout the country. At the same time the organization changed its name from Agricultural Development Programmes Mbozi Trust Fund to **Actions for Development Programmes – Mbozi** because currently the interventions are more than agricultural production.

### **1.3 ORGANIZATIONAL SET UP**

The supreme organ of the organization is the General Meeting currently composed of five founder members and eight ordinary members. The Management and Control of the affairs of ADP Mbozi is entrusted to the Board of Directors which is responsible to the General Meeting.

The management team of the organization on the other hand guides the execution of the day to day implementation of the programmes and organizational processes. The management team is composed of heads of departments. Other key members of staff may be co-opted. The current departments of the organization include Sustainable Food and Nutrition development, Entrepreneurship and Market Development, Community Empowerment, Environment and Climate change management and Finance, Administration and Organizational Development. Heads of departments report to the executive director.

### **1.4 WORKING AREA**

From the time when it was a project, ADP-Mbozi has been working in Mbozi and Momba districts in Songwe region.

Currently the organization is implementing projects in all four districts of Mbozi, Ileje, Momba and Songwe in Songwe region; Mbeya district in Mbeya region, four districts (Mpanda, Mlele, Mpimbwe and Nsimbo) and Wanging'ombe district in Njombe region. In all these districts the organization has sub offices and/or has established contact persons.

## **SECTION TWO: ADP MBOZI STRATEGIC DIRECTION**

This section elaborates on the strategic direction of ADP Mbozi for 5 years starting on the 1<sup>st</sup> January 2017 to 31<sup>st</sup> December 2021. In this section the vision and mission of the organization is stated including the core values. The priority focus areas for this period are listed and the strategies for achieving the objectives of each area of focus are listed down.

### **2.1: VISION, MISSION AND VALUES OF ADP MBOZI**

#### ***2.1.1 Vision***

ADP Mbozi envisions rural and urban communities in Southern Highlands of Tanzania attaining livelihood security and sustainably managing their resources.

#### ***2.1.2 Mission***

ADP Mbozi is a leader in facilitating socio-economic empowerment of marginalized<sup>1</sup> rural and urban communities in Southern Highlands of Tanzania through promotion of improved agriculture production and food utilization, entrepreneurship and market development, addressing challenges of environment and climate change and community empowerment on

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<sup>1</sup> *Marginalized communities* are defined as all the people (smallholder farmers, Orphans and Vulnerable Children and Youth, low income women, widows and widowers) who because of their position in the society are exploited and are unconscious of their abilities to bring about their development and hence subjected to poverty.



children issues, gender, HIV and AIDS and good governance. Moreover the organization will strive to strengthen its internal capacity in order to implement successfully the above mentioned focus areas.

### **2.1.3 Values**

- i. Commitment: we believe commitment to our work shall lead to realization of significant positive changes in our organization and the community we work with.
- ii. Sharing out: we believe that development is brought about through combining efforts of different stakeholders therefore the communities we work with have a significant contribution towards their own development.
- iii. Transparency: we commit ourselves to be transparent in our organization and we shall inspire the same to the communities we work with.
- iv. Trustworthy: we believe that trustworthy can help us to work as a team and therefore achieve our goals much more efficiently. We are also convinced that trustworthy, in case of farmers, is a pre-requisite for successful collective selling of their produce.

## **2.2: STRATEGIC FOCUS AREAS AND STRATEGIES**

The strategic plan 2017 – 2021 has five focus areas as listed below;-

- i. *Sustainable Food Security and Nutrition development*
- ii. *Entrepreneurship and Market development*
- iii. *Environmental and Climate change management.*
- iv. *Community Empowerment on (Children, Gender, HIV/ AIDS, and Good Governance)*
- v. *ADP Mbozi internal capacity strengthening*

***From the above focus areas five strategic objective and strategies thereof were developed as follows;-***

### ***2.2.1: Sustainable food security and nutrition status in communities improved.***

- a. To increase crop and livestock production
- b. To strengthen post harvest practices
- c. To improve food budgeting at household level
- d. To improve nutrition status at household level
- e. To promote appropriate farming technologies

### ***2.2.2: Entrepreneurship and market accessibility enhanced***

- a. To strengthen Producers' marketing groups and associations.
- b. To promote business development skills
- c. To promote access to markets information by producers.
- d. To enhance Producers' and traders' linkage
- e. To enhance access to Financial Services

### ***2.2. 3: A healthy and friendly environment in communities promoted.***

- a. Enhance hygiene, sanitation and safe and clean water in the community.
- b. Enhance Climate Change and variability management

***2.2.4: Enhanced community empowerment in dealing with children, gender, HIV/AIDS, and Good Governance***

- a. To promote rights and security of children
- b. To promote gender equality and equity
- c. Enhance HIV / AIDS prevention and Impact mitigation including O/MVC support.
- d. Enhance Good governance.

***2.2.5: Governance and management capacity of ADP Mbozi strengthened in order to operate efficiently and effectively.***

- a. To enhance financial capacity of ADP Mbozi
- b. To improve policies, systems and procedures
- c. To improve human resource
- d. To improve storage and retrieval of information
- e. To enhance networking and collaboration
- f. To enhance publicity of ADP Mbozi

## **2.3 THE APPROACHES**

In the next five years ADP Mbozi will operate using the following approaches:

- a. Working with target beneficiaries through groups.
- b. Use of community volunteers.
- c. Farmers field schools.
- d. Value Chain Development.
- e. Networking and Outsourcing.
- f. Resource Efficient Agriculture.
- g. Referrals and linkages
- h. Integration within the organization and between organizations.

### **SECTION THREE: ANNUAL WORK PLAN 2020**

The plan of work for year 2020 is based on the commitment already made between ADP Mbozi and development partners to implement interventions that will address particular needs of the target group in the mandate area of ADP Mbozi. In this regard much appreciation is extended to all development partners who have joined hands with ADP Mbozi in bringing about much needed development to the marginalized communities.

The plan is also based on the recommendations made by workshop participants of 2019 Annual Internal Evaluation that was conducted between 05/12 – 06/12/2019 at TACRI Mbimba conference hall. Participants made valuable contributions aiming at improving the work done by ADP Mbozi in ensuing years.

The planned activities are all in line with the focus areas of the organization as stated in the 2017 to 2021 strategic plan and therefore are expected to meet the general objective and strategic objectives as follows;-

### 3.1 GENERAL OBJECTIVE

The main objective of the organization is to contribute towards improving the quality of life of marginalized families in Southern highlands of Tanzania through increased households food and nutrition security, income and livelihood assets.

### 3.2 STRATEGIC OBJECTIVES:

3.2.1: Sustainable food security and nutrition status in communities improved.

3.2.2: Entrepreneurship and market accessibility enhanced.

3.2.3: A healthy and friendly environment in communities promoted.

3.2.4: Governance and management capacity of ADP Mbozi strengthened in order to operate efficiently and effectively.

3.2.5: Enhanced community empowerment in dealing with children, gender, HIV/AIDS, and Good Governance.

3.2.6: Governance and management capacity of ADP Mbozi strengthened in order to operate efficiently and effectively.

### 3.3. CURRENT PROJECTS UNDER EACH STRATEGIC OBJECTIVE

In order to meet the above strategic and main objectives the organization will implement the programmes and projects as tabulated below:-

| No. | Name of project   | Objective  | Where implemented                                    | Funder       |
|-----|---|--|--|--------------|
|     | <b>Strategic Objective 1: Sustainable food security and nutrition status in communities improved.</b>               |  |  |              |
|     |   |  |  |              |
| 1.  | Songwe Integrated Food Security Project (SIFSP)   | Improved food security at household level in 6 wards of Songwe district, Tanzania by December 2024.                  | 12 villages (6 wards) in Songwe district.            | Horizont3000 |
|     | <b>Strategic Objective 2: Entrepreneurship and Market accessibility enhanced.</b>                                   |  |  |              |
| 2   | Promoting Market Led Approach to Improve Profitability of Maize, Beans and Rice Value Chains in Sumbawanga Cluster. | The goal is to improve the livelihoods of 45,000 medium and smallholder women and men farmers in Katavi region while | Mpanda, Msimbo and Mlele districts in Katavi region. | AGRA         |

| No. | Name of project  | Objective  | Where implemented  | Funder                        |
|-----|--|--|--|-------------------------------|
|     |  | reducing shocks and stress through adaptive capacities and market led agricultural production  |  |                               |
| 3.  | Improving Productivity and Structured Markets along the entire Rice Value chain in Momba District.                           | The goal of the project is to increase the competitiveness of Momba rice through enhancement of productivity and quality rice produced by more than 5000rice farmers to enhance income and food security by 2021.                                | In 6 wards of Kamsamba, Chitete, Chirurumo,Mkulwe Ivuna and Msangano.  | GIZ through Kilimo Trust.     |
|     |  |  |  |                               |
|     | <b>Strategic objective 4: Enhanced community empowerment in dealing with children, gender, HIV/AIDS, and Good Governance</b> |  |  |                               |
| 4.  | Comprehensive HIV prevention, care and treatment services to KP and PP in Chunya and Songwe district.                        | To increase comprehensive HIV prevention, care and treatment services to KP and PP in Chunya and Songwe districts so as to reduce the incidence of new HIV transmission as well as increase and retain client in ART services by September 2018. | Chunya and Songwe and Chunya districts.  | Walter Reed Mbeya.            |
| 5.  | Tuwekeze Pamoja  | Girls and boys in Songwe, including the most marginalized, have met their developmental milestones and are ready to learn by age 6.  | 8 wards of Ruanda, Itumpi, Shiwinga, Ipunga, Nyimbili, Wassa, Isandula, Nanyala in Mbozi District Songwe Region. | Save the Children – Tanzania. |
| 6-9 | USAID Kizazi Kipya; USAID New Generation Program   | Improve Health and Social wellbeing people and their families through strategic service  | Mbozi, Momba, Tunduma and Wanging'ombe districts.  | Pact Tanzania.                |

| No. | Name of project     | Objective   | Where implemented                               | Funder           |
|-----|---------------------|---|---|------------------|
|     |                     | delivery and support by March 2017.   |   |                  |
| 10. | USAID Tulonga Afya. | To improve health status of community by transforming socio-cultural norms and supporting the adoption of healthier behaviors | 21 wards(108 villages) in Wangingombe district. | T-MARC Tanzania. |
|     |                     |   |   |                  |

### 3.3.1 Strategic Objective 1: Sustainable food security and nutrition status in communities improved.

#### A. Integrated Food Security Project in Songwe District, Songwe Region

| No<br>.   | ACTIVITY   | ACTIVITY<br>TARGET  | MEANS OF<br>VERIFICATI<br>ON | TIME FRAME |   |   |   |   |   |   |   |   |   |   |   | RESPO<br>NSIBLE |
|---|--|---|------------------------------|------------|---|---|---|---|---|---|---|---|---|---|---|-----------------|
|   |  |   |                              | J          | F | M | A | M | J | J | A | S | O | N | D |                 |
| Result 1: Crops and livestock(Chicken) production techniques improved |  |   |                              |            |   |   |   |   |   |   |   |   |   |   |   |                 |
| 1   | Conduct Agro-ecological system analysis (AESAs)                        | 1,404 farmers to participate in AESA for the selected crops | Field and account reports    |            |   |   |   |   |   |   |   |   |   |   |   | FO              |
| 2.  | Conduct farmers’ field days;24 field days in 12 days                   | 2,808 participants will be reached                          | Field and account reports    |            |   |   |   |   |   |   |   |   |   |   |   | FO              |
| 3   | Conduct exchange visit within the project area;12 inter-village visits | 1404 (421fe) will participate                               | Field and account reports    |            |   |   |   |   |   |   |   |   |   |   |   | FO              |
| 4   | Train farmers on appropriate use of farm technologies-animal weeding   | 684(205fe) will participate                                 | Field and account reports    |            |   |   |   |   |   |   |   |   |   |   |   | FO              |
| 5   | Conduct training on Field and Yield measurement                        | 684(205fe) will participate                                 | Field and account reports    |            |   |   |   |   |   |   |   |   |   |   |   | FO              |
| 6   | Train group representatives on seed multiplication                     | 24 farmers, 2 in each village will be trained               | Field and account            |            |   |   |   |   |   |   |   |   |   |   |   | FO              |

|   |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |        |
|---|---|--|---------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--------|
|   |   |  | reports                   |  |  |  |  |  |  |  |  |  |  |  |  |        |
| 7   | Support new farmers with foundation seeds                                 | 24 farmers, 2 in each village will be supported                      | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  | FO     |
| 8   | Promote model farmers on chicken keeping                                  | 120 farmers will be selected, 10 in each village for the new targets | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  | LFO    |
| 9   | Support farmers with improved cocks                                       | 12 villages will be supported with 120 improved cocks                | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  | LFO    |
| 10  | Conduct exchange visit within the project area                            | 120 model farmers will be involved                                   | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  | LFO    |
| 11  | Conduct activities follow up and monitoring.                              | 12 activity follow up per annum, one activity per month              | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  | FO/PC  |
| <b>Result 2: Crop storage practices &amp; food budgeting improved</b> |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |        |
| 12  | Conduct training of farmers on indigenous and improved storage techniques | 684(205fe)farmers will be trained                                    | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  | FO     |
| 13  | Conduct look and learn visit on crop storage                              | 24 representative farmers to attend in the nearby villages           | Field and account         |  |  |  |  |  |  |  |  |  |  |  |  | FO/LFO |



|    |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |        |
|----|--|--|---------------------------|--|--|--|--|--|--|--|--|--|--|--|--------|
|    |  |  | reports                   |  |  |  |  |  |  |  |  |  |  |  |        |
| 14 | Conduct sensitization meeting on food budgeting  | 684(205fe) to be sensitized                              | Field and account reports |  |  |  |  |  |  |  |  |  |  |  | FO/CDO |
| 15 | Conduct practical training on food budgeting at household level  | 684(205fe) will be trained                               | Field and account reports |  |  |  |  |  |  |  |  |  |  |  | FO/CDO |
| 16 | Conduct training on proper use of food budgeting form  | 684(205fe) will be trained                               | Field and account reports |  |  |  |  |  |  |  |  |  |  |  | FO/CDO |
| 17 | Conduct awareness meetings on gender in relation to food budgeting and on effect of HIV/AIDS in reducing labour productivity | 684 (205 fe) will participate                            | Field and account reports |  |  |  |  |  |  |  |  |  |  |  | FO/CDO |
| 18 | Retraining of farmers selected as input suppliers  | 2 (1fe) farmers from each of 12 villages will be trained | Field and account reports |  |  |  |  |  |  |  |  |  |  |  | FO     |
| 19 | Select 24 farmers to be trained on business development skills   | 24 representative farmers to be trained                  | Field and account reports |  |  |  |  |  |  |  |  |  |  |  | FO     |
| 20 | Orient farmers on the purchase of farm input and seeds   | 24 farmers will be involved                              | Field and account reports |  |  |  |  |  |  |  |  |  |  |  | FO     |

|  |   |   |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |            |
|--|---|---|---------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|------------|
| 21   | Conduct monthly meetings for paraprofessionals  | 12 meetings per annum, one meeting per month            | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | FO         |
| 22   | Support paraprofessionals in activities implementation  | 36 bicycles and training materials will be provided     | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | FO/PC      |
| 23   | Conduct activities follow up and monitoring   | 12 activity follow up per annum, one activity per month | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | FO/LFO/CDO |
| <b>Result 3: Household nutrition focusing on children improved</b> |   |   |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |            |
| 24   | Sensitize target group to be aware on food value of locally available foods in project area and their utilization | 684(205fe) households will be involved                  | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | CDO        |
| 25   | Conduct training on proper management of homestead gardening and fruits trees                                     | 684 (205 fe) households will be trained                 | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | FO         |
| 26   | Conduct training on Soya beans production   | 684 (205 fe) households will be trained                 | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | FO         |
| 27   | Conduct demonstration to targeted community members on soya processing (soya bean and vegetables)                 | 684 (205 fe) household will be involved                 | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | CDO        |

|    |   |   |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |               |
|----|---|---|---------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|---------------|
| 28 | Conduct demonstration on preparation of balance diet and nutritious flour   | 684 (205 fe) household will be involved                       | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | CDO           |
| 29 | Facilitate world food day   | 300 participants will be involved                             | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | FO/CDO        |
| 30 | Facilitate farmers to attend World women day  | 300 participants will be involved                             | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | CDO           |
| 31 | Facilitate farmers to attend World AIDS days  | 300 participants involved.                                    | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | CDO           |
| 32 | Work with schools to empower children as hygiene ambassadors and agents of change within their families and communities | 12 primary schools in the project area to be involved         | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | CDO           |
| 33 | Conduct exposure visit in Nanenane shows in Mbeya   | 6 best farmers in each village will be involved (72 in total) | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | FO/PC/CDO/LFO |
| 34 | Conduct monthly meetings with CEs   | 12 meetings per annum   | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  |  | CDO           |

|    |  |   |                           |  |  |  |  |  |  |  |  |  |  |  |  |                   |
|----|--|---|---------------------------|--|--|--|--|--|--|--|--|--|--|--|--|-------------------|
| 35 | Support community educators in activities implementation                           | 36 bicycles and training materials will be provided | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  | CDO/PC            |
| 36 | Conduct re-training of CEs and PPs in order to improve their skills and techniques | 36 CEs & 36 PPs will be re-trained                  | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  | CDO/FO            |
| 37 | Conduct follow up and activities monitoring  | 12 activity follow up once in every month           | Field and account reports |  |  |  |  |  |  |  |  |  |  |  |  | FO/PC/C<br>DO/LFO |

### 3.3.2 Strategic Objective 2: Entrepreneurship and Market accessibility enhanced.

#### 3.3.2.1: PIATA TIJA Tanzania project.

| S/N | ACTIVITY   | TARGETS  | Year 2020 |   |   |   |   |   |   |   |   |  |
|-----|--|----------|-----------|---|---|---|---|---|---|---|---|--|
|     |  |          | J         | F | M | A | M | J | J | A | S |  |
| F2  | Program monitoring   | 4 Visits |           |   |   |   |   |   |   |   |   |  |
| G   | Objective 1: Increased staple crop productivity for smallholder farmers  |          |           |   |   |   |   |   |   |   |   |  |
| G6  | Develop and scale up innovative approaches for inclusive access to inputs and extension services for smallholder farmers | 114      |           |   |   |   |   |   |   |   |   |  |
| G12 | Build capacities of women famers on agribusiness skills-   | 30       |           |   |   |   |   |   |   |   |   |  |
| G13 | Link women farmers to available affordable financial products and risks management products                              | 30       |           |   |   |   |   |   |   |   |   |  |

|     |   |              |  |  |  |  |  |  |  |  |  |  |
|-----|---|--------------|--|--|--|--|--|--|--|--|--|--|
| G14 | Build leadership capacity for women farmers in order to build confidence in decision making-  | 30           |  |  |  |  |  |  |  |  |  |  |
| H   | <b>Objective 2. Strengthened and expanded access to output markets</b>  |              |  |  |  |  |  |  |  |  |  |  |
| H9  | Organize producers, FOs for the selected crops to participate in trade fairs  | 30 groups    |  |  |  |  |  |  |  |  |  |  |
| I   | <b>Objective 3: Increased capacity of small holder farming households and agricultural systems to better prepare for and adapt to shocks and stresses</b> |              |  |  |  |  |  |  |  |  |  |  |
| I9  | Conduct training to new farmers in producer organizations on business skills, contract negotiation and crop aggregation                                   | 20000        |  |  |  |  |  |  |  |  |  |  |
| I10 | Capacitate FOs to adopt farm budget practices (record keeping; costing, and profitability in focused value chains   | 150          |  |  |  |  |  |  |  |  |  |  |
| J   | <b>CROSSCUTTING ISSUES</b>  |              |  |  |  |  |  |  |  |  |  |  |
|     | <b>Output 11.1.1 Increased youth SHF groups participating in the agricultural value chain and production</b>  |              |  |  |  |  |  |  |  |  |  |  |
| H20 | Support youth enterprises along agriculture value chain-  | 12Youth FOs  |  |  |  |  |  |  |  |  |  |  |
| H21 | Link youth farmers to available affordable financial products and risks management products   | 12 youth FOs |  |  |  |  |  |  |  |  |  |  |

### 3.3.2.2: PSM CONSORTIUM MOMBA PROJECT

| S/N | Activity  | Targets | 2020 |   |   |   |   |   |   |   |   |   |   |   |
|-----|---|---------|------|---|---|---|---|---|---|---|---|---|---|---|
|     |   |         | J    | F | M | A | M | J | J | A | S | O | N | D |
|     | Objective 1. Increased paddy productivity of 5,000 SHFs from 2 MT to 4 MT/ha through adoption of improved practices by March 2021 |         |      |   |   |   |   |   |   |   |   |   |   |   |
| 1.4 | Capacitating 53 already existing farmers group and 57 formulating new farmers group   | 53      |      |   |   |   |   |   |   |   |   |   |   |   |
| 1.5 | Establish and maintain 12 paddy demonstration plots in the project areas  | 6       |      |   |   |   |   |   |   |   |   |   |   |   |
| 1.7 | Training 5000 farmers on SRP practices  | 15      |      |   |   |   |   |   |   |   |   |   |   |   |
| 1.8 | Conduct monitoring and evaluation programs to ensure farmers adhere to SRP practices  | 8       |      |   |   |   |   |   |   |   |   |   |   |   |
| 1.9 | Develop database with 5,000 Smallholder rice  | 1       |      |   |   |   |   |   |   |   |   |   |   |   |
|     | Objective 3: Increased access to finance for SHFs and Pre-financed inputs for 1,500 SHFs by March 2021.                           |         |      |   |   |   |   |   |   |   |   |   |   |   |
| 3.1 | Support 55 farmers group to be registered to the government of Tanzania   | 55      |      |   |   |   |   |   |   |   |   |   |   |   |
| 3.3 | Training 5000 farmers on FBS and financial literacy skills  |         |      |   |   |   |   |   |   |   |   |   |   |   |
| 3.4 | Conduct monitoring and evaluation programs to ensure farmers adhere to FBS and financial literacy skills                          | 2,500   |      |   |   |   |   |   |   |   |   |   |   |   |
| 3.5 | Conduct B2B meeting between FBOs and inputs supplier/financial institutions   | 2       |      |   |   |   |   |   |   |   |   |   |   |   |
| 3.6 | Mobilize 110 group to establish internal saving and loaning scheme  | 110     |      |   |   |   |   |   |   |   |   |   |   |   |
| 3.7 | Support 30FBOs with 1,500 farmers access to pre-financed inputs direct from OBO Investment Co. Ltd by 2021                        | 30      |      |   |   |   |   |   |   |   |   |   |   |   |
| 3.8 | Support 30 FBOs with not less than 1,500 rice farmers access to production loan financing from financial institutions by 2021     | 30      |      |   |   |   |   |   |   |   |   |   |   |   |

### 3.3.3 Strategic objective 4: Enhanced community empowerment in dealing with children, gender, HIV/AIDS, and Good

#### 3.3.3.1: Comprehensive HIV And AIDS Prevention, Care And Treatment Project In Chunya And Songwe Districts.

|     | ACTIVITY  | ACTIVITY TARGET   | MEANS OF VERIFICATION   | Time line |     |     |      |     |     |     |     |      |      |     |     |
|-----|---|---|---|-----------|-----|-----|------|-----|-----|-----|-----|------|------|-----|-----|
|     |   |   |   | 2019      |     |     | 2020 |     |     |     |     |      |      |     |     |
| S/N |   |   |   | Oct       | Nov | Dec | Jan  | Feb | Mar | Apr | May | June | July | Aug | Sep |
|     | HBHC Adult Care and Support   |   |   |           |     |     |      |     |     |     |     |      |      |     |     |
| 1   | Conduct Quarterly site Supportive supervision for mentorship, technical assistance and data verification        | four (4) supportive supervision visit                     | Number of supportive supervision visits conducted and Supervision reports |           |     |     |      |     |     |     |     |      |      |     |     |
|     |   |   |   |           |     |     |      |     |     |     |     |      |      |     |     |
| 2   | Attach 35 Community Based HIV and AIDS Providers (CBHSP's) at high volume facility to strengthen LCM initiative | List and names of 35 CBHS-P attached to High volume sites | Names of CBHS-P attached and names of facility attached                   |           |     |     |      |     |     |     |     |      |      |     |     |

|   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 3 | Conduct Quarterly meeting with 35 CBHSPs and provide monthly allowance for CBHS Providers  | 4 meetings with 35 CBHS-P  | Number of meetings held;<br>Number of participants participate in monthly meetings   |  |  |  |  |  |  |  |  |  |  |  |
| 4 | Conduct every month TB Screening, STI Screening and Nutritional assessment, counseling, and support (NACS) for HIV+ adults.  | 8,700 New enrolled clients screened and linked for diagnosis and treatment | Number of clients screened;<br>Number of suspect clients linked for diagnosis.<br>Number of clients receive treatment/services |  |  |  |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 | Conduct Moonlight HIV testing in around local working place targeting KVP and Men who cannot access HIV and other health related screening services at normal /routine services and/or after working hours | 7,649 People to be counseled and tested HIV                                | Number of clients tested and received their test results.  |  |  |  |  |  |  |  |  |  |  |  |
| 6 | Organize and conduct Outreach focused HTS services in selected hotspots located at   | 7,649 People to be counselled and tested HIV                               | Number of clients tested and received their test results.  |  |  |  |  |  |  |  |  |  |  |  |



|    |   |                                   |   |  |  |  |  |  |  |  |  |  |  |  |  |
|----|---|-----------------------------------|---|--|--|--|--|--|--|--|--|--|--|--|--|
|    | hard to reach areas ( Mining, Boda boda and fishing )includes some MJ communities)                            |                                   |   |  |  |  |  |  |  |  |  |  |  |  |  |
|    |   |                                   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| 7  | Conduct quarterly supportive supervision visits and quarterly data review and cleaning.                       | 12 Supportive supervision to done | Number of supportive supervision visits conducted and Supervision reports |  |  |  |  |  |  |  |  |  |  |  |  |
| 8  | Conduct monthly internal staff meeting for sharing project performance strategies                             | 12 meeting be held                | <b>Number of Meetings conducted and Minutes of meeting</b>                |  |  |  |  |  |  |  |  |  |  |  |  |
| 9  | Conduct monthly internal CQI meeting to identify gaps and develop action plan for program quality performance | Twelve CQI meetings be held       | <b>Number of CQI meetings conducted</b>                                   |  |  |  |  |  |  |  |  |  |  |  |  |
|    |   |                                   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| 10 | Pay salaries and benefits   | 8 Program staff to be payed       | Number of staff paid  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11 | Other Administration Costs  |                                   | Salaries paid per the budget, Purchases and payments made                 |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|-------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|  |  |  | as budgeted |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|-------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

### 3.3.3.2: Tuwekeze Pamoja project Work Plan

| No. | ACTIVITY  | ACTIVITY TARGET | MEANS OF VERIFICATION                                   | TIME FRAME |   |   |   |   |   |   |   |   |   |   |   | RESPONSIBLE |
|-----|---|-----------------|---|------------|---|---|---|---|---|---|---|---|---|---|---|-------------|
|     |   |                 |   | J          | F | M | A | M | J | J | A | S | O | N | D |             |
| 1   | Annual hosting fee  | 1               | Website on run  |            |   |   |   |   |   |   |   |   |   |   |   | IT          |
| 2   | External statutory annual audit contribution  | 1               | Audit report  |            |   |   |   |   |   |   |   |   |   |   |   | HFA         |
| 3   | Information cards and toy boxes) Community materials: toy boxes, handmade toys + replenishment in late Y3 | 8 wards         | Activity report   |            |   |   |   |   |   |   |   |   |   |   |   | PO          |
| 4   | Biannual refresher trainings  | 2 Trainings     | Activity report   |            |   |   |   |   |   |   |   |   |   |   |   | PO          |
| 5   | Purchase and distribute Materials for facilitators  | 70 CFs          | Monthly, quarterly reports<br>List of package materials |            |   |   |   |   |   |   |   |   |   |   |   | PO          |
| 6   | Child safeguarding training to community facilitators and Master trainers                                 | 81              | Training report, monthly and quarterly reports          |            |   |   |   |   |   |   |   |   |   |   |   | PO          |
| 7   | Conduct reflection meetings at ward level with CFs  | 70 CFs          | Financial report<br>List of equipment purchased.        |            |   |   |   |   |   |   |   |   |   |   |   | PO          |
| 8   | Provide Stipend and communication to CF and Master Trainers (Monthly)                                     | 70 CFs          | Field , monthly & quarterly reports                     |            |   |   |   |   |   |   |   |   |   |   |   | PO          |

|    |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |       |
|----|--|--------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|-------|
| 9  | Conduct advocacy Workshop with hamlet leaders in February 2020             | 20 participants    | Training report, monthly, Quarterly reports  |  |  |  |  |  |  |  |  |  |  |  |  | PO    |
| 10 | Support MTAKUWA committee at district level (2x1 x 30 people per district) | 24 people          | Training report, monthly, Quarterly reports. |  |  |  |  |  |  |  |  |  |  |  |  | PC    |
| 11 | Conduct gender sensitive programming training                              |                    | Training report, monthly, Quarterly reports. |  |  |  |  |  |  |  |  |  |  |  |  | PO    |
| 12 | Conduct fund raising training  | 12 staff           | Financial report                             |  |  |  |  |  |  |  |  |  |  |  |  | ED    |
| 13 | Conduct ADP Mbozi board members and staff training on child safeguarding.  | 40 Board and staff | Minutes, monthly reports                     |  |  |  |  |  |  |  |  |  |  |  |  | ED    |
| 14 | Participation in conferences (bi-annual AIAL meeting)                      | 4 staff            | Activity report                              |  |  |  |  |  |  |  |  |  |  |  |  | PC    |
| 15 | Participation relevant meetings/workshops                                  | 7 staff            | Activity report                              |  |  |  |  |  |  |  |  |  |  |  |  | PC    |
| 16 | Conduct Programme supportive supervision                                   | 12 months          | Activity report                              |  |  |  |  |  |  |  |  |  |  |  |  | M&E   |
| 17 | Data entry into the system (DCIRIS) Per day (+One Day orientation)         |                    | Activity report                              |  |  |  |  |  |  |  |  |  |  |  |  | M&E   |
| 18 | Post-testing- enumerators  |                    | Activity report                              |  |  |  |  |  |  |  |  |  |  |  |  | M & E |

| No<br>. | ACTIVITY | ACTIVITY<br>TARGET | MEANS OF<br>VERIFICATION | TIME FRAME | RESPO<br>NSIBLE |
|---------|----------|--------------------|--------------------------|------------|-----------------|
|---------|----------|--------------------|--------------------------|------------|-----------------|

**3.3.3.3: USAID Kizazi Kipya annual work plan-Momba District.**

|   |  |              |              | J | F | M | A | M | J | J | A | S | O | N | D |                |
|---|--|--------------|--------------|---|---|---|---|---|---|---|---|---|---|---|---|----------------|
| 1 | ESLO will capacitate LVs to monitor progress of groups in providing OVC social and CRM funds   | 7LVs         | Field report | x | x | x | x | x | x | x | x | x | x | x | x | ESLO, CDO      |
| 2 | ESLO will monitor sampled groups for growth and utilization of funds for supporting OVC in their HHs   | 13 WY groups | Field report | x | x | x | x | x | x | x | x | X | x | x | X | ESLO, LVs      |
| 3 | ESLO in collaboration with LVs will conduct supportive supervision to assess readiness of WORTH YETU groups and enter the data into the system | 55 WY groups | Field report | x | x | x | x | x | x | x | x | x | x | x | x | ESLO, LVs      |
| 4 | ESLO in collaboration with LVs and ward CDO will supervise WORTH YETU groups to the end of 2nd cycles  | 20 WY groups | Field report |   |   | x |   |   | x |   |   | x |   |   | x | ESLO, CDO, LVs |
| 5 | ESLO will conduct a one-day workshop on fee for service to all LVs in the Council  | 7 LVs        | Field report | x |   |   |   |   |   |   |   |   |   |   |   | ESLO           |

|    |   |              |                |   |   |   |   |   |   |   |   |   |   |   |   |  |
|----|---|--------------|----------------|---|---|---|---|---|---|---|---|---|---|---|---|--|
| 6  | ESLO will conduct a certification panel workshop  | 2LVs         | Field report   |   | x |   |   |   |   |   |   |   |   |   |   | ESLO   |
| 7  | ESLO in collaboration with DCDO will run a focused group discussion and portfolio review  | 20 WY groups | Meeting report |   | x | x |   |   |   |   |   |   |   |   |   | ESLO, DCDO                                   |
| 8  | ESLO in collaboration with staff from the government will participate in Launch event of LVs who will be independent and ready to be supported by assessed and graduated groups | 4 LVs        | Event report   | x | x | x | x | x | x | x | x | x | x | x | x | ESLO, LV and DSWO, DCDO, DNuO, DRCHC O, DACC |
| 9  | ESLO in collaboration with government staff will conduct a networking workshop at ward level as support platforms   | 4 LVs        | Field report   | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMC & CMO                               |
| 10 | ESLO will continue providing a monthly supportive supervision on the implementation of Money Management by visiting LVs at ward level and sampled groups                        | 7 LVs        | Field report   | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMO & CMC                               |

|    |  |          |              |   |   |   |   |   |   |   |   |   |   |   |   |                |
|----|--|----------|--------------|---|---|---|---|---|---|---|---|---|---|---|---|----------------|
| 11 | HHOs will invite CBHSPs in one of the monthly meetings from nearby health facilities to share solutions of the challenges encountered by CCWs in provision of HIV services   | 4 CBHSPs | Field report |   |   | x |   |   | x |   |   | x |   |   | x | HHO            |
| 12 | HHOs and or CMOs will coordinate and collaborate with different experts from the council to provide orientation to CCWs during monthly meetings on different related services including NACS, MUAC assessment and HIV counselling          | 58 CCW   | Field report | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMO       |
| 13 | CCWs/LCWs will continue to conduct nutritional assessments using MUAC tapes, provide nutrition counseling, and provide referrals and linkages to health facilities (including HTS), and other nutrition support for malnourished children. | 58 CCWs  | Field report | x | x | x | x | x | x | x | x | x | x | X | X | HHO, CMO & CMC |

|    |   |                |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
|----|---|----------------|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| 14 | HHOs will continue sharing the importance having nutritional supplemental food available in every monthly report and advocate for budgeting in CCHPs and through other stakeholders | 58 CCWs        | Field report |   |   |   |   |   |   |   |   |   |   |   |   |   |   | HHO & CMO |
| 15 | CMC and CMO will support CCWs/LCWs to discuss positive parenting messages during case management case visits  | 58 CCWs        | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | x | CMO, CMC  |
| 16 | CMC and CMO will continue to monitor how CCWs are delivering positive parenting messages and build their capacities to ensure high quality services provided                        | 58 CCWs        | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | X | CMO, CMC  |
| 17 | CMC and CMO will identify OVC-caregiver who performs well to provide testimonies on how interventions have changed his behavior, attitude, norms and customs toward children        | OVC Caregivers | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | x | CMO & CMC |



|    |   |              |                        |   |   |   |   |   |   |   |   |   |   |   |   |                 |
|----|---|--------------|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|
| 18 | CMO, CMC and ESLO will facilitate watching of positive parenting videos followed by Dialogue to members of WORTH YETU groups who are both care givers and non-care givers | 38 WY groups | Field report           | x | x | x | x | x | x | x | x | x | x | x | x | CMO, ESLO & CMC |
| 19 | HIV integration advisor will conduct training to HHO and CMO on 90-90-90 at Cluster level (Two cluster may be combined)   | 2 Staff      | Training report        |   |   |   | x |   |   |   |   |   |   |   |   | HHO, CMO        |
| 20 | Trained HHO and CMO above with support from TSC-BDRL will cascade the capacity building on 90-90-90 to other ADP, staff including ESLO, CMC, M&E and CMO                  | 4 Staff      | Training report        |   |   |   |   | x |   |   |   |   |   |   |   | HHO, CMO        |
| 21 | HHO, CMO and CMC with support from TSC-BDRL and CM will conduct a two-day ward level orientation on Pediatric and Adolescent HIV to CCWs/LCWs                             | 58 CCWs      | Field Report           |   |   | x | x |   |   |   |   |   |   |   |   | HHO & CMO       |
| 22 | CMO/CMC will invite IP staff or LGA staff for in-service training during  | 58 CCWs      | Monthly meeting report | x | x | x | x | x | x | x | x | x | x | x | x | CMO & CMC       |

|    |   |          |                 |   |   |   |   |   |   |   |   |   |   |   |   |                      |
|----|---|----------|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|
| 23 | monthly meetings  |          |                 |   |   |   |   |   |   |   |   |   |   |   |   |                      |
|    | HHO, CMO, CMC in close collaboration with TSC-BDRL will conduct a refresher training on a revised HIV risk assessment and adherence during monthly meetings                           | 3 Staff  | Training report | x | x | x | x | x | x | x | x | x | x | x | x | CMC, CMO, HHO        |
|    | CCWs/LCWs with support from HHOs will conduct HIV Risk Assessment for newly enrolled beneficiaries and re administer the tool to all OVC with undisclosed HIV status in FY20          | 58 CCWs  | Field report    | x |   |   |   |   |   |   |   |   |   |   |   | CMC, CMO, HHO & M&EO |
|    | HHO to collaborate with LGA and other IPs to access HIV services including EID, PMTCT, ART initiation, HIV monitoring (HVL and CD4), disclosure and linkage to appropriate services   | 58 CCWs  | Field report    | x | x | x | x | x | x | x | x | x | x | x | X | CMC, CMO, HHO & M&EO |
|    | CCWs/LCWs with support from HHO during routine case management will provide HIV service package to CLHIV aiming at same day initiation of ART, daily ART uptake, adherence to ART and | 61 CLHIV | Field report    | x | x | x | x | x | x | x | x | x | x | x | x | CMO, HHO & CMC       |

|    |  |                       |              |   |   |   |   |   |   |   |   |   |   |   |   |  |                |
|----|--|-----------------------|--------------|---|---|---|---|---|---|---|---|---|---|---|---|--|----------------|
|    | viral suppression  |                       |              |   |   |   |   |   |   |   |   |   |   |   |   |  |                |
| 26 | Effective supportive supervision will be provided from the level of the HIV Integration Advisor down to CCWs/LCWs to ensure timely and appropriate linkages to HIV services                | 58 CCWS               | Field report | x | x | x | x | x | x | x | x | x | x | x | x |  | HHO, CMO & CMC |
| 27 | CCWs/LCWs with support from HHO will do a mapping of age appropriate CTCs for linking CLHIV for psychosocial support. CCWs ensure that their OVC who are HIV positive attend these clinics | 7 CLHIV               | Field report | x | x | x | x | x | x | x | x | x | x | x | x |  | HHO, CMO & CMC |
| 28 | LCWs/CCWs will issue escorted referrals to OVC and caregivers who require Health facility support to disclose their HIV status   | 61 Escorted referrals | Field report | x | x | x | x | x | x | x | x | x | x | x | x |  | HHO, CMC & CMO |
| 29 | CCWs/LCWs with support from CMC and upon informed consent will plan for a clinical home visit by a trained HCW to support HIV status disclosure at family level                            | 16 Home visits        | Field report | x | x | x | x | x | x | x | x | x | x | x | x |  | HHO, CMC & CMO |

|    |   |                   |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |
|----|---|-------------------|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|
| 30 | CMO and CMCs will organize CCW orientation on Project activities, Graduation, Enrollment, NICM sustainability at ward level   | 58 CCWs           | Field report    |   |   | x | x |   |   |   |   |   |   |   |   |   | CMC, CMO        |
| 31 | TSC-CM will organize and invite CM who will travel to cluster level to attend a 2 days refresher training on project deliverables   | 1 Staff           | Training report |   |   |   | x |   |   |   |   |   |   |   |   |   | CMC             |
| 32 | Project Manager will meet and make a close follow up with DED/DMO/DSWO to ensure KK NICM activities are reflected in Plan-Rep   |                   | Meeting minutes |   | x |   |   |   |   |   |   |   |   |   |   |   | PM &M&EO        |
| 33 | ADP, staff will conduct in-service orientation to CCWs on the new care plan application through USSD during monthly meetings.   | 785 OVC care plan | Field report    | x | x | x | x | x | x | x | x | x | x | x | x | x | M&EO, CMC & CMO |
| 34 | TSCs Case Management, cluster M&E Coordinator, ADP, CMO and CMC during supportive supervision will provide technical support to CCWs to ensure all new beneficiaries have care plan and update ones for existing beneficiaries on quarterly basis | 785 OVC care plan | Field report    | x | x | x | x | x | x | x | x | x | x | x | x | X | M&EO, CMC & CMO |

|    |   |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |
|----|---|---|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|
| 35 | CMCs and CMO in collaboration with CCWs will identify eligible households who meet criteria to get Improved Community Health Fund (ICHF)            | 96 OVC households receive ICHF/TIKA cards.                          | Field report |   |   |   |   |   |   |   |   |   |   |   |   |   |   | CMO, CMC, HHO      |
| 36 | CCWs will issue referrals and closely follow up their completion  | 347 referrals issued<br>330 referrals completed                     | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMC           |
| 37 | CMO will work with CMC to establish schedule for care plans monitoring during their normal supportive supervision                                   | 58 CCWs   | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | x | CMO, CMC           |
| 38 | CCW will use HHs visits conducted to review and update care plan developed in the previous visit  | 785 care plans reviewed and updated on quarterly basis              | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | x | CMO, CMC           |
| 39 | CMC will work with CCW to identify households which met graduation benchmarks and closed their files and their information submitted to the system. | 30 households identified for graduation and their cases get closed. | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | x | M&EO, CMO, CMC     |
| 40 | On quarterly basis DSWO and ASWO jointly will conduct the supportive supervision with CSO staff to learn KK implementation                          |   | Field report |   |   | x |   |   | x |   |   | x |   |   |   | x |   | PM, M&EO, CMO, CMC |
| 41 | CMO and CMC will roll out CCWs monthly meetings and gather relevant   | 58 CCWs   | Field report | x | x | x | x | x | x | x | x | x | x | x | X | x |   | CMC & CMO          |

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|    | information/feedback for project adjustment.  |         |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |                     |
| 42 | ADP, staff will explain the retention and motivation strategy to LCWs/CCWs during CCWs monthly meetings and implement the strategy.                                   | 58 CCWs | Field report    | x | x | x | x | x | x | x | x | x | x | x | X | x | CMC & CMO           |
| 43 | ADP, staff will conduct a meeting with DSWO, ASWO to plan when the transfer of beneficiaries' files, maintain confidentiality, accessible from CSO to LGA.            |         | Meeting minutes |   |   |   |   | x | x | x |   |   |   |   |   |   | PM, M&EO, CMO & CMC |
| 44 | ADP, staff will travel to ward level where KK project is implemented to assess the space for beneficiaries' files storage.  |         | Field report    |   |   |   |   | x | x | x |   |   |   |   |   |   | PM, M&EO, CMO, CMC  |
| 45 | ADP, staff and LGA team at ward level will conduct a joint meeting to compile the work done on space capacity assessment and submit to DED for approval.              |         | Field report    |   |   |   |   | x | x | x |   |   |   |   |   |   | PM, M&EO & CMO, CMC |
| 46 | During supportive visit cluster team will organize 3-4 hours on job orientation training to CSO staff and LGA staff at ward level readiness assessment, SOP roles and |         | Field report    |   |   |   |   | x | x | x |   |   |   |   |   |   | PM, M&EO & CMO, CMC |

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|    | responsibilities of data and file management   |  |              |   |   |   |   |   |   |   |   |   |   |   |   |                     |
| 47 | CMCs and CMOs will document all files that need to be transitioned to ward level when space is available and strong cupboard.  |  | Field report |   |   |   |   |   | x | x |   |   |   |   |   | PM, M&EO & CMO, CMC |
| 48 | During household visits CCWs will assess OVC with HRAQM to identify CLHIV who are not on ART and escort them to nearby CTCs on the same day or within seven days                             | 61 identified CLHIV who are not on ART are escorted for ART initiation | Field report | x | x | x | x | x | x | x | x | x | x | X | x | HHO                 |
| 49 | CMC will deploy 41 clinical home visits to be done by pediatric nurse or and 1 social welfare officer visit when CLHIV who are denied ART initiation or when signs of neglect are identified | 16 home visits conducted by pediatric nurse                            | Field report | x | x | x | x | x | x | x | x | x | x | x | x | CMO, CMC & HHO      |
| 50 | Monitoring of ART daily uptake for all CLHIV who are on ART: CCWs/LCWs will provide escorted referrals to CTC for adherence counselling to all CLHIV with                                    | 155 CLHIV with poor ART adherence                                      | Field report | x | x | x | x | x | x | x | x | x | x | x | x | CMO, CMC & HHO      |

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|    | poor ART adherence  |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |                |
| 51 | Monitor clinic attendance for all CLHIV who are on ART: CCWs/LCWs will track and escort back to care CLHIV who have missed appointments or are LTFUs.   |   | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | CMO, CMC & HHO |
| 52 | Support long term adherence: For CLHIVs with high HVL, HHO will liaise with the clinic and clinical IP to support CCWs to attend the 'Enhanced Adherence and Counselling Sessions' CTCs provide together with caregiver and OVC | 36 caregivers and CLHIV attended the sessions.    | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMO, CMC  |
| 53 | HHO will support CCWs/LCWs to invite PLHIV peer for visiting HHs to meet age appropriate for discussion, experience sharing and psychological support   | 14 peers visiting HHs once in 12 months           | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMO, CMC  |
| 54 | CCWs/LCWs with support from ELISO, M&E/HHO follow up and link CLHIV who attended Waves one and  | 9 OVC who attended Wave one and two of Vocational | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | CMO, HHO, M&EO |



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|    | two of Vocational training to WORTH YETU support groups for enabling them to stable in Food and transport support  | training will be followed up and linked to WORTH YETU support groups |                     |   |   |   |   |   |   |   |   |   |   |   |   |  |          |
| 55 | HHO will be supported with TSC-BDRL to conduct quarterly CHMT meetings to discuss challenges pertaining to MISSAP, LTFUs and include them in the tracking by CCWs from the project                         |  | CHMT meeting report |   |   | x |   |   | x |   |   | x |   |   | x |  | HHO      |
| 56 | HHO will visit high priority CTCs in their routine supportive supervision to insinuate challenges faced by K2 beneficiaries enrolled in the program including MISSAP, LTFUs and those with high viral load | 4 high volume CTCs   | Field report        |   |   |   |   |   | x |   |   |   |   |   | x |  | HHO      |
| 57 | CMO/CMC, CCWs will refer and follow up on identified cases of violence, abuse, neglect and exploitation  |  | Field report        | x | x | x | x | x | x | x | x | x | x | x | x |  | CMO, CMC |
| 58 | With guidance and support from CMO/CMO, CCWs will continue following up  | 251 child abuse cases referred to protection                         |                     | x | x | x | x | x | x | x | x | x | x | x | x |  | CMC, CMO |

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|    | VAC/GBV referrals with protection committees, Police Gender and Children Desk, one-stop-centers (OSC), ASWO, and to DSWOs                           | committees, Police Gender and Children Desk, OSC, ASWO, and to DSWO after abuse |                            |   |   |   |   |   |   |  |  |  |  |  |  |                       |
| 58 | ADP will participate in the commemoration of the day of the African child   |   | Event participation report |   |   |   |   |   | x |  |  |  |  |  |  | CMO, CMC              |
| 59 | ESLO will orient LVs on gender norms to discuss to CG VSLGS   | 542 caregivers in Worth Yetu groups   | Training report            | x | x | x | x | x | x |  |  |  |  |  |  | ESLO, CMO             |
| 60 | M&E and CMO will facilitate a two days training to 23 service providers (HCWs, ASWO, NuO, Legal officer) on USSD referral system                    | 23 Service providers  | Training report            |   |   | x |   |   |   |  |  |  |  |  |  | M&EO, CMO             |
| 61 | Cluster team will facilitate a five days training of beneficiaries' registration native android App to CSO M&E, Data Clerk and CMO at cluster level | 3 Staff   | Training report            |   |   | x |   |   |   |  |  |  |  |  |  | M&EO, CMO, Data clerk |
| 62 | Cluster team will facilitate a two days summit meeting to review data and discuss challenges related to Data  | 3 Staff   | Meeting report             |   |   |   |   |   | x |  |  |  |  |  |  | M&EO, CMO, PM         |

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| 63 | Council level quarterly data review meeting |  | Meeting report |  |  | x |  |  | x |  |  | x |  |  | x | M&EO, CMO, HHO, ESLO |
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**3.3.3.4: USAID Kizazi Kipya annual work plan-Tunduma District.**

| No. | ACTIVITY  | ACTIVITY TARGET   | MEANS OF VERIFICATION   | TIME FRAME |   |   |   |   |   |   |   |   |   |   |   | RESPONSIBLE      |
|-----|---|---|---|------------|---|---|---|---|---|---|---|---|---|---|---|------------------|
|     |   |   |   | J          | F | M | A | M | J | J | A | S | O | N | D |                  |
| 1   | ADP Mbozi Economic Strengthening and Livelihoods Officers (ESLOs) will set targets and monitor progress of LVs in ensuring groups have OVC, Social and CRM funds. | 27 WORTH YETU Groups with CRMCs, OVCs and Social funds. | Field reports and monthly reports showing information on OVC funds, Social and CRM funds        |            |   |   |   |   |   |   |   |   |   |   |   | ESLO & M&EO      |
| 2   | ADP Mbozi ESLO will visit sampled groups to monitor the growth and utilization of funds for supporting OVC and their HH.  | 10 groups sampled by ESLO                               | Field reports and monthly reports detailed OVC and HH supported with OVC funds.                 |            |   |   |   |   |   |   |   |   |   |   |   | ESLO             |
| 3   | ADP Mbozi ESLO work closely with M&E Officer to support LVs to upload data on HH that received CHF/TIKA cards and whether they are continuing to use them.        | 40 HH with Improved CHF/TIKA cards                      | Field reports, checklists and monthly reports showing HH supported with Improved CHF/TIKA cards | J          | F | M | A | M | J | J | A | S | O | N | D | ESLO, HHO & M&EO |

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| 4 | ADP -Mbozi will Fill all WORTH Yetu groups' LV supportive supervision and ESLO readiness tools assessed and ensure readiness tools data are entered Comm Care | 27 Worth Yetu groups filled with readiness tool and supportive supervision check list. | Field reports and monthly reports that shows group readiness information |   |   |   |   |   |   |   |   |   |   |   |   |  | ESLO |
| 5 | ADP -Mbozi will conduct and supervise quarterly routine supportive supervision up to end of 2nd cycle of every WORTH Yetu groups.                             | 27 Groups supervised up to 2 <sup>nd</sup> cycle.                                      | Field reports and monthly reports  | J | F | M | A | M | J | J | A | S | O | N | D |  | ELSO |
| 6 | ADP Mbozi through ESLO will conduct a 2-day certification panel workshop.   | 10 LV received certification panel workshop  | Training reports and monthly reports                                     |   |   |   |   |   |   |   |   |   |   |   |   |  | ESLO |
| 7 | ADP Mbozi will conduct field work visits to run Focus Group Discussions and Portfolio Review.   | 27 Worth Yetu groups visited.  | Field reports and monthly reports  | J | F | M | A | M | J | J | A | S | O | N | D |  | ESLO |
| 8 | ADP Mbozi will conduct launch events for independent LVs.   | Certified LVs officially introduced as independent LVs and ready to operate            | Event report and monthly report  | J | F | M | A | M | J | J | A | S | O | N | D |  | ESLO |

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|    |  | independently.   |                                      |   |   |   |   |   |   |   |   |   |   |   |   |  |      |
| 9  | ADP Mbozi with support from TSC-ES will conduct networking workshops as a community level support platform.  | Networking workshops for certified Independent LVs (ILV) conducted at community level. | Training report and monthly reports. |   |   |   |   |   |   |   |   |   |   |   |   |  | ESLO |
| 10 | ADP Mbozi ESLOs will provide continuous supportive supervision on the implementation of the Money Management Curriculum for remaining 13 sessions where it was cascaded by end of FY19 and full 16 sessions in new DREAMS Councils (Q1, Q2, Q3, and Q4). | 29 WORTH YETU groups supervised directly or through LVs                                | Field reports and monthly reports    | J | F | M | A | M | J | J | A | S | O | N | D |  | ESLO |
| 11 | ADP -Mbozi through LVs will roll out Selling Made Simple to newly established WORTH Yetu groups to build members skills in start and/or expand micro-businesses (Q2, Q3, and Q4).  | 5 WORTH YETU groups  | Field report and mothly reports      | J | F | M | A | M | J | J | A | S | O | N | D |  | ESLO |

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| 12 | ADP mbozi will conduct LV meetings into monthly basis   | 12 Meetings  | Meeting minutes and monthly reports             |   |   |   |   |   |   |   |   |   |   |   |   | ESLO, CMC, CMO HHO&M &E O     |
| 13 | ADP Mbozi will continue sharing reports, best practices and challenges for CCWs supporting health facilities and CTCs on beneficiary linkages to health and HIV services and seek support through already existing platforms.               | 4 quarter reports shared to LGAs   | Quarter reports, dispatch books and check lists | J | F | M | A | M | J | J | A | S | O | N | D | PM, M&E O,HHO, CMO,C MC &ESLO |
| 14 | ADP Mbozi HHOs will use one of their CCW monthly meetings to invite CBHS supervisors from nearby health facilities to share experiences and identify challenges and solutions regarding coordination of HIV services among CCWs and CBHSPs. | 15 CBHS Supervisor, 64 CCWs  | Meeting minutes and monthly reports.            |   |   |   |   |   |   |   |   |   |   |   |   | HHO, CMO & CMC                |
| 15 | ADP Mbozi CCWs/LCWs, in coordination with community health workers (CHWs) and CBHS providers, will ensure that OVC caregivers receive information on health, HIV, and locally available services (CHWs, MNCH workers,                       | 64 CCWs will collaborate with CBHSPs, HCWs and MNCH workers in sorting out | Field reports and monthly reports               | J | F | M | A | M | J | J | A | S | O | N | D | HHO,CM O,CMC                  |

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|    | or CBHSPs) including working together to track CLHIV who are LTFUs and missed appointments.  | HIV related Challenges      |  |   |   |   |   |   |   |   |   |   |   |   |   |  |           |
| 16 | <p>ADP Mbozi staff will monitor how trained L/CCWs continue to support caregivers of children age 0-3 years on their playing and communicating behavior with their child and on the quality of the caregiver-child interaction.</p> <p>Monthly reports from HHO will include information on supportive supervision and monitoring caregivers of children aged 0-3 years in their communication behavior to assess the quality of caregiver-Child-Interaction</p> | 12 monthly reports from HHO | Field reports and monthly reports  | J | F | M | A | M | J | J | A | S | O | N | D |  | HHO       |
| 17 | DSWOs or ASWOs, ADP Mbozi CMOs, will participate on quarterly basis, accompany the CCD Facilitators (LCWs and HCWs) during their supportive supervision visits to offer mentoring support.   | 4 visits with 3 LGAs        | Quarterly supportive supervision reports on CCD activities which includes HCWs, ASWO and DSWO. | J | F | M | A | M | J | J | A | S | O | N | D |  | CMC & CMO |



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| 18 | ADP Mbozi CCWs with support from CMCs will continue to work with government officers to ensure under age 3 children receive appropriate early stimulation services.   | # of children under 3 age                     | Monthly report from CMC with information on stimulation services for children aged 3 years. | J | F | M | A | M | J | J | A | S | O | N |   | CMC & CMO      |
| 19 | ADP Mbozi HHOs, in collaboration with CMOs, will organize MNCH workers or other locally available nutrition experts to provide in-service training for CCWs/LCWs on nutrition counseling, including NACS, the use of MUAC for nutrition assessment, and referral pathways for malnourished children during CCWs monthly meetings. | 2 program staff and 64 L/CCWs trained on NACS | Meeting minutes, Training reports and monthly reports                                       | J | F | M | A | M | J | J | A | S | O | N | D | CMO, HHO & CMC |
| 20 | ADP Mbozi CCWs/LCWs will continue to conduct nutritional assessments using MUAC tapes, provide nutrition counseling, and provide referrals and linkages to health facilities (including HTS), and other nutrition support for malnourished children.  | 1636 beneficiaries assessed with MUAC tapes   | Field reports and monthly reports   |   |   |   |   |   |   |   |   |   |   |   |   | CMO, HHO & CMC |

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| 21 | CCWs will continue to use CCW job aid which stipulates items of focus NACS support during each case management visit.  | 64 CCWs  | Field Report and monthly reports               | J | F | M | A | M | J | J | A | S | O | N | D | CMC, CMO, HHO & M&E O |
| 22 | Given the current shortages of nutritional supplemental and therapeutic food, CSOs' HHOs, with support from TSCs-BDRL, will continue to advocate to the government, private sector, and other external stakeholders for the procurement of such food for malnourished children from CHMTs. | # of supplementary and therapeutic food procured.        | Field reports, check lists and monthly reports |   |   |   |   |   |   |   |   |   |   |   |   | HHO,CM C & CMO        |
| 23 | ADP -Mbozi by using CCWs/LCWs will continue delivering positive parenting messages at the household level during case management home visits to build caregivers skills on positive parenting.   | 360 OVC caregivers received positive parenting messages. | Field reports and monthly reports              | J | F | M | A | M | J | J | A | S | O | N | D | CMO ,ESLO, HHO, ,CMC  |
| 24 | ADP -Mbozi Case Management Officers and Case Management Coordinators will monitor how CCWs/LCWs are delivering positive parenting messages to OVC and provide mentorship and coaching to ensure high quality   | 64 CCWs monitored  | Field report and monthly reports               |   |   |   |   |   |   |   |   |   |   |   |   | CMC,C MO              |

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|    | service is delivered.  |   |  |   |   |   |   |   |   |   |   |   |   |   |   |  |                     |
| 25 | ADP Mbozi CMCs in collaboration with CCWs/LCWs will draw best practices from OVC caregivers for evidence-based results and share with the wider community. This will be done by identifying caregivers who gives testimonies on how the intervention has changed their behavior, attitude, norms and customs toward children | Identified OVC-caregiver testimony on best practices based on set criteria. | Field report and monthly reports                                     |   |   |   |   |   |   |   |   |   |   |   |   |  | CMC,C MO            |
| 26 | TSCs, ADP -Mbozi Case Management Officers and Case Management Coordinators, and SWOs will conduct supportive supervision visits with CCWs/LCWs (links to 3.0.1). This will include supporting the delivery of positive parenting messages.   | Number of Supportive supervision visit conducted by CMO and CMC.            | Supportive Supervision check list, field reports and monthly reports | J | F | M | A | M | J | J | A | S | O | N | D |  | CMC, CMO            |
| 27 | Using tablets, WORTH Yetu groups' members (who are both OVC caregivers and non-OVC caregivers) will watch parenting videos that will be followed by positive parenting dialogues facilitated by the LVs as part of WORTH Yetu groups meeting.  | 27 WORTH Yetu groups watched positive parenting videos.                     | Filed report and monthly reports                                     |   |   |   |   |   |   |   |   |   |   |   |   |  | CMC,C MO,ESL O, HHO |

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| 28 | HIV Integration Advisor will conduct a 90-90-90 capacity building and project guides training to cluster staff and some CSO staff (HHO and CMO)   | 2 staff  | Training report                     | J | F | M | A | M | J | J | A | S | O | N | D | HHO, CMO          |
|    | ADP -Mbozi HHO and CMO with support for the TSC-BDRL and TSC-CM will conduct a 90-90-90 capacity building and project guides training to remaining CSO staff (ESLO, CMC and M&E, CMO, officers) | 4 program staff capacitated on HIV control epidemic (90-90-90) | Training report                     |   |   |   |   |   |   |   |   |   |   |   |   | HHO & CMO         |
| 29 | EGPAF will conduct a council level 5days training on the Pediatric and Adolescent package to LCWs/CCWs covering 75% of CCWs in the 18 councils.   | 64 CCW trained at council level                                | Training report                     |   |   |   |   |   |   |   |   |   |   |   |   | PM & CMO          |
| 30 | EGPAF will conduct a ward level 5days training on the Pediatric and Adolescent package to LCWs/CCWs covering 25% of CCWs in the 18 councils   | 64 CCWs trained at ward level                                  | Training report                     | J | F | M | A | M | J | J | A | S | O | N | D | CMO & PM          |
| 31 | ADP Mbozi CMO and CMC will deliver in-service training during CCWs/LCWs' monthly meetings   | 64 CCWs  | Meeting minutes and monthly reports |   |   |   |   |   |   |   |   |   |   |   |   | CMC,C MO          |
| 32 | Provide supportive supervision and coaching with potential household visits   | # of households visited by program staff                       | Field reports and monthly reports   |   |   |   |   |   |   |   |   |   |   |   |   | CMC,C MO, HHO     |
| 33 | ADP -Mbozi HHOs, CMOs, and CMCs with support from TSC-BDRL will conduct a refresher in-   | 64 CCWs refreshed on revised HIV                               |                                     | J | F | M | A | M | J | J | A | S | O | N | D | HHO,CM C,CMO, HHO |

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| 34 | service training on the revised HIV Risk, Services and Adherence Assessment to CCWs/LCWs, during monthly meetings before the administration of the tool for new, un-assessed, and undisclosed beneficiaries.  | Risk Assessment tool  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |                |
|    | ADP Mbozi CCWs/LCWs will conduct HIV Risk, Services and Adherence Assessment once for newly enrolled beneficiaries and re-administer the tool to all OVC with undisclosed HIV status in FY20 and provide referrals and linkages as needed.  | 27 CCWs reach out to all un-assessed beneficiaries and re-administer the tool to all undisclosed and provide referrals and linkages needed. | Field report, check lists and monthly reports      | J | F | M | A | M | J | J | A | S | O | N | D |  | HHO, CMC, CMO  |
|    | ADP -Mbozi HHOs will work with DMOs/DACCs, CTC in-charges, and ART implementing partners (IPs) in their respective councils to support OVC to access HIV services including HIV testing, EID, prevention of mother-to-child transmission of HIV (PMTCT), ART initiation, ART adherence, disclosure support, OIs treatment, CD4 testing, VL testing, support groups and other age appropriate services – using pediatric and | # of CLHIV received HIV service package and number of CTC reports submitted to HHO.   | Field report, CTC check lists and monthly reports. | J | F | M | A | M | J | J | A | S | O | N | D |  | HHO,CM C & CMO |
| 35 |   |   |  |   |   |   |   |   |   |   |   |   |   |   |   |  |                |

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|    | adolescents' friendly services mapped by EGPAF in FY18.   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |                |
| 36 | ADP-Mbozi will conduct effective supportive supervision will be provided from the level of the HIV Integration Advisor down to CCWs/LCWs to ensure timely and appropriate linkages to HIV services. | Number of CTC checklist report shared to TSCL-BDRL then to HIV Integration advisor                           | CTC check lists and monthly reports.          | J | F | M | A | M | J | J | A | S | O | N | D |  | HHO            |
| 37 | ADP -Mbozi through CCWs/LCWs will link OVC with available age appropriate clinics and support groups for further psychosocial support.  | Number of CLHIV linked to age appropriate CTCs for psychological support and reports shared on monthly bases | Field report and monthly reports              |   |   |   |   |   |   |   |   |   |   |   |   |  | CMC, HHO & CMO |
| 38 | ADP -Mbozi CCWs/LCWs will issue escorted referral for OVC and their caregivers who require Health facility support on disclosure.   | 11 escorted referrals  | Field report, check lists and monthly reports |   |   |   |   |   |   |   |   |   |   |   |   |  | CMC, HHO       |
| 39 | Upon informed consent from the caregiver, CCWs/LCWs with support from CMCs will plan a clinical home visit by a trained nurse from a nearby health facility   | Number of home visits conducted, and reports shared to CMO by  | Field reports and monthly reports             | J | F | M | A | M | J | J | A | S | O | N | D |  | CMC, HHO & CMO |

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|    | to support families on disclosure whenever required.   | CCWs/LCWs                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |  |                           |
| 40 | Newly CCWs to attend a three days project SOP Orientation.   | # of newly recruited CCWs                       | Training report   |   |   |   |   |   |   |   |   |   |   |   |   |  | CMC,HH<br>O,CMO,<br>M&E O |
| 41 | ADP Mbozi CCWs to attend one - day orientation on Project activities, Graduation, Enrollment, NICM sustainability  | # of newly recruited CCWs                       | Training report   |   |   |   |   |   |   |   |   |   |   |   |   |  | CMO,<br>CMC               |
| 42 | ADP- Mbozi CMCs to attend two days Refresher Training on project deliverables and focus at the cluster   | 1 CMC   | Training report   |   |   |   |   |   |   |   |   |   |   |   |   |  | CMC                       |
| 43 | ADP Mbozi staff will liaise with the CSWO on commencement of the government fiscal year planning and budgeting and ensure project NICM activities are reflected in the PlanRep.  | # of Adolescent books distributed               | Kizazi Kipya NICM activities reflected in Plan-Rep for Tunduma TC | J | F | M | A | M | J | J | A | S | O | N | D |  | PM or<br>CMO              |
| 44 | Identification, Eligibility Screening, and Enrollment into Kizazi Kipya: TSCs and HHOs will step down the guide to the rest of ADP Mbozi staff including CMCs who will support CCWs to conduct the enrollment. (link to 2.2.1) | 47 CLHIV beneficiaries enrolled in the project. | Field report, enrollment forms and monthly reports                | J | F | M | A | M | J | J | A | S | O | N | D |  | HHO,<br>CMO,C<br>MC       |

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| 45 | Family and Child Asset Assessment and Care Planning: ADP -Mbozi CMOs and CMCs will orient CCWs/LCWs on the new care plan application (USSD) during routine CCWs monthly meetings.  | -64 CCW oriented on Care plan USSD app.<br><br>- Number of OVC individual care plans developed | Training report, field reports and monthly reports |   |   |   |   |   |   |   |   |   |   |   |   |  | CMC & CMO            |
|    | Family and Child Asset Assessment and Care Planning: TSCs Case Management, cluster M&E Coordinator, ADP -Mbozi CMOs and CMCs during supportive supervision will provide technical support to CCWs to ensure all new beneficiaries have care plan and update ones for existing beneficiaries on quarterly basis | Number of care plans developed   | Field report, check lists and monthly reports      |   |   |   |   |   |   |   |   |   |   |   |   |  | CMO, CMC, M&E O, HHO |
|    | Services Provision, including CHF/TIKA Cards: TSCs in collaboration with ADP -Mbozi CMOs, CMCs, and HHOs will work with Council CHF/TIKA Coordinators to provide CHF/TIKA cards household of   | 40 OVC households identified and received CHF/TIKA cards.                                      | Check lists, Monthly reports                       | J | F | M | A | M | J | J | A | S | O | N | D |  | CMO, HHO, CMC        |
| 46 |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |                      |



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|    | CLHIV.   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |
| 47 | Referrals and Linkages: ADP - Mbozi through CCWs will issue referrals once the care plan is developed. See section 3.0.2.2 for more details and sub-activities on referrals and linkages. (Linked to 3.0.4)                    | 491 referrals issued<br>466 referrals completed.         | Field reports and monthly reports                                     |   |   |   |   |   |   |   |   |   |   |   |   | HHO,CM<br>C,CMO          |
| 48 | Monitoring Care Plan: ADP - Mbozi through CCWs will monitor the implementation of the care plan through monthly home visits. However, depending on the type of vulnerability, CCWs may visit families more or less frequently. | Number of OVCs visited for monitoring purposes           | Supportive Supervision check list, field reports and monthly reports. |   |   |   |   |   |   |   |   |   |   |   |   | CMC,C<br>MO              |
|    | Monitoring Care Plan: ADP - Mbozi CMOs and CMC will provide on-site mentoring and support to CCWs/LCWs to ensure care plans are appropriately monitored and timely updated   | 64 CCWs  | Field report and monthly reports                                      |   |   |   |   |   |   |   |   |   |   |   |   | CMC,C<br>MO              |
| 49 | Monitoring Care Plan: ADP - Mbozi will CCWs/LCWs will continue monitoring care plan implementation, reviewing progress every three months and updating plans accordingly.  | # of care plans reviewed and updated on quarterly basis. | Field report and monthly reports                                      |   |   |   |   |   |   |   |   |   |   |   |   | CMO,C<br>MC              |
| 50 | Graduation: ADP -Mbozi through CMOs will print the list developed by the M&E team and Pact's Case  | # of households to be visited for                        | Meeting Minutes   | J | F | M | A | M | J | J | A | S | O | N | D | M&E,C<br>MO,CM<br>C, HHO |

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|    | Management and Child Protection Advisor of eligible households for graduation for CCWs, distribute and remind them of the graduation process.   | graduation.   |  |   |   |   |   |   |   |   |   |   |   |   |   |                      |
| 51 | -Graduation: CCWs/LCWs will meet with families that are ready to graduate and inform them on the precise month that graduation will occur, and then administer an abbreviated assessment.<br>- Those that have not slipped back into vulnerability will be graduated and their case files will be closed.   | # of households to be identified for graduation and their cases get closed. | Filed reports  | J | F | M | A | M | J | J | A | S | O | N | D | CMO, CMC             |
| 52 | In-Service Training, Supportive Supervision, and Mentorship: CSOs' CMOs and CMCs will supervise and provide supportive supervision to CCWs/LCWs regularly. Generally, a ADP - Mbozi CMO will spend 10 working days per month while and CMCs will spend 15 days per months providing supportive supervision. | # of supportive supervision and mentorship conducted by ADP-Mbozi staff.    | Training report, supportive supervision check lists and monthly reports. |   |   |   |   |   |   |   |   |   |   |   |   | M&E O, CMO, CMC,HH O |
| 53 | In-Service Training, Supportive Supervision, and Mentorship: ADP -Mbozi will support DSWOs to join their visits on quarterly basis while at ward level with the ASWO or appointed acting officer.   | # of monitoring visits conducted by LGA staff at district level             | Training report and monthly reports                                      | J | F | M | A | M | J | J | A | S | O | N | D | M&E O, CMO, CMC,HH O |

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|    |   | and reports produced  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |                            |
| 54 | CCWs monthly meetings v/s Quarterly meetings: ADP -Mbozi staff with support from TSCs Case Management will roll out CCWs quarterly meetings and gather relevant information/feedback for project adjustment.  | -12 CCWs monthly meetings conducted<br><br>-# of information/feedback gathered                          | Meeting minutes, field reports and monthly reports        | J | F | M | A | M | J | J | A | S | O | N | D |  | CMC,C MO,HH O, M&E         |
| 55 | CCWs Retention and Motivation Strategy: ADP -Mbozi staff will explain the retention and motivation strategy to LCWs/CCWs during CCWs monthly meetings and implement the strategy.   | Relevant information related to project gathered and shared on quarterly basis.                         | Meeting minutes, field reports                            |   |   |   |   |   |   |   |   |   |   |   |   |  | CMC, CMO/H HO              |
|    | Transition of Case Management Files from CSOs to Government Offices (LGA & CSO level): ADP -Mbozi Program Managers will submit the reviewed MOU that articulates file retention policy, shared data quality assurance responsibilities, shared data management responsibilities, inclusion of Kizazi Kipya forms in the case files, accountability of | -# of wards met criteria for case file transition.<br><br>-# of case file transitioned to ward offices. | Transition check lists, filed reports and monthly reports | J | F | M | A | M | J | J | A | S | O | N | D |  | M&E O, CMO,C MC, HHO, ESLO |

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|    | specific people for keeping up-to-date organized files, supportive supervision roles, continued use of USSD by CCWs to Pact DHIS2 database, and access protocols to the files to LGA.  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |
| 56 | Transition of Case Management Files from ADP -Mbozi to Government Offices (LGA & CSO level): CSOs will measure their filing space for existing case management files, and for closed files, to determine the space required for storage of files in each ward.               | 15 wards visited and assessed.  | Check list, Field report and monthly reports    |   |   |   |   |   |   |   |   |   |   |   |   | CMO, CMC,                |
| 57 | Transition of Case Management Files from ADP Mbozi to Government Offices (LGA & ADP -Mbozi level): ADP -Mbozi will share the measurement with the LGA for the LGA to assess the capacity of ward offices to accommodate case files.  | The assessment report shared to DED for approval  | Assessment report, check lists and Field report | J | F | M | A | M | J | J | A | S | O | N | D | CMO, CMC                 |
| 58 | Transition of Case Management Files from ADP -Mbozi to Government Offices (Ward Level): ADP Mbozi staff and ward level officers will be oriented on case file transitioning and ward level readiness assessment, SOP roles and responsibilities of data and file management. | # of ADP-Mbozi and LGA staff oriented on readiness assessment, SOP roles and responsibilities | Orientation reports, Orientation check lists    | J | F | M | A | M | J | J | A | S | O | N | D | M&E O,CMO, HHO,ES LO,CMC |

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|    | 3.22 Transition of Case Management Files from ADP - Mbozi to Government Offices (Ward Level): CSOs' CMCs and CMOs with support of TSCs Case management will conduct the ward-level readiness assessment, to factors such as adequate storage space for existing and new files.  | Documents to be transferred at ward level listed down and shared to counterparts. | Field reports and check lists   |   |   |   |   |   |   |   |   |   |   |   |   | CMO,C MC, HHO, ESLO,C MC, M&E |
| 59 | Transition of Case Management Files from ADP -Mbozi to Government Offices (Ward Level): CSOs and LGAs will make decision if the ward is ready for transition. The actual casefile transfer will happen, and the Ward Social Welfare Officer/ Assistant Social Welfare Officer will post access protocols on the cabinet at the ward-level office. | Kizazi Kipya beneficiaries' files maintained at ward level                        | Field reports, supportive Supervision check lists and monthly reports | J | F | M | A | M | J | J | A | S | O | N | D | CMO,C MC, HHO, ESLO,C MC, M&E |
| 60 | Same day within seven days ART initiation for CLHIV not on ART: CCWs will assess OVC with   | # of identified CLHIV who are not on  | Field report, HHO supportive  | J | F | M | A | M | J | J | A | S | O | N | D | HHO,CM O,CMC                  |

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|    | HRAQM to identify CLHIV who are not on ART and follow them up after every seven days for ART initiation.   | ART   | Supervision check list and monthly reports                              |   |   |   |   |   |   |   |   |   |   |   |   |             |
| 61 | Same day within seven days ART initiation for CLHIV not on ART: ADP -Mbozi by using CCWs/LCWs will provide escorted referral to all CLHIV who are not on ART for ART initiation.   | Number of identified CLHIV who are not on ART are escorted for ART initiation                       | Field report, HHO supportive Supervision check list and monthly reports |   |   |   |   |   |   |   |   |   |   |   |   | HHO,CMO,CMC |
|    | Same day within seven days ART initiation for CLHIV not on ART: For CLHIV who are denied ART initiation by family members including caregivers, CMC will deploy clinical home visit by a nurse trained on pediatric counseling where necessary or use social welfare systems when signs of neglect are identified (linked to IR 3.4) | 7 home visits conducted by pediatric nurse<br><br>Number visits conducted by social welfare officer | Field report, HHO supportive Supervision check list and monthly reports | J | F | M | A | M | J | J | A | S | O | N | D | HHO,CMO,CMC |
| 63 | Monitoring of ART daily uptake for all CLHIV who are on ART: CCWs will conduct monthly Case management visit and monitor ART uptake using ART adherence job aid and document adherence to ART using HRAQM  | # of CLHIV on ART   | Supportive Supervision check list, field reports and monthly reports    | J | F | M | A | M | J | J | A | S | O | N | D | HHO,CMO,CMC |

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| 64 | Monitoring of ART daily uptake for all CLHIV who are on ART: CCWs/LCWs will provide escorted referrals to CTC for adherence counseling to all CLHIV with poor ART adherence.   | # of CLHIV with poor ART adherence  | Field report, HHO supportive Supervision check list and monthly reports |   |   |   |   |   |   |   |   |   |   |   |   | HHO,CMO,CMC   |
| 65 | ADP -Mbozi will monitoring of ART daily uptake for all CLHIV who are on ART: CCWs/LCWs will liaise with HHOs to invite a nurse trained on pediatric ART counseling to provide an enhanced adherence session at the household together with the CCW for CLHIV with repeated poor ART adherence (have been identified to have poor adherence twice or more in a year). | # of visits conducted to CLHIV with poor ART adherence                        | Field reports, supportive supervision check list and monthly reports    | J | F | M | A | M | J | J | A | S | O | N | D | HHO,CMO,CMC   |
| 66 | ADP -Mbozi will monitor clinic attendance for all CLHIV who are on ART: CCWs will monitor clinic attendance by review CTC1 cards and use HRAQM to document visits attended during the last three months.   | # of CLHIV who are on ART monitored   | Field report, HHO supportive Supervision check list and monthly reports | J | F | M | A | M | J | J | A | S | O | N | D | HHO, CMC, CMO |
| 67 | ADP -Mbozi monitor clinic attendance for all CLHIV who are on ART: CCWs/LCWs will track and escort back to care CLHIV who have missed appointments or are LTFUs.   | All CLHIV who missed appointments and LTFUs escorted and linked back to care. | Field report, HHO supportive Supervision check list and monthly reports |   |   |   |   |   |   |   |   |   |   |   |   | HHO, CMC, CMO |

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| 68 | Support long term adherence: CCWs/LCWs will link caregivers of CLHIV in need of food support and other critical material needs to Worth Yetu groups, other community partners, and good Samaritans.   | All Caregiver of CLHIV in need of critical materials linked to receive food and other support from different stakeholders | Filed reports, Check lists and monthly reports     | J | F | M | A | M | J | J | A | S | O | N | D | HHO,ES LO, CMC/C MO |
| 69 | ADP -Mbozi will support long term adherence: CCWs/LCWs with support from HHOs and TSCs-BDRL will link caregivers of CLHIV to available food security interventions/organizations (WFP, CUAMM etc.) for long-term food security repose and other needs | # of caregivers with CLHIV received long term food security support   | Filed reports, Check lists and monthly reports     |   |   |   |   |   |   |   |   |   |   |   |   | HHO,ES LO, CMC/C MO |
| 70 | ADP -Mbozi will support long term adherence: For CLHIVs with high HVL, HHOs will liaise with the clinic and clinical IP to support CCWs to attend the 'Enhanced Adherence and Counseling Sessions' CTCs provide together with caregiver and OVC       | # of caregivers and CLHIV attended the sessions.  | Filed reports, Check lists and monthly reports     | J | F | M | A | M | J | J | A | S | O | N | D | HHO,ES LO, CMC/C MO |
| 71 | Support long term adherence: ADP -Mbozi through CCWs/LCWs will provide escorted referrals for CLHIV who have missed their   | # of CLHIV who missed their clinics   | HHO check list, field reports and monthly reports. |   |   |   |   |   |   |   |   |   |   |   |   | HHO                 |



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|    | clinics or are LTFUs   | and are LTFUs escorted.  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |               |
| 72 | Support to medical care: ADP - Mbozi through CCWs will provide escorted referrals for all emergencies and critical medical care needs for CLHIV  | 40 households with CLHIV received iCHF cards   | Field reports, check list and monthly reports.    | J | F | M | A | M | J | J | A | S | O | N | D |  | HHO, CMC, CMO |
| 73 | Psychosocial support: ADP -Mbozi CCWs/LCWs will assess if all CLHIV attend age appropriate clinics or PLHIV support groups and document this through HRAQM.  | # of CLHIV attending age appropriate CTCs and support groups of PLHIV and document through HRAQM | Field reports, VAC screening and monthly reports. |   |   |   |   |   |   |   |   |   |   |   |   |  | CMO,HHO,CMC   |
| 74 | Psychosocial support: CCWs/LCWs will provide referrals and link OVC and their caregivers to age appropriate clinic or PLHIV support groups for continued psychosocial support for CLHIV who need peer support (those with poor adherence, high HVL, poor clinic attendance, face stigma etc.), | # of Caregivers and OVC linked to age appropriate support groups                                 | Field reports, VAC screening and monthly reports. |   |   |   |   |   |   |   |   |   |   |   |   |  | HHO,CMC,CMO   |
| 75 | Psychosocial support: HHOs will support CCWs/LCWs to invite peer CLHIV to visit the OVC at home upon caregivers' informed  | # of peers visiting HHs once in 12   | Trip reports and monthly reports                  | J | F | M | A | M | J | J | A | S | O | N | D |  | HHO, CMC      |

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|    | consent (clinical partner will select the competent peer educator to visit the CLHIV) to discuss issues related to stigma, peer pressure, copying with ART uptake etc.  | months   |   |   |   |   |   |   |   |   |   |   |   |   |   |                |
| 76 | Household economic status to support need for CLHIV: CCWs/LCWs will link CLHIV to Worth Yetu groups for support (food support, transport support, etc.) (Linked to result 1) using the guide created by Kizazi Kipyia's HIV Integration Advisor and Economic Strengthening Advisor.   | # of CLHIV followed up and linked to WORTH YETU support groups                     | Field reports, Monthly reports  |   |   |   |   |   |   |   |   |   |   |   |   | HHO,ES LO, CMC |
| 77 | Paper-based Bi-directional Referral and Linkage System: TSCs-BDRL will provide supportive supervision to ADP-Mbozi HHOs on the bi-directional referral and linkage system; all success stories and best practices will be visited and will have an action plan to address gaps and challenges each quarter and share the reports with HIV Integration Advisors for follow up. | # of action plans developed each addressing the challenges of the previous report. | HHO quarter reports on paper-based B-directional Referral and Linkage | J | F | M | A | M | J | J | A | S | O | N | D | HHO            |
| 78 | Paper-based Bi-directional Referral and Linkage System: success stories and best practices' HHOs will arrange with CTC focal persons at a nearby facility to come and address bottlenecks and challenges of the system on the bi-   | -1 meeting conducted with CTC focal persons  | Meeting minutes and reports.  |   |   |   |   |   |   |   |   |   |   |   |   | HHO            |

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|    | directional referral and linkage system during CCWs/LCWs monthly meetings at least once during the year.   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |          |
| 79 | Paper-based Bi-directional Referral and Linkage System: success stories and best practices HHOs will continue to collaborate with CHMTs and Care and Treatment partners to oversee the use of referral boxes in CTCs.  | Referral boxes are available and having referral feed backs. | Field reports and monthly reports  |   |   |   |   |   |   |   |   |   |   |   |   |  | HHO      |
| 80 | Paper-based Bi-directional Referral and Linkage System: success stories and best practices' HHOs will conduct supportive supervision visits with CCWs/LCWs and health and social service providers on the bi-directional referral and linkage system, as stipulated in the SOP (including visits to randomly sampled beneficiaries). | # of visits and beneficiaries visited.                       | Monthly reports on HHO supportive supervision showing challenges of BDRL addressed | J | F | M | A | M | J | J | A | S | O | N | D |  | HHO      |
| 81 | Paper-based Bi-directional Referral and Linkage System: CCWs/LCWs issue and track all referrals to health and social services using the established paper-based referral and linkage system in all councils.   | # of issued and tracked Paper-based Bidirectional referrals. | Monthly reports showing efforts for tracing and completeness of referrals          | J | F | M | A | M | J | J | A | S | O | N | D |  | HHO,CM C |
| 82 | Paper-based Bi-directional Referral and Linkage System: CCWs/LCWs issue and track all  | # of completed paper-based                                   | Monthly reports showing efforts for tracing and                                    |   |   |   |   |   |   |   |   |   |   |   |   |  | HHO,CM C |

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|    | referrals to health and social services using the established paper-based referral and linkage system in all councils.   | referrals  | completeness of referrals                          |   |   |   |   |   |   |   |   |   |   |   |   |               |
| 83 | Paper-based Bi-directional Referral and Linkage System CCWs/LCWs will accompany and provide transport support to beneficiaries for urgent/necessary cases, as described in the project's escorted referral guide.  | 10 beneficiaries have emergence referrals.   | Escorted referral check list and monthly reports   |   |   |   |   |   |   |   |   |   |   |   |   | HHO, CMOCMC   |
| 84 | Electronic Bi-directional Referral and Linkage System: ADP Mbozi M&E officers will support HHOs to prepare a dashboard that will support the HHOs to oversee and track the referrals at council level; HHOs will use the electronic referral dashboard to provide technical support to CMCs and CCWs/LCWs. | 1 Dashboards produced by M&E officer which support decision and service provision of HHO | DHIS2 Dashboard App and monthly reports            | J | F | M | A | M | J | J | A | S | O | N | D | M&E, HHO, CMC |
| 85 | Electronic Bi-directional Referral and Linkage System: CCWs/LCWs will use the USSD application to issue and track referrals as required.   | # of referrals issued and completed through USSD App                                     | Field reports and monthly reports                  |   |   |   |   |   |   |   |   |   |   |   |   | HHO, CMC      |
| 86 | ADP Mbozi CMOs will work with WEOs and/or head of COBERT centers to enroll out of school girls and boys age 9-14 in primary  | -# of consultative meetings with   | Meeting minutes, field reports and monthly reports | J | F | M | A | M | J | J | A | S | O | N | D | CMO, CMC, HHO |

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|    | school or COBERT centers. WEO will inform head teachers and head of COBERT center about Kizazi Kipya education support including re-enrolment of out of school youth age 10-14 in primary school/COBERT centers. Youth meeting the primary school criteria will be registered in primary school and those with COBERT criteria will be enrolled in COBERT centers. | minutes conducted<br>-# of youth liked to COBERT and enrolled in primary schools. |   |          |          |          |          |          |          |          |          |          |          |          |          |             |
| 87 | CCWs will monitor education attendance and progression of school age girls and boys during case management home visits.  | # of OVC attendance and progression reported on monthly basis                     | Monthly reports                               |          |          |          |          |          |          |          |          |          |          |          |          | CMC,C<br>MO |
| 88 | Using a job aid developed in FY 19, CCWs will discuss with caregivers and their children about school attendance and performance. Any actions will be included in children's individual care plans.  |   |   | <b>J</b> | <b>F</b> | <b>M</b> | <b>A</b> | <b>M</b> | <b>J</b> | <b>J</b> | <b>A</b> | <b>S</b> | <b>O</b> | <b>N</b> | <b>D</b> | CMO,C<br>MC |
| 89 | 3.2.4.1 TSC-BDRL will support HHOs to hold semiannual CHMTS meetings.  | 2 meetings conducted  | Biannual meeting reports and meeting minutes. | <b>J</b> | <b>F</b> | <b>M</b> | <b>A</b> | <b>M</b> | <b>J</b> | <b>J</b> | <b>A</b> | <b>S</b> | <b>O</b> | <b>N</b> | <b>D</b> | HHO         |
| 90 | TSC-BDRL will support HHOs to hold semiannual priority CTC meetings  | 2 CTC meetings conducted  | Semiannual meeting reports and meeting        |          |          |          |          |          |          |          |          |          |          |          |          | HHO         |

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|    |   |   | minutes.  |   |   |   |   |   |   |   |   |   |   |   |   |  |         |
| 91 | ADP Mbozi will use HHO Supportive Supervision Checklist developed in FY18, CSOs' HHOs will visit priority CTCs at least once a month to enhance coordination between the CSO and CTCs.                                    | # of CTC visited                                    | HHO Supportive Supervision Checklist and monthly reports  | J | F | M | A | M | J | J | A | S | O | N | D |  | HHO     |
| 92 | Attend biweekly meeting held at CTCs lead by the clinical partners to support patient tracking, tracking for high viral load testing and where possible enrolling CLHIV with high HVL and CLHIV in need into OVC program. | # of meeting attended with Clinical partners at CTC | Meeting minutes and reports   |   |   |   |   |   |   |   |   |   |   |   |   |  | HHO     |
| 93 | Provide support and follow up through household case management visits to their beneficiaries who attend CTCs to attend their clinic as scheduled and prevent defaulting from care and treatment services                 | # of beneficiaries provided support and follow ups. | Monthly case management reports with details of support provided to beneficiaries who attend CTC. | J | F | M | A | M | J | J | A | S | O | N | D |  | HHO,CMO |
| 94 | ADP Mbozi will conduct Post VETA Survey to Wave 1 and 2 OVC who ever completed vocational scholarship and start up kits to assess their engagement in   | -2 ADP-Mbozi staff will participate in Post VETA    | Field report and monthly report   |   |   |   |   |   |   |   |   |   |   |   |   |  | CMO     |

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|    | in-come generating activities and improvement in economic well-being.   | SURVEY  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |          |
| 95 | Support vocational training start up kits.  | 1 OVC supported with startup kits   | Field report checklist and monthly report  | J | F | M | A | M | J | J | A | S | O | N | D |  | CMO      |
| 96 | ADP Mbozi through CCWs will refer and follow up on identified cases of violence, abuse, neglect and exploitation.   | # of abuse case identified  | Monthly reports with details of identified and referred cases with Violence, abuse, neglect and exploitation |   |   |   |   |   |   |   |   |   |   |   |   |  | CMO, CMC |
| 97 | ADP Mbozi through CMOs and CMCs will support CCWs to continue following up VAC/GBV referrals with protection committees, Police Gender and Children Desk, one-stop-centers (OSC), ASWO, and to DSWOs. | # of child abuse cases referred to protection committees, Police Gender and Children Desk, OSC, ASWO, and to DSWO | Monthly reports with details of VAC/GBV cases followed up with CPC, Police Gender and Children Desk          |   |   |   |   |   |   |   |   |   |   |   |   |  | CMO,C MC |

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| 98  | Pact's TSCs Case Management and Cluster M&E team will continue to review child protection referrals and services on a monthly basis targeting CSOs with low number of referrals or reported cases that have not received appropriate services. | # of active child protection case conferencing meetings that LCWs/LCWs/ CCWs attended reflected in CCWs monthly reports | Field reports and monthly reportss  | J | F | M | A | M | J | J | A | S | O | N | D | CMO, M&E,C MC, HHO |
| 100 | TSCs–Case Management will continue to provide technical assistance to support CMOs and CMCs  |   | Quarterly technical report with information of how CMO/CMC were supported   |   |   |   |   |   |   |   |   |   |   |   |   | CMO,C MC           |
| 101 | Pact's M&E team will orient TSCs Case Management, CMOs, CMCs and CCWs on the USSD VAC and GBV to victims of abuse.   | 2 program staff oriented on USSD VAC and GBV to victim of abuse   | Quarterly technical report with information on orientation of TSC Case Management, CMO, CMC and CCWs on the USSD VAC and GBV to |   |   |   |   |   |   |   |   |   |   |   |   | CMO,C MC           |



|     |   |   | victims of abuse  |   |   |   |   |   |   |   |   |   |   |   |   |              |
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| 102 | ADP -Mbozi will continue to participate in councils level protection committee meetings and share the project contribution in identifying and responding to VAC and GBV cases especially after the roll out of VAC and GBV screening cascade to inform government planning and budgeting for VAC and GBV services as indicated in the NPA-VAWC: Increase VAWC baselines and targets data for informed decision from 24% to 85%. | -# of protection committee meetings attended by Program staff<br>-# of VAC and GBV cases identified and reported. | Field and monthly report with information on the number of cases reported             | J | F | M | A | M | J | J | A | S | O | N | D | CMO/C MC     |
| 103 | ADP -Mbozi Case Management Officers and CMCs will work with DSWOs and other child protection stakeholders to ensure referred cases are responded to and feedback is shared in the council level protection committee meetings.  | # of responded referral cases and feedback  | Monthly reports with details of responded referral cases and feedback                 |   |   |   |   |   |   |   |   |   |   |   |   | CMO,C MC,HHO |
| 104 | ADP -Mbozi Case Management Officers will attend meetings, sharing up to date data on the number of child protection and GBV escorted referrals were conducted by CCWs during the quarter. During the meetings,  | # of meetings attended by CMO/CMC   | Meeting minutes and reports with data on child protection and GBV escorted referrals. |   |   |   |   |   |   |   |   |   |   |   |   | CMO, CMC     |

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|     | CSOs' CMOs will highlight the challenges and successes they have encountered around identifying, referring, and following up on child abuse and GBV cases during the quarter and seek for support where relevant.  |   |                                      |   |   |   |   |   |   |   |   |   |   |   |   |               |
| 105 | ADP -Mbozi through Kizazi Kipya LCWs at the ward levels will continue to participate in the ward level VAWC Protection Committees where they are functioning and provide ward level data related to child protection and GBV cases. LCWs will also participate in case conferencing during these meetings. | # of meetings attended by LCWs                            | Field reports and monthly reports    | J | F | M | A | M | J | J | A | S | O | N | D | CMC,C MO      |
| 106 | ADP -Mbozi will participate in the commemoration of the day of the African child.  | # of program staff participated                           | Event participation report           |   |   |   |   |   |   |   |   |   |   |   |   | CMO,C MC      |
| 107 | HIV/AIDS Day (1 December   | # of program staff participated                           | Event participation report           |   |   |   |   |   |   |   |   |   |   |   |   | HHO, CMO,C MC |
| 108 | ADP -Mbozi will cascade and enforce their Child Safeguarding Policy to every volunteer working on Kizazi Kipya through project orientations forums and through routine monthly meetings in-service trainings   | -#of in-service trainings conducted<br>-# of CCWs trained | Training reports and monthly reports | J | F | M | A | M | J | J | A | S | O | N | D | CMC,C MO      |

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| 109                         | ADP -Mbozi LVs will be oriented on the Gender Norms discussion guide through the LV monthly meetings.   | 10LV oriented on Gender Norms                           | Training report                   |   |   |   |   |   |   |   |   |   |   |   |   |  | ESLO,C<br>MO,CM<br>C |
| 110                         | ADP -Mbozi LVs will deliver the Gender norms discussion to Kizazi Kipyia caregivers in the VLSGs  | 29 Worth Yetu groups received Gender Norms education    | Field reports and monthly reports |   |   |   |   |   |   |   |   |   |   |   |   |  | ESLO,C<br>MO,CM<br>C |
| 111                         | ADP -Mbozi will select gender champion in their organization who will be trained on Gender Transformation package and cascade the training to other organization staff in their offices | 1satff  | Training report                   | J | F | M | A | M | J | J | A | S | O | N | D |  | CMO/C<br>MC          |
| <b>M&amp;E DESCRIPTIONS</b> |   |   |                                   |   |   |   |   |   |   |   |   |   |   |   |   |  |                      |
| 112                         | -ADP -Mbozi M&E refresher training (on system, data management & reporting)<br>-M&E and CMO/HHO will travel to the cluster to attend a 5 days training (M&E, CMO/HHO)                   | 2 staff trained on system, data, management & reporting | Training report                   | J | F | M | A | M | J | J | A | S | O | N | D |  | M&E,<br>CMO/H<br>HO  |
| 113                         | -ADP Mbozi M&E Systems LV_VSLG app and Job aid training.<br>-ADP Mbozi M&E and ESLO will travel to cluster attending 5 days training  | 2 staff trained on LV_VSLG App                          | Training report                   | J | F | M | A | M | J | J | A | S | O | N | D |  | M&E,<br>ESLO         |

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| 114 | -ADP -Mbozi Program Staffs Systems orientation (LV_VSLG app and Job aid).<br>- ADP -Mbozi program Staff will participate on two days training at CSO level lead by M&E and ESLO.  | 4 staff oriented on LV_VSLG App                                       | Orientation report |   |   |   |   |   |   |   |   |   |   |   |   |  | M&E, ESLO             |
| 116 | -ADP -Mbozi will be LVs trained on VSLG app and Job Aid<br>- ADP -Mbozi ESLO, M&E, CMC, CMO will facilitate a two days training of LVs on WORTH App and Job aid.  | 10 LV trained on VSLG App   | Orientation report |   |   |   |   |   |   |   |   |   |   |   |   |  | ESLO,C MC,M&E         |
| 117 | ADP -Mbozi Service Provider training on USSD and referral system.   | 12 Service providers trained on USSD referral system.                 | Training report    | J | F | M | A | M | J | J | A | S | O | N | D |  | M&E,C MO              |
| 119 | -ADP -Mbozi staff trained on new beneficiaries' registration native android App<br>- Cluster team will facilitate a 5 days training of beneficiaries' registration native android App to ADP Mbozi M&E, Data Clerk and CMO at cluster level | 3 staff trained on new beneficiaries' registration native android App | Training report    | J | F | M | A | M | J | J | A | S | O | N | D |  | M&E, Data Clerk & CMO |

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| 119 | -Data summit meeting, data management, dissemination and use conference.<br>- Cluster team will facilitate a two days summit meeting to review data and discuss challenges related to Data | 2 staff attended data summit meeting.                     | Meeting minute and report  |   |   |   |   |   |   |   |   |   |   |   |   | M&E,PM /HHO       |
| 120 | -Data quality improvement<br>-ADP Mbozi will conduct data quality improvement in ward level for the purpose of assessing.  | -<br>-# of selected CCWs                                  | Improvement report on data entry, processing and reporting                             | J | F | M | A | M | J | J | A | S | O | N | D | M&E,CC Ws         |
| 121 | ADP -Mbozi staff will attend a 2 days semiannual data review meetings at cluster level.  | 2 staff   | Meeting minutes and report   |   |   |   |   |   |   |   |   |   |   |   |   | M&E, CMO/H HO     |
| 122 | -ADP -Mbozi will conduct routine monitoring supervision.<br>- ADP -Mbozi M&E Officer will allocate 10 days in a month to provide implementation support                                    | -1 staff<br>- Improved data reporting for decision making | Monthly and Field reports that include site detailed findings.                         | J | F | M | A | M | J | J | A | S | O | N | D | M&E               |
| 123 | ADP -Mbozi will conduct Joint supportive supervision with DSWO.  | # of joint supportive supervision conducted               | Field report from DSWO and ADP-Mbozi staff which include detailed finds from the site. |   |   |   |   |   |   |   |   |   |   |   |   | CMO,M &E,HHO ,CMC |

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| 124 | ADP Mbozi staff will attend partnership meeting in cluster level for discussion of project progress. | 4 staff                                    | Meeting minutes and report  |   |   |   |   |   |   |   |   |   |   |   |   | M&E, CMO, PM,HHO |
| 125 | Printing of tools  | # of tool printed and distributed          | Printing checklists and stationery tracking tools                           |   |   |   |   |   |   |   |   |   |   |   |   | M&E              |
| 126 | Procurement of case files  | 60 case files procured.                    | Procurement report and stationery tracking tools                            |   |   |   |   |   |   |   |   |   |   |   |   | M&E, Accountant. |
| 127 | Internet Bundles for DHIS2/ComCare depends on number of tablets.                                     | 2 tablets                                  | Number of tablets subscribed with internet bundles for data synchronization | J | F | M | A | M | J | J | A | S | O | N | D | M&E, Data Clerk  |
| 128 | Internet Bundles for LVs   | 10 tablets                                 | Number of tablets subscribed with internet bundles for data synchronization |   |   |   |   |   |   |   |   |   |   |   |   | ESLO, LVs        |
| 129 | Data entry for non-USSD submitted forms  | Number of non-USSD forms entered on system | Com care reports and monthly reports  |   |   |   |   |   |   |   |   |   |   |   |   | M&E, Data Clerk  |
| 130 | Strengthen QI TEAMS at CSOs level  | 4 QI visits                                | Field report and improvement plans  |   |   |   |   |   |   |   |   |   |   |   |   | CTM, M&E C       |

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| 131 | To Strengthen QI teams at community level (CCWs) | 4 QI visits | Field reports and improvement plans. | <b>J</b> | <b>F</b> | <b>M</b> | <b>A</b> | <b>M</b> | <b>J</b> | <b>J</b> | <b>A</b> | <b>S</b> | <b>O</b> | <b>N</b> | <b>D</b> | M&E<br>&CMO/<br>CMC |
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**3.3.3.5: USAID KIZAZI KIPYA PROGRAMME ANNUAL WORK PLAN-MBOZI DC-SEPTEMBER 2019/ SEPTEMBER 2020**



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| 6  | ESLO will conduct a certification panel workshop  | 29 LVs        | Field report   |   | x |   |   |   |   |   |   |   |   |   |   |   | ESLO   |
| 7  | ESLO in collaboration with DCDO will run a focused group discussion and portfolio review  | 260 WY groups | Meeting report |   | x | x |   |   |   |   |   |   |   |   |   |   | ESLO, DCDO                                   |
| 8  | ESLO in collaboration with staff from the government will participate in Launch event of LVs who will be independent and ready to be supported by assessed and graduated groups | 29 LVs        | Event report   | x | x | x | x | x | x | x | x | x | x | x | x | x | ESLO, LV and DSWO, DCDO, DNuO, DRCHC O, DACC |
| 9  | ESLO in collaboration with government staff will conduct a networking workshop at ward level as support platforms   | 29 LVs        | Field report   | x | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMC& CMO                                |
| 10 | ESLO will continue providing a monthly supportive supervision on the implementation of Money Management by visiting LVs at ward level and sampled groups                        | 29 LVs        | Field report   | x | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMO & CMC                               |
| 11 | HHOs will invite CBHSPs in one of the monthly meetings from nearby health facilities to share solutions of the challenges   | 29 CBHSPs     | Field report   |   |   | x |   |   | x |   |   | x |   |   | x |   | HHO  |

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|    | encountered by CCWs in provision of HIV services   |          |              |   |   |   |   |   |   |   |   |   |   |   |   |   |                |
| 12 | HHOs and or CMOs will coordinate and collaborate with different experts from the council to provide orientation to CCWs during monthly meetings on different related services including NACS, MUAC assessment and HIV counselling          | 609 CCW  | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMO       |
| 13 | CCWs/LCWs will continue to conduct nutritional assessments using MUAC tapes, provide nutrition counseling, and provide referrals and linkages to health facilities (including HTS), and other nutrition support for malnourished children. | 609 CCWs | Field report | x | x | x | x | x | x | x | x | x | x | x | X | X | HHO, CMO & CMC |
| 14 | HHOs will continue sharing the importance having nutritional supplemental food available in every monthly report and advocate for budgeting in CCHPs and through other stakeholders  | 609 CCWs | Field report |   |   |   |   |   |   | x |   |   | x |   |   |   | HHO & CMO      |

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| 15 | CMC and CMO will support CCWs/LCWs to discuss positive parenting messages during case management case visits   | 609 CCWs       | Field report    | x | x | x | x | x | x | x | x | x | x | x | x | CMO, CMC       |
| 16 | CMC and CMO will continue to monitor how CCWs are delivering positive parenting messages and build their capacities to ensure high quality services provided                 | 609 CCWs       | Field report    | x | x | x | x | x | x | x | x | x | x | x | X | CMO, CMC       |
| 17 | CMC and CMO will identify OVC-caregiver who performs well to provide testimonies on how interventions have changed his behavior, attitude, norms and customs toward children | OVC Caregivers | Field report    | x | x | x | x | x | x | x | x | x | x | x | x | CMO & CMC      |
| 18 | CMO,CMC and ESLO will facilitate watching of positive parenting videos followed by Dialogue to members of WORTH YETU groups who are both care givers and non-care givers     | 260 WY groups  | Field report    | x | x | x | x | x | x | x | x | x | x | x | x | CMO, ESLO& CMC |
| 19 | HIV integration advisor will conduct training to HHO and CMO on 90-90-90 at Cluster level (Two cluster may be  | 2 Staff        | Training report |   |   |   | x |   |   |   |   |   |   |   |   | HHO, CMO       |

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|    | combined)   |          |                        |   |   |   |   |   |   |   |   |   |   |   |   |                      |
| 20 | Trained HHO and CMO above with support from TSC-BDRL will cascade the capacity building on 90-90-90 to other ADP, staff including ESLO, CMC, M&E and CMO    | 13 Staff | Training report        |   |   |   |   |   |   |   |   |   |   |   |   | HHO, CMO             |
| 21 | HHO, CMO and CMC with support from TSC-BDRL and CM will conduct a two-day ward level orientation on Pediatric and Adolescent HIV to CCWs/LCWs               | 330 CCWs | Field Report           |   |   |   |   |   |   |   |   |   |   |   |   | HHO& CMO             |
| 22 | CMO/CMC will invite IP staff or LGA staff for in-service training during monthly meetings   | 609 CCWs | Monthly meeting report | x | x | x | x | x | x | x | x | x | x | x | x | CMO & CMC            |
| 23 | HHO, CMO, CMC in close collaboration with TSC-BDRL will conduct a refresher training on a revised HIV risk assessment and adherence during monthly meetings | 6 Staff  | Training report        | x | x | x | x | x | x | x | x | x | x | x | x | CMC, CMO, HHO        |
| 24 | CCWs/LCWs with support from HHOs will conduct HIV Risk Assessment for newly enrolled beneficiaries and re administer  | 609 CCWs | Field report           | x |   |   |   |   |   |   |   |   |   |   |   | CMC, CMO, HHO & M&EO |

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|    | the tool to all OVC with undisclosed HIV status in FY20   |                      |              |   |   |   |   |   |   |   |   |   |   |   |   |                      |
|    | HHO to collaborate with LGA and other IPs to access HIV services including EID, PMTCT, ART initiation, HIV monitoring (HVL and CD4), disclosure and linkage to appropriate services                     | 609 CCWs             | Field report | x | x | x | x | x | x | x | x | x | x | x | X | CMC, CMO, HHO & M&EO |
| 25 | CCWs/LCWs with support from HHO during routine case management will provide HIV service package to CLHIV aiming at same day initiation of ART, daily ART uptake, adherence to ART and viral suppression | 365 CLHIV            | Field report | x | x | x | x | x | x | x | x | x | x | x | x | CMO, HHO & CMC       |
| 26 | Effective supportive supervision will be provided from the level of the HIV Integration Advisor down to CCWs/LCWs to ensure timely and appropriate linkages to HIV services                             | 609 CCWS             | Field report | x | x | x | x | x | x | x | x | x | x | x |   | HHO, CMO & CMC       |
| 27 | CCWs/LCWs with support from HHO will do a mapping of age appropriate CTCs for linking CLHIV for psychosocial support. CCWs ensure that their OVC who are HIV positive attend these clinics              | 6 CTCs and 105 CLHIV | Field report | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMO & CMC       |

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| 28 | LCWs/CCWs will issue escorted referrals to OVC and caregivers who require Health facility support to disclose their HIV status                                  | 365 Escorted referrals | Field report    | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMC & CMO  |
| 29 | CCWs/LCWs with support from CMC and upon informed consent will plan for a clinical home visit by a trained HCW to support HIV status disclosure at family level | 95 Home visits         | Field report    | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMC & CMO  |
| 30 | CMO and CMCs will organize CCW orientation on Project activities, Graduation, Enrollment, NICM sustainability at ward level                                     | 609 CCWs               | Field report    |   |   | x | x |   |   |   |   |   |   |   |   | CMC, CMO        |
| 31 | TSC-CM will organize and invite CMC who will travel to cluster level to attend a 2 days refresher training on project deliverables                              | 4 Staff                | Training report |   |   |   | x |   |   |   |   |   |   |   |   | CMC             |
| 32 | Project Manager will meet and make a close follow up with DED/DMO/DSWO to ensure KK NICM activities are reflected in Plan-Rep                                   |                        | Meeting minutes |   | x |   |   |   |   |   |   |   |   |   |   | PM&M&EO         |
| 33 | ADP, staff will conduct in-service orientation to CCWs on the new care plan application through USSD during monthly meetings.                                   | 785 OVC care plan      | Field report    | x | x | x | x | x | x | x | x | x | x | x | x | M&EO, CMC & CMO |
| 34 | TSCs Case Management, cluster M&E Coordinator, ADP, CMO and CMC during supportive supervision will provide technical  | 11,397 OVC care plan   | Field report    | x | x | x | x | x | x | x | x | x | x | x | X | M&EO, CMC & CMO |

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|    | support to CCWs to ensure all new beneficiaries have care plan and update ones for existing beneficiaries on quarterly basis                        |  |              |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |
| 35 | CMCs and CMO in collaboration with CCWs will identify eligible households who meet criteria to get Improved Community Health Fund (ICHF)            | 600 OVC households receive ICHF/TIKA cards.                          | Field report |   |   |   |   |   |   |   |   |   |   |   |   |   | CMO, CMC, HHO      |
| 36 | CCWs will issue referrals and closely follow up their completion  | 5,245 referrals issued<br>4,983 referrals completed                  | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMC           |
| 37 | CMO will work with CMC to establish schedule for care plans monitoring during their normal supportive supervision                                   | 609 CCWs   | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | CMO, CMC           |
| 38 | CCW will use HHs visits conducted to review and update care plan developed in the previous visit  | 11,397 care plans reviewed and updated on quarterly basis            | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | CMO, CMC           |
| 39 | CMC will work with CCW to identify households which met graduation benchmarks and closed their files and their information submitted to the system. | 437 households identified for graduation and their cases get closed. | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x | M&EO, CMO, CMC     |
| 40 | On quarterly basis DSWO and ASWO jointly will conduct the supportive supervision with CSO staff to learn KK implementation                          |  | Field report |   |   | x |   |   | x |   |   | x |   |   | x |   | PM, M&EO, CMO, CMC |



|    |  |          |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |                     |
|----|--|----------|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---------------------|
| 41 | CMO and CMC will roll out CCWs monthly meetings and gather relevant information/feedback for project adjustment.   | 609 CCWs | Field report    | x | x | x | x | x | x | x | x | x | x | x | X | x | CMC & CMO           |
| 42 | ADP, staff will explain the retention and motivation strategy to LCWs/CCWs during CCWs monthly meetings and implement the strategy.  | 609 CCWs | Field report    | x | x | x | x | x | x | x | x | x | x | x | X | x | CMC & CMO           |
| 43 | ADP, staff will conduct a meeting with DSWO, ASWO to plan when the transfer of beneficiaries' files, maintain confidentiality, accessible from CSO to LGA.   |          | Meeting minutes |   |   |   |   | x | x | x |   |   |   |   |   |   | PM, M&EO, CMO & CMC |
| 44 | ADP, staff will travel to ward level where KK project is implemented to assess the space for beneficiaries' files storage.   |          | Field report    |   |   |   |   | x | x | x |   |   |   |   |   |   | PM, M&EO, CMO, CMC  |
| 45 | ADP, staff and LGA team at ward level will conduct a joint meeting to compile the work done on space capacity assessment and submit to DED for approval.   |          | Field report    |   |   |   |   | x | x | x |   |   |   |   |   |   | PM, M&EO & CMO, CMC |
| 46 | During supportive visit cluster team will organize 3-4 hours on job orientation training to CSO staff and LGA staff at ward level readiness assessment, SOP roles and responsibilities of data and file management |          | Field report    |   |   |   |   | x | x | x |   |   |   |   |   |   | PM, M&EO & CMO, CMC |

|    |  |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |  |                              |
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| 47 | CMCs and CMOs will document all files that need to be transitioned to ward level when space is available and strong cupboard.  |   | Field report |   |   |   |   |   |   |   |   |   |   |   |   |   |  | PM,<br>M&EO<br>& CMO,<br>CMC |
| 48 | During household visits CCWs will assess OVC with HRAQM to identify CLHIV who are not on ART and escort them to nearby CTCs on the same day or within seven days                             | 365 identified CLHIV who are not on ART are escorted for ART initiation | Field report | x | x | x | x | x | x | x | x | x | x | x | X | x |  | HHO                          |
| 49 | CMC will deploy 41 clinical home visits to be done by pediatric nurse or and 1 social welfare officer visit when CLHIV who are denied ART initiation or when signs of neglect are identified | 95 home visits conducted by pediatric nurse                             | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x |  | CMO,<br>CMC &<br>HHO         |
| 50 | Monitoring of ART daily uptake for all CLHIV who are on ART: CCWs/LCWs will provide escorted referrals to CTC for adherence counselling to all CLHIV with poor ART adherence                 | 365 CLHIV with poor ART adherence                                       | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x |  | CMO,<br>CMC &<br>HHO         |
| 51 | Monitor clinic attendance for all CLHIV who are on ART: CCWs/LCWs will track and   | 365 CLHIV   | Field report | x | x | x | x | x | x | x | x | x | x | x | x | x |  | CMO,<br>CMC &<br>HHO         |

|    |   |  |                     |   |   |   |   |   |   |   |   |   |   |   |   |                |
|----|---|--|---------------------|---|---|---|---|---|---|---|---|---|---|---|---|----------------|
|    | escort back to care CLHIV who have missed appointments or are LTFUs.  |  |                     |   |   |   |   |   |   |   |   |   |   |   |   |                |
| 52 | Support long term adherence: For CLHIVs with high HVL, HHO will liaise with the clinic and clinical IP to support CCWs to attend the 'Enhanced Adherence and Counselling Sessions' CTCs provide together with caregiver and OVC | 86 caregivers and CLHIV attended the sessions.   | Field report        | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMO, CMC  |
| 53 | HHO will support CCWs/LCWs to invite PLHIV peer for visiting HHs to meet age appropriate for discussion, experience sharing and psychological support   | 86 peers visiting HHs once in 12 months  | Field report        | x | x | x | x | x | x | x | x | x | x | x | x | HHO, CMO, CMC  |
| 54 | CCWs/LCWs with support from ELISO, M&E/HHO follow up and link CLHIV who attended Waves one and two of Vocational training to WORTH YETU support groups for enabling them to stable in Food and transport support                | OVC who attended Wave one and two of Vocational training will be followed up and linked to WORTH YETU support groups | Field report        | x | x | x | x | x | x | x | x | x | x | x | x | CMO. HHO, M&EO |
| 55 | HHO will be supported with TSC-BDRL to conduct quarterly CHMT meetings to discuss   |  | CHMT meeting report |   |   | x |   |   | x |   |   | x |   |   | x | HHO            |

|    |  |  |                            |   |   |   |   |   |   |   |   |   |   |   |   |          |
|----|--|--|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|    | challenges pertaining to MISSAP, LTFUs and include them in the tracking by CCWs from the project   |  |                            |   |   |   |   |   |   |   |   |   |   |   |   |          |
| 56 | HHO will visit high priority CTCs in their routine supportive supervision to insinuate challenges faced by K2 beneficiaries enrolled in the program including MISSAP, LTFUs and those with high viral load | 6 high volume CTCs   | Field report               |   |   |   |   |   | x |   |   |   |   |   | x | HHO      |
| 57 | CMO/CMC, CCWs will refer and follow up on identified cases of violence, abuse, neglect and exploitation  |  | Field report               | x | x | x | x | x | x | x | x | x | x | x | x | CMO, CMC |
| 58 | With guidance and support from CMO/CMO, CCWs will continue following up VAC/GBV referrals with protection committees, Police Gender and Children Desk, one-stop-centers (OSC), ASWO, and to DSWOs          | child abuse cases referred to protection committees, Police Gender and Children Desk, OSC, ASWO, and to DSWO after abuse |                            | x | x | x | x | x | x | x | x | x | x | x | x | CMC, CMO |
| 58 | ADP will participate in the commemoration of the day of the  |  | Event participation report |   |   |   |   |   | x |   |   |   |   |   |   | CMO, CMC |

|    |    |   |                        |                       |            |   |   |   |   |   |   |  |   |  |             |  |   |                       |
|----|----|---|------------------------|-----------------------|------------|---|---|---|---|---|---|--|---|--|-------------|--|---|-----------------------|
|    |    | African child   |                        |                       |            |   |   |   |   |   |   |  |   |  |             |  |   |                       |
|    | 59 | ESLO will orient LVs on gender norms to discuss to CG VSLGS   | 260 Worth Yetu groups  | Training report       |            | x | x | x | x | x | x |  |   |  |             |  |   | ESLO, CMO             |
|    |    | M&E and CMO will facilitate a two days training to service providers (HCWs, ASWO, NuO, Legal officer) on USSD referral system                       | 23 Service providers   |                       |            |   |   |   |   |   |   |  |   |  |             |  |   |                       |
| No | .  | ACTIVITY  | ACTIVITY TARGET        | MEANS OF VERIFICATION | TIME FRAME |   |   |   |   |   |   |  |   |  | RESPONSIBLE |  |   |                       |
|    | 60 |   |                        | Training report       |            |   | x |   |   |   |   |  |   |  |             |  |   | M&EO, CMO             |
|    | 61 | Cluster team will facilitate a five days training of beneficiaries' registration native android App to CSO M&E, Data Clerk and CMO at cluster level | 2 Staff, 9 data clerks | Training report       |            |   | x |   |   |   |   |  |   |  |             |  |   | M&EO, CMO, Data clerk |
|    | 62 | Cluster team will facilitate a two days summit meeting to review data and discuss challenges related to Data  | 3 Staff                | Meeting report        |            |   |   |   |   | x |   |  |   |  |             |  |   | M&EO, CMO ,PM         |
|    | 63 | Council level quarterly data review meeting   |                        | Meeting report        |            |   | x |   |   | x |   |  | x |  |             |  | x | M&EO, CMO, HHO, ESLO  |

### 3.3.3.6: ADP-MBOZI WANGING'OMBE DC USAID TULONGE AFYA PROJECT ANNUAL WORK PLAN FOR 2020.

|    |  |   |                       | J | F | M | A | M | J | J | A | S | O | N | D |  |
|----|--|---|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|--|
| 1. | Conduct refresher training to CHWs, CVs and PCs across all wards of interventions  | 11 CHWs, 11 CVs and 22 PCs                                  | Training Report       |   |   |   |   |   |   |   |   |   |   |   |   | ADP Mbozi<br>USAID Tulonge<br>Afya Team (2<br>POs and<br>M&EO) |
| 2. | Conduct face to face or/and small groups of targeted audience's interpersonal communication at each street, village and ward level | At least 80% of the aforementioned target audiences reached | Monthly Report        |   |   |   |   |   |   |   |   |   |   |   |   | ADP Mbozi<br>USAID Tulonge<br>Afya Team (2<br>POs and<br>M&EO) |
| 3. | Participate during Mother meet up events and Mid- media activities such as Cultural theatres as organized by USAID Tulonge Afya    | CHWs, CVs and PCs across all wards of interventions         | Field/Activity Report |   |   |   |   |   |   |   |   |   |   |   |   | ADP Mbozi<br>USAID Tulonge<br>Afya Team (2<br>POs and<br>M&EO) |

|     |  |   |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 4.  | Support national based health communication campaign implementation at district levels through Interpersonal Communication (IPC)   | At least 80% of the aforementioned target audiences reached | Field/Activity Report |  |  |  |  |  |  |  |  |  |  |  |  |  | ADP Mbozi<br>USAID Tulonge<br>Afya Team (2<br>POs and<br>M&EO) |
| 5.  | Working with the village and ward health committees, health facilities and community health workers, identify and outline agreed upon venues and locations for the outreach education sessions.                          | venues identified in all 11 wards                           | Activity Report       |  |  |  |  |  |  |  |  |  |  |  |  |  | ADP Mbozi<br>USAID Tulonge<br>Afya Team (2<br>POs and<br>M&EO) |
| 6.. | Identify existing potential People Living with HIV/AIDS (PLHIV) associations and groups set by USAID Boresha Afya to talk about TB, family planning and enhance messages on adherence to ART during outreach activities. | At least 1 group identified within each ward                | Activity Report       |  |  |  |  |  |  |  |  |  |  |  |  |  | ADP Mbozi<br>USAID Tulonge<br>Afya Team (2<br>POs and<br>M&EO) |





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|     |  |  |                              |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
| 10  | Conduct community meetings/dialogues led by village leaders  | Number of meetings conducted                               | Monthly Report               |  |  |  |  |  |  |  |  |  |  |  |  |  | ADP Mbozi<br>USAID Tulonge<br>Afya Team (2<br>POs and<br>M&EO)                          |
| 11. | To conduct regular monitoring and supportive supervision to volunteers to ensure effective and quality implementation of the project | Number of supportive supervision visits conducted          | Activity report              |  |  |  |  |  |  |  |  |  |  |  |  |  | ADP Mbozi<br>USAID Tulonge<br>Afya Team (2<br>POs and<br>M&EO) and<br>HPS/LGAs<br>staff |
| 12  | Participate during monthly and quarterly review meeting with USAID Tulonge Afya zonal team   | Number of meeting organized on monthly and quarterly basis | Monthly and Quarterly Report |  |  |  |  |  |  |  |  |  |  |  |  |  | USAID Tulonge<br>Afya Team and<br>ADP Mbozi<br>USAID Tulonge<br>Afya Team               |
| 13  | Coordinate and participate in quarterly  | Number of  | Monthly and                  |  |  |  |  |  |  |  |  |  |  |  |  |  | USAID Tulonge   |

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|    | supporting visit by USAID Tulonga Afya head quarter staff and HPS/LGAs                                | supportive supervisions visited                 | Quarterly Supportive supervision Report    |  |  |  |  |  |  |  |  |  |  |  | Afya Head quarter Team<br>ADP Mbozi<br>USAID Tulonga Afya Team and HPS/LGAs staff |
| 14 | Support youth interactive small group discussion including distribution of youth focus IEC material.  | Number of IEC materials distributed             | Activity Report                            |  |  |  |  |  |  |  |  |  |  |  | ADP Mbozi<br>USAID Tulonga Afya Team (2 POs and M&EO)                             |
| 15 | Support site visit from USAID and other visitors on as need basis                                     | Number of site visits supported                 | Activity Report                            |  |  |  |  |  |  |  |  |  |  |  | ADP Mbozi<br>USAID Tulonga Afya Team (2 POs and M&EO)                             |
| 17 | To prepare and submit monthly, quarterly semi-annual and annual technical and finance progress report | At least monthly and quarterly report submitted | Monthly, Quarterly, Semi-annual and annual |  |  |  |  |  |  |  |  |  |  |  | Program Manager, Program Accountant,  |

|    |  |                           |   |  |  |  |  |  |  |  |  |  |  |  |  |  |
|----|--|---------------------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|
|    |  |                           | technical and<br>finance<br>progress report |  |  |  |  |  |  |  |  |  |  |  |  | M&EO and 2<br>POs  |
| 18 | To prepare and submit final technical<br>and financial report. | Final report<br>submitted | Technical and<br>Financial<br>report.       |  |  |  |  |  |  |  |  |  |  |  |  | Program<br>Manager,<br>Program<br>Accountant,<br>M&EO and 2<br>POs |

3.3.3.7: Strategic Objective 5: Governance and management capacity of ADP Mbozi strengthened in order to operate efficiently and effectively.

Annual work plan 2020: Governance and management capacity of ADP Mbozi strengthened in order to operate efficiently and effectively.

| S/N | Activity  | Activity target  | MOV                                       | Time frame |   |   |   |   |   |   |   |   |   |   |   | Responsibility |
|-----|---|--|---|------------|---|---|---|---|---|---|---|---|---|---|---|----------------|
|     |   |  |   | J          | F | M | A | M | J | J | A | S | O | N | D |                |
| 1   | <b><i>Strengthen Resource mobilization;</i></b>                           |  |   |            |   |   |   |   |   |   |   |   |   |   |   |                |
| i)  | <u>Enhance internal resource mobilization (independent business unit)</u> |  |   |            |   |   |   |   |   |   |   |   |   |   |   |                |
| a.  | To obtain land title of the land for construction of Conference facility. | One land certificate.  | Title deed.                               |            |   |   |   |   |   |   |   |   |   |   |   | ED/HFA         |
| b.  | To register FSCs.   | At least one centre registered; Ndalambo, Myunga and Chitete | Land certificate                          |            |   |   |   |   |   |   |   |   |   |   |   | ED             |
| c.  | To grow Avocado trees in the FSC.   | 200 seedlings at Ibembwa FSC.                                | Accounts records                          |            |   |   |   |   |   |   |   |   |   |   |   | ED/HALD        |
| d.  | To complete construction of Kanga House                                   | One house built  | Accounts records/ physical visit to Kanga |            |   |   |   |   |   |   |   |   |   |   |   | ED/HFA         |
| ii) | <u>Enhance external resource mobilization</u>                             |  |   |            |   |   |   |   |   |   |   |   |   |   |   |                |
| a.  | To update donor list  | One list updated   | Donor list report                         |            |   |   |   |   |   |   |   |   |   |   |   | ED             |
| b.  | To attend donor conferences   | 3 meetings per year  | Meeting reports                           |            |   |   |   |   |   |   |   |   |   |   |   | ED             |
| c.  | To write proposals  | 5 Concept notes/proposals                                    | Concept/proposal documents                |            |   |   |   |   |   |   |   |   |   |   |   | ED/HEMI        |

|    |   |   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                          |
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| 2  | <b>Improve Human resource (members, board and staff) management</b>       |   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                          |
| a. | To train staff on topical issues of interest to its staff                 | At least 40 staff trained   | Training reports   |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED                       |
| b. | To train board on child safeguarding.                                     | Board and Senior staff  | Training report.   |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED                       |
| c. | To conduct staff meetings   | 3 meetings per year (one joint meeting and 2 meetings at section level) | Meeting reports    |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED/HFA                   |
| d. | To conduct annual staff appraisal and develop annual staff capacity plans | staff appraised   | Assessment forms   |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED/HFA                   |
| e. | To conduct AGM  | 1 AGM   | Meeting minutes    |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED/HEMI                  |
| e. | To conduct Board meetings   | 3 meetings per year   | Meeting minutes    |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED                       |
| f. | To organize board field visits  | Two visits per year   | Field visit report |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED/HEMI<br>HCED/<br>HALD |
| g. | To conduct management team meetings                                       | 12 meetings   | Meeting minutes    |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED/HEMI                  |
| 3  | <b>Improve policies, systems and procedures in the organization</b>       |   |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                          |
| a. | To draft missing and update out of date policies of the organization      | 2 new policy documents (Safeguarding & Risk Management                  | Policy documents   |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED                       |

|    |  |  |                            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
|----|--|--|----------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|
|    |  | policy)  |                            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
| b. | To conduct end of year evaluation                      | One workshop conducted   | Workshop report            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED |
| c. | To prepare annual plans                                | One annual plan prepared   | Annual plan report         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED |
| d. | To compile annual report of the organization           | One annual report prepared   | Annual report              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED |
| 4  | <b><i>Enhance Networking and collaboration</i></b>     |  |                            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
| a. | To maintain good relationship with relevant networks   | Pay annual fees for MIICO, PELUM, ACT, FORUM CC, PANITA, TCRF                        | Accounts records           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED |
| b. | To make regular communications with current donors     | At least one email communication per month for each donor                            | Communication record files |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED |
| c. | To invite potential supporters to visit ADP Mbozi      | 3 potential supporters invited   | Communication record files |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED |
| 5  | <b><i>To enhance publicity of the organization</i></b> |  |                            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
| a. | To prepare publicity materials;                        | 500 calendars  | Accounts records           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED |
| b. | To distribute publicity materials                      | 500 Calendars to stakeholders in Dodoma, Dar, Songwe, Njombe, Mbeya, Rukwa & Katavi. | Dispatch books             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED |

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| c, | To update and link website of the organization                     | Twice per year                                   | Visit to website |  |  |  |  |  |  |  |  |  |  |  |  |  | ED     |
| 6  | <b>To improve storage and retrieval of information</b>             |  |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| a. | To conduct quarterly back up of organization's documents           | (plans, progress reports, budgets, expenditures) | Back up facility |  |  |  |  |  |  |  |  |  |  |  |  |  | ED/M&E |
| b. | To conduct half year back up of organizations half year documents. | (plans, progress reports, budgets, expenditures) | Back up facility |  |  |  |  |  |  |  |  |  |  |  |  |  | ED/M&E |
| c. | To conduct annual back up of organizational annual documents       | (plans, progress reports, budgets, expenditures) | Back up facility |  |  |  |  |  |  |  |  |  |  |  |  |  | ED/M&E |
| d  | To conduct quarterly review meetings                               | 4 Meetings for project staff representatives     | Meeting minutes  |  |  |  |  |  |  |  |  |  |  |  |  |  | ED/M&E |
|    | <b>Total</b>   |  |                  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |

**PART FOUR: BUDGET**

***ADP MBOZI***

|                   |   |                                |                                |
|-------------------|---|--------------------------------|--------------------------------|
|                   | <b><i>ANNUAL BUDGET 2020</i></b>  |                                |                                |
|                   | <b><i>Budgetary Items</i></b>   | <b><i>Budget 2020</i></b>      | <b><i>Total</i></b>            |
|                   | <b><i>Personnel and Administration cost</i></b>   |                                |                                |
|                   | Full time staff   | 672,239,589.25                 |                                |
|                   | Part time staff   | 331,228,025.90                 |                                |
|                   | Administration cost   | 94,780,853.00                  |                                |
|                   | <b><i>Sub-Total</i></b>   | <b><i>1,098,248,468.15</i></b> | <b><i>1,098,248,468.15</i></b> |
| <b><i>1</i></b>   | <b><i>SUSTANABLE FOOD SECURITY<br/>AND NUTRITION STATUS IN<br/>COMMUNITY IMPROVED</i></b> |                                |                                |
| <b><i>1.1</i></b> | <b><i>Songwe food security Project</i></b>  |                                |                                |
|                   | <b><i>Project activities</i></b>  |                                |                                |
|                   | Activity cost   | 111,352,039.00                 |                                |
|                   | <b><i>Sub-Total</i></b>   | <b><i>111,352,039.00</i></b>   | <b><i>111,352,039.00</i></b>   |
| <b><i>2</i></b>   | <b><i>ENTREPRENEUSHIP AND MARKERT<br/>ACCECIBILITY IMPROVED</i></b>                       |                                |                                |
| <b><i>2.1</i></b> | <b><i>Suka -AGRA</i></b>  |                                |                                |
|                   | <b><i>Project activities</i></b>  |                                |                                |
|                   | Activity cost   | 131,185,063.77                 |                                |



|            |   |                              |                              |
|------------|---|------------------------------|------------------------------|
|            | <b><i>Sub-Total</i></b>   | <b><i>131,185,063.77</i></b> | <b><i>131,185,063.77</i></b> |
| <b>2.2</b> | <b>CARI-Value chain of pad</b>  |                              |                              |
|            | <b>Project activities</b>   |                              |                              |
|            | Activity cost   | 90,976,200.00                |                              |
|            | <b><i>Sub-Total</i></b>   | <b><i>90,976,200.00</i></b>  | <b><i>90,976,200.00</i></b>  |
| <b>2.3</b> | <b>IB IN SUNFLOWER VALUE CHAIN PROJECT</b>  |                              |                              |
|            | Project activities  |                              |                              |
|            | Activity cost   | 103,577,000.00               |                              |
|            | <b><i>Sub-Total</i></b>   | <b><i>103,577,000.00</i></b> | <b><i>103,577,000.00</i></b> |
|            |   |                              |                              |
| <b>3</b>   | <b><i>ENHANCED COMMUNITY<br/>EMPOWERMENT IN DEALING<br/>WITH CHILDREN,GENDER<br/>HIV/AIDS AND GOOD<br/>GOVERNANCE</i></b> |                              |                              |
| <b>3.1</b> | <b>Kizazi kipya Project -Wanging'ombe<br/>DC</b>  |                              |                              |
|            | <b>Project activities</b>   |                              |                              |
|            | Activity cost   | 109,272,200.00               |                              |
|            | <b><i>Sub-Total</i></b>   | <b><i>109,272,200.00</i></b> | <b><i>109,272,200.00</i></b> |
| <b>3.2</b> | <b>Kizazi kipya Project - Mboz DC</b>   |                              |                              |
|            | <b>Project activities</b>   |                              |                              |
|            | Activity cost   | 269,008,400.00               |                              |

|            |  |                                |                                |
|------------|--|--------------------------------|--------------------------------|
|            | <b><i>Sub-Total</i></b>                                    | <b><i>269,008,400.00</i></b>   | <b><i>269,008,400.00</i></b>   |
| <b>3.3</b> | <b>Kizazi kipya Project - Momba DC</b>                     |                                |                                |
|            | <b>Project activities</b>                                  |                                |                                |
|            | Activity cost  | 84,357,600.00                  |                                |
|            | <b><i>Sub-Total</i></b>                                    | <b><i>84,357,600.00</i></b>    | <b><i>84,357,600.00</i></b>    |
| <b>3.4</b> | <b>Kizazi kipya Project - Tunduma TC</b>                   |                                |                                |
|            | <b>Project activities</b>                                  |                                |                                |
|            | Activity cost  | 49,736,300.00                  |                                |
|            | <b><i>Sub-Total</i></b>                                    | <b><i>49,736,300.00</i></b>    | <b><i>49,736,300.00</i></b>    |
| <b>3.5</b> | <b><i>Comprehensive HIV prevention -<br/>Chunya DC</i></b> |                                |                                |
|            | <b>Project activities</b>                                  |                                |                                |
|            | Activity cost  | 45,597,540.00                  |                                |
|            | <b><i>Sub-Total</i></b>                                    | <b><i>45,597,540.00</i></b>    | <b><i>45,597,540.00</i></b>    |
| <b>3.6</b> | <b>Tuwekeze Pamoja</b>                                     |                                |                                |
|            | <b>Project activities</b>                                  |                                |                                |
|            | Activity cost  | 101,097,800.00                 |                                |
|            | <b><i>Sub-Total</i></b>                                    | <b><i>101,097,800.00</i></b>   | <b><i>101,097,800.00</i></b>   |
| <b>3.7</b> | <b>Tulonga Afya</b>  |                                |                                |
|            | <b>Project activities</b>                                  |                                |                                |
|            | Activity cost  | 84,068,304.00                  |                                |
|            | <b><i>Sub-Total</i></b>                                    | <b><i>84,068,304.00</i></b>    | <b><i>84,068,304.00</i></b>    |
|            |  |                                |                                |
|            | <b><i>GRAND TOTAL</i></b>                                  | <b><i>2,278,476,914.93</i></b> | <b><i>2,278,476,914.93</i></b> |

