

Punjab STRC Evaluation Report

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Executive Summary

The PGIMER School of Public Health participated in the bidding process of setting up the State Training Resource Centre (STRC) and the contract was signed with NACO in July 2008. Even though the contract had been signed in July, STRC started functioning only in September due to the delay in disbursement of funds. Presently STRC is running with a three member project faculty team along with one person for administration and one for finance. The project team consists of a training coordinator, associate training officer, assistant training officer, one administrative officer, one finance officer and four community consultants. Administrative affairs including the salary of the project staff have been funded by NACO and the programme component is by SACS. The major role of STRC is to enhance the capacity of 24 Target Intervention units in Punjab, 32 in Haryana as well as 13 TIs in Chandigarh. STRC has the mandate of capacitating the TIs by providing adequate training to the team members, orienting them to have better understanding of the grass root level needs and also to build up resources and knowledge systems. CRRID is a partner of STRC along with the School of Public Health.

Programme Delivery

Induction, harm reduction, accounting, outreach, community mobilization and syndromic management are the major thematic areas in which STRC has been providing capacity building to TIs. STRC Punjab, has tremendous potential to grow up as an excellent and competent training institution in North India. The primary reason for it is that, STRC has a very supportive parenting by The PGIMER School of Public Health. Even in the very beginning stage, STRC is able to make use of the expertise and experience of a set of resource persons by virtue of being a child of the school. STRC can access the entire faculty of the school and also can effectively build up networking with Institutions like Punjab University. STRC is now currently suffering from scarcity of funds. The Centre has not received any money from NACO since May. The staff members have not been paid since March. Even in unpaid situation, the commitment the staff members had while the time of evaluation is indeed remarkable.

STRC needs to have a relook at the strategies and methods adopted for need assessment, documentation, identifying learning sites as well as building up resource pool. The most significant issue is the non availability of training materials /modules in local languages. There is an urgent need to get the materials translated into local languages. It has been said

that STRC is also in need of more persons who can effectively deliver in a language, which is comfortable to the participants. Even though one need assessment study has been carried out, the centre was not able to cover all communities in a comprehensive fashion. The study was conducted only among the programme managers. There is a need to conduct the need assessment exercises in a regular fashion including that of peers as well as out reach workers. It should be as participatory as possible. The documentation and report writing also need to have a relook in terms of presenting facts, figures and findings in a more systematic, scientific and researched manner. The STRC staff needs capacity building in research methodology and report writing.

Post training field visits have to be carried out consistently so as to measure the growth, the level of empowerment and learning as the result of training. Besides, STRC should design and develop innovative methods for identifying and disseminating best practices.

The unprecedented delay in transferring fund from the part of NACO happens to be a major constrain for effectively carrying out the responsibilities of STRC. It must be avoided in future. Besides, it is found that there is a delay in communication which may result in an information gap, between STRC, SACS and NACO. For instance, STRC has been asked by NACO to suspend all the training programmes planned since June. It is said that NACO is in the process of updating and revising the modules and STRC is asked to wait until the modules are ready. The evaluation team does not find it a desirable practice. As an academic institution STRC should have a fair amount of autonomy as well as capacity to conceive, design and develop modules and other training materials.

Organisational Capacity

The Punjab STRC is set up inside the premises of PGIMER School of Public Health. It was set up as soon as the signed contract was received from NACO. The steps to recruit the staff members were initiated by STRC immediately after receiving the contract. However, due to not finding the suitable person for the job, they could not fill up the certain positions such as training officer till January 2009 and full time training coordinator till December 2008. The staff turnover was low. Only one of the administrative staff left in between due to personal reasons and also he had not been found fit for job by the seniors. The staff's contract was only till 15th July and information about extending the contract till 31st July came only on the last day of the validity of the contract.

All the staff members have received written job responsibilities by STRC. They were clear about their roles and responsibilities. They have conducted the activities as assigned by their seniors from time to time. STRC has maintained all the operational records i.e. attendance, leave, movement register as of the date of visit of evaluation team. It has been filled properly. The attendance register was having the date of joining of different staff members as well as remarks by Nodal Officer, STRC. The staff meetings have been conducted almost in every alternate month. The action plans have been prepared in the meeting and roles and responsibilities of staff members have also been fixed to carry out the planned activities along with the timeline for delivery. The staff is also found quiet satisfied with the support received from management in terms of tackling issues such as recruitment of faculty members, tackling the finance related issues and fixing the training schedules.

Finance

The STRC has been able to spend only 69 percentage of total budget approved under proposal. This is mainly due to delay in signing of contract, almost 3 months delay in receiving the first installment from NACO and also delay in receiving the second installment from NACO. The verbal and written communication received from NACO also led to non-conducting of certain activities such as training material and operational research. For example - The NACO stated in the e-mail dated 2nd July that project management module is under revision and therefore it will take 2 more weeks for getting it approved. In this scenario, it's wrong to judge the STRC by their budget utilization.

The budget has been used as per the approved budget except in the head of hall charges. Under hall charges, the amount spent on purchasing the pointer, chairs for STRC staff, rent of hiring audio visual aid twice for the training programme, getting LCD repaired etc. was booked.

The institute has also not been able to spend the scheduled amount under the budget head of development of training material and conducting operational research. However, the institute has done the preparatory work for both the tasks. The problem in actual implementation of these was communication received from NACO in this effect.

The PGIMER rule doesn't allow School of Public Health to have a separate bank account. This is true for all the projects run under School of Public Health including STRC. A separate

research cell of PGIMER manages all the SPH projects. Different committees exist to give approval for purchasing the hardware, software, payment to consultants, salary etc. The system of approval is very rigorous and time consuming. This also led to delay in payments even after receiving money from NACO.

The payment is mostly made through cheque. The cash payment limit is up to Rs. 2000. All the bills were found in original in the file. The usage of vouchers is not part of the PGIMER institute system. The school of Public health also has internal committee from which approval for all the purchase for STRC has been sought.

The statement of expenditure has been submitted to NACO on 21st March 2009. This SoE has provided the details about the amount spent from the first installment received from NACO on 11th October 2008. It shows that 95% amount has been utilized against the received amount. However, on physical verification it has been found that almost 21.56 percent has remained unutilized till the date of issuing SoE.

1 Background:

1.1 State Training and Research Centre Evaluation

National AIDS Control Programme Phase III (NACP III) is focused on saturating the coverage of core and bridge population through targeted intervention (TI) programme. To standardize systems and procedures, operational guidelines have been developed on all categories of Targeted Intervention proposals namely, Men having Sex with Men (MSM), Female Sex Workers (FSW), Injecting Drug Users (IDU), Migrants and Truckers.

In order to ensure standardised and quality trainings to different categories of staff working with NGOs/CBOs on TI's with a mandate to develop a sustainable and institutionalised centre for the capacity building of partner organizations for TI's, gather learning through additional research and develop pedagogy of learning for TI scale up, National AIDS Control Organization has decided to institutionalize the training and capacity building process with the State Training and Resource Centres (STRC).

In order to evaluate the performance and quality of State Training Resource Centres (STRC) an annual review and evaluation for all the 14 STRC's NACO has involved Praxis.

1.1.1 Purpose

The main purpose of conducting the evaluation is to explore in detail about the process, timeline and quality maintained as well as the constraints both organizational and financial faced by STRC.

1.1.2 Objective:

To conduct a year end evaluation of Haryana, Punjab and Chandigarh STRC established by NACO.

1.2 Evaluation Methodology

The team of evaluators interacted with staff of STRC. The in-depth interviews were held with staff members to explore in detail about programme delivery, organisational capacity and financial capacity. The documents were reviewed to check the identification and capacity building of faculty, training conducted by STRC, academic committee and programme planning, document reporting, process of recruitment and induction, record keeping and

procedures, staff meetings, governance and leadership and finance. The list of documents referred is appended in annexure 1. The evaluation team conducted Focus Group Discussion with representatives of Tis at various levels such as project managers, peer educators and outreach workers. The participants for FGD as well as resource persons for interview were selected randomly. The selection process was done on the second day of the evaluation and their availability has been checked in order to conduct the semi-structured questionnaire.

2 Evaluation Schedule

The team of two evaluators conducted the evaluation for three days. The detailed schedule followed by evaluators has been enclosed as annexure 2.

3 Key Findings

3.1 STRC Fact Sheet

1. Basic Details

A.	Name of the STRC	STRC Punjab
B.	Name of the Implementing Partner	School of Public Health
C.	States/ UTs Covered	Punjab, Haryana, Chandigarh
D.	Number of Districts covered	40 (Punjab – 19, Haryana – 20, Chandigarh – 1)
E.	Date of Contract with NACO	15 th July 2008 and 16 th February
F.	Date on which started functioning	14 th September
G.	Number of TI partners covered	69 (Punjab – 24, Haryana – 32, Chandigarh – 13)
H.	Location of STRC:	Chandigarh

2. Organization Structure (ask for organogram)

3. STRC Team (As on 23rd July 2009)

	Number
Training Coordinator	1
Training Officers	2
Admin And finance	2
Community Consultant	4

Faculty Members	-
Total	9

4. Details of the Academic Committees formed by STRC

	Name of the committee members	Representation	When joined
1	Dr. Rajesh Kumar	Academician	6 th October 2008
2	Dr. Shalina Mehta	Academician	6 th October 2008
3	Dr. Ashwani Nanda	NGO	6 th October 2008
4	Dr. PVM Lakshmi	Academician	6 th October 2008
5	Dr. Meenu Singh	SACS	6 th October 2008
6	Mr. Sandeep Mittal	SACS	6 th October 2008
7	Mr. Vinod Kumar	SACS	6 th October 2008
8	Mr. Gaurav Gaur	Trainers	6 th October 2008
9	Mr. Yaswinder Singh	Community Representative	6 th October 2008
10	Mr. Mohinder Singh	NGO	6 th October 2008
11	Mr. Ram Pyari	Community Representative	6 th October 2008
12	Mr. Chaitanya Bhatt	Trainers	6 th October 2008
13	Dr. Manmeet Kaur	Academician	6 th October 2008

3.2 PROGRAMME DELIVERY

3.2.1 Identification and Capacity Building of Faculty

I. Identification of faculty members

The STRC team meets resource persons in different training programmes and thus identify the appropriate persons. The resource persons are selected on the basis of skills, experience, local language skill etc. STRC has been provided with a list of experts, by NACO in the inception stage. The STRC training officers enriched this list by identifying more resource persons by their own. According to them, developing the resource pool was a collective exercise done by STRC, NACO and SACS.

II. Trainings of faculty members

As mentioned earlier, STRC has a resource pool of experts and trained persons. There is a list of 33 resource persons from various disciplines. The STRC team stated that all of them are trained by NACO and it is non negotiable according to the guidelines. But later on, while interacting with the resource persons, the evaluation team found that there are trainers who have not undergone any training by NACO. Nidhi Jiswal, has stated that she has not attended any of the trainings by NACO. Narayan Das, a community member as well as a trainer who also has been interviewed by the evaluation team stated that he has not undergone any of the trainings by NACO. STRC has not given any training to the faculty members/resource persons. At the same time all the project staff had attended training of trainers (ToT) conducted by STRC. The centre has given one ToT on Community mobilization. The faculty members/programme staff has attended the same. Two other ToTs were given by

NACO, one on Outreach planning and the other on project management.

Project staff	ToTs attended
Mr Daman Ahuja(Training coordinator)	1.Community mobilization 2. Project Management
Ms Nidhi Batnagar(Associate training officer)	1.Out reach planning 2.Community mobilization
Ms Harjyot(Assistant training officer)	1.Out reach planning 2.Community mobilization 3.Project Management

III.Capacity of faculty members

As mentioned earlier, STRC has a resource pool developed by the support of NACO. Out of 34 resource persons listed, 10 of them are the faculty members of School of Public Health, the parental organization of STRC. STRC has not documented the CVs of the resource persons. Only seven CVs were available for examination. The STRC staff couldn't provide CVs of all the resource persons. Apart from faculty members of the School of Public Health, the list includes experts from Punjab University, SACS of Hariyana, Punjab and Chandigarh as well as TSUs and TIs. The evaluation team has examined both the list of the faculty members as well as the available CVs. It is clear that majority of the faculty members are quite qualified in terms of academic status as well as relevant experience.

The evaluation team had conducted semi structured interview with four faculty members in the list, viz, Dr Salini Mehta(Department of Anthropology,P U) Ms Nidhi Jaswal(Junior Demonstrator, School of Public Health, PGIMER) Mr Gaurav Gaur(Department of Social Work, PU).Dr Salini has more than 20 years of experience in the field of HIV/Aids. She has facilitated a number of trainings in India and abroad. She is well informed of the third phase of NACP, its goals and objectives. She has a critical view point on the programme as well. She has not attended any training by NACO, but attended one by Global Aids Fund since the commencement of her association with STRC. Dr Salini opined that STRC should be given autonomy to pick up trainers according to their field requirements. At present STRC has limitations in choosing facilitators, which is caused by the conditions imposed by NACO. There are many experts who have not undergone training by NACO.STRC is not in a position to make use of their expertise only for the reason that they have not undergone training by NACO.

According to Dr Salini, the fundamental skill which a trainer should have is communication skill. Command over local language is non negotiable. Sound knowledge on subject and sensitivity to the field realities are other essentials required for a trainer. She suggested that STRC should devise a capsule for wetting the capability and capacities of the facilitators. She also opined that the facilitator should be

able to go beyond the modules. Modules are only basic guidelines to facilitate training and the trainers should expand the scope of the guiding materials in order to elicit maximum output.

Nidhi Jaswal has facilitated 10 trainings in STRC on peer education, outreach planning and community mobilization. She had previous experience in working with TI (IPHA) as councilor. Her discipline is Psychology and currently doing PhD in Psychiatry. She also is informed of the goals and objectives of NACP 3. She has attended three ToTs including that by NACO (On outreach planning). Ms Nidhi Jaswal too subscribes the view that language skill is a non negotiable factor for facilitating a training. She opined that the scarcity of trainers who have command over local language is the major challenge that STRC faces at this point of time. She also observed that time management is very important in a training programme. The facilitator should be able to cover all the subjects scheduled and should be able to ensure maximum participation by effective time management. STRC's trainings are some times tightly scheduled and participation of the trainees happens to be minimal. The more participatory the sessions are, the more will be the result in terms of capacity building.

IV. Identification of agencies/individuals

There are no agencies or institutions involved in training other than The School of Public Health and CRRID (a partner organization of STRC) The STRC staff members identify individuals from various training programmes they do. The major resource pool is the list of resource persons developed with the support of NACO. The training officers said that STRC is in the process of identifying potential facilitators in local level, but such a process has not been recorded anywhere. They showed one mail sent to the TIs asking them to suggest facilitators in the local level. But it doesn't specify what level of people need to be identified for the purpose. It is found that no such plans and ideas are on in the direction of diversifying the training component in a more decentralized manner. The learning opportunity for potential facilitators in the peer level is the sessions in training in which they have been asked to explain how they effectively use the tools and how their learning's have been impacted in the project.

3.2.2 Trainings by STRC

I. Number of trainings conducted

STRC has conducted 24 trainings since inception till date with a participation of 712 persons at various levels from different TIs in Punjab, Hariyana and Chandigarh. Induction, Outreach planning, Harmr reduction, accounting, syndromic management are the major thematic areas covered. There is a mention about refresher training, but no details of the same are provided in the report. Later on the project staff explained that the name of the training has been changed. (The training for planning out reach with community conducted from 22nd to 24th January was the same training earlier named refresher training). The training reports hardly provide information on field visits conducted by participants during training .The reports do not speak about the location of the sites visited, how the site is selected and whether it's a best practice one or not.

From the Hariyana report it is understood that 8 trainings have been done, 3 on OR planning tools, one training on accounting, harm reduction, induction and n Syndromic management each. One ToT on outreach planning has also been held.

Chandigarh: 5 trainings conducted three on out reach planning, and one each on harm reduction and induction.

The annual plan doesn't contain any information on the trainings planned. There is a separate training plan in which STRC has planned trainings for the months of June to August. This plan is approved by Academic committee and send to NACO, but they haven't received any response from NACO yet. There is no practice of making a year calender for training, but make quarterly plan for the same.

There is no updating of tools. Same tools are used for each training like, for OR planning tools are repeated in all the reports.

The challenges in conducting the training: According to the training coordinator, the biggest challenge is the scarcity of fund. The project is suffering from budget constraints. STRC has not received any fund after May. The staff members have not received salary since March. No training has been conducted since May. They used to field visit every week until January, due to budget constraints, field visits have come down. According to the contract 20% of the time has to be spend for field visit (20% for documentation and 60% for training).

According to the project staff, NACO's delay in delivering modules is another major challenge that STRC faces. They have submitted three months training plan, but NACO has asked to suspend all

the trainings as they are involved in the process of updating the modules. Even after one year, they have not yet received the modules from NACO. The trainings conducted were based on the operational guidelines by NACO and the STRC staff members learning's and experience.11 trainings are pending for the same reason.

Procurement of budget from Hariyana SACS is another problem the STRC staff members face. They don't clear the files in time and the fund disbursement has always been delayed.

In the blooming stage, the scarcity of resource persons who has command over local language was a big challenge. Most of the resource persons were from other parts of the country and they can not handle Punjabi or even Hindi. After a couple of trainings the project staff was able to find out resource persons who know the language as well as the local context. This is done with the support of NACO.

II. The training needs assessments & Identification of categories of personnel's to be trained

The training needs are assessed in consultation with TIs and community consultants for each state. One need assessment study was conducted in April 2009 keeping in mind the objectives of NACP 3. The training officers and community consultants met all the TIs for the purpose. The report of the need assessment study has been reviewed by the evaluation team. The report doesn't give a clear idea on the methodology and tools adopted for the study. It seems that the STRC team needs capacity building in terms of engineering a field research in a professional and scientific manner incorporating appropriate methodology and tools which are successfully tested and proved. Under the subhead 'methodology' the report elucidates the universe of the study, while the subhead 'study design' only indicates the time frame of the study. According to the need assessment report one questionnaire has been distributed among the project managers of 69 TIs of Punjab, Hariyana and Chandigarh. The questionnaire has been attached in the report which gives an idea on what all aspects had been covered under the study. The thematic areas of training are categorized into four, viz, project management and office maintenance, service delivery, community mobilization and financial management. Each category contains a set of questions to bring about the capacity building needs of TIs. The questionnaire seems to be comprehensive in terms of covering the areas in which the TIs need capacity building. But the report doesn't elaborate on the methodology adopted both in terms of data collection as well as analysis. It is understood from the report that the data was analyzed using EPI-Info package, but the process of analysis has not been explained with supportive evidence. In other words the need assessment report doesn't give an idea on how the research team has reached to the given conclusions and findings. The study was more an online

survey rather than that done on a field based data collection. The questionnaire has been emailed to the respondents, namely project managers of TIs, ORWs or Peer Educators had not been included in the study. The evaluation team observes that the absence of peers and outreach workers in the domain of the study is a significant limitation of the same.

Similarly no definite process had been adopted to identify the category of personnel in need of training. The incorporation of different categories of personnel has been done mostly on the basis of the call by TIs, their expression of interest and training needs. The work plan doesn't explain anything in this regard. Work plan provides information only on the areas in which STRC plan to move in. It is understood from the training reports that most of the categories have been covered under STRC's training programmes namely, project managers, outreach workers, peer educators, doctors and male nurses. But no specific strategy is developed to identify the personnel and to subsequently figure out their capacity building needs.

III. Field visits for the training participants

Field visits have been carried out for some of the trainings, but not for all the trainings. According to the training officers, field visits are not required for all the trainings. Trainings on outreach planning, induction and community mobilization need field visits. On the other hand, trainings on accounting, harm reduction, and syndromic management, field visits are not required. The training officers said that they choose best practices sites for field visit for training participants, but the same is not recorded in the training report. The training reports don't give an idea on the context and rationale of choosing the site. The process of selecting the site has not been explained in the reports. There is no mention of the location and name of the site in the training reports; on the other hand it is listed in the programme schedule, as field visit only. There is no detailing of the sites visited or how and why the sites have been selected. There is no evidence for the claim that best practiced sites have been selected for field visits for the training participants.

IV. Pre and Post training evaluation

Pre and post test has been done regularly for most of the trainings. The STRC training officers distribute a questionnaire among the participants on the first day, explain them about it and collect the filled questionnaire back after a couple of hours. This is called pre test. On the final day of training the same questionnaire is distributed which is called the post test. There might be a few changes in the post test questionnaire, according to the lessons learned from previous training

experiences. Using this tool the training officers do evaluation and subsequent scoring. The questionnaires are available in local language.

V. Post training field visits by the STRC

The STRC training offices do field visits, but not with a specific objective to assess the impact of training as well as to identify the needs in future in terms of training. They do field visits to assess the performance of TIs in general, to understand their strength and weakness and also to figure out the needs of TIs. Assessing the impact of training is one among the objectives of the field visit. The visits are not done specifically for the purpose of impact assessment of training. According to the STRC staff members, NACO hasn't given any guideline in terms of post training field visit. With a specific objective of assessing the impact of training.

The evaluation team examined the field visit reports of Punjab, Haryana and Chandigarh. The observation guidelines/objectives for STRC staff to carry out the field visits, are as follows:

- Process of working
- Innovations
- Needs Improvement
- Utility of trainings
- Level of empowerment
- Ownership of community
- Understanding and difficulties of implementation of tools
- Working of self help groups
- Drop in centre

The reports provide some idea on the areas in which capacity building is required for TIs, their strength and weakness and also the lessons learned and recommendations by the STRC staff. The team follows the above listed indicators to conduct the field visit. But the reports hardly provide information on how the analysis has been done. The methodology of field study has not been clearly mentioned in the reports. The process of carrying out the field study and subsequent analysis has not been documented clearly. The indicators of field study and observations by the

STRC team have been given in a tabular format. It is written that the team had interactive session with the TI staff/members. It is not clear whether it was an FGD or one to one interaction or any other methods through which the team could be able to extract information. If it was an FGD, the report doesn't specify how it was conducted and who participated. It is very important to document the process followed, methodology and tools adopted.

The report of field visits carried out to the TIs in Punjab, doesn't provide any information on the impact of training. The team had only captured the strength and weaknesses of the TIs in Punjab. As mentioned above, these field visits are not carried out with a specific objective of assessing the impact of training. The reports of field visits to TIs in Hariyana and Chandigarh provide some information about the impact of training, but not sufficient .For example the STRC team observes that the members of TI, Society for Women and Child Health in Panchkula, Hariyana, have acquired understanding of a few tools, hotspots and basic knowledge on HIV .But the report doesn't provide any supportive evidence for the same, or the report doesn't elaborate on how the analysis has been done and how the STRC team has reached to such a conclusion.

3.2.3 Academic committee and Programme planning

I. Constitution of the academic committee

Objectives
<ul style="list-style-type: none"> • Identify , in order of priority, the categories of personnel's to be trained • Review the content and duration of the training • Identify the best practices sites for field visits • Approve the annual work plan with budget • Review the implementation of the work plan in every quarter and the work done by the project faculty • Meeting at least three times in a year

The academic committee, which is a non-negotiable component of the project as per the revised contract has been constituted according to the guidelines provided by NACO. The

guidelines insists that ,there should have adequate representation from different sectors viz academics, trainers, other NGOs imparting training at the grass root level, TI partners, representatives of SACS and communities. The evaluation team observes that the current committee in place fulfills the criteria of composition in terms of representation from the required levels. The members were nominated by the leadership of the School of Public Health , the parental organization of STRC and the rationale behind the composition of the team is the guideline by NACO. The STRC team has explained that NACO guidelines were the criteria of constituting the committee. The evaluation team observes that apart from following the guideline by NACO, STRC leadership has not contributed in terms of constructive ideas in formulating the committee, locating the objectives and defining the roles and responsibilities.

Mr.Yashwinder Singh(project director,Pahal Foundation) and Ms Ram Pyari(PE,ACF ,Ropar) are the two members in the academic committee who represents the communities. The STRC team identified their potential during training sessions and nominated them to the committee.Mr Yashwinder Singh is also a resource person who have been giving orientation and training on basic awareness of HIV, spot and contact mapping and also on NACP 3.The STRC team observed that the community representatives are able to articulate the problems identified at the grass root level and they largely contribute in assessing the training needs and identifying the categories of personnel to be capacitated.

The academic committee has been constituted on 4th June 2009, ie eight months since the commencement of STRC. (Even though, the contract has been signed in July 2008,the STRC has come into the operational mode since September only).

II. Quarterly meeting of the academic committee

The academic committee has met only once since the date of formation. The evaluation team has examined the report of the committee meeting held on the formation day, i.e. on 4th June 2009.There were four items in the agenda of the meetings, such as ;

- 1.Introduction of roles and objectives of academic committee
- 2.Review of the training plan and agenda for the next three months
- 3.Discussion on learning sites
- 4.Discussion on new approaches related to capacity building.

The evaluation team observes that the academic committee has not reviewed the work done by STRC in the previous months since inception. The agenda of the meeting corroborate this observation as it speaks nothing about the review of the accomplishments since inception. According to the agenda and minutes of the meeting ,he committee had discussed the following;

- 1.The need for enriching the resource centre-The committee has suggested the centre should give thrust to expand the centre, by including more reading meterails, reports, newspaper clippings etc. Besides the committee had also discussed about the need for an online resouce pool to be developed so as to make the navigation easy through the entire database.
- 2.Had discussion on the learning sites, best practices-The best practices sites have been listed out in the academic committee report, according to which the team members plan field visits.
- 3.The committee had also discussed the need for exposure visits for STRC team members.
- 4.The training coordinator presented the proposed training plans and budget for the next three months (June to August) and the committee approved the same.

The meeting, which was held on the formation day of the committee, lasted for two hours only. The review of the work done by STRC has not been included in the agenda as well. It is evident that the committee has not reviewed the trainings and other accomplishments carried out by STRC since inception till date.

III. Development of the work plan, monitoring indicators and the budget

The revised work plan has been submitted to NACO in February 2009, i.e., six months after signing the contract. According to the training coordinator the work plan has been envisaged and developed by the STRC team, namely the training coordinator, senior training officer (who quit STRC couple of weeks back) associate training offier and assistant training officer. The training coordinator explained that adequate consultation had been done with the deputy directors of SACS in terms of formulating the work plan. The consultation with TIs were more on an informal level which has not been followed by any definite process.The evaluation team observes that the submission of final work plan has been delayed for 6 months since its inception.

The work plan has listed activities for capacity building, orienting staff on their roles, resource building, developing modules and training calender,operational research,website

development,pre-post evaluation of trainings, developing panel of experts and so on. Among the 21 activities listed 11 of them are either in an ongoing process or yet to be started. For example,webiste has not yet hoisted, the modules have yet to be developed and operational research has yet to be carried out. The work plan submitted in February, was approved by NACO in March.

IV. Identifying the best practice/learning sites for field visits

As of now the best practices /learning sites are identified by SACS but not by STRC.SACS of Punjab,Hariyana and Chandigarh had identified the best practices,handed over the information to STRC.The academic committee, in it's meeting held on 4th June, conducted a discussion about the best practices.The sits suggested by each of the SACS are:

- Punjab- Ambuja Cements Foundation,Ropar

 Swami Vivekananda Medical Mission,Amritsar

- Hariyana- District Red Cross Society,Sonipat(CTI)

 Pahal Foundation,Faridabad

- Chandigarh- FPAI ,Mohali

 FPAI,Panchkula

 AIWC,Chandigarh

By examining the field visit reports, the evaluation team came to know that the STRC team had conducted visits one site each in Punjab and Hariyana.The STRC team has documented the strength and weaknesses of each TIs .The information provided in the report does not seem to be sufficient. The report does not convey how the team was able to get the information, whether through group discussions or interviews. The report hardly provide information on the rationale behind the findings,viz the strength and weakness. The points are not elaborated so as to get a clear idea on the processes followed by the TIs in implementing the programme at all levels.For example the report on Ambuja Cement Foundation,Ropar suggests that the TI needs better advocacy strategy.The report does not convey the reasons for such a recommendation,what makes the advocacy strategy week and how to improve the same.The reports generally follow this pattern and provide information gap in terms of the processes followed and strategies adopted.The recommendations also are not logically presented answering to 'all the why questions' possibly may arise. For example,the STRC team who

visited Pahali foundation in Hariyana, suggests that tools need improvement and timely updation, while the report does not present logical reasons and evidences for the same. It also does not elaborate the urgency or genuineness of the need.

Another point which needs to be mentioned is that, the STRC has not launched a specific strategy for field visits to the learning sites. The field visits to the sites have been carried out as part of the general plan for visits to the field (Irrespective of their status, whether learning or not). Apart from the learning sites suggested by SACS, STRC should take steps to identify learning sites by their own. It is very necessary to disseminate the best practices, lessons and strategies to all TIs across. As of now, it seems that STRC has not triggered a thinking exercise in this regard so as to develop methodology and tools to envisage a better strategic intervention in the long run.

V. Capacity building of NGOs in proposal writing

In terms of capacity building of NGOs in proposal writing, STRC has made some efforts. STRC has conducted a one day work shop for nonTIs in capacitating them planning and budgeting programmes. The non TIs used to send proposals for TI projects which used to be rejected as well. This is the context in which STRC has decided to provide orientation regarding the need for targeted intervention, the goals and objectives of NACP 3 and also on the concept of high-risk population and bridge population as well. In the one-day workshop, the participants were also oriented on the process of TI partner selection and standard practices in documentation for TI partners.

One planning and visioning workshop was conducted by STRC for TIs in this regard. The objective of the workshop was to provide orientation on TI's projects to be implemented, functioning of TIs under NACP-III with special focus on annual action plan. The session on programme management covered various components in planning, developing monitoring and evaluation indicators and also project specific annual action plan with goals, objectives and activities.

VI. Operational research

STRC has proposed operational research and has submitted a note for the same to NACO. They have given a list of areas in which STRC want to do operational research. A meeting was held on 17th November 2008 to identify the areas in which operational research should have been carried out. Two academic committee members, one resource person and one training officer attended the meeting. The areas identified by the team in the discussion are as follows:

- Sexual violence among child domestic help
- MSMs in Chandigarh
- Sex work among college students in Chandigarh
- CBO formation in North India
- Process from NGO to CBO
- FSWs in Chandigarh

STRC is supposed to choose one topic from the above list. The list has been sent to NACO for approval. They have been informed by NACO that they would suggest one from the list in which STRC could pursue the research. The evaluation team doesn't find it as a desirable practice. STRC should be given autonomy in matters regarding the area of operational research.

3.2.4 Documentation and Reporting

I. Documentation of trainings including the best practices

The trainings are documented in a written format. Separate reports for each state is available both in soft copy as well as in black and white. There is no audio visual documentation except photographs which are incorporated in the report. The STRC doesn't have the infrastructure for audio visual documentation at present. The best practices have been identified and shared by NACS. The project staff had visited the same and it is mentioned in the field visit report as well as in the academic committee report. (The field visit report is the documentation of the field visits carried out by the training officers to the best practices. It does not have any mention of the field visits done by participants during training. That piece of information is available in the training reports only, which is mentioned above).

It has to be mentioned that information on best practices is provided by SACS and not identified by STRC itself. The team has identified the strength and weakness of each unit and documented it in the field visit report. In terms of best practices, the information provided in the field reports is insufficient. For example, the team has carried out a field visit to FPAI, Mohali and has identified and documented the strength and weakness of the project. It is suggested that the technical skills need to be improved and the entire project staff need training for sensitization. The report does not corroborate this finding with supportive evidence and does not elucidate why the TI needs capacity building in the referred areas.

Besides the report does not provide concrete suggestions and recommendations on how to plan and execute the kind of capacity building required.

II. Translation of training modules

No training modules are available in local languages. STRC has received only one module from NACO ,that is for programme management for training of project managers. Three more modules are available on peer education, on outreach planning and on service delivery, which are developed by STRC itself. According to the STRC staff, only two of the modules need translation. The modules for training on peer education and outreach planning in which PEs and ORWs being the participants need to be translated into the local languages. The other two modules both for programme management and service don't need translation because they are meant for project managers who can follow English.

NACO is supposed to provide modules for all categories but it has not provided yet. As mentioned under the subhead ,number of trainings conducted, STRC has been asked by NACO to suspend all the scheduled trainings as they are in the process of updating modules. For the time being they follow the operational guidelines provided by NACO along with the modules developed by STRC.It has to be noted that none of the modules are available in translation, even though at least two of them need to be available in local languages(on outreach planning and peer education).Non availability of fund is the reason cited by the training coordinator for the same. The team members said that the translators need half of the amount in advance and for the time being STRC is not in a position to pay as it has not received any fund after May. The pre –post test tools are available both in Hindi and Punjabi. The translation is done by the team members themselves. Besides all the reading materials also are available in local languages.

III. Documentation centre

The documentation centre run by STRC is still in a budding stage which requires improvement both in terms of collecting resource materials and dissemination of knowledge.At present there are very few books ,CDs,magazines and journals and other reading materials in the centre.The centre does not have a separate space.The books and other materials are kept in a room which is used by the training coordinator.STRC has send a communication to SACS,Punjab requesting rupees one lakh for buying books and reading materials for the centre.

IV. Website

The website is under construction. It has not yet been hoisted. The evaluation team examined the content created for the website. The STRC team said that the reason for the delay in website hoisting is the scarcity of fund.(Rs 10000/- is required for the purpose).

V. Quarterly newsletter

There is no such practice of bringing out quarterly newsletters. The team has not yet thought about such a plan. There is no mention of quarterly news letter in the work plan as well.

VI. Timely report submission

The monthly report is supposed to be sent by third of every month. The evaluation team finds that STRC is not up to the mark in adherence to deadline. For example the report for the month of February has been sent on 20th March as well as the report for the month of April has been sent on 8th May.

3.2.5 Conclusion

STRC Punjab, has tremendous potential to grow up as an excellent and competent training institution in North India. The primary reason for the same is that,STRC has a very supportive parenting by The PGIMER School of Public Health.Even in the very beginning stage,STRC is able to make use of the expertise and experience of a set of resource persons by virtue of being a child of the school.STRC can access the entire faculty of the school and also can effectively build up networking with Institutions like Punjab University.STRC is now currently suffering from scarcity of fund. The Centre has not received any money from NACO since May. The staff members have not been paid since March. Even in unpaid situation, the commitment the staff members had while the time of evaluation is indeed remarkable.

STRC needs to have a relook at the strategies and methods adopted for need assessment, documentation, identifying learning sites as well as building up resource pool. The most significant issue is the non availability of training materials/modules in local languages. There is an urgent need to get the materials translated into local languages. It has been said that STRC is also in need of more persons who can effectively deliver in a language, which is comfortable to the participants. Even though one need assessment study has been carried out, the centre was not able to cover the entire communities in a comprehensive fashion. The

study was conducted only among the programme managers. There is a need to conduct need assessment exercises in a regular fashion including peers as well as out reach workers. It should be as participatory as possible. The documentation and report writing also need to have a relook in terms of presenting facts, figures and findings in a more systematic, scientific and researched manner. The STRC staff needs capacity building in research methodology and report writing.

Post training field visits have to be carried out in a constant fashion so as to measure the growth, the level of empowerment and learning as a result of training. Besides,STRC should design and develop innovative methods for identifying and disseminating best practices.

The unprecedented delay in transferring fund from the part of NACO happens to be a major constrain for effectively carrying out the responsibilities of STRC.It should have been avoided.Besides,it is found that there is delay in communication which may result in information gap, between STRC,SACS and NACO. For instance ,STRC has been asked by NACO to suspend all the training programmes planned since June.It is said that NACO is in the process of updating and revising the modules and STRC is asked to wait until the modules are ready.The evaluation team does not find it as desirable practice. As an academic institution STRC should have a fair amount of autonomy as well as capacity to conceive ,design and develop modules and other training materials.

3.3 ORGANIZATIONAL CAPACITY

3.3.1 Recruitment and induction

i. **Office Setup**

The PGIMER School of public health is located inside the premises of Post Graduate Institute of Medical Education and Research (PGIMER). The PGIMER was established in 1962 and was declared as an Institute of National Importance” by an act of parliament on 1st April 1967 wherein the administrative control was passed to an autonomous body.

The school of public health has its own building within PGIMER premises. The aim of the institute is to conduct postgraduate teaching programme and short term training courses. The institute took part in the bidding process in order to set up the State Training Resource Centre (STRC). After receiving the contract in July 2008, STRC has been set up within the IPH compound. The office was set up immediately after receiving the contract from NACO. The STRC is well equipped in terms of infrastructure The IPH bore the responsibility of recruitment of faculty members as well as meeting other statutory payment obligations i.e. payment of electricity, water and municipal taxes. The STRC has not budgeted these items in the proposal.

All the staff members are contractual staff members. The NACO has also not paid the STRC for providing the insurance coverage. Therefore, they have no insurance coverage.

ii. **Recruitment of Staff**

The proper process was followed for recruiting the staff. The posts were advertised in the notice board of the PGIMER institute, Punjab University, CRID and other colleges affiliated to Punjab University. In one of the cases, to get the suitable candidate for the post of training coordinator, it also got circulated through NACO/SACS. The institute has formed a selection committee comprising of faculty members of school and also members from SACS in order to conduct the interviews in a fair manner for the posts i.e. one each for Training Coordinator, Training Officer, Associate Training Officer, Assistant Training Officer, administrative assistant and four posts for community consultant. The positive point is that along with the posts, nature of posts, qualification and terms of reference for the candidates were also mentioned in the advertisement (refer annexure 3). The fifteen days were given for applying for the job and date of conducting the interview was given in the advertisement itself. It was

an open selection process as no scrutiny of applications was done before conducting the interviews. In the interviews, selection for all the posts was done except project coordinator. The reason for non-selection of the training coordinator was not getting the suitable candidate for the position in terms of years of experience and qualifications. The advertisement, list of panel for conducting interviews, people interviewed and recommended candidates is attached as annexure 3. The appointees have joined the STRC between 11 September and 25th September 2008. Out of the entire selected community consultants, only three have joined the office and one post remained vacant till April 2009.

The selection of training officer was done in the month of September but she has not joined due to less salary. Even the waiting person has refused to join due to some personal reasons. After that, nodal person and HoD of the institute tried to find the suitable person but it took sometime for finding the next person.

For the position of training co-ordinator, second round of interviews were held on 22nd November 2008 and for training officer and administrative assistant, it was held on 31st December 2008. For both the positions respective person joined in the month of December and January (refer the table below)

S. No	Name of Staff	Designation	Date of Joining	Date of Service notice	Date of leaving	Name of Staff	Date of joining
1	Daman Ahuja	Coordinator	8/12/2008				
2	Ateryi Ganguli	Training Officer	3/1/2009	Contract Finished on 14 th July 2009			
3	Nidhi Bhatnagar	Associate Training Officer	15/09/2008				
4	Harjyot Khosa	Assistant Training	25/06/2008				

		officer					
5	Lalita Rani	Accounts Assistant	11/09/2008				
6	Yashpal Singh	Administrative Assistant	23/09/2008	02/12/2008	31/12/2008	Gurpreet Singh	03/01/2009
7	Kamal Dev Sharma	Community Consultant	03/10/2008				
8	Monisha Raj	Community Consultant	01/10/2008				
9	Gurpreet Singh	Community Consultant	03/10/2008		02/01/2009		
10	Pardeep Kumar	Community Consultant	16/01/2009				
11	Sandeep Kumar	Community Consultant	27/04/2009				

iii. Induction of project staff

The responsibility of providing induction was of nodal officer of the institute. The associate and assistant training officers were provided induction for two days in which they were briefed about the training programmes and its kind, target group, ways to innovate for pedagogy development, usage of different methodologies, process of recruiting faculty members and also evaluating them during training so as to ensure their suitability for the position. The half a day briefing for the administrative person and finance person was also done internally. Accounts assistant was also attached with Mr. Mahinder Singh, Assistant Accounts officer of the School of Public Health.

The associate training officer, assistant training officer and nodal officer of IPH were provided four days residential orientation programme at Mysore by NACO from 17th – 20th October 2008. The facilitators mainly were from NACO and Karnataka State Aids Prevention Society. All the arrangements were made by NACO. The orientation was on “orienting STRC for STRC”. The key objectives of the orientation training was to provide induction training to the participants on NACP III, provide an in-depth understanding on operational

guidelines, procurement procedures, national PIP, experience in conducting operations research, training needs assessment and community needs assessment and also to provide specialized training. They were also explained about how the idea to set up STRC came up, the shift from NGO to CBO, about Targeted Interventions (TIs), its origin and concept. The basic concept of CBO was also introduced to participants. The half-day field visit was made to Ashodya, one of the NGO in Mysore and also to the soliciting sites of MSM. On the 4th day, TSU and SACS people have also participated so as to explain the participants about the role of SACS, NACO and STRC. This helped the training officers from Punjab STRC to get familiarized with the functioning of SACS and NACO.

iv. Staff Turnover/Attrition

Most of the staff has continued till the complete project duration. Only exception is Mr. Yashpal who was appointed as Administrative Assistant. He also served proper notice period i.e. one month. The reason for his resignation was mainly due to personal reasons but also non-satisfaction of seniors. He was explained about the work, which he was supposed to do. However, his performance was not up to the mark. Therefore, he gave the resignation letter.

A few important positions i.e. training coordinator and training officer remained vacant till 6th December and 2nd January respectively. The reason for being the post of training coordinator vacant was two folds: one, delay in the signing of the contract till end of August due to time taken by SACS in sending the contract back because of non-availability of SACS signing authority as well as by NACO, after signature from the signing authority. This has led to the delay in the whole process of setting up of STRC including the selection of candidates. Second, STRC has not found a suitable candidate for these posts. Dr. Manmeet Kaur has worked as an honorary person till the appointment of training coordinator. She was also appointed as nodal officer for STRC by HoD in the month of August vide letter no. SPH/08/1391-93 dated 11th October 2008. However, she has not received any remuneration from the STRC as she was also working as faculty member of School of Public Health.

One of the community consultants has resigned in the month of January and joined the position of administrative assistant. In his place, another person got recruited within the 15 days period. He was involved till 23rd May 2009. He couldn't be involved further due to non-receipt of the funds from NACO. His salary was not paid since February due to non-receipt of

funds from NACO. One of the community consultants has joined on 27th April and worked till 22nd July 2009.

The staff also felt de-motivated due to non-payment of salary for almost five months. The staff members have started the process of applying outside the institute due to this reason. The lack of security was also because they have not heard from NACO regarding the renewal of the contract. This led to the resignation of a few staff members in the month of July.

The difficulty was also faced in selecting the training coordinator due to less monthly salary mentioned in the ToR. It was also difficult to match the experience and qualification of the person vis-à-vis salary offered.

v. Staff's understanding of Job

All the staff members have been explained about their roles and responsibilities at the time of joining. The job responsibilities have also been given to them in writing (refer annexure 4). It has been observed that all the staff members were assigned the roles as per NACO guidelines (refer revised ToR annexure 5).

The primary responsibility of training coordinator was overall supervision, ensuring quality of training, preparation of work plan, coordinating the training programmes, convening meeting of academic committee, preparing report and submitting the SoEs. The responsibilities handled by training officer were providing help in the preparation of work plan, development of training material, pre and post evaluation tool, preparing the report and also undertaking field visits.

The accounts person was responsible for handling the accounts i.e. cash book, entry of all the inflow and outflow, preparing the reconciliation statement and statement of expenses (SoEs). The administrative staff was handling the leave register, attendance register, movement register, appointment letters and joining reports etc.

3.3.2 Record keeping and Procedures

Most of the registers and records were maintained properly. It includes the attendance, leave and movement registers. There was some confusion in terms of total leave for project staff. The management earlier followed the PGI regular staff rule, which allows the staff to take

only 8 days leave (6 casual and 2 RH) along with sick leave and earned leave. They came to know from their research grant cell that they are allowed to take 30 days leave only before two months. The attendance and leave registers were maintained till the date of the visit of the evaluation team. The administrative assistant was quite efficient in managing the records.

Nodal officer checked the entry in attendance register on every third day. At times, she also asks the administrative assistant to bring the register in her room at 9.30 a.m. for checking. She has also put remarks in a few cases in the register. The register is also checked by Head of the Department of school of Public Health once in a month. The movement form and leave form is approved by the training coordinator.

3.3.3 Staff meetings

The proposed meeting was weekly. However, formal meeting was reduced to once in a month due to varied training schedules. From the discussion with the associate and assistant training officers and training coordinator, it was evident that they had informal meetings with nodal officer quite often. In the initial period, main purpose of holding the meetings was planning. They discussed about identification of resource persons, deciding about the module, collecting resource material for documentation centre and usage of resource material in the training, methodological inputs. Off late, it's mainly the issues related to finance and administration that were discussed.

The minutes of the meetings, which were documented, are related to the following:

- planning of training schedule (attended by HSACS, Haryana TSU, STRC nodal officer and training officer on 12th September 2008);
- adjudging the capacity building needs of the TIs, planning of the training calendar and discuss the modalities and roles of SACS, TSU and STRC (attended by 3 SACS, 2 TSUs & STRC staff held on 16th September 2008);
- review meeting of STRC on 22nd November 2008 to discuss the terms of reference of the staff, trainings conducted and attended, training calendar and issues of concern regarding infrastructure and accounts etc.;
- making a data record each TI wise, ensuring usage of participative methodology in training, focusing on management skills of the programme managers, sending the

- community consultants to the field and preparing reporting format (meeting held on 16th January 2009 and attended by STRC staff);
- preparing the draft documents on peer education, community outreach workers, project managers by training officers, state of account by accounts assistant and procurement of laptop by administrative assistant dated 20th March 2009;
 - introductory letter and developing ToR for community consultants; preparing of questionnaire, feedback and agenda in Hindi and Punjabi, translating the manuals, identification of material to be translated in the local languages and ensuring its publication, preparing a roaster of week's planning (meeting held on 16th April 2009 and attended by STRC staff);
 - meeting of HIV projects of department held on 9th June 2009; and
 - preparing of the reports by the STRC team for evaluation via e-mail dated 8th July 2009

The HoD reviewed the STRC project and discusses its financial, administrative and technical related issues once in two months. These reviews worked as a mechanism of ensuring quality checks. In the meeting, all the faculty members of school were also invited. The coordinator for operations research was decided and a committee was also formed to discuss it. The HoD specifically contributes in this direction.

3.3.4 Governance and Leadership

The management has developed an appraisal system so as to identify the capacity need of the staff. The STRC staff has good equations with nodal officer as well as training coordinator. The unison among the team members was quite evident while conducting the evaluation. Some of the issues discussed with management were planning for organizing the trainings i.e. fixing the dates with SACS, understanding of role played by TSU/ managing the conflict within TSUs as they perceive training as one of their core activities and their linkage with SACS and direct close association with NACO.

The training coordinator was the main responsible person for taking the decision regarding the place of training, participants and handholding of trainees.

3.3.5 Conclusions

The Punjab STRC is set up inside the premises of PGIMER School of Public Health. It is set up as soon as the signed contract is received from NACO. The steps to recruit the staff members have been initiated by STRC immediately after receiving the contract. However, due to not finding the suitable person for the job, they could not fill up the certain positions such as training officer till January 2009 and full time training coordinator till December 2008. The staff turnover was low. Only one of the administrative staff left in between due to personal reasons and also he has not been found fit for job by the seniors. The staffs were having contract only till 15th July and information about extending the contract till 31st July has come only on the last day of the validity of the contract.

All the staff members have received written job responsibilities by STRC. They were clear about their roles and responsibilities. They have conducted the activities as assigned by their seniors from time to time. STRC has maintained all the operational records i.e. attendance, leave, movement register as of the date of visit of evaluation team. It has been filled properly. The attendance register was having the date of joining of different staff members as well as remarks by Nodal Officer, STRC. The staff meetings have been conducted almost in alternate month. The action plans have been prepared in the meeting and roles and responsibilities of staff members have also been fixed to carry out the planned activities along with the timeline for delivery. The staff is also found quiet satisfied with the support received from management in terms of tackling issues such as recruitment of faculty members, tackling the finance related issues and fixing the training schedules.

3.4 FINANCE

3.4.1 Budget Utilization

The total amount budgeted was Rs. 23, 90,000/- whereas amount spent is Rs. 16, 41,773/- as of July 22nd 2009. This reflects that the 69 percentages of funds have been utilised. The main reason for lack of fund utilization was as follows:

- Delay in the starting of the assignment because of time taken in responses received from 3 SACS and then finally signing of NACO.
- non-receipt of the allocated funds by STRC. They do not have separate budget head for the projects other than the funds received from the funding by NACO.

The budget has been used as per the approved budget except in the head of hall charges. Under hall charges, the amount spent on purchasing the pointer, chairs for STRC staff, rent of hiring audio visual aid twice for the training programme, getting LCD repaired etc. was booked. It has been found in the discussion with STRC staff that reasons for spending the money and putting under the head of hall charges were due to not having any separate head for these activities. It was urgent for the institute to spend the money on these items in order to run the training programmes smoothly.

The institute has received the information from NACO that a standardized and uniformed manual for outreach, project management, service delivery, behaviour change communication will be provided by NACO. However, it has not been received till now. This led to the non-expenditure of scheduled amount under the budget head of development of training material. The institute has taken extra effort and spent time in producing the training material for outreach planning, peer education and project management, were developed and research proposal for conducting operational research were written. However, they have not been able to allocate money for translation and publication of training material due to funds constraint. The fund constraint was mainly due to non-receipt of the funds from NACO. They couldn't also start the operational research also due to the same reason. These are the two activity budget heads for which no money has been utilized. The main constraint is non-clarity by NACO in terms of which contract to follow and also delay in getting the response from NACO.

3.4.2 Financial Process

Bank Account

The PGIMER rule doesn't allow School of Public Health to have a separate bank account. This is true for all the projects run under School of Public Health including STRC. The PGIMER have a separate research cell. All the projects are maintained through that cell. The system of approval is very rigorous and time consuming. This also led to delay in payments even after receiving money from NACO. On one hand, it ensures that proper check system is in place. On the other, it also creates difficulty in terms of getting the funds in a short span. Therefore, for troubleshooting there is a system of issuing the cheque in the favour of nodal officer. The money is withdrawn within hours of transfer and it's primarily been used to pay the external consultants as well as petty cash payments. The advance from research cell was

also taken in the similar way to conduct the training depending upon the number of the facilitators etc.

Systems of Payment

In most of the cases, payment has been made through cheque except in a few cases as explained above. The cash payment limit is up to Rs. 2000. While verifying the bills, evaluator has observed that all the bills were in original in the file. They have been kept in the serial order as per the date of issuing the cheque. The entry in cashbook and bills also matches.

The usage of vouchers is not part of the PGIMER institute system. Therefore, vouchers have not been printed.

The institute has a research cell under which various committees have been formed for giving varied approvals. Different committees exist to give approval for purchasing the hardware, software, payment to consultants, salary etc. The school of Public health also has internal committee from which approval for all the purchase for STRC has been sought.

Timely Financial Reporting

The statement of expenditure has been submitted only once to NACO on 21st March 2009. The delay in submitting the SoE is mainly due to non-receipt of the format from NACO by STRC. This SoE has provided the details about the amount spent from the first installment received from NACO on 11th October 2008. It shows that 95% amount has been utilized against the received amount. However, on physical verification it has been found that on the date of issuing the SoE, only Rs. 6, 56,085/- amount has been spent rather than Rs. 7, 88,394 as reflected in the SoE. It shows that almost 21.56 percent has remained unutilized till the date of issuing SoE. This difference arises mainly due to the pending bills, which has been added to the actual expenses made till the date of the issue of SoE. This is a wrong practice. The format has not provided any space for mentioning the pending payment. These are those payments for which work has already been done but payment has not been made due to not having the sufficient money in their bank account. This problem has not been arisen if there

has been an additional column stating the pending payments due to non-receipt of funds or due to non-Clearance of files internally such as payment of computers.

After submitting the bill on 21st March 2009, twice follow up was done through letter dated 11th May 2009 vide letter no. SPH/STRC/09/100 and 30th June 2009 vide letter no. SPH/STRC/09/105 for getting the installment released. The second installment has only been received on 15th July 2009. The delay in receiving the installment has led to the non-submission of SoE as well as raising the other payment bills by STRC.

The financial reports were sent through courier to NACO.

3.4.3 Conclusions

The STRC has been able to spend only 69 percentage of total budget approved under proposal. This is mainly due to delay in signing of contract, almost 3 months delay in receiving the first installment from NACO and also delay in receiving the second installment from NACO. The verbal and written communication received from NACO also led to non-conducting of certain activities such as training material and operational research. For example - The NACO stated in the e-mail dated 2nd July that project management module is under revision and therefore it will take 2 more weeks for getting it approved. In this scenario, it's wrong to judge the STRC by their budget utilization.

The budget has been used as per the approved budget except in the head of hall charges. Under hall charges, the amount spent on purchasing the pointer, chairs for STRC staff, rent of hiring audio visual aid twice for the training programme, getting LCD repaired etc. was booked.

The institute has also not been able to spend the scheduled amount under the budget head of development of training material and conducting operational research. However, the institute has done the preparatory work for both the tasks. The problem in actual implementation of these was communication received from NACO in this effect.

The PGIMER rule doesn't allow School of Public Health to have a separate bank account. This is true for all the projects run under School of Public Health including STRC. A separate

research cell of PGIMER manages all the SPH projects. Different committees exist to give approval for purchasing the hardware, software, payment to consultants, salary etc. The system of approval is very rigorous and time consuming. This also led to delay in payments even after receiving money from NACO.

The payment is mostly made through cheque. The cash payment limit is up to Rs. 2000. All the bills were found in original in the file. The usage of vouchers is not part of the PGIMER institute system. The school of Public health also has internal committee from which approval for all the purchase for STRC has been sought.

The statement of expenditure has been submitted to NACO on 21st March 2009. This SoE has provided the details about the amount spent from the first installment received from NACO on 11th October 2008. It shows that 95% amount has been utilized against the received amount. However, on physical verification it has been found that almost 21.56 percent has remained unutilized till the date of issuing SoE.

List of Documents to be reviewed for assessment of Programme Delivery

- List of faculty members for each of the topics and date of enrolment (Do we have a list of topics specified?)
- Training reports of faculty members on trainings received by them.
- CVs of faculty members
- Directory/List of agency for peer educator trainings (identified and engaged)
- List of trainings conducted and their reports
- Needs assessments reports
- Pre and Post evaluation reports
- Translated training material
- Academic Committee member list
- Work plan
- Reports on process of identification of best practice sites.
- Reports of academic committee based on performance in accordance to the work plan.
- Quarterly newsletters
- Proposals or reports of operational researches.

2. List of documents to be reviewed while scoring for organizational capacity

- Rent agreement and monthly financial reports
- Personnel files – Appointment letters , leave and attendance records
- Induction report by staff
- Job Descriptions
- Attendance register
- HR policy
- Movement register
- Leave records and applications
- Staff meeting minutes

3. List of documents to be reviewed for Finance

- Approved Budget for the current year
- Monthly Financial reports
- Bank Statements/ Accounts/ Passbook
- All Bills and Vouchers
- SOEs submitted to SACs
- Reconciliation statement

Evaluation Schedule**Evaluator 1****Evaluator 2**

Day 1		
Time	Activity	Members
10 a.m. to 11:00 a.m.	Introduction of the team and sharing of evaluation schedule and agenda (Discuss information on the fact sheet)	Evaluation team and STRC team
11:00 a.m. to 1:30 p.m.	Discussions and Documentation review on Finance and Accounting	Admin and Accounts Officer, 1 Training Officer, Evaluator 2
1:30 p.m. to 2:50 p.m.	Lunch	
2.50p.m. to 5:15 p.m.	Discussions and Documentation review on Organization Capacity (Recruitment and Induction, Record Keeping and Procedures)	Training Coordinator, 1(at least) Training Officer and Evaluator 2
Day 2		
Time	Activity	Members
10 a.m. to 2:00 p.m.	Discussions and Documentation review on Organization Capacity (Staff meetings, Governance and Leadership)	Training Coordinator, 1 Training Officer and Evaluator 2
2:00 p.m. to 2:30 p.m.	Lunch	
2:30 to 5:15p.m.	Discussions and Documentation review on Finance and accounting	Admin and Accounts Officer, 1 Training Officer, Evaluator 2
Day 3		

Time	Activity	Members
9 a.m. to 1.30 noon	Discussions and Documentation review on Finance and accounting	Training Coordinator and Evaluator 2
1:30 p.m. to 2:00 p.m.	Lunch	
2.00 to 3:00	Discussions and Documentation review on Organization Capacity and Finance and accounting (wrapping up)	Nodal Officer, Training Coordinator and Evaluator 2
3.00 to 3:30	Discussions with faculty members trained by the STRC	Faculty Member and Evaluation team
3:30 to 4:15p.m.	De Briefing and sharing of the evaluation experience	Evaluation team and STRC team

Copy of Advertisement

Vacancies for State Training Resource Centre under
National AIDS Control Program at
School of Public Health, PGIMER

S.No	Name	Qualifications	Terms of Reference
1	Training Coordinator (1)	Should have MBA or post graduation in social sciences. Experience in conducting training, developing curriculum and managerial experience are desirable. Four to five years of experience in social development program is essential.	She/he has to report to the Official in charge of the STRC for TIs within the TSU/SACS. Should have good understanding of HIV/AIDS programs and related health issues and good communication skills.
2	Training Officer (1)	Should have MBA or post graduation in Social Sciences. 3-4 years of experience in working with NGO/CBO and high risk groups essential. Experience in conducting training is desirable.	Should have good understanding of HIV/AIDS programs and related health issues and good communication skills. Have to plan the trainings with the consultation of Coordinator and the SACS.
3	Associate Training Officer (1)	Should have MBA or post graduation in Social Sciences. 2-3 years of experience in working with NGO/CBO and high risk groups essential	Should have good understanding of HIV/AIDS programs and related health issues and good communication skills. She/He has to report training officer
4	Assistant Training Officer (1)	Should have MBA or post graduation in Social Sciences. 1-2 years of experience in working with NGO/CBO and high risk groups essential	Should have good understanding of HIV/AIDS programs and related health issues and good communication skills. She/He has to assist associate and assistant training officer.
5	Administrative Assistant (1)	Graduation with knowledge of computers.	Should have understanding of HIV/AIDS. Have to do all the related documentation of the program.
6	Accounts Assistant (1)	Graduation with knowledge of computers.	To maintain accounts of the program. Managing TA/DA of trainees and trainers and supporting other financial management related issues like audits. Procurements etc.
7	Community Consultant (4)	Graduation/10+2	Should have understanding of HIV/AIDS. Have to communicate with the high risk groups.

These positions are purely on contract. Applications of the candidates who possess the required qualifications should reach this office of the undersigned (Room No.109), School of Public Health, P.G.I.M.E.R, Chandigarh through proper channel by 8th August, 2008. Attested copies of all certificates/testimonials in support of their qualifications/experience etc. may be attached with the application. Interview will be held in the office of the undersigned on 11th August, 2008 at 11:00 a.m. in School of Public Health, P.G.I.M.E.R, Chandigarh.

Rajesh Kumar
(Dr. Rajesh Kumar) 24/7/08
Head
School of Public Health,
P.G.I.M.E.R, Chandigarh

CC: Notice Boards of PGI & PU.

JOB RESPONSIBILITIES

Name _____ Designation: Training Coordinator

Supervisor _____ Date _____

1. Co-ordination with
 - NACO
 - State AIDS Control Society (Punjab, Haryana, Chandigarh)
 - Technical Support Unit (Punjab, Haryana, Chandigarh)
2. Facilitation
3. Management of the entire program
4. Procurement of office equipments and training aids
5. Capacity Building of staff

Name _____ Designation: Training Officer

Supervisor _____ Date _____

1. Co – ordinate with SACS and TSU Chandigarh
2. Creating time lines, calendar and work plan for each event
3. Development of training material and translating them into Hindi and Punjabi
4. Search and organize training material
5. Develop core group guidelines for communication
6. Coordinating all SACS, TSUs & STRC for outreach plan
7. Manage mid term and end year evaluation
8. Any other as required

Name: _____ Designation: Associate Training Officer

Supervisor _____ Date _____

1. Plan training schedules in consultation with SACS and TSUs.
2. Co – ordinate with SACS and TSU Haryana
3. Develop training calendar and work plan
4. Planning community based trainings
5. Assigning work to community consultant. Responsible for 2 community consultant
6. Search and organize training material
7. Management of training programs
8. Conduct operations research
9. Any other as required

Name: _____ **Designation:** Assistant Training Officer

Supervisor _____ **Date** _____

1. Co – ordinate with SACS and TSU Punjab.
2. Carryout pre and post tests of trainings
3. Analyze and compile final reports of training programs.
4. Document and share training out comes with SACS and TSU.
5. Internet search for training material.
6. Identify research areas for operations research.
7. Knowledge management – literature search, resource etc
8. Any other as require

Name: _____ **Designation:** Administration Assistant

Supervisor _____ **Date** _____

1. Maintaining office/staff files
2. Keeping record of staff attendance, leave
3. Coordinate with accounts assistant for ensuring timely salary, TDS etc
4. Facilitating training organization and report writing
 - a) Travel arrangements
 - b) Accommodation
 - c) Communicate for timely arrangements
 - d) Meetings and proceedings/minutes
5. Facilitating preparation of power point presentation
6. Resource management with Training Officers
 - a) Manuals
 - b) Modules
 - c) Audio Visual aid
 - d) Books
7. Develop website for sharing knowledge
8. Any other as required.

Name:

Designation: Accounts Assistant

Supervisor _____ **Date** _____

1. Maintaining accounts for all trainings
 - a) Arrangement of funds
 - b) Disbursement of funds
 - c) Maintain all the cash vouchers
 - d) Salary of staff
 - e) Financial and accounts record
2. Responsible for timely audit
3. Travel arrangements with admin assistant
4. Procurement of office equipments and training aids
5. Any other as required

Terms of Reference for Contracting State Training and Resource Centres

A) Background

National AIDS Control Programme Phase III (NACP III) is focused on saturating the coverage of core and bridge population through targeted intervention (TI) programme. To standardize systems and procedures operational guidelines have been developed on all categories of Targeted Intervention proposals namely, Men having Sex with Men (MSM), Female Sex Workers (FSW), Injecting Drug Users (IDU), Migrants and Truckers.

In order to ensure quality, capacity building of implementing agencies is required. Therefore, in order to focus on providing uniform, quality training to different categories of staff working with NGOs/CBOs viz. Program Managers, Counselors, Finance Accountants, Outreach Workers, Peer Educators and link workers. The National AIDS Control Organization has decided to institutionalize the training and capacity building process with the State Training and Resource Centers (STRC).

B) Objectives

1. Ensuring need based training of TIs as per NACP III's technical and operational guidelines.
2. Enhancing the capacity of NGOs and civil society organizations in proposal development for NACP funded targeted intervention projects;
3. Undertaking operational research and evaluation of TIs.

C) Scope of Work of STRC

D) Training:

1. The Consultant will be responsible for training the following human resources working in Targeted Intervention projects and other related personnel
 - i) Program Managers
 - ii) Finance and Administrative officers

- iii) Service providers such as
 - Doctors
 - Counselors
 - Nurses
 - iv) Outreach Workers, Link Workers
 - v) Monitoring and Evaluation personnel
 - vi) Any others as indicated by NACO
2. The consultant will identify agencies/persons at State / District level to train peer educators based on the prescribed modules, tools and aids. Efforts should be to decentralize such training as close to Peer Educators as possible.
 3. The consultant to ensure 40% of total faculty time on training, 20% on field visits, 20% on research and 20% on reporting and documentation.
 4. Building capacity of NGOs / CBOs / Civil Society Organizations based on the curriculum developed by NACO for each category of functionaries, the consultant shall design the structure of training course/module; develop case studies; design teaching aids; organize field visits; develop evaluation and assessment tools; grade the trainees in orders to identify these needing further training and attention; repeat training and undertake any other activity required to make the training knowledge as well as skill based.
 5. Provide to the client within a week of completion of the training course, a detailed report as prescribed at Annexure 1 specifically grading participants to help identifying these needing repeat training or additional help.
 6. NACO will provide prototype of teaching- learning materials/aids. Consultant to adapt them to local need, if required, translates into local language and ensures distribution to the trainees.

II) The consultant to develop capacity among NGO's / Civil Societies in proposal writing with the objective of identifying agencies to saturate coverage of TIs in the State.

III) Research and Evaluation

1. The consultant to establish a documentation centre wherein training materials, literature, tool kits, other resource manuals and materials in the form of audio-visual aids, case studies, documentaries, etc pertaining to HIV/AIDS in particular and the health sector and development in general collected and compiled. Inclusion of other areas such as livelihood, education, micro-credit to create linkages and developing a multi- sectoral approach would be desirable.
2. As the consultant is required to identify bottlenecks that are frequently faced by the implementing agencies, focus needs to be on problem solving. For designing such relevant training programmes consultants should undertake need assessment and evaluation of trainings through desk review and field visits.
3. Consultant to constitute an Academic Committee of not more than 10-12 persons and consisting of academicians, trainers, representatives from established NGOs imparting training at grass root level, social workers, representatives of the community, TI partners and one representative of SACS. The tasks of the Academic Committee will be to:
 - a. Identify, in order of priority, the categories of personal to be trained during the year.
 - b. Review the content and duration of the training
 - c. Identify best practice sites for field visits and resource persons as required
 - d. Approve the Annual Work Plan with budget.
 - e. Review the implementation of the work plan every quarter and work done by the Project faculty
 - f. The committee should meet at least three times in a year
 - i. During January for development and approval of the annual work plan to be incorporated in the AAP of the SACS
 - ii. During May to review the work conducted by STRCs as per the approved annual work plan and undertake mid-term corrective action, if any.

- iii. During September for evaluation of trainings so far conducted and proposed next step

D) Reporting obligations

Following reports to be submitted in the format to the client:

- a) Monthly report: as per the format at Annexure 2 and 3 to be submitted electronically on the 3rd of every month
- b) Minutes of the meeting of the academic committee within seven days of the meeting as on when held
- c) Report of any evaluation/ field visit conducted within 7 days of completion of such evaluation / field visits.

E) Personnel and Other Facilities to be provided by the Consultant

The consultant to provide the names and CV of all staff under the project to the Client. Concurrence of NACO on the persons appointed is mandatory. The faculty required along with the positions is as under:

Sl no	Category	No. of post	Qualification & experience	Salary Range	Functions
1	Training Coordinator	One	Essential: Post graduate in social science/sociology/anthropology/Statistics /public health with 8-10 years of experience in social development programmes. experience in conducting training developing curriculum and capacity building/human resource management. Desirable: Knowledge of public health	35-50,000 consolidated	1. Overall supervision and ensuring quality of training 2. Timely preparation of the annual work plan. Monitoring and reviewing the implementation of the work plan 3. Coordinating the training programmes:

			perspective and HIV/AIDS in particular will be desirable.		<ul style="list-style-type: none"> • Timely identification and procuring services of resource persons • Providing all logistic support for the training / field visits etc. <ol style="list-style-type: none"> 4. Imparting training 5. Convening the meeting of the academic committee. 6. Submission of report to the client as per requirement 7. Attend meeting of NACO/SACS as and when required. 8. Submission of SOEs/UCs as required to ensure constant flow of funds 9. Ensure timely completion of Audit
2.	Training Officer	2 (for less than 60 projects) & 3 (for	Essential: Post graduate in social science/sociology/anthropology/Statistics /public health with 7 years	25 – 35,000 consolidated.	<ol style="list-style-type: none"> 1. Provide inputs for preparing the Annual Work Plan 2. Develop training materials / case

		more than 60)	<p>of experience in social development programmes. Experience in conducting training developing curriculum and capacity building/human resource management.</p> <p>Desirable: Knowledge of public health perspective and HIV/AIDS in particular will be desirable.</p>		<p>studies / tools / teaching aids</p> <ol style="list-style-type: none"> 3. Impart Training based on the approved training curriculum and modules. 4. Develop pre and post evaluation tool to assess the impact of training 5. Submit process documentation / reports to Training Coordinator within 3 days of completion of training and provide feedback about the trainees to the SACS and TSU as appropriate 6. Undertake field visits and evaluate and submit reports within 3 days of completion of work / visit to the Training Coordinator with copy to SACS / NACO, if so required.
3	Accounts and	One	B.Com (Accountancy Hons) with atleast 3 years of	Rs.8000 to Rs.10000	1. To provide administrative,

	Administrative staff		experience		financial and logistic support to the project 2. Prepare and submit SOE and UCs to SACS and NACO
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Any relaxation of qualification, remuneration is permissible only after prior and written approval of DG, NACO.

F) Monitoring & Evaluation

- i) Monthly and quarterly reports should be submitted to NACO / SACS as per Annexure 1, 2 and 3
- ii) The Consultant shall hold regular meetings with SACS for sharing and discussing program progress, emergent lessons, and outcomes.
- iii) The annual evaluation for extension of STRC shall be conducted every April by a team formed by NACO (for renewal/ extension of the contract).

G) Deliverables for STRC

Sl.No	Activity	Timeline
1	STRC office set up and recruitment of staff	Within 45 days of signing the contract
2	Training complete of faculty members	Within 75 days of signing the contract
3	Constitute the Academic Committee to develop the Work plan	Within 75 days of signing the contract
4	Submission of the work plan with monitoring indicators	Within 90 days of signing the contract
5	1 st training to be launched	1 st week of the 4 th month from the date of signing the contract
6	Designing of research study	Within 9 th month of signing the contract
7	Obtaining approval for the study for NACO –	Within 11 months of signing

	R&D committee etc	the contract
8	Launching of operation research	With 12 th month of signing the contract

H) Facilities to be provided by the Client

NACO

- Operational guidelines and training curriculum along with prototype of training modules for trainees / teaching aids
- Assist the STRC to identify resource persons / best practice sites for training
- Release funds within 15days of receiving Utilization certificates
- Accord formal approval of faculty selected

SACS

- Assist the consultant in recruitment of faculty
- Assist in identifying trainers and resource persons, particularly from within the community and arrange for field visits to demonstration sites as and when required by STRC
- Attend the Academic committee to ensure training work plan is in accordance with the need of and aligned to the Annual Action Plan of SACS

Questionnaire for the STRC Resource Persons

Objectives

- To understand their training skills and overall training knowledge
- How is their understanding of NACP III and TI (Targeted intervention)
- What is their earlier experience with TI and capacity building

Set of broad questions:

1. What are your earlier experiences of training for targeted intervention?
2. According to you what are few musts for a good training?
3. How do you plan for any training (Need identification, planning, execution)?
4. How many training you have received after joining STRC?
5. How your training needs were identified?
6. What is the most important skill set for being a good trainer?
7. What are major thrust areas in NACP III?
8. How do you think you can play a major role in the entire Programme?
9. For Programme management point of view how important is capacity building?
10. How do you see your capacity enhancement after you joined STRC?

Leading questions for FGD with trainees (NGOs)

1. How many STRC training programmes have you attended in the last year? Which ones?
2. How long for? Residential or non-residential?
3. Was the fieldwork or any other kind of practical session included?
4. How many other participants were there and how many resource persons?
5. Were you asked to fill any needs assessment form before attending the training?
6. Were you asked for your expectations before the training took place? If yes, how?
7. Were your expectations met? If not, why?
8. Could you mention the major strengths and weaknesses that you have generally felt about the training methodology (facilitation style, training tools, etc)

STRENGTHS	WEAKNESSES

9. Was the training sessions well organised and planned?
10. Was the training venue comfortable and suitable to training activities?
11. Was the workshop schedule too rigorous, not rigorous or just right?
 Rating Options: 0 = No/none of the time, 1 = Somewhat/some of the time
 2 = Mostly/most of the time, 3 = Very much/all the time, n/a = Not applicable

13. Facilitation/Trainer

Was the trainer well prepared?	
Were the objectives of the training sessions clear?	
Was the trainer's presentation well organized?	
Did the trainer use clear language?	
Was the trainer audible (i.e. speak loud enough)?	
Did the trainer use appropriate body language (i.e. facial and body expressions including good eye contact)?	
Were participants given a space to interact during the training sessions	
Did the trainer express appreciation for participant input?	
Did the trainer treat participants with respect?	
Did trainer respond to group signals (i.e. discern the mood of the group, by noticing and responding appropriately when participants appeared to be upset, tired, or confused)?	
Did the trainer use a variety of training methods effectively?	
Did the trainer use group work or case studies?	
Did the trainer effectively facilitated people's participation?	
Did the trainer ask and use feedback from the participants?	
Did the trainers probe for questions and concerns?	
Did the trainer use creative visual aids?	
Did the trainer position the visual aids suitably (i.e. so everyone could see and use them)?	
Did the trainer effectively link the visual aids to relevant information?	

14. Were you able to apply the training learning to your work? If not, why?

15. During the training, was there space for you to provide an ongoing feedback on each session?

16. At the end, was the training evaluated through a form or else?

17. What are your suggestions for improvement?