

EVALUATION REPORT

State Training and Resource Centre Nagaland and Manipur

Submitted by

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List of Abbreviations

FSW	Female Sex Workers
IDUs	Injecting Drug Users
MSM	Men having Sex with Men
ORW	Out Reach Worker
PE	Peer Educator
PM	Programme Manager
SOE	Statement of Expenditure
TI	Targeted Intervention
TSU	Technical Support Unit
TNA	Training Needs assessment
FSW	Female Sex Workers
IDUs	Injecting Drug Users
MSM	Men having Sex with Men
ORW	Out Reach Worker
PE	Peer Educator
PM	Programme Manager

Executive summary

The Evaluation report contains observations and evaluators comments on process, quality and quantity with regard to the performance of the STRC on various indicators put down by NACO. The three components examined here are Programme Delivery Organizational Capacity and Finance.

Programme Delivery: The State Training and Resource Centre for Nagaland and Manipur is hosted by the Emmanuel Hospital Services and is located in CISHR, Dimapur, and Nagaland. From 2004 EHA has been involved with implementation of Targeted Intervention Programmes in Manipur and Nagaland supported the Bill and Melinda Gates Foundation. EHA is also a part of Christian Institute of Health Sciences and Research a society involved in running a tertiary level hospital facility. EHA brings with is years of experience of working on a variety of health concerns including HIV.

The initiation of the contracting procedures was as early as September 2008 while the contract got signed only by 29th April 2009 (the dates were amended later by NACO). The recruitment of staff took over a month and half and this was followed by the Academic Committee meeting and training roll out in September 09.

From September onwards the pace of scheduling and roll out of trainings has been significant. For the past five months the programmes have been held on time and with careful planning. An average of four trainings have been conducted every month. However in some instances planned trainings could not be conducted owing to paucity of time.

The STRC has used TI Evaluation reports as its base for identifying training needs for the past year. However now that most cadres have undergone at least one training the STRC would need to look at conducting both field visits to support the processes hands on as well as conduct a more detailed needs assessment of the TI partners, to conduct relevant refreshers.

The STRC has a sound resource pool catering the various sessions and topics in their trainings. Most of the faculty currently conducting sessions are from within the STRC team or SACS or Project Orchid. A challenge for them would be to engage newer resources and to build their capacities to cater the trainings needs of the TIs.

Efforts have been made towards developing Pre and post evaluations for all the trainings. Stress needs to be given towards capturing the understanding of the participants, both by relooking at the methodologies used as well as the formulation of the questions itself.

Training quality assessment and monitoring would be the function of the Academic Committee, however owing to budgetary constraints the committee has been able to meet only once in the past year. The budget for AC meetings would need enhancement in order to make quarterly meetings possible.

One of the challenges stated by the STRC has been in relation to their coordination with the respective SACS. A consultation or coordination meeting between NACO, NERO, MSACS, NSACS and STRC would be needed to overcome the challenges in this respect. Another bottle neck faced by the team has been with regard to allocation of budgets for various components. Travel and Academic Committee budget allocations are examples.

The support of EHA is evident in the support of programme and administrative staff designated to the STRC. However a stronger guidance and monitoring of the team would ensure a marked difference in performance. The team is growing and owing to a variety of reasons has had a limited time to conduct its activities however in the coming period given the opportunity it does show potential to evolve.

Background

1.1 State Training and Resource 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) programmes. To standardize systems and procedures, operational guidelines have been developed for 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).

1.1.1 **Purpose:** The following exercise is being undertaken to evaluate the performance and quality of State Training and Resource Centre (STRC) Nagaland and Manipur

1.1.2 **Objectives:** To conduct a year end evaluation of STRC Nagaland and Manipur

1.2 Evaluation Methodology

Evaluation consultant Ms Roshni Subhash and Mr Pankaj Sarma, NERO spent three days with the STRC and undertook a review of the work done on various deliverables and indicators developed. To achieve this, documents and reports were reviewed, discussions and interviews with staff and faculty and NGOs trained by the STRC were also held. The team also interacted with MSACS and NSACS to seek their comments and feedback on the activities of the STRC.

2. Evaluation Schedule

Evaluator 1

Day	Activity
26 th February 2010	Meeting with Nagaland SACs
27 th February 2010	Introductory meeting with STRC
	Discussions with STRC team on Programme Delivery
28 th February 2010	Discussions with Team on Organizational Capacity
1 st March 2010	Discussions with Training Participants and Faculty.
2 nd March 2010	Meeting with Manipur SACS and Interactions with Manipur STRC team

Evaluator 2

Day	Activity
26 th February 2010	Meeting with Nagaland SACs
27 th February 2010	Introductory meeting with STRC
	Discussions with STRC team on Finance.
28 th February 2010	Discussions with STRC Team on Finance

Key Findings

3.1 STRC Fact Sheet

1. Basic Details

A.	Name of the STRC	EHA-STRC for Manipur & Nagaland
B.	Name of the Implementing Partner	Emmanuel Hospital Association
C.	States/ UTs Covered	Manipur & Nagaland
D.	Number of Districts covered	Nagaland – 11 , Manipur – 9
E.	Date of Contract with NACO	15 th September 2008 was date of the original contract. However owing to delay in the final signatures the contract finally got signed in April and letter from NACO now states the amended dates as 29 th April 2009.
F.	Date on which started functioning	The STRC team was recruited by the 1 st Of July 2009
G.	Number of TI partners covered	39 TI's in Nagaland & 54 TI's in Manipur
H.	Location of STRC:	CIHSR Complex, 4 th mile. Dimapur, Nagaland

2. STRC Team

Position	Number supported by NACO	Number supported by EHA ¹
Training Coordinator	1	-
Training Officers	3 ²	4
Admin And finance		2
Total	4	6
Faculty Members	Nagaland – 17 Manipur – 26	

2. Details of the Academic Committee formed by STRC

SN	Name of committee members	Representation	Joining ³
1.	Prof. J. Abraham	Associate Director, Christian Institute for Health Sciences and Research, Dimapur, <i>Academician</i> .	8 th Sept 09
2.	Dr. Bernice Dzuwichu	Joint Director-TI, <i>Nagaland State AIDS Control Society</i> . Kohima.	8 th Sept 09
3.	Mr. Chenitheng W. Humtsoe	Executive Director, Bethesda Youth Welfare Centre, Dimapur. <i>Trainer and TI partner</i>	8 th Sept 09
4.	Ms. Ela K	Director, Prodigals' Home, Dimapur <i>Social Worker and TI partner</i>	8 th Sept 09
5.	Mr. Kreibu Nakhro	Chairman, Network of Nagaland Drugs & AIDS Organisation <i>Trainer and Social worker</i>	8 th Sept 09
6.	Dr. Akoijam Brogen	Associate professor, Community Medicine Department. Regional Institute of Medical Sciences, Imphal, <i>Academician</i>	“

¹ EHA has extended support of some of its staff towards STRC activities, some of them spend their entire time with the STRC while others are involved part time.

² Only two Training Officers have been sanctioned by the contract. However there are three Training Officers recruited by EHA to meet the training load of the two states. Two Training Officers are placed in Manipur and One training Officer and Training Coordinator are based out of Nagaland.

³ As there were no specific dates available for consenting to be part STRC, the date of the first AC meeting is being considered as the joining date.

7.	Dr.H.L.Leinsang	Deputy Director(Training), <i>Manipur State AIDS Control Society</i>	“
8.	Mr. Abhiram Mongjam	Joint Director, <i>TI Manipur State AIDS Control Society</i>	“
9.	Mr. Deepak Leimapokpam	President, Manipur Network of Positive People (MNP+), Manipur, <i>Community Representative</i>	“
10.	Mr.Yumnam Shasikumar Singh	General Secretary, Social Awareness Service Organisation (SASO), Imphal , <i>Community representative</i>	“
11	Dr. Rebecca Sinate	Regional Program Advisor- TI, NERO-NACO Guwahati.	“
13.	Ms. Huidrom Rosenara	Regional Program Advisor-Training NERO-NACO Guwahati	“
14.	Dr.Tara Manchin Hangzo	Co-ordinator, HIV/AIDS. EHA, New-Delhi	“
15.	Mr. Simon W. Beddoe	Training Coordinator- STRC, EHA Dimapur, and Nagaland.	“

3.2 PROGRAMME DELIVERY

3.2.1 Identification and Capacity Building of Faculty

3.2.1.1 Identification of Faculty Members

The STRC has identified a resource pool in both states. In order to identify these resources suggestions were solicited from NERO and SACS. The final list has been circulated to the stakeholders and has not met with any objections.

EHA itself has been working on Targeted Interventions in both Manipur and Nagaland therefore has been able to use its own experience and resources towards building the faculty pool. There are 26 members listed in the resource pool for Manipur and 17 for Nagaland. There range of topics covered by the resource pool's specialization is adequate to cater to the training requirements.

However owing to time constraints expressed by resource persons from time to time the trainings are largely facilitated by the STRC team members as well as Officers from Project Orchid. A challenge for the STRC would be to garner wider resources for its trainings and build capacities of emerging leaders/trainers from the TIs itself.

3.2.1.2 Training of Faculty Members

The team shared that most members of the resource pool have extensive experience of working on concerns related to targeted interventions. The need for any specific training or orientation was not felt. Some of the members listed in the resource tool have been trained in the TOTs organized by NACO.

The STRC team members and the EHA-Orchid team members are part of the resource pool and through the initiative of EHA they are offered regular opportunities for enhancing their skills and knowledge.

3.2.1.3 Capacity of Faculty Members

Review of CVs

STRC currently does not have available with it CVs of all the members of the resource pool. Attempts had been made to gather information from the resource pool based on a format circulated to them. The format would provide both an overview of the structured trainings and inputs received by the individual as well as their work experience. However they have not received sufficient responses on the same.

A review of the CVs available with the STRCs and the profiles of the resource pool members indicate that a majority of the resource pool members have experiences with various aspects of targeted interventions. The pool contains individuals with a diverse range of experiences and profiles ranging from medical professionals, Outreach and Programme Management experiences, counselors etc and among these are members who are part of the community that the targeted Interventions caters to. The STRC team also did share that an average of 25-30% of its resource pool have at some point of time been or still are part of the IDU community. This would in itself lend an edge to their understanding and delivery of trainings.

Interview with faculty⁴

The evaluator interacted with three of the STRC faculty. They are currently working with organizations/projects associated with the concerns of HIV and drug use. The faculty interviewed has considerable experience with Targeted Interventions in general and on topics that they have conducted sessions on in specific. Most faculty have indicated that the resource pool would benefit from periodic meetings and capacity building.

3.2.2 Trainings by STRC

3.2.2.1 Identification of agencies/individuals to train peer educators

The STRC has been contracted from the April 09 and by the time the office was set up and activities were rolled out the Annual Action Plan of the respective SACS were already in place. The team shared that for the past few years both Manipur and Nagaland SACs had contracted the

⁴ Details in annexure

RRTCs for training of peer educators and the same arrangement had been built into the SACS'S AAPs for 2009-2010. Therefore the selection of resources for training of peer educators has already been completed by SACs. In the instances for Manipur however the STRC was requested to handle the training load of around 216 peer educators and the training is currently in progress. The STRC has not been approached by the RRTC for any support regarding the facilitation of trainings etc, However there have been few interaction with occasional requests for resource materials and modules.

3.2.2.2 Number of trainings conducted

The work plan for the STRC was drafted in consultation with the two SACS and with reference to their respective AAPs. The work plan was given its final shape post the consultation with the Academic Committee meeting in September, 09.

Manipur and Nagaland have different arrangements for finances with their respective SACS. The Manipur team received an amount for all its trainings lump sum. However the amount released only took into account only some of the trainings which were a part of the work plan. As the finance released to them could not accommodate more trainings(and the team was already working on tight schedules) other trainings that were approved by the Academic Committee could not be completed. In Nagaland however the team was working on trainings through reimbursements from SACS. This allowed for greater flexibility in scheduling trainings and modifying their work plan in accordance to changing needs and priorities.

The tables below look at the trainings scheduled in the work plan and their status along with trainings conducted that were not originally part of the work plan. The trainings scheduled were all in consultation with the respective SACS.

Nagaland

S.no	Training name/ topic	Cadres	No of Batches	Part of Original work plan y/n	Status	Pre and post test	Field visit	Actual training load
1.	Programme management	PMs	1	Y	This was the 1 st training post the formation of STRC. SACS conducted it and it was used as a platform to introduce the TIs to the STRC and orient the STRC on the training preparations and processes.	Y (See it)	N	38
2.	Data Collection tools	Accountants, PEs, Counselors, nurses	4	Y	2 batches were held for counselors and nurses. PE trainings were to be taken up by the RRTC.	Y	N	43
3.	Induction training	PD , PM , PEs, Counselors, ORWs, Nurses,	4	Y	2 batches were conducted and the PEs training load was taken up by the RRTC. Site visit to Bethesda Youth Welfare Centre, TI Chumukedima.	Y	N	PD 3 PM 8 Acct 8 N 7 ORW 20 Total 46
4.	Outreach Planning	ORWs	3	Y	The training load was completed in 2 batches	Y	N	70
5.	Harm Reduction	PM, ORW, PE, Nurses	3	Y	Not completed as module is	-	-	-

					awaited from NACO.			
6.	Programme Management	PD	2	Y	Not Completed as modification of the module was still pending.	-	-	-
7.	Programme Management	ORW	3	Y	Not Completed	-	-	-
8.	Financial Accounting	PD, PM Accountants	3	Y	SACS will be training accountants. PM PD not completed	-	-	-
9.	Service packages for New TIs		1	N	Completed	Y	N	PM 8 ORW 18
10.	Community Mobilization (macro)	PD PM			2 batches completed	Y	N	48
11.	Community Mobilization (micro)	ORWs			2 batches completed, 1 to begin on 2 nd to 4 th March '10	Y	N	57
12.	Proposal development	PD PM			Planned for March			

Manipur

S.no	Training name/ topic	Cadres	No of Batches	Part of Original work plan y/n	Status	Pre and post test	Field visit	Actual Trng Load
1.	Programme Management	PD	2	Y	Not Completed	-	-	-
2.	Programme Management	PM	2	Y	Completed	Y	Y	54
3.	Outreach planning	ORWs	6 ORW	Y	The training for ORWs have been completed and 3 batches of PE trainings completed and the rest are in process	N	Y	156

4.	Outreach planning	Some PEs	7	Y	3 pending PE	Y	N	Trngs in process. As of now 135
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3.2.2.3 Field Visits for the training participants

The STRC has undertaken with the SACS discussions on the development of learning sites. The sites are being looked at being identified and strengthened with the purpose of providing an exposure to training participants into the implementation of processes and systems discussed during the trainings and the site would also serve as a model for other TI's in the state and outside. Post preliminary discussions with the JD – Nagaland SACS, the immediate focus would be to identify IDU intervention learning sites based on the outcomes of the TI evaluations. Two TIs, Kripa and Bethesda have been selected. A phase wise process too has been outlined for the development of these sites, which include streamlining of documentation and procedures, strengthening service provision, providing on site trainings etc. The STRC staff has also visited these sites for preliminary assessments. However, only one batch has been taken for the field visit to these sites.

In Manipur, batches of Outreach Workers have been taken for Field Visits, These sites have been recommended by the SACS and they are over 10 in number. No formal criteria was in place for these selections. The team shared that the though the participants did enjoy visiting the TIs , it would be inappropriate to assume that the field visits complimented the classroom sessions as currently the trainings on planning and data collection tools were on formats that the TIs were not using. The team felt that what was available for view and learning at the site was not in Tandem with the trainings which were attempting to bring in new procedures and systems.

3.2.2.4 Training needs Assessment/Capacity assessment of NGO partners

There has been no specific exercise conducted to gauge the training needs of the TI partners. However the evaluation reports of the TIs were reviewed by the STRC team and an effort was made to cull out the overall need for the state based on these reports. For the newly contracted TIs were provided the induction trainings by the STRC in the current year.

3.2.2.5 Pre and Post training evaluations

During the initial trainings of the STRC, the pre test questionnaires administered consisted largely of open ended questions. The team shared that based on feedback from NACO, in questionnaires formulated for the later trainings there were attempts to make the findings easily quantifiable and analysis scientific. They have since been using multiple choice questions. The questionnaires are designed covering the major topics and are fairly comprehensive.

The difference in results between pre and post test is on an average between 10-20% with pre test results showing 40-50% correct responses and post test responses not often crossing 70%. On review of the questionnaires it could be derived that these results could also bear a relation with the nature of questions asked and the language used. The team could work towards simplifying some of the language used for the questionnaire and experiment with the nature of questions and methodology itself (MCQs, True/false, agree/disagree, polling booth methods etc.).

3.2.2.6 Documentation of training including best practices.

All trainings have been documented by the STRC. The reports cover the process involved in the training, methodology some participant responses feedbacks along with analysis of the pre and post tests. There has been no focused effort to document the best practices.

3.2.2.7 Translation of Training Modules.

There were no focused attempts on translation of the training modules or materials. The team shared that facilitation and discussions were held in the languages understood by the participants but however translation would be a very daunting task as there are close to 16 languages/dialects in the state.

3.2.2.8 Post Training field Visits

No post training visits have been undertaken by the STRC. The same however is planned for April 2010.

3.2.3 ACADEMIC COMMITTEE AND PROGRAMME PLANNING

3.2.3.1 Constitution of Academic Committee and its Meetings

A common Academic Committee has been formed by the STRC for the two states. The committee draws representation from the SACS, STRC and NERO along with various individuals involved with HIV related interventions.

The Committee met on 8th September 2009. The TOR and, Work plan of the STRC and decisions regarding the training of various cadres was undertaken. The committee has reviewed the work and also made comments on the same. Owing to budgetary constraints the committee has not been able to meet again.

3.2.3.2 Development of the work plan, monitoring indicators and the Budget

The STRC work plan and budget were developed between mid august and mid September. The same has been discussed with the Academic Committee in Sept 09 and the finalized plan was sent to Nagaland SACS on 11th September 2009 and Manipur SACS on 10th September 2009.

The STRC did share that as the Annual Action Plans of the two SACs were already finalized prior to the STRC being formed, the STRC work plan was based on the pre decided AAPs. The plans have undergone some changes in the course of training roll out.

3.2.3.3 Identify categories of personnel to be trained during the year

After discussions with the various SACs the STRC is finally allocated only Project Directors, Project Manager's and Outreach workers as a part of their training load. In some instances nurses have been invited for the trainings on data collection tools. The STRC is also responsible for conducting induction trainings for all cadres of new TIS. The agencies identified by SACS for the various cadres are:

1	Project Directors	STRC
2	Project Managers	STRC
3	Outreach Workers	STRC
4	Peer Educators	Respective RRTCs. (in Manipur however responsibility of 216 PEs is with STRC)
5	Counselors	Agencies identified in the Global Fund Round 7
6	Doctors	SACS
7	Accountants	SACS

3.2.4 DOCUMENTATION AND REPORTING

3.2.4.1 Documentation Centre

The STRC maintains a small documentation unit where various training, operational guidelines and HIV TI and IDU related documentation is maintained. This could be an initial step but would need more focused work and budgetary sanction to grow.

3.2.4.2 Website www.eha-strc.org/

The STRC has a website that has been developed with the initial support from EHA. However the website is inadequately maintained and has only been updated once since the functioning of the STRC. Lack of funds for website development and the pressure of training loads were reasons for stated for inadequate maintenance.

3.2.4.3 Quarterly Newsletters

No newsletters have been printed as it is not mentioned in the list of deliverables nor is there a budgetary allocation for the same.

3.2.4.4 Timely Submission of reports

There has been no fixed period for submission of monthly reports by the STRC.

3.3 Organizational Capacity

3.3.1 Recruitment and induction

3.3.1.1. Office Setup

The STRC is housed within the CISHR campus and the space has been available since the contract signing. However the team was recruited only in mid June.

3.3.1.2. Recruitment of Staff

STRC Team

S.no	Name	Role
1	Simon W Beddoe	Training Coordinator
2	Vizhodenu Savi	Training Officer
3	Sobhana Sorokhaibam	Training Officer
4	Chakpram Umananda	Training Officer

The above mentioned positions were advertised for and interviews were conducted for a suitable candidate. Mr. Simon Beddoe, Training Coordinator joined the project on 15th June 2009 and the training officers in the week after.

EHA Support

1	James Kikon	Support to STRC , Dimapur, Nagaland
2	Yanchen Yanthan	Support to STRC Dimapur, Nagaland
3	Aribam Rishikanta Sharma	Support to STRC Imphal, Manipur
4	Moses Liepekho	Support to STRC Imphal, Manipur

In addition to the positions in the STRC, EHA has also extended the support of its team members towards the STRC activities. The team shared that the STRC support in Dimapur has been working full time towards STRC activities since Nov 09. In Imphal one member of the STRC

support team is currently spending a majority of his time with the STRC and the other is supporting the STRC as well as Orchid in order to strengthen his experience with the implementation of TIs.

3.3.1.3. Induction of project staff

The project staff was given an overview of the job responsibilities at the time of the interview. Additionally, the Project Coordinator and the team conducted a day long orientation and discussion with his team on the activities to be undertaken by the STRC.

3.3.2 Staffing

3.3.2.1. Staff Turnover / Attrition

None of the staff recruited have left service.

3.3.2.2. Staff's understanding of Role

The evaluators undertook discussions with the STRC staff along with some of the support team members on their individual responsibilities. They have all received details of their responsibilities along with their appointment letters and are aware of their responsibilities. The Training Coordinator is based out of Dimapur and leads the team in planning its activities, conducting the trainings and coordinating with the SACS, NACO and NERO. The training officers are actively involved in the organizing and facilitating the trainings. Most members including the EHA support to STRC is actively involved in conducting sessions. The team members have prior experience of working with TIs and other health programmes.

3.3.3 Record keeping and Procedures

3.3.3.1. Maintenance of Staff Operational Records

Each of the offices (Dimapur and Imphal) of the STRC have in place systems for recording both attendance and movement of the staff members. Records regarding training documentation and reporting, Learning site development, pre and post test scores compilation and analysis etc were reviewed and found to be satisfactorily maintained. However details of resource pool members and their profiles needs to be maintained better.

3.3.3.2. Staff Meetings

The team of the STRC is divided between Dimapur and Imphal. Though the Training Coordinator does visit Imphal, the entire team does not meet together for any staff meetings. The travel budget sanctioned for the STRC is not sufficient to support this. The team members did share that meetings to discuss work progress and exchange of ideas was a need and would help them in learning from each other. There were different methods and procedures followed by each of the teams in maintaining track of individuals trained, pre test post test analysis, process documentation. Some form of regular sharing by the teams would definitely go a long way in their growth. It would be important for this aspect to be considered for financial allocation if the contract is extended.

3.3.3.3 Governance and Leadership

The team members share that they were satisfied with the work environment and the support of their colleagues. The STRC team is given adequate independence in directing the course of its activities and receives extensive support of the staff and infrastructure available within EHA. The EHA support and environment have been critical in the functioning of the STRC.

3.4 Financial Evaluation

3.4.1 Contract, its validity and Budget:

Feeling the necessity, to cater the training needs of TI staff for the state of Nagaland and Manipur, NACO selected Emmanuel Hospital Association (EHA), Nehru Place, New Delhi-110019 to establish a State Training and Resource Centre (STRC) at Dimapur, Nagaland. Accordingly, a contract vide No. 11/2008-09 on 15th September 2008 was signed between EHA as consultant and NACO, Nagaland SACS and Manipur SACS as client, to be affective from the date of joining for a period of one year or any mutually agreed date. Later the period of contract was agreed one year wef 29th April 2009 to 28th April 2010.

As per the mutually agreed contract, the budget for Remuneration and reimbursable are as below:

Budget Head	Description	Total Budget in Rupees
1.Remuneration of staff		
Training co-ordinator	@Rs. 30000/- pm for 1	3,60,000/-
Training officer	@Rs.15000/- pm for 2	3,60,000/-
Trainer Consultant	@Rs. 1000/- pd for 6persons for 50 days	3,00,000/-
Community consultant	@Rs.500/-pd for 6 persons for 120 days	3,60,000/-
Sub total – 1		13,80,000/-
2. Reimbursables		
Local transportation	@Rs. 15,000/- per month	1,80,000/-
Trg. Material development	-	1,00,000/-
Phone/mails/courier	@Rs. 2,000/- per month	24,000/-
Postage and stationery	@Rs. 2,000/- per month	24,000/-
Computer (2 desk top)	@Rs. 40,000/- for two	80,000/-

LCD projector		60,000/-
Printers 2 Nos	@Rs. 10,000/- for two	20,000/-
Operational Research		1,00,000/-
Hall Hiring charges	@Rs 2,000/- pd for 40 days	80,000/-
Management cost 5%		94,400/-
Sub total- 2		
Total		21,42,400/-
Service charge (to be deducted at source)		2,64,800/-
Gross total		24,07,200/-

As per agreement the fund is to be released as below:

Sequence	%	Total release	(-)Service Charge	Receivable by STRC
Signing of the contract	35	8,42,520/-	92,680/-	7,49,840/-
Completion of half year wp	20	4,81,440/-	52,960/-	4,28,480/-
Completion of 3 rd qtr.wp	20	4,81,440/-	52,960/-	4,28,480/-
Submission of final UC	20	6,01,800/-	66,200/-	5,35,600/-
Total	100	24,07,200/-	2,64,800/-	21,42,400/-

Hence, as per the agreement, NACO should release grant worth Rs. 749840/-, 428480/- and Rs. 428480/- respectively as 10 months of contract is already over. The rate of service charge has come down from 12.36 to 10.30%. While releasing the grant of first two installments, 10.30 has been deducted from the STRC receivable amount. Accordingly they received Rs. 1,21,367/- less while receiving the first two installments of grant as below:

Installments	Releasable	Service charge	Actual receipt
First	7,49,840/-	77,234/-	6,72,606/-
Second	4,28,480/-	44,133/-	3,84,347/-

3.4.2 Operation of Bank Account and availability of Fund:

Both the installments of grant was released in the Name of EHA which was deposited in their Delhi Account. EHA Dimapur unit was having a Savings Bank account with SBI, Dimapur main branch vide No. 30211125064 . The account is jointly operated by Dr, Langkham and Mr. Gomang. This account is now being utilized only for the STRC. Hence STRC is having a separate account as on date. While grant is released by NACO, it is initially deposited in the Delhi EHA account and the entire money is transferred to Dimapur Account. Though is an office at Imphal also to cater the needs of the Manipur state there is no separate Bank account at Manipur. Only salary is paid through Bank transfer but all programmatic expenditure is done in cash.

The entire sum required for the programme is drawn as advance and spent in cash. This is because of monitoring only one Bank account for both the states and signatories sit either in Guwahati office or Delhi. The availability of fund and its utilization till 28th Feb is as below:

Receipt	Amount	Payment	Amount
Grant-in-Aid 1 st installment	6,72,606/-	Staff salary	9,90,879/-
Grant-in-Aid 2 nd installment	3,84,347/-	Furniture & equipments	2,12,289/-
Nagaland SACS	3,97,680/-	Office maint. Cost	88,653/-
Manipur SACS	11,86,300/-	Travel and meeting cost	14,08,955/-
Bank interest	4,445/-	Management cost	72,600/-
Excess of exp. over income	10,69,263/-	Training cost	13,38,945/-
Total	41,12,321/-	Total	41,12,321/-

From the Receipt and payment account it is clear that STRC has to spend much more than their actual receipt. However, under program Head the expenditure is Rs. 13,38,945/- (some advances are still to be adjusted) against their total receipt of Rs. 15,83,980/-. Though there are receivable from Nagaland SACS, balance advance granted by Manipur SACS are still laying with them. But out of total receipt of Rs. 14,59,078/- for the manpower and office maintenance their expenditure is Rs.27,73,376/- which is almost double the grant received and also much beyond the total approved budget.

In spite of not spending under some of the head like Hall hiring, Operational research, development of training materials etc. and in spite of joining of personnel from 17th June 2009 against the validity of the contract starts from 29th April 2009, the operating cost is exceeding the limit. This is because, engaging one more training officer, payment of salary as per EHA norms including PF contribution which costs higher than the sanctioned budget and also due to 700% increase in the travel cost etc. The EC members belong to both the states. Due to difficult terrain for attending the meeting it needs air travel. There being no other head, the cost is booked under TA/DA head. The supervisory visit and also the inter unit visit of establishment in both the states, cause huge expenses and much beyond expectations and around 55% of the total budget.

3.4.3 Staffing pattern and salary

All the sanction posts are filled in the month of June 2010. Staff turnover is nil. Status of staff position is as below:

Name	Designation	Date of joining	Monthly pay	Budget provision
Simon Beddeo	Training coordinator	15 th June 2009	39,073	30,000/-
Chakpram Umananda	Training officer	17 th June 2009	29,233/-	15,000/-
Shobhana	Training officer	17 th June 2009	27,942/-	15,000/-
Vizihodhenu	Training officer	17 th June 2009	27,942/-	Nil
Vaccant	Community consultant(3)	-	-	3,60,000/-
Vaccant	Trainer consultant(3)	-	-	3,00,000/-

From the above table it is clear that against three regular posts, they have appointed four to maintain the two separate units. But they have not appointed community consultant or the Trainer consultant. It is also been observed that, there is no provision of support staff for office maintenance accounting etc. However EHA has provided two support staff one each in two locations paid from their own budget. Staff turnover is nil which is a very positive indication.

3.4.3 Programs Conducted: (till Feb 2010)

Though the date of agreement is 29th April and the positions were filled from 17th June 2009, after doing the initial work, they started conducting program virtually from October 2009. During this span of five months, they conducted about 20 programs ie on average four programs a month beyond the monitoring and follow up visits. The programs are relating to different level of TI functionaries. The actual training cost is much below the estimated budget in Dimapur and also within the upper limit in Imphal. In Dimapur, most of the time, the EHA facility is utilized for which they do not charge.

3.4.4 Maintenance of Financial records:

Hence, EHA is having a financial operating guidelines amended from time to time. They also use an accounting package called “Ex-Generation” used in all their offices across the country. It is specially developed for their organization. It is a semi automatic system and seems to be good. Bank reconciliation is part of the package. Bank Reconciliation Statement is prepared regularly.

3.4.5 Procurement of Assets and maintenance of Asset Register:

Though budget provision for procurement of assets was Rs. 1, 60,000/- only, they have purchased more items required for normal office functioning at a cost of Rs.2,12,289/-.The system of procurement is in order.

3.4.6. Submission of SOE and record maintenance:

Two types of SOE are prepared. One is for NACO funding for stuffing and reimbursable expenses and the other is for the expenditure related to the programs. The SOE for administrative expenses are prepared quarterly which is a requirement of the funding agency and submit regularly. For program activities, the activity wise SOE is prepared and monthly consolidated statement is

submitted to the SACS. Though Manipur has given advance on the basis of the work plan the submission of SOE is found to be regular.

The record maintenance is found perfect. The cash voucher, adjustment vouchers, receipt vouchers and the adjustment vouchers are kept in different files and serially numbered. Cash Book Ledger Book and Asset Register etc are computerized. Records relating to the programs are also maintained in a systematic way.

Annexure 1

Group Discussions with NGO staff⁵

Profile of the participants: 7 persons (2 Project managers 1 Counselors 4 ORWs) from the TIs in Dimapur and Kohima were a part of the group discussions. All participants present had attended at least 1-2 trainings with the STRC. A mix of both old and new TIs

Field visits: Most participants shared that they would like to have field visits to supplement the learning's of the trainings.

Selection of resource persons / facilitators /trainers: The group was overall satisfied with the knowledge of the resource persons and their methodologies. The language used, presentations were found satisfactory.

However the group did share that these resource persons have also been training TIs in the trainings conducted by the RRTC prior to the STRC formation. Therefore the group has been seeing them repeatedly and would like to interact with newer faculty. Bringing faculty from outside the state in order to learn from the experiences from other states was also stressed on.

Strengths or highlights of the trainings

- It provided the opportunity for TI staff to interact with each other.
- The resource persons had a good knowledge of their subjects
- The different methodologies used by trainers kept sessions interesting and simple to comprehend.

Weaknesses

- Repeated revision of formats and therefore repeated trainings on them.
- Concerns of MSM interventions needs attention especially for new TIs.
- Some resource persons lacked sensitivity in dealing with participant's mistakes or incorrect information that participants have.
- Community mobilization trainings were a little theoretical.

⁵ The discussion took place only with Nagaland TIs.

Annexure 2

Discussions with Nagaland SACS

The evaluators had an interaction with the Nagaland SACS Project Director and Finance Director on the February 26, 2010. The JD-TI was the point person for coordination with the STRC but she was not available for the interaction. The concerns raised by the team were largely regarding the coordination of the STRC with SACS.

- The Finance Director pointed out the fact that the trainings were not taking place as per the original schedule and therefore new budgets should be sent in prior to the training so that reimbursement processes are made easier. He also requested for copies of the original attendance lists at the time of submission of bills.
- The PD shared that the TIs were a bit unsure of the STRC currently and it would be more beneficial if the SACS sent out the invites. The SACS was also keen on receiving lists of TIs who have not sent their staff for the scheduled trainings.
- They also shared that the STRC did not currently have a facility to host trainings and residents and should make provisions at the earliest.

The team however maintained that the glitches arising in functioning were largely related only to the procedures and overall they did not have any major concerns regarding the STRC's activities /

Discussions with Manipur SACS

At Manipur the evaluator met with the Project Director, Joint Director- TI, and Deputy Director TI.

- The primary concerns raised by the team were with that they were not regularly updated regarding the training schedules and reports. The STRC team shared that all schedules were shared and reports sent by email to three email ids of the SACS. After some deliberation on these issues it was finally suggested that hard copies of reports and other documents be sent to SACS.

- The DD also expressed a degree of dissatisfaction with the resource pool and selection of members sent for TOTs. The STRC team clarified the processes through which they had accommodated the only the SACS recommendations for the TOTs.
- To enable smoother coordination monthly meetings could be scheduled with the STRC point persons in SACs and minutes could be circulated to the PD and the others.

Annexure 3

Discussions with Faculty

Dr Collins, Clinical Coordinator, EHA

Dr Collins has conducted sessions on various clinical components of the trainings of the STRC. He has intensive experience of the subject matter that he trains on and being a part of EHA – Orchid he has been able to understand the field situations that the TIs work.

He spoke of the challenges faced in training the IDU interventions on tools and service packages which are largely developed keeping FSW and MSM interventions in mind. Making these formats and concepts for IDUs and delivering them in a manner that would be relevant for teams working with IDUs was important. He felt that a common sharing and orientation of the resource pool on this would be beneficial.

Ms Ela Mary, YARD

Ms Ela Mary has been associated with targeted interventions and serves as a resource to the STRC on programme Management, Outreach planning and Mobilization related sessions. She shared that the STRC did brief him prior to the trainings with regard to the profile of the participants and supported her in her preparation by providing her with updated information on the NACO guidelines, resource material and presentations.

She suggested that there be some onsite hand holding and support for the TIs by the STRC staff as it would help them incorporate learnings to practice. She also observed the need for field visits for the training participants.

She shared that the STRC could conduct quarterly meetings for review or for capacity building of the faculty.