

Oversight Committee Visit Report

HIV/AIDs Disease Component-Baluchistan

Quetta
15th -16th Nov 2023

BACKGROUND:

Oversight Committee visited Quetta from 15th November to 16th November 2023 to meet with Principal Recipients, Sub- Recipients and partners working with Global Fund grant (GFATM) NFM III implementation under the HIV/AIDs disease component. Oversight mission arranged preliminary meeting with relevant stakeholders to understand the performance of Global Fund Grants and to ensure that resources are being used efficiently and effectively for the benefit of the country.

ACKNOWLEDGEMENTS:

All OC members acknowledged the CCM Secretariat for coordinating and arranging this oversight visit where all the relevant soft copies of performance frameworks, SR agreements, grant agreements, budgets for both PRs were provided for Oversight members. CCM secretariat also shared Annual Plan for Oversight Committee.

Following was the Guidance of GFATM for Oversight as per

<https://www.theglobalfund.org/en/country-coordinating-mechanism/oversight/>

The following members had joined the visit:

Sr. no.	Name	Organization	Designation
1	Ms. Batool	UNDP	M & E Officer
2	Mr. Naveed Iqbal	HSA	Treasurer HSA
3	Mr. Zubair Khan	Association of People Living with HIV and AIDS	Provincial Coordinator Baluchistan
4	Mr. Aman Allah Kakar	Baluchistan CSO representative –SOCIO PAK	CCM Member
5	Mr. Hammad Murtaza	CCM Secretariat	CCM Coordinator

PURPOSE OF THE OVERSIGHT VISIT:

The following points were the purpose of the OC visit;

- HIV/AIDs components of GF Grants
- To understand that how the grants are working
- To follow progress and challenges
- To make recommendations to the PR on improving performance

OC VISIT SCHEDULE:

During this visit, OC members visited the following facilities in Baluchistan;

OC Visit Schedule								
November 15-16, 2023								
OC Visit HIV Disease Component –Quetta								
Sr, no.	Date	City	Name of station	Name of Facility	Estimated Time	SR/PR	Contact person	Contact No.
1	15-Nov-23	Quetta	Bolan Medical Complex	ART Center	9:00 am	Baluchistan AIDS Control Program	Ms. Batool Ali	0300-8380125
2	15-Nov-23	Quetta	DIC+ Site	HIV Prevention for Key Populations (MSM,TG-SW & FSW)	10:30 am	Socio Pak	Aman Ullah Kakar	0300-3878182
3	15-Nov-23	Debrief meeting	Debrief Meeting with Secretary Health/DG Health Baluchistan is to be held on November 15, 2023 at 2PM, if not possible the debriefing will done on 16th Nov, 2023					
4	16-Nov-23	Quetta	NZ-COPC's	COPC+Site	12:30 pm	NZ	Faisal	0333-7854064

KEY OBSERVATION AND RECOMMENDATIONS:

Date of Oversight Visit- 15 th November, 2023		
Name of the Venue	Site specific Progress/Observations/ Areas for improvement	Recommendations
Quetta-Bolan Medical Complex	GENERAL Observations:	
	1. It was observed that viral load data was not updated and case was missing whom VL was due. No viral load was conducted in Bolan Medical complex Quetta site for last 3 years, which is very alarming.	1. PRs must ensured and maintained updated data of viral load. There is need to develop regular effective monitoring mechanism regarding VL data.
	2. Very poor stock management was observed in ART sites and ARVs were given to the patients without following SoPs.	2. There is need to improve stock management and must follow SOPs.
	3. Data entry and counselors staff was not appointed in ART center.	3. PRs appointed qualified data entry and counselors as early as possible otherwise program can suffer.
	4. It was observed that the staff was	4. PRs should arranged capacity building training for staff regarding counseling and provided them necessary logistics items.

	<p>conducting counseling without proper training and logistics.</p> <p>5. Discrimination and stigma issues faced by PLHIVs in the health care settings, specifically in surgical issues.</p>	<p>5. Provision of Health Services completely free of Stigma and Discrimination, in Health Care Settings and Community, (especially at higher levels of health care delivery).</p>
Date of Oversight Visit- 15th November, 2023		
Quetta- DIC+ Site	<p>1. It was observed during OC visit, very poor coordination among center in charge and Lab in-charge.</p> <p>2. It was found that HIV Testing Data only available manually.</p> <p>3. It was observed that the staff was conducting counseling without proper training and logistics.</p> <p>4. Discrimination and stigma Issues faced by PLHIVs in the health care settings, specifically in surgical issues.</p> <p>5. There is no referral mechanism between TB and HIV clinic as vulnerable immune compromised patients are at verge of getting infections due to lack of mechanism of testing</p> <p>6. It was highlighted that very poor monitoring system is very poor in ART center. The staff even did not know their TORs.</p>	<p>1. There is need to improve stock management and must follow SOPs while giving ARVs to the patients.</p> <p>2. There is need to develop MIS system for record of HIV testing data.</p> <p>3. PRs should arranged capacity building training for staff regarding counseling and provided them necessary logistics.</p> <p>4. Provision of Health Services completely free of Stigma and Discrimination, in Health Care Settings and Community, (especially at higher levels of health care delivery).</p> <p>5. Coordination mechanism should be established for HIV testing, referrals and LTFU for those who are both HIV and TB positive.</p> <p>6. PRs should develop effective and strict monitoring mechanism tools for smooth functioning of the program. There is also need to conduct capacity building for staff. The staff should be aware about TORs.</p>
Date of Oversight Visit- 16th November, 2023		
Quetta-COPC- NZ and Site Visit	<p>1. It was observed that monitoring system is not up to the mark. There is no proper monitoring system at any facility.</p> <p>2. It was observed that untrained staff is working.</p> <p>3. Nai Zindagi organization has been facing a lot of problems because of Govt. Drug free campaigns as they have no access to those patients for their services.</p> <p>4. Discrimination and stigma Issues faced by PLHIVs in the health care settings, specifically in surgical issues.</p>	<p>1. PRs need to conduct regular follow-up meetings and improve monitoring system.</p> <p>2. Professional staff should be hired for lab and store.</p> <p>3. PRs should hold a meeting with relevant govt. officials regarding Drug free campaigns and discussed the issue.</p> <p>4. Provision of Health Services completely free of Stigma and Discrimination, in Health Care Settings and Community, (especially at higher levels of health care delivery).</p>

Note: These below mentioned observations and recommendations were mutually discussed and agreed by all the oversight members.

DEBRIEFING MEETING WITH DG HEALTH Baluchistan:

At the end of the visit, debriefing meeting was held with DG Health Baluchistan along with PRs and SRs representatives. The following some key points were discussed;

- The PR IHHN/BRSP has poor coordination with VBDs MCP Baluchistan.
- No HR details of the staff are shared nor the hiring policy by IHHN/BRSP with VBD MCP Baluchistan.
- No monitoring reports are shared by IHHN/BRSP.
- No details of the stocks are shared by IHHN/BRSP.
- There is no trainers' pool developed at the provincial level therefore, the trainers are imported from other provinces by the IHHN/BRSP.
- No trainings details are ever shared by IHHN/BRSP.
- No MEAL officers' reports are shared.
- Quality assurance department has an issue of vacant positions at the VBDs MCP Balochistan.
- Funding request of the new grant GC7 has not been shared with VBDs MCP Management despite few reminders.

DG Health concluded the meeting and gave vote of thanks. The meeting was very fruitful and successful. He directed to Mr. Aamir Raisani - Director VBDs MCP and Dr. Faheem – Director Vertical programs to address these above mentioned observations made by CCM OC with the spirit of improvement in the program. He assured that he owns all above discussed issues and health department will put all its efforts in rectification of the issues. DG Health showed high spirits, commitment, devotion and ownership regarding elimination of all three diseases.

PHOTO GALLERY:

