

**UPDATES ON PREVIOUS RECOMMENDATIONS MADE BY OVERSIGHT COMMITTEE ON 28.02.219**

No	Recommendation	Person Responsible	Update as at May 2019
1.	Procurement processes should be synchronized with the funding cycles.	-TNT, KEMSA, MOH	<p>TNT GF grants are on-budget and implementation, including procurements is aligned to GoK financial years (FY) that commence in July and end in June the following year.</p> <p>SRs have been guided appropriately, especially in ensuring that procurement plans for coming FY are prepared and approved by end of current FY.</p> <p><b>Done</b></p>
2.	Budget for procurement of Drugs and health commodities should be factored in quarter three or Four during funding request development in future when its certain that the budget will be absorbed.	KCM PRs	<p>This is noted for purposes of future grants.</p> <p>Within the current grants, PR 1 is re-aligning procurement budgets with GoK budget execution cycles whenever an opportunity for reprogramming arises, taking into consideration the procurement lead times of about 9 months.</p>
3.	KRCS to work closely with National and County AYP technical working groups to ensure that all targeted beneficiaries for the cash transfer programme are enrolled and benefit from the program,	KRCS AYP TWG	<p>This has been done and agreements made to identify girls through school registers ad chiefs in school and out of school respectively. This has resulted in <b>8,437 (94%)</b></p>

**UPDATES ON PREVIOUS RECOMMENDATIONS MADE BY OVERSIGHT COMMITTEE ON 28.02.219**

No	Recommendation	Person Responsible	Update as at May 2019
			<p>biometrically registered in the program. The additional girls are being registered in June 2019.</p> <p><b>Done</b></p>
4.	<p>The Oversight committee recommended that HIV ICC to discuss in details the selection process of 11 MSM networks identified by KRCS to be supported to continue with implementation of MSM module</p>	<p>KRCS,HIV ICC</p>	<p>KRCS has worked with NASCOP KP TWG to evaluate each of the MSMs networks for direct engagement. This was documented and presented in the last HIV ICC with a request for 4 Networks to start direct implementation. The HIV ICC approved this request. The HIV ICC meeting agreed to receive quarterly updates and continuous request based on discussions and agreement with NASCOP KP TWG.</p>
5.	<p>Amref and NMCP to provide close supervision to CHVs to ensure Quality of Services for community case management of malaria</p>	<p>Amref NMCP</p>	<p>Amref has a budget for supervision of community health volunteers. The supervision is done bi-annually by qualified officers from the county/sub county and the link health facility. The composition of the team include pharmacist/pharmacy technologist, health records and information officer, medical laboratory technologist (Quality Assurance Officers), malaria control coordinators, community strategy focal person, community health extension workers attached to the Community Health Unit</p>

**UPDATES ON PREVIOUS RECOMMENDATIONS MADE BY OVERSIGHT COMMITTEE ON 28.02.219**

No	Recommendation	Person Responsible	Update as at May 2019
			<p>as well as the In-charge of the facility where the CHU is linked to.</p> <p>Revision of the supervision checklist has been planned for second week of June so that supervision will be extended to the households for CHVs to be observed doing the actual testing of malaria and any gaps addressed.</p> <p><b>Ongoing</b></p>
6.	<p>Full report on the status of Microscopes procured under Co-financing budget to be presented to the KCM on 14<sup>th</sup> March,2019.</p> <p>Further verification of non-functional microscopes by an independent team of biomedical experts to be conducted.</p>	TNT	<p>Report presented to the KCM on 14<sup>th</sup> March,2019.</p> <p>KCM recommended that further assessment of the non-functional microscopes by a team of biomedical experts and share recommendations with KCM and Ministry of Health to ensure value for money and functionality of all Microscopes.</p> <p>A team of biomedical experts has been established to assess the non-functional microscopes and share report with KCM.</p> <p><b>Ongoing</b></p>

**UPDATES ON PREVIOUS RECOMMENDATIONS MADE BY OVERSIGHT COMMITTEE ON 28.02.219**

No	Recommendation	Person Responsible	Update as at May 2019
3	Fast track tax waivers and exemptions to ensure timeliness in: granting Tax exemption certificate, Waivers, Port Clearance and distribution of Tax Exempt Commodities	-KCM -The National Treasury, Commissioner of TAX	The Ministry of Health/ KCM Chair took action vide letter reference no MOH/1B/15/1/13/Vol.11/72.  Letter issued. No outstanding Issues.
4	Resolve issues around DAGA resolution to ensure smooth flow of antimalarial commodities supported by PMI	TNT, USAID, KEMSA, MOH	The matter has been brought to the attention of Ministry of Health Top leadership and the National Treasury. Follow up on issues around DAGA ongoing to facilitate supply of malaria commodities supported by PMI to stabilize the supply chain and avert stock outs.
6	HIV, Malaria and TB ICCs should share documents with Oversight committee at least 7 days before the meeting.	ICCs	HIV ICC/TWG commended for ensuring timeliness.  MICC/TB ICC/TWG-Need to improve on timeliness
7	PRs and KCM Secretariat to share with KCM Updates on the progress made on implementation of OIG recommendations.	PRs  KCM Secretariat	See attached matrix

<b>PROGRESS MADE ON IMPLEMENTATION OF OIG AUDIT RECOMMENDATIONS</b>		
<b>OIG AUDIT RECOMMENDATION</b>	<b>RESPONSIBLE</b>	<b>UPDATE AS AT MAY,2019</b>
<p>Development of an action plan for implementation of the TB strategic initiatives, including;</p> <p>Implementation arrangements for expansion of TB case detection and reporting in the private sector</p> <p>Interventions for improving and monitoring active case findings at facility and communities</p> <p>A challenge fund to pay for performance initiatives</p>	<p>TNT/MOH</p> <p>31/12/2019</p>	<p>TNT, MOH, NLTP working to improve the Draft Action plan; and subsequently share with MOH leadership and other stakeholders. The final version of action plan is expected by end of June 2019.</p> <p>However, implementation of strategic initiatives for finding missing people with TB; i.e. pay for performance, expanded TB detection and reporting in private sector and active case finding innovations has commenced.</p> <p><b>Ongoing</b></p>
<p>Revision of the implementation strategy for AGYW interventions based on lessons as per pilot phase.</p>	<p>KRCS</p> <p>31/03/2019</p>	<p>The implementation strategy for AGYW interventions has been revised and shared with AYP TWG. The GF CT has provided comments for improvement. Approved for implementation</p> <p>Done</p>
<p>Development of an oversight and implementation plan for improved timely identification and management of expiries at the central and facilities level</p> <p>Including measures to address identified control gaps upstream and downstream.</p>	<p>TNT/KEMSA</p> <p>31/12/2019</p>	<p>Draft action plan is under review. Final version is expected by end of June 2019.</p> <p>However, some of the activities in the plan have started being implemented. There was identification and mop up of expired commodities for HIV and Malaria in Jan-March quarter.</p>

		Discussions to be held to do the same for TB commodities. The order management teams follow up with counties to ensure that reporting of commodities is done since good reporting informs the quantification of health products. Programs monitor the stock status during the monthly commodity meetings and where short expiry products are identified efforts are made to redistribute or use before expiry.
Design of an appropriate framework which takes into consideration different options for implementing GF grants in a devolved setting, in line with GF guidelines.	COG TNT KCM 31/12/2019	Process to design framework has been initiated under guidance of CT  County capacity self-assessment completed in Jan 2019.  Counties Readiness assessment by the Global Fund to receive and programmatically and Financially account for Global Fund Funds Completed.  GF Delegation to visit Kenya early June,2019 to present and discuss the outcome.  <b>Ongoing</b>
Development of guidelines for timely selection of SRs at the start of new implementation periods with a view to ensuring uninterrupted program continuity.	KCM/PRs 31/12/2019	<ul style="list-style-type: none"> <li>Initial Joint meeting between KCM Secretariat and PRs held on 19<sup>th</sup> February,2019 to discuss the approach.</li> <li>PRs shared experiences and lessons learned in SR Selection process.</li> </ul>

		<ul style="list-style-type: none"><li>• Follow-up meeting with all Chairs of Technical Review Committees held on 4<sup>th</sup> March,2019.</li><li>• Road map finalized and presented to the KCM on 14<sup>th</sup> March,2019.</li><li>• Road Map and request for technical assistance endorsed by KCM on 14<sup>th</sup> March,2019.</li><li>• UNAIDS offered to provide Technical Assistance to the KCM to ensure that the SR Selections guidelines are developed.</li><li>• KCM Management Committee held a meeting on 4<sup>th</sup> April,2019, developed TORs and established Technical Review Committee to recommend the most suitable Consultant for the assignment.</li><li>• Technical Review Committee finalized selection process.</li><li>• TRC report Endorsed by the KCM .</li></ul> <p><b>Ongoing</b></p>
--	--	---