Strategic Technical Assistance for Grant Excellence (STAGE)
A new Approach to Quality Management for Global Fund Recipients by BACKUP Health
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“STAGE” is a new technical assistance (TA) approach that has been launched by the German Development Cooperation’s (GIZ) Project BACKUP Health. The aim of STAGE is to work with Global Fund (GF) grant implementers and assist them to address challenges they have identified in managing their Global Fund grants. The new TA approach is based on a modular structure, with each module containing several units. Each unit responds to specific challenges which GF grant implementers may have experienced.

GF grant implementers in all BACKUP focus countries are eligible to apply and can pick and combine particular units within each module to specifically address and resolve management challenges in their organisation. For the latest list of BACKUP focus countries please see the FAQs (attached) or go to our website, click on the application tab and then follow the application link in your preferred language.

Why is there a need for a new approach?

Global Fund grant implementers face numerous challenges and bottlenecks in managing their grants. Some are related to wider health system issues, others are related to organisational issues that may not be addressed under other TA efforts. It is these organisational issues that BACKUP will focus on with STAGE.

Some of the main issues and bottlenecks reported by grant recipients include:

- Difficulty in ensuring dynamic planning, i.e. absence of ongoing reviewing and revising of work plans, inability to track the progress of planned activities.
- Insufficient availability and quality of programmatic data, and inadequate use of data for decision making.
- Inadequate PSM planning and reporting leading to stock-outs and overstocks (as well as expiries and break-downs) of health products (including lab products and equipment).
- Inefficient financial management processes.

Some consequences of these challenges include negative effects on grants, including:

- Low absorption of grant funds, low financial burn rates.
- Programmatic performance below expectations.
- PSM losses.

What makes STAGE different?

STAGE differs from other TA interventions because it:

- Focuses on organisational development (OD), quality management, and ultimately programme performance.
- Concentrates on the practicalities for the grant implementers in getting the job done in a less than ideal situation, rather than attempting to resolve broader health systems issues that are often outside the implementers’ control.
- STAGE is based on a modular structure with each module containing several units.
- Focuses on the use and sustainable integration of techniques and tools into daily management tasks, rather than focusing on the techniques or tools themselves.
- And most importantly – the Applicants decide what they want (or need) to change in their organisation and in the way they work.

Benefits of the “STAGE” TA for GF grant implementers:

- Simple application process, with defined modules and specific units to request – which will be further refined with the applicant during the first (scoping) visit of the facilitator(s).
- Facilitate rather than complicate the implementers’ day-to-day operations by helping to address and improve what they believe are the most important gaps.
- Assist in addressing organisational or GF-related issues and bottlenecks identified by the applicant with the GIZ BACKUP team’s assistance by developing practical solutions together.
- Help achieve better grant performance.
How will it work?

1. If a GF grant implementer would like to apply for a BACKUP STAGE assignment, they can choose between different modules and units and select the ones that are the most relevant and useful for them.

2. In the first round of applications the TA options on offer are in the following 4 categories:
   - Planning and program revision
   - Managing data challenges
   - Strengthening financial management, and
   - Distribution and Reporting at the Last Mile Level.

3. There is a simple, rapid application form and process (see below: “How to apply for BACKUP STAGE”).

4. The applicant shall provide clarifications as may be requested by BACKUP during the application process, when BACKUP will communicate and ensure a clear understanding of what is requested and needed.

5. Once the request is approved by BACKUP, the TA starts with a scoping visit during which the selected units are reviewed together with the applicant and final adjustments are made to the TA assignment plan.

6. After the scoping visit, BACKUP will finalize the TORs and select a team of facilitators with specific expertise to work with the applicant organisation.

7. Every consultancy consists of a number of visits (depending on the modules and units selected and specific needs identified during the scoping visit) as well as remote support.

8. In a follow-up phase the facilitators will provide remote support and may conduct follow-up visits as required to ensure sustainability and institutionalisation of the technical support. STAGE commits to provide highly experienced and specifically trained facilitators who will always use a participatory approach in working with the applicant team, and will be flexible and ready to adapt to changes.

Implementation phases
- Focus and follow-up visits
- Remote support between visits

Timeframe
- Focus visits ~8 – 12 weeks after application
- Follow-up visits ~6 – 12 months after last focus visit

Profile of Facilitators
- Each assignment will be conducted by a team of facilitators with specific expertise, depending on the modules and units selected.
- Relevant qualification: technical experience in a relevant field, GF experience, experience with organisational development and change management
What does BACKUP expect from applicants?

- Only to apply if they are genuinely interested in making some changes.
- The applicant takes responsibility, and thus remains in control. The BACKUP team will only be there to assist in making these changes.
- Commitment, engagement and availability of staff during the agreed timeframe (while facilitators will take into consideration and adapt schedules to avoid interfering with other priorities).
- To write a brief mid-term and final report to be submitted to the BACKUP team (using a template to be provided). The focus of these reports will be to: 1) note progress on achievements and results in organizational changes; 2) explain any adjustments to the initial TA roll-out schedule; and 3) to express any potential additional needs to ensure sustainable organisational change.
- Provide a focal person who is responsible for STAGE and the main contact person for BACKUP.

How to apply for BACKUP STAGE

1. Develop a one- to two-page Project Outline describing (i) the organisation and its role in the implementation of GF grants, (ii) the challenges faced by the applicant organisation, and (iii) the pre-selected module(s) and the related units – if already identified. The Project Outline must be sent to backup@giz.de.
2. Review and refinement of selected modules with BACKUP.
3. BACKUP will then send the STAGE application material, where the applicant can select the desired modules and units. When selecting units, please also note the application guidelines below.
4. Duly sign (by all parties) and send the application back to backup@giz.de.
5. A final review of the selected modules will be conducted, in close collaboration with BACKUP.

Application guidelines for BACKUP STAGE

To apply for STAGE and select the most suitable units, BACKUP Health recommends that applicants follow these six principles:

Select only as many modules as you can handle in one assignment. BACKUP suggests not to choose more than 4 units in one assignment.

In order to conduct a successful assignment, the smooth collaboration and communication between BACKUP Health, the experts conducting the visits and the applicant is crucial.

The facilitator(s) conducting the Scoping Visit will revise the selected units together with you. If needed, there is still a chance to adapt the selection.

- Be modest
- Be sure
- Be critical
- Be timely
- Be flexible
- Be responsive

A STAGE assignment can only be successful when fully supported by the applicant. Before applying make sure you have enough time and resources to conduct the assignment.

When selecting units, critically check if the units really address your main challenges.

Please regard the detailed description of each unit and ask BACKUP for support and clarification if needed.

The process from handing in the first project outline until the first focus visit can take some time – so think ahead and apply in a timely way.

Visit our website: http://bit.ly/2xb9zTm
List of Modules (available as of September 2018)

BACKUP Health’s STAGE mechanism will begin by offering the four following modules:

Module 1: Improving Planning and Programme Revisions

Objective: Improve GF grant implementers (PR, SR, Sub) capacity to deal with delays, unexpected changes, risks and challenges related to implementation of the grant workplan.

UNIT A Improving skills for result-based operational planning and budgeting
UNIT B Introducing tools for activity tracking and re-planning and practice their utilisation at GF grant implementers level
UNIT C Improving the quality of activity plan review meetings at GF grant implementers level
UNIT D Introducing tools for routine and non-material programme revision and practice of routine programme revisions
UNIT E Integrating results of risk and/or capacity assessment and/or GF management actions in operational planning at all levels
UNIT F Communicating more effectively and efficiently between PR/SRs or Subs
UNIT G Communicating more effectively and efficiently with the CCM
UNIT H Communicating and negotiating more effectively and efficiently with TGF
UNIT I Using the PR Dashboard more effectively for planning and re-planning
UNIT J Fixing resolving technical issues experienced by the PR with the PR Dashboard
UNIT K Introducing the PR Dashboard and CCM Summary (whole-of-country approach)
UNIT L Strengthening leadership for proactive and responsive planning
UNIT M Improving information management (filing, communication lines, back-up systems)

Module 2: Managing Data challenges

Objective: To help GF grant implementers avoid delays in reporting and errors in forecasting due to delayed, incomplete and low-quality data.

UNIT A Using imperfect (e.g. incomplete, inaccurate, unreliable) data for programmatic reporting
UNIT B Striving for improved quality data and use of imperfect programmatic data for decision making
UNIT C Mentoring PR LMIS managers to address challenges related to PSM data and reporting
UNIT D Clarify issues about denominators in the PR Dashboard (key population, regional targets, adjustment of PF milestones, etc.)
UNIT E Fixing glitches experienced by PR in using the PR Dashboard (and using the PR Dashboard more effectively)
UNIT F Using the Dashboard effectively despite imperfect data including its use as feedback tool (PR/SRs or Subs)
UNIT G Clarification of PR and SR (or Subs) roles and responsibilities
UNIT H More effective and efficient communication by PR with TGF around data related challenges (e.g. DHIS2 constraints)
UNIT I Strengthening leadership for data-based decision making
UNIT J LMIS and eLMIS problem solving and tools for improvement

Module 3: Strengthening financial management

Objective: Reducing bottlenecks in financial management.

UNIT A Action Plan for re-admission of fiscal responsibility from Fiscal Agent (FA) to PR
UNIT B Clarification of roles and responsibilities in financial management by PR and SRs (or Subs)
UNIT C More effective and efficient communication with GF around financial management issues
UNIT D More effective and efficient communication between PR and SRs (or Subs) around financial matters
UNIT E Facilitate the revision of financial procedure manuals and their adaptation to distinct levels of capacity
UNIT F Strengthen Leadership for transparency in financial management
UNIT G Strengthening accounting practice (in response to GF management actions and perceived needs, for example utilisation of software, managing justifications for expenditure)

Module 4: Distribution and Reporting at the Last Mile Level

Objective: To assist PR to resolve last-mile distribution (LMD) challenges in ensuring the supply chain reaches all sites, including the most remote ones, and that reporting/data in submitted by these sites.

UNIT A Review of transport and distribution situation, challenges, and options for the grant-funded products. Review level of reporting and accountability for products received by sites
UNIT B Devise LMD Plan and Distribution & Accountability Solutions with PR/SR team
UNIT C Devise tools for monitoring & supervision of sites, follow-ups to ensure LMD solutions are working, and stock-outs are avoided

To find more detailed information about the modules and units please visit our website. The remaining five modules that have been developed (i.e. improved laboratory PSM; effective PSM at health facility level; capacity for overseeing community-based activities; improving CBO & NGO capacity for financial sustainability; orientation of PRs/SRs on working with TGF) will be offered at a later stage, based on lessons learned during the first assignments.