



CDC's Country Management and Support Initiative

Report Summary for May 2011 Country Management and Support Visit to Central America Region

Background

As the U.S. science-based public health and disease prevention agency, the Centers for Disease Control and Prevention (CDC) plays an important role in implementing the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) under the direction of the Department of State Office of the U.S. Global AIDS Coordinator. CDC uses its technical expertise in public health science and long-standing relationships with Ministries of Health across the globe to work side-by-side with countries to build strong national programs and sustainable public health systems that can respond effectively to the global HIV/AIDS epidemic. All CDC global HIV/AIDS PEPFAR-related activities are implemented by the Division of Global HIV/AIDS (DGHA) in CDC's Center for Global Health.

CDC's Commitment to Accountability

CDC/DGHA launched the Country Management and Support (CMS) initiative in 2011 to identify any challenges resulting from the rapid scale-up of complex PEPFAR/CDC programming as part of CDC's commitment to transparency and accountability. This initiative serves as a basis for ongoing, monitored quality improvement of CDC/DGHA's programs and operations through internal programmatic and financial oversight. CMS is a proactive response on the part of CDC to ensure that CDC/DGHA is supporting the Presidential Initiatives, Department of State, and Office of the U.S. Global AIDS Coordinator. The CMS strategy is designed to assess CDC/DGHA's accountability in the following key areas:

- **Intramural Resources:** Ensuring proper management and stewardship of financial resources, property, and human resources within CDC's overseas offices
- **Extramural Funding:** Ensuring responsible and accurate management of financial and other resources external to CDC's overseas offices
- **Public Health Impact:** Ensuring the delivery of consistently high quality interventions and technical assistance that positively impact the populations the program serves

Central America Region Country Management and Support Visit

CDC/DGHA conducted a CMS visit to the CDC Regional Office for Central America and Panama from May 16-20, 2011. The principal objectives of this CMS visit were to:

- Perform a CDC/DGHA headquarters assessment of internal controls in the field to ensure the highest level of accountability
- Provide clear feedback and support to the country office to improve current internal controls
- Refine, systematize, and modify CMS methodologies, processes, and associated tools for full implementation of the CMS across all CDC/DGHA-supported programs in the field

CDC/DGHA headquarters (CDC/HQ) in Atlanta, Georgia assembled an intra-agency multidisciplinary team of eight subject matter experts in the following areas to perform the CMS assessment: country management and operations, program budget and extramural resources, procurements and grants, financial management, science, and key technical program areas (e.g., strategic information, laboratories).

CMS Methodology

The CMS team conducted a five-day visit to the CDC/DGHA Central American Regional office (CDC/Central America), which included reviews of financial documents, administrative and technical site visits with grantees, one-on-one meetings with staff, data quality spot checks, and reviews of internal financial controls at CDC and grantee offices. Assessment tools and checklists were developed by CMS leadership in consultation with subject matter experts at CDC/HQ. This methodology was designed to provide a “point in time” synopsis of CDC/Central America’s operations.

Scope

CMS visits are designed to provide an overview of CDC/DGHA country programs and identify best practices and areas for improvement. These visits should not be considered comprehensive and are not intended to replace Inspector General audits. The scope of this CMS visit focused only on the CDC/DGHA portfolio of global HIV/AIDS activities implemented through PEPFAR.

Program Background

DGHA’s Central American Regional Office is located in Guatemala. Since 2003, it has worked to help strengthen and coordinate strategic information and prevention strategies to respond to the HIV epidemic in the region. Specifically, CDC/DGHA works to build in-country capacity to design, implement, and evaluate HIV/AIDS-related surveillance systems. It is also working to improve broader national health information systems within the region’s Ministries of Health to collect, store, analyze, and use high-quality data essential to HIV prevention, care, and treatment programs.

Summary of Key Findings and Recommendations

Program Administration and Technical Oversight

Country Operations. The most salient findings were positive staff morale, the need for better documentation of personnel records and utilization of time cards, and enforcement of chain of command among staff. In addition, Embassy hiring and staffing mechanisms do not capture CDC professional staffing needs.

Recommendations:

- CDC/Central America should prioritize staff recruitment in order to achieve full staffing and request technical assistance from Center for Global Health (CGH) to discuss the rating system with the Embassy
- CDC/Central America should work with CGH to review and re-write position descriptions and put a career development plan in place for each staff member

Country Management. The CMS team found that, in general, CDC is adequately addressing key issues in response to the HIV/AIDS epidemic. There is, however, inadequate program management for strategic information and laboratory; there is activity overlap among grantees in both of these areas and a lack of balance between scaling-up of services with program quality.

Recommendations:

- CDC/Central America should develop standard operating procedures for internal and external quality assurance through a regular and standardized monitoring and evaluation process

- CDC/Central America should schedule regular meetings with United States Government sister agencies to discuss technical matters, collaborations and troubleshooting

Science Office. The CMS team found no clear delegation of Science Office responsibilities in the Central America program. However, the process for reviewing and clearing protocols and manuscripts functions well. This is primarily due to the implementing grantees' prior knowledge and experience in this area.

Recommendation:

- CDC/Central America should establish standard operating procedures for Science Office actions and a Science Office tracking system and warehouse for Science Office restrictions and protocols

Program Management

Procurement and Grants. CMS team members representing CDC's Procurement and Grants Office (PGO) visited four grantees. Overall, grantees had adequate internal controls in place to properly account for USG funds. Some implementing grantees, however, need to ensure they are in compliance with U.S. government rules and regulations concerning consultants.

Recommendation:

- CDC/Central America should work with grantees to ensure that resources for each cooperative agreement are separately identified and that each grantee can demonstrate that they are registered in-country and have at least one locally employed staff member

Program Budget and Extramural Management. CMS team members representing DGHA's Program Budget and Extramural Management Branch (PBEMB) found that CDC/Central America should continue working to improve budget and extramural management.

Recommendations:

- CDC/Central America should implement budget and cooperative agreement tracking databases
- CDC/Central America should develop standard operating procedures for standard grants actions and site visits
- CDC/Central America should align technical activities to regional operating plan and partnership framework

Financial Management

CMS team members representing CDC's Financial Management Office found that internal controls for petty cash appear to be adequate. Stronger internal controls, however, are needed for the procurement approval process.

Recommendations:

- CDC/Central America Deputy Director at Large should obtain an "Ariba" account for approving purchase order requests
- CDC/Central America should consider establishing a blanket purchase agreement to purchase office supplies

Next Steps

The CMS team shared their key findings and recommendations with the CDC/Central America office and CDC/HQ. The team also developed a scorecard for internal management use, which is populated with all of the issues identified during the visit, recommendations, due dates, and primary point of contact for each issue.

