

The *Timisha*Capacity Development
Programme



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ABOUT LVCT HEALTH

LVCT Health is a leading indigenous Kenyan nongovernmental organisations working in health, with a focus on HIV, sexual reproductive health (SRH) and maternal child health. We work across Africa to secure an environment where all can access affordable services and where people living with HIV can enjoy long, and productive lives and make positive contributions to the community.

LVCT Health trains over 700 health providers annually, and has trained over 75% of all the 7000 HTC counsellors in Kenya and 90% of HTC counsellor supervisors. LVCT health has helped to establish over 500 of the roughly 1,200 HTC sites in Kenya. Through capacity-building of local partners, over 200 HTC sites have been 'graduated' to be managed by Government of Kenya (GoK) and civil society organisation (CSOs). LVCT heath has strengthened the organisation systems of 71 civil society organisations.

CAPACITY DEVELOPMENT AT LVCT HEALTH

Capacity development is engrained in the LVCT Health's culture and practice. The *Timisha* (Kiswahili for

fulfil) organizational capacity development model was developed based on experiences and lessons of LVCT Health's own growth. LVCT Health's extensive field experience provides evidence to inform a contextualized response. The model is used to identify and plan organizational capacity development interventions for local partners.

PROGRAM OBJECTIVE:

To strengthen the response of local organisations by establishing operational organisational systems that foster successful and sustainable HIV and sexual reproductive health programme implementation.

SUB-OBJECTIVES:

- ☐ To increase coverage and improve access to HIV and SRH services.
- ☐ To improve the quality of services offered by the sub-partners.
- ☐ To reinforce the sustainability of the interventions offered by the sub-partner organisations and therefore strengthen the country's response.

THE TIMISHA CAPACITY BUILDING APPROACH

More than simply training, capacity development refers to activities that strengthen an organisation and help it better fulfil its mission. As a country led, country-owned, country managed organisation, LVCT Health's extensive field experience provides evidence to inform a contextualized response.

The *Timisha* model focuses on organisation **system strengthening.** *Timisha* is based on the understanding that knowledge is experientially, socially and culturally constructed.

Under *Timisha*, learning is approached as a social process which recognizes that everyone has something to offer. The model emphasizes interaction between staff from the sub-partner organisations and LVCT Health staff undertaking similar activities at LVCT Health on a daily basis.

This ensures a high level of competence underpinning the capacity development process. defines under **Managerial, Financial and Technical** capacity building.

ACHIEVEMENTS:

21 sub-partners strategic plans developed.

38 sub-partner governance systems strengthened and active.

38 sub-partners developed /revised key organisation policy documents.

60 sub-partners complying with legal and statutory requirements.

38 sub-partners aligned to national M&E structures and operating active databases.

5 sub-partners offered infrastructure support to set up additional HTC sites and improve service provision space.

Approx. KES 117 million (approx. US\$ 1.47 million) sub granted annually with **99% expenditure rates**.

All Sub-partners achieved **over 100% of their targets**

25 sub-partners focus on vulnerable populations, mainly people living with disability, youth, men who have sex with men, sex workers and discordant couples.

THE PROCESS IN SUMMARY

01

Identification and selection of potential partners

To ensure willingness to participate in capacity building process.

1 month process

02

Joint assessments of institutional systems, governance and technical capacities

To facilitate an internal reflection of partner systems against international standards to make informed decisions. **2 week process**

03

Joint goal development (strategy based on baseline status of the organization)

To ensure consensus of goals and ownership by organizations management, governance teams. **2 week process**

04

Contracting (and annual re-contracting) outlining scope of work and expectations

To commit to a shared understanding between LVCT and partner organizations.

2 week process (done concurrently with joint goal development)

05

Capacity Development plans, budgets and implementation

To facilitate an internal reflection of partner systems against international standards to make informed decision. **2-4 year process**

06

Closeout/graduation

To present a credible organization to stakeholders.

3-6 month process

THE LVCT HEALTH CAPACITY DEVELOPMENT APPROACH: THE TIMISHA MODEL

INCEPTION

01

IDENTIFY PROGRAMME INTERVENTION AREAS

- Stakeholder engagement
- Define capacity building goals/ operational framework

PARTNER IDENTIFICATION

- Solicitation / Selection
- Notification of acceptance

IDENTIFY CAPACITY GAPS / TA NEEDS

- Application of LVCT capacity development toolkit
- Create ownership & build consensus

IMPLEMENTATION

02

GRANT SUPPORT AND SETTING STANDARDS

- Contractual agreements
- Grants disbursements
- Grants Monitoring

CAPACITY BUILDING

- 1. Technical capacity
- Program design & management
- Monitoring & evaluation
- Data management & Utilization

2. System Strengthening

- Governance & strategy
- HR/administration
- Finance systems & structures
- Resource mobilization

STRENGTHENING NATIONAL POLICY ADVOCACY AND REFORMS

- Alignment to national policies
- Networking and advocacy
- Community engagement

PERFORMANCE MONITORING

03

MANAGERIAL

- Compliance to statutory requirements
- Strategic plan(operational)
- Staff development plan

FINANCIAL

- Grants monitoring
- Accurate returns
- Accurate reports
- Adherence to budgets

TECHNICAL

- Accurate and timely reporting
- Data management and analysis systems
- Utilization of data
- Continuous monitoring of subpartner activities
- Periodic evaluation of the project
- Reporting to national authorities
- Reporting on national indicators.

OUTCOMES

04

QUALITY SERVICE DELIVERY

FIELD LEADERSHIP (LOCAL)

ALIGNMENT TO NATIONAL POLICIES AND SYSTEMS

OPERATIONAL ORGANIZATIONAL SYSTEMS THAT MEET INTERNATIONAL STANDARDS.

FINANCIAL ACCOUNTABILITY & SUSTAINABILITY

LEARNING ORGANIZATION









ADVANTAGES OF THE TIMISHA CAPACITY DEVELOPMENT MODEL

- The capacity building is of high quality as it is done by competent, experienced people who carry out similar roles on a day-to-day basis at LVCT Health.
- It responds to the specific needs of an organisation as identified in the comprehensive assessments carried out upon short-listing and in the course of the program implementation.
- It is comprehensive, addressing the different facets of the organisation i.e. organisational as well as technical.
- It makes use of a tailor-made curriculum, training material and M&E tools developed over time, and piloted specifically for the African context.
- It encourages partnerships and networking with government agencies, health facilities and other civil society organisations (CSOs), boosting the HIV national response.
- The model encourages reporting through the national M&E frameworks, using the national tools, such that the work done by the sub-partners is captured and counted as contributing to the country response.
- The model relies heavily on on-job training as a strategy, avoiding workshops and classroom trainings that take the staff away from their work stations.



