

**JOINT MANAGEMENT RESPONSE TO THE MID-TERM REVIEW REPORT**

<b>MTR recommendations</b>	<b>Response</b>	<b>Specific action /Comments</b>	<b>Responsible Agency</b>	<b>Time line</b>
1. Monitor the National Disability Strategic Plan (NDSP) review workshop follow up actions, and include advocacy for monitoring of disability inclusion in Sustainable Development Goals (SDGs) implementation, as part of NDSP.	Agreed	<ul style="list-style-type: none"> <li>• Disability Auction Council (DAC) will conduct the annual National Disability Strategic Plan (2014-18) review workshop – it will be held in Nov/Dec 2016.</li> <li>• UNDP will support DAC to follow up on the agreed action points from last year workshop. Some of the actions are being implemented.</li> <li>• Programme Coordination Team (PCT) and Technical Review Group (TRG) to continue to support DAC in advocating for inclusion of disability –specific indicators.</li> <li>• With regards to advocacy to monitor the inclusion of Sustainable Development Goals (SDGs), UNDP along with other agencies are supporting DAC for inclusion of disability –specific indicators within the Cambodian Sustainable Development Goals (CSDGs).</li> </ul>	UNDP/ DAC PCT	Nov-Dec 2016  Nov 2016
1.1 Clarify roles of provincial DAC and provincial Persons with Disability Foundation (PwDF) to avoid duplication and overlapping.	Agreed	Disability Rights Initiative Cambodia (DRIC) has already initiated action corresponding to a similar recommendation of the Functional Analysis Report (2015)		
2. Develop more provincial Disabled People's Organization (DPO) leaders, including women with disabilities, through training on leadership, language skills and exposure visits.	Agreed	<ul style="list-style-type: none"> <li>• The DRIC has already supported 22 Disabled People's Organizations (DPOs) including 09 DPOs for women with disabilities. Capacity building of the DPOs is an on-going process across the country to build the capacity of leadership/ management skill of the DPOs/Women with Disabilities Federations (WwDF) through Technical Support Group (TSG) and senior management group of Cambodian Disabled People's Organization (CDPO). DPOs/WwDF are undergoing regular coaching, mentoring and training.</li> <li>• CDPO has developed the annual specific capacity development action plan for DPOs/WwDFs to align with the 5 years strategic plan of CDPO.</li> </ul>	UNDP	On- going

<p>2.1 Develop links with other DPOs at district levels, including those supported by Cambodia Disability Inclusive Development Fund (CDIDF) of component 4, in building up provincial DPOs, instead of promoting new district and provincial level DPOs from scratch.</p>	<p>Partially agreed.</p>	<ul style="list-style-type: none"> <li>• This recommendation is not clear. Cambodia Disability Inclusive Development Fund (CDIDF) grantees are not necessarily DPOs but rather NGOs working in other fields beside disability. UN doesn't promote establishment of new DPOs but rather leave it up to people with disability to determine whether there is a need for new DPOs which will properly represent their voices and interests. However, we do recognize the need to reinforce the linkages and cooperation between various civil society organizations at subnational level (including those supported by DRIC under different components) and will use the following mechanisms to do so.</li> <li>• Provide technical assistance to provincial DAC and CDPO to coordinate/convene stakeholders meetings at the provincial level.</li> <li>• Invite select CDPO/DPO/Self Help Groups (SHGs) to CDIDF partners meetings and facilitate linkages between the current provincial DPOs and other DPOs and SHGs supported by other actors in the provinces including through component4.</li> <li>• It is not within the programme budget to support more DPOs; for the remainder of the programme, the focus will be on informally building up leadership capacity within the existing pool of DPOs.</li> </ul>	<p>UNDP, UNICEF, WHO, CDPO and CDIDF partners</p>	<p>On- going</p>
<p>3. Reduce the gap between PwDF and NGOs.</p>	<p>Agreed</p>	<p>See response below in 3.1 and 3.2</p>		
<p>3.1 Communicate to all stakeholders about the delayed handover option for Physical Rehabilitation Centers (PRCs), especially to the NGOs who are expected to raise funds to continue support to PRCs in the interim; and include Ministry of Economy and Finance ( MoEF) in the discussion.</p>	<p>Agreed</p>	<ul style="list-style-type: none"> <li>• The rehabilitation transition process analysis report and a letter for the creation of rehabilitation transition committee (Ministry of Social Affairs, Veterans, Youth (MoSVY), MoEF, Ministry of Health (MoH), IO/INGOs (International Non-Governmental Organizations (INGOs) will be submitted to the Minister, MoSVY for his approval.</li> <li>• It is planned to recruit a consultant to assist the above committee to develop a 5-10 year rehabilitation transition plan.</li> <li>• The 5-10 years rehabilitation transition plan as a road map will be communicated to all the stakeholders for action.</li> </ul>	<p>WHO, MoSVY, PWDF, IO/NGOs</p>	<p>Oct –Dec 2016</p> <p>Oct-Dec 2106</p> <p>End of 2017</p>

<p>3.2 Set limited goals for the remaining tenure of DRIC, in consultation with PwDF and NGOs, for example, reviewing the PwDF strategy plan, structure and capacity, and finalizing agreements on standardized operating procedures for PRCs.</p>	<p>Agreed</p>	<ul style="list-style-type: none"> <li>To work with Persons with Disability Foundation (PwDF), DWPwD (Department for Welfare of Persons with Disabilities) and IO/INGOs to review the national Standard Working Procedure (SWP), including some specific tools such as Patient Management. System (PMS), Stock Management System (SMS) and Client Satisfaction Survey (CSS).</li> <li>As recommended in the rehabilitation transition analysis and Capacity assessment reports, WHO along with NGOs will advocate with MoSVY and PwDF to consider CDPO and a representative of a NGO to be part of PwDF's board.</li> <li>To review PwDF mandate, structure and responsibility in accordance the handover plan.</li> </ul>	<p>WHO/MoSVY/PWDF</p>	<p>On-going</p> <p>On-going</p> <p>End of 2017</p>
<p>4. Institutionalize mechanisms of capacity building and referrals within the health sector for sustainability.</p>	<p>Agreed</p>	<p>Specific action indicated under recommendation#4.1 and 4.2</p>		
<p>4.1 Work with MOH to ensure that the health information systems at province, district and health center levels include information on persons with disabilities.</p>	<p>Not in agreement</p>	<p>Not part of the programme design. However, WHO will continue to work with MoH to strengthen rehabilitation intervention into sector planning and programming.</p> <p>In the current context of Cambodia's development of the Health Strategic Plan 2016-2020 (HSP3) and the localization of SDGs, WHO together with partners will support MoH ( Ministry of Health) for the inclusion of specific rehabilitation indicators within these two high-level documents, that will be served as the key determining factor for improving health information systems. So also to support MoH in developing capacity of health staff working at all levels, including pre-service training.</p> <p>Additional actions;</p> <ul style="list-style-type: none"> <li>To use findings from the secondary analysis of 2014 Cambodia Demographic Health Survey (CDHS) data (specifically the disability chapter supported by WHO) to advocate for continued use of Washington Group (WG) questions in future Cambodia Demographic Health Survey</li> </ul>	<p>WHO, MoH, PCT</p>	<p>On- going</p>

		<p>(CDHS).</p> <ul style="list-style-type: none"> <li>• Together with PCT, UNDP, UNICEF and other Development Partners to continue advocating with Ministry of Planning (MoP) and MoSVY to include internally comparable disability data collection tool into their surveys, census and Administration data collection system.</li> </ul>		
4.2 Advocate with MoH to include training of health center staff and village health staff on early identification, early intervention and referrals in the health sector's on-going training plans.	Partially agreed	<p>The programme will continue to advocate with MoH strengthen rehabilitation intervention under relevant policies/programmes.</p> <p>Continue working within the framework of HSP3 to support inclusion of rehabilitation services – e.g.</p> <p>a) Review and update Minimum Package of Activities guidelines for the health center and Complementary Package of Activities guidelines for the referral hospital, with attention to, but not limited to, the following: services for NCDs including services such as rehabilitation and palliative care, geriatric and adolescent reproductive health services.</p> <p>b) Strategic Objective 1.11 of HSP3 aims to promote early detection of NCDs, provide better management of acute events, and ensure availability and access to long-term care as well as palliative care and rehabilitative services.</p>	WHO, MoH	On-going
		<p>Continue supporting Preventive medicine Department (PMD) to review its rehabilitation training module according to the new MPA guidelines.</p>	WHO, MoH	On-going
		<p>To share key lessons learnt from the implementation of Provincial Rehabilitation Demonstration Project (PRDP) in Kampong Cham and work with MoH to replicate these lessons learnt to other health facilities.</p>	WHO, MoH and HI	On-going
		<p>To the extent possible, link and share information on the tools development and trialing of a physical screening tool and developmental milestones for children for health centers by Handicap International and CCAMH with CDIDF funds</p>	WHO, UNICEF, DIDF partners, HI, CCAMH and GIZ	
5. Review the small grants scheme to focus more on	Agreed	<ul style="list-style-type: none"> <li>• Communicate this change in the CDIDF to external partners (CDIDF grantees) as well as to DRIC Implementing</li> </ul>	UNICEF	September 2016

fewer numbers of partners for long term sustainable development.		<p>Agencies (IAs). External interested parties are also informed that under CDIDF, in 2016 and 2017 there will be no new open call for proposal. Justification provided is the recommendation of the Mid Term Review (MTR).</p> <ul style="list-style-type: none"> <li>• No new open call for CDIDF proposals.</li> <li>• Propose to extend and amend existing partnerships.</li> <li>• Continue with support to children and families with disabilities but focus on transition from CDIDF funds, sustainability and building local partnerships.</li> <li>• Create networking opportunities between CDIDF partners – included where relevant other DRIC stakeholders.</li> <li>• Geographic Alignment with UNICEF targeted provinces, districts and communes to the extent possible.</li> <li>• Strengthening partnership and learning between UNICEF and CDIDF partners through regular network meetings.</li> </ul>		
5.1 Review selection process for 2016 and 2017 to reconsider open selection and look at opportunities to extend and deepen partnership with existing CDIDF grantees.	Agreed	<ul style="list-style-type: none"> <li>• No new open call for CDIDF proposals – propose to extend and amend existing partnerships.</li> <li>• Met with the existing 15 CDIDF partners on 19<sup>th</sup> May 2016 to communicate with them about ways forward with the remaining DRIC funding in 2016 and 2017. Funding is not guaranteed for all partners; it will be based on monitoring of projects, reports and the new Programme Documents that are submitted to UNICEF for consideration.</li> <li>• Envelope of \$ available is approximately US\$660,000 (for two years 2016-2017).</li> <li>• Remaining implementation and funding period end of 2017 (December) = all activities must be completed and funds utilized.</li> <li>• Loosely, we estimate that organizations eligible for partnership extension can apply for up to approximately 50K; amounts to be discussed between UNICEF and each organization individually.</li> <li>• Currently working with 9 CDIDF partners from 2014 round to develop joint programme documents for partnership extension.</li> <li>• Pending programme monitoring visit + reports from the remaining 6 CDIDF partners from 2015 round in order to assess whether they are eligible for amendment to the</li> </ul>	UNICEF	September 2016

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<p>6. Institutionalize capacity building mechanisms for disability inclusion at sub-national levels</p>	<p>Agreed</p>	<p>This recommendation covers recommendation #4 ; 4.1; 4.2; 6.1 and 6.2</p> <ul style="list-style-type: none"> <li>• Finalize the draft Guiding Document on DAC, Disability Action Working Groups (DAWGs) and provincial DAC in both Khmer and English version.</li> <li>• Sensitization workshop on guiding document on DAC, DAWGs and provincial DAC to the council and working group members and relevant stakeholders including DPOs.</li> <li>• Develop Disability Inclusion Guideline for DAC, DAWGs and provincial DAC.</li> <li>• Support DAC to provide coordination and advisory role to DAWGs, provincial DAC and the cross sectoral agencies.</li> <li>• Develop capacity development action plan for DAC-Secretary General (SG) and DAWGs.</li> <li>• Continue to work closely with MoI during the sub-national roll-out of the disability inclusion training to further develop the capacity of sub-national trainers.</li> <li>• Engage to the extent possible, through Ministry of Interior (MoI), DPOs and NGOs in the sub-national trainings.</li> <li>• Engage to the extent possible through MoI, MoSVY and DoSVY in sub-national roll-out of the disability-inclusion training for local authorities in the target provinces and districts.</li> <li>• Technical support to provincial DAC under our convergent provinces (Battambang and Kampong Cham-TBC).</li> <li>• Coordinate with DAC to provide technical support to DAWG of targeted ministries.</li> </ul>	<p>UNICEF/WHO/UNDP</p>	<p>End of 2016</p> <p>On going</p> <p>End of 2017</p> <p>End of 2016</p> <p>End of 2016</p> <p>As soon as DAC provincial office is fully functional</p> <p>On-going</p>
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6.1 Identify which agency or agencies will be the 'holder (s)' of this capacity building, in consultation with MOI, MoSVY and CDPO, and develop a set of master trainers to continue the training.	Agreed	See the response under recommendation #06	UNICEF	
6.2 Continue to include Provincial Office of Social Affairs, Veterans and Youth (PoSVY) and District Office of Social Affairs, Veterans and Youth (DoSVY) officials in future sensitization programmes, in consultation with DAC and CDPO.	Agreed	To date, MoSVY from the national level has supported the process to sensitize sub-national decision-makers about disability rights and the development of the disability inclusion training package. We will continue to engage MoSVY and DoSVY for the remaining duration of the programme	UNICEF	
7. Promote synergy and convergence within DRIC, with TRG and PCT playing a more active role in identifying and promoting communication and convergence.	Agreed	This will be an agenda item during the monthly TRG meetings.	TRG/PCT	Oct 2016 onwards
8. Improve external communication and coordination	Agreed	It will be reflected in the 2017 PCT work plan	PCT	Dec 2016
8.1. Improve donor relations by re-induction of Department of Foreign Affairs and Trade (DFAT) into the PMG, provided both sides perceive the need for and value addition of, such engagement.	Agreed	<ul style="list-style-type: none"> <li>• DFAT to be part of the last 30 minutes of the Programme Management Group (PMG) meetings.</li> <li>• The ToR of the PMG to be revised for the approval of the board during the Sep 2016 meeting.</li> </ul>	PMG/DFAT	From the next PMG meeting to be convened

8.2 Highlight examples of DRIC work that reflect the current key words in DFAT – innovation, gender, private sector engagement – in reports and donor meetings.	Agreed	All the agencies will address these key concepts and highlight them in their reporting and meetings as found relevant and appropriate	All agencies/PCT	With immediate effect
8.3. Establish mechanisms of coordination with other large agencies (INGOs and bilateral agencies) in the disability sector in the country for joint advocacy with government.	Agreed	This will be reflected in the 2017 PCT work plan.	PCT	Oct 2016 onward
9. Have the PCT play an effective coordinating role within and outside DRIC, focusing on issues of synergy, convergence, communication, stakeholder engagement and advocacy.	Agreed.	<ul style="list-style-type: none"> <li>• PCT to develop a work plan in consultation with the TRG which will include strengthening advocacy, reporting, external communication and coordination with stakeholders’ apart from creating synergy within the programme and externally.</li> <li>• The Work plan to be endorsed by the PMG and approved by the board. This should be preceded by a review of tasks performed by the PCT on the basis of the ToR stated in the prodoc.</li> <li>• PMG to conduct a functional analysis of the PCT.</li> </ul>	PCT and PMG	Oct 2016 onward
9.1 PCT to have an annual work plan in consultation with the agency focal points and approved by the PMG, on technical support to be provided, and on coordination issues (advocacy, synergy, cross fertilization, external communication) to be addressed, with targets and indicators to monitor progress.	Agreed	See response under recommendation 09	PCT	Dec 2016

9.2 Review tasks of PCT as detailed in the original proposal, carry out analysis of how different functions are being fulfilled and what supports are required to do this effectively.	Agreed	See response under recommendation 09	PMG	Nov 2016
10. Review and revise some of the outputs, targets and indicators as identified by the agencies, across all components.	Agreed	PCT to lead this exercise along with the TRG members during the development of the 2017 work plan. The M and E frame has to be revised if the programme will end in 2017.	PCT/TRG	Oct –Dec 2016
10.1 Develop a few key indicators to capture change of a transformational nature, as pointed out in component recommendations above, and for DRIC as a whole.	Agreed	<ul style="list-style-type: none"> <li>• Document case studies that highlight transformational and qualitative change from the programme.</li> <li>• Capture qualitative change that has occurred in programmatic domains.</li> </ul>	All agencies/PCT	October 2016 onwards
10.2 Have the annual report reflect transformational change, synergy and innovative practice.	Agree		PCT	2016 onwards
11. Greater focus on advocacy with government, with the Programme Board playing a more active role, especially about financing for disability issues; capitalize on the Prime Minister's interest in disability issues, by arranging meetings with him to present DRIC.	Agreed	To be included on the agenda for the Sep 2016 Programme Board meeting.	PB/PMG/PCT	Sep-Oct 2016
11.1 Engage more with MoSVY and MoEF for	Agreed	Responded under recommendation #11 As part of the 5-10 year rehabilitation transition plan ( under	PCT/PMG/PB WHO, MoSVY and PwDF	April 2017 onwards

advocacy on financing for disability issues.		recommendation#3.1), Ministry of Economy and Finance (MoEF) and will be invited to be part of the joint national rehabilitation committee		
11.2 Facilitate development of a clear national road map for disability issues in the country, with priority areas for action and financing plan, in consultation with Government, INGOs, NGOs and DPOs.	Agreed.	In principle, the recommendation is accepted. The NDSP is a road map for disability sector in Cambodia until 2018. It is not possible for the DRIC to ensure that there is an extended road map beyond 2018	DAC	On going