

**ANNEX VI
INTERIM NARRATIVE REPORT**

- This report must be completed and signed by the Contact person of the Coordinator.
- The information provided below must correspond to the financial information that appears in the financial report.
- Please complete the report using a typewriter or computer (**you can find this form at the following address <Specify>**).
- Please expand the paragraphs as necessary.
- **Please refer to the Special Conditions of your grant contract and send one copy of the report to each address mentioned.**
- The Contracting Authority will reject any incomplete or badly completed reports.
- The answer to all questions must cover the reporting period as specified in point 1.6.

List of acronyms used in the report

ACT	The Alliance for Conflict Transformation
AHEAD	Action for Health Development
API	The Advocacy and Policy Institute
CAF	Community Accountability Facilitator
CBO	Community Based Organisation
CCSP	Cambodian Civil Society Partnership
CISA	Coalition for Integrity and Social Accountability
CSC	Community Score Card
FHD	Family Health Development
GCT	Genesis Community of Transformation
HEAD	Health and Development Alliance
KAFDOC	Khmer Association For Development of Country-Side Cambodia
I-SAF	Implementation of the Social Accountability Framework
IPHIA	Indigenous People Health Improvement Association (IPHIA)
JAAP	Joint Accountability Action Plan
LNGO	Local Non-Governmental Organisation
MIPAD	Mondulkiri Indigenous People's Association for Development (MIPAD)
MIRO	Minority Rights Organization
MPC	Mlup Promviheathor Center
MVi	My Villages
NCDD	National Committee for Sub-National Democratic Development
NGO	Non-Governmental Organisation
OD	Operational District
PHD	Provincial Department of Health
PoEYS	Provincial Office of Education Youth and Sport
PPA	Provincial Program Manager Advisor
PSC	Project Steering Committee
PVT	Prom Vihear Thor
PwD	People with Disability
SILAKA	A Cambodian NGO works toward sustained development, with women and men actively participate equally for good governance.
SNDD	Sub-National Democratic Development Body
SVC	Save Vulnerable Cambodians
VBK	VBK is a dynamic Cambodian learning organisation at the forefront of capacity development
YCC	Youth Council of Cambodia

1. Description

- 1.1. Name of Coordinator of the grant contract: CARE Deutschland-Luxemburg e.V.
- 1.2. Name and title of the Contact person: Katrin Von Der Dellen
- 1.3. Name of Beneficiary(ies) and affiliated entity(ies) in the Action: Local CSO partners
- 1.4. Title of the Action: Implementation of Social Accountability Framework; strengthening social accountability capacities for civil society, citizens including women, youth and ethnic minorities
- 1.5. Contract number: DCI ASIE /2015/365-741
- 1.6. Start date and end date of the reporting period: 01.11.2017-01.05.2018
- 1.7. Target country(ies) or region(s): Cambodia Ratanak Kiri, Mondul Kiri, Koh Kong, and Kampot provinces.
- 1.8. Final beneficiaries&/or target groups¹ (if different) (including numbers of women and men): Citizens in 4 provinces, particularly women, youth and ethnic minorities and 27 local NGO partners and CBOs receiving financial support, selected participating citizens especially women, youth and ethnic minorities.
- 1.9. Country(ies) in which the activities take place (if different from 1.7): NA

2. Assessment of Implementation of Action Activities

2.1. Executive Summary of the Action

The Implementation of Social Accountability Framework (ISAF) project is managed by CARE and its local NGO partners and involves priority actions including Information for Citizen (I4C) activities, budget awareness raising, and facilitation of the community scorecard approach and self-assessments. Significant progress was made towards achieving the I-SAF project goal during this reporting period from 01 November 2017 to 30 April 2018. The Implementation Plan of the Social Accountability Framework specifies the following implementation arrangements, which determines the roles and participation of the various actors and stakeholders. 27² Local None Governmental Organization (LNGO) partners were successfully recruited which 20 NGOs are implementing partners, four horizontal partners and three specialized training partners.

On all levels of government, national and sub-national levels, most authorities have shown an enthusiasm for the I-SAF project, particularly services providers at the district level. During the reporting period, Community Accountability Facilitators (CAFs) were completed refresher training in Module 1-3 and ISAF cycle was readjusted to fit with CARE's financial year. The inception meetings and I4C awareness meetings were conducted in all of CARE's allocated districts, which were attended by government officials from the commune council, primary school, and health centre. Whereas, community scorecard and service provider self-assessment meetings are on-going.

¹ "Target groups" are the groups/entities who will be directly positively affected by the project at the Project Purpose level, and "final beneficiaries" are those who will benefit from the project in the long term at the level of the society or sector at large.

² Horizontal Partner LNGO (HP), there are 4 HPs in each province. HPs are responsible to build capacity to implementing NGO partners (IP) on I-SAF Technical and provide constantly coaching and backstopping support after properly trained by CARE. The IP, there are 20 IPs in all 20 districts within 4 provinces of CARE I-SAF target. IPs are responsible to do ground work and a direct implementer with villagers and local authority as per I-SAF activity cycle. The Specialised Training Partners: there are three specialized training partners which provides capacity building to the 24 HPs and IPs on Gender Empowerment, Financial Management, and M&E.

CARE engaged in policy level learning and review activities and provided input to Partnership Steering Committee Study visit to review progress and policy barriers in education, health and local administration. CARE also contributed to a review of the implementation plan and strategy for the ISAF phase II, and the final draft is expected to be finalized by end of this year 2018.

The following section outlines progress made towards the specific objectives and indicators of the I-SAF project:

Overall objective: To reduce poverty through democratic, inclusive and equitable local governance and more accessible and equitable public service delivery.

Indicator Covered: 60% of target districts, there is an increase in the percentage of students reaching Grade 6 after 3 years.

Result: The average completion rate of four target province is 70.15% in academic year 2015-2016 and the figure increase to 70.45% in academic year 2016-2017.

Indicator Covered: 60% of citizens in target districts report enhanced overall satisfaction with local service delivery (in schools, health centres and commune administrations)

Result: 56.80% of citizens in target districts participated in the mid-term review reported enhanced overall satisfaction with local service delivery.

Indicator Covered: 60% of women, youth and ethnic minorities in target districts report enhanced overall satisfaction with local service delivery (in schools, health centres and commune administrations)

Result: 53.55% of women, 60% of youth and 50.29% of ethnic minorities in target districts participated in the mid-term review reported enhanced overall satisfaction with local service delivery.

Specific Objective: To enhance the performance, responsiveness and accountability of local government and service providers (specifically communes, health centres and primary schools) in selected districts through improved access to local information, open budgets and citizen-led monitoring, with a specific focus on the engagement and impacts for women, youth and ethnic minorities.

Indicator 1: 60% of citizens in target districts report that local service providers are more responsiveness to their needs

Result: 59.79% of citizen participated in the mid-term review survey responded that service providers are responsive to their need after and during social accountability implementation.

Indicator 2: 60% of women, youth and ethnic minorities report that local service providers are more responsiveness to their needs

Result: 58.78% women, youth and ethnic minorities participated in the mid-term review survey responded that service providers are responsive to their need after and during social accountability implementation.

Indicator 3: 80% of target districts complete the full annual I-SAF process (including proactive dissemination of information for citizens, citizen monitoring and the preparation of a Joint Accountability Action Plan)

Result: By the end of this reporting period, all target districts had completed 60% of the full annual I-SAF process, including proactive dissemination of information for citizens, citizen monitoring, whereas the preparation of a Joint Accountability Action Plan (JAAP) are expected to be completed by end of July 2018.

Indicator 4: In 60% of target districts, at least 50% of community participants are women

Result: 58% of participants were women. This result was fully met the output target which aimed to reach 50% women in social accountability process.

Indicator 5: In 60% of target districts, at least 25% of community participants are youth or from ethnic minorities

Result: 28% of community participants were youth and 35% of community participants were ethnic minority people. The number is met target 25% youth and 25% ethnic minority. This figure higher than last year's result 21% were youth and 20% were ethnic minority people.

Indicator 6: 60% of citizens in target districts report discernable improvements in local service delivery (in schools, health centres and commune administrations) as a result of the implementation of the Joint Accountability Action Plan (JAAP)

Result: 72.37% of citizen participated in the evaluation survey reported discernible improvements in local services. 69.93% discernible improvement in commune services, 66.75% discernible improvement in health services, and 70.17% discernible improvement in primary school services. Respondents reported visible improvements in local service delivery across six criteria, which include staff and behaviour, services provided, infrastructures, rights and standards information.

Indicator 7: 60% of women, youth and ethnic minorities report discernable improvements in local service delivery

Result: According to results of Mid Term Review survey conducted in mid of 2017, women, youth and ethnic minorities reported different perception toward improvement in local service delivery. 75.78% of youth response discernible improvements in local service delivery whereas women and ethnic minorities reported 72.24% and 65.92% respectively.

2.2. Results and Activities

Component 1: Enhanced access to Information and Budgets

Activity 1.1 The local NGO partner (LNGO) collects, reviews and compiles core data, and designs and produces information for I-SAF Information for Citizens (I4C) packs, and reviews and validates the public dissemination of. (SR1)

CARE worked with the National Committee for Sub-National Democratic Development Secretariat (NCDD) and CSO partners to update the I4C packages and circulate to target service posts include communes administrative, health centres and primary schools. In response to beneficiary feedback during the mid-term review which indicated need for improvement of awareness raising tools, CARE worked with LNGO partners to produce I4C in audio format in Khmer language to help citizens - especially illiterate persons - with better understanding on service standards and their rights to access local services include commune administrative, health centre and primary school.

In the first quarter 2018, after financial support was cut from number of development partners on operational costs of NCDD, district government encountered challenges to deliver annual updates of I4C packages to service posts and to run data collection from communes' administrative, health centres and primary schools in order to produce post-on of annual work performance. In order to help overcome these challenges, CARE and LNGO partners supported district administrative offices to circulate I4C packages to service posts and in data collection and entry to produce annual post-on updates to provinces including Ratanak Kiri, Mondul Kiri, Kampot and Koh Kong.

Topic Covered: Information, Education and Communication (IEC) materials

The IEC production aimed to enhance citizen access to information. Materials produced in this reporting period in response to the findings from the mid-term review include laminated I4C banner, audio I4C, and social accountability promotional t-shirt for CAF. A part from that, portable AP system with wireless microphone was provided to LNGO partners to help in dissemination of audio I4C, which make it easy to share social accountability message with villagers wherever they are, for example, village market and village hall. The portable AP system enables participants listen clearly, easily and effortlessly to message about services standard and rights.

The most notable use of promotional t-shirt is the value that they have in public promoting and recognition of social accountability. All CAFs who received t-shirts were required to sign an agreement with local NGO partner on the purpose and use of the t-shirt, and commit to avoiding use in affiliation with political activities and inappropriate behaviour for example drinking alcohol and gambling.

Table 1: Supportive Equipment provided and IEC Material Produced in 2018

No.	IEC material and equipment	# of items produced and contributed
1	Portable AP system with wireless microphones	20 sets
2	Social accountability promotional t-shirt	657 shirt
3	Five minutes audio for public awareness raising on standards and rights	01 audio

Topic Covered: Services centres post annual update I4C poster

Indicator covered: 80 % of targeted service centres post and annually update full and complete I4C information (including standards, performance data and budget information). (R1)

Result: 100% (392 out of 392) service centres post and annually update full and complete I4C information includes standards, performance data and budget information. I4Cs posters are displayed in all target service posts, including: 72 communes, 48 health centres and 172 primary schools. Feedback

from the community indicates a need for updated IEC materials to improve format, terminology and design to be clearer for less informed and/or literate populations.

Table 2: The number of service posts by province 2018

Province	# District	#Commune	# Primary School	# Health Centre
Rattanak Kiri	6	21	93	10
Mondul Kiri	4	13	47	9
Koh Kong	5	18	53	10
Kampot	5	20	79	19
Total	20	72	272	48

Activity 1.2 The local NGO partner (LNGO) compiles, reviews and simplifies budget information. CAFs, with the support of the commune council and the LNGO, conduct village and commune-level outreach activities to raise citizen awareness and understanding of I4Cs and enhance budget literacy. (SR2)

Topic Covered: I4Cs awareness raising meeting

I4C awareness raising processes are on track and reached proposed targets as per the approved work plan, with 58% women, 44% ethnic minority and 27% youth attending activities. CARE and its partners implemented I4C awareness raising approximately one month ahead of national social accountability cycle to ensure village outreach activities are accomplished before the election.

Notable engagement by local authorities and CAFs to lead public I4C awareness raising at village and commune level was realized with minor coordination required from LNGO partners. Many CAFs gained self-confidence to express themselves and play leadership roles in providing information on standards and rights to the communities. In each village meeting event at least one local authority attended the meeting, with approximately 300 officials engaged to support I4C awareness raising.

Table 3: Data of I4C participants in four provinces 2018

Province	Number of events	Participants	Number of Participants					
			Male	Female	Youth	ID-Poor	Ethnic Minority	PwD
Kampot	91	6,429	2,109	4,320	769	669	217	178
Koh Kong	70	5,914	2,385	3,529	1624	807	174	1
Ratana Kiri	84	12,465	6,064	6,401	3,882	1,378	9,991	13
Mondul Kiri	22	1,216	382	834	648	98	1,012	7
Total	267	26,024	10,940	15,084	6,923	2,952	1,1394	199

Indicator covered SR2: In 60% of target districts, there is a discernable improvement in citizen's (including women, youth and ethnic minorities) understanding of government standards, budgets and performance.

Result: 90% of citizens including women, youth and ethnic minority participated in the post I4C awareness raising evaluation survey reported understanding standards and performance of local service delivery, while 54% of citizens reported an understanding of budget and expenditure of local government.

Component 2: Strengthened citizen-led monitoring

Activity 2.1 The LNGO, in collaboration with CAFs, prepares and conducts the citizen monitoring process through facilitation of service provider self-assessment meetings, implementation of annual community scorecards, and community scorecard meetings. (SR3)

Topic Covered: Community Scorecards

The Community Scorecard is a citizen-driven accountability measure for the assessment, planning, monitoring and evaluation of service delivery. CARE and its NGO partners are continue to conduct the community scorecard process in 72 target communes in Ratanak Kiri, Mondul Kiri, Koh Kong and Kampot. This activity is expected to be fully completed by June 2018. The output data of community in the four provinces will be fully available in next quarter.

The Community scorecard process is facilitated in order to transform attitude, behaviour and financial management of local authorities and improve accountability by bringing together service users and service providers to identify the underlying obstacles to effective service delivery, and then develop a shared strategy for their improvement. Improvement criteria by sector is summarized below:

Improvement Criteria of Commune Administrative:

- CA1: Ensure enough staff to work at commune hall
- CA2: Improve staff behaviour, friendliness, politeness of commune staff (including commune council members)
- CA3: Improve working hours, punctuality, and respect of rules
- CA4: Enhance capacity of commune staff (including commune council members)
- CA5: Ensure public posting/dissemination of information
- CA6: Improve hygiene, sanitation, environment of the commune hall
- CA7: Ensure adequate materials, equipment, office supplies of the commune hall
- CA8: Ensure having information board
- CA9: Improve infrastructure in the commune hall
- CA10: Need a new commune hall
- CA11: Ensure workable toilets in the commune hall
- CA12: Respect posted fees (no extra service charges)
- CA13: Improve issuance of birth, death and marriage certificates
- CA14: Improve issuance of other official documents
- CA15: Improve infrastructure in the commune
- CA16: Listen to views of citizens, and respond to their concerns
- CA17: Invite people to council meetings and other relevant meetings
- CA18: Hold Council meetings as stipulated by law

Improvement Criteria of Health Centre:

- HC1: Ensure adequate number of Health Centre staff
- HC2: Improve staff behaviour, friendliness and politeness
- HC3: Improve working hour, punctuality, and respect of internal rules.
- HC4: Enhance staff capacity
- HC5: Ensure public posting/dissemination of information
- HC6: Improve hygiene, sanitation, environment of health centre
- HC7: Ensure adequate office supply and materials
- HC8: Ensure having information board
- HC9: Improve infrastructure in health centre
- HC10: Need a building or health centre
- HC11: Ensure separate functioning toilets
- HC12: Respect posted fees
- HC13: Ensure 24 hour standby
- HC14: Ensure provision of health service to local area
- HC15: Ensure adequate drug
- HC16: Ensure adequate medical supply or health centre equipment
- HC17: Improve referral system to other health facilities
- HC18: Ensure regular Health Centre Management Committee Meetings

Improvement Criteria of Primary School:

- PS1: Ensure adequate number of teacher
- PS2: Improve teacher behaviour and politeness
- PS3: Improve working hour, punctuality and discipline
- PS4: Enhance teacher capacity
- PS5: Ensure public posting/dissemination of information
- PS6: Improve hygiene, sanitation, environment of school
- PS7: Ensure adequate office supplies and materials
- PS8: Ensure having information board
- PS9: Improve infrastructure in school
- PS10: Need new classroom or building
- PS11: Ensure separate functioning toilets
- PS12: Ensure appropriate number of student per class
- PS13: Ensure adequate textbooks per student
- PS14: Ensure having kindergarten school
- PS15: Ensure to have library and enough reading books
- PS16: Ensure not to have any unofficial payments
- PS17: Ensure a playground
- PS18: Ensure adequate school equipment
- PS19: Ensure adequate number of teaching days as stipulated by law
- PS20: Ensure free schooling for every child at primary school
- PS21: Improve relations between parents and schools and school Committee Meeting
- PS22: Ensure that teachers will help all students to learn equally

Topic Covered: Service Provider Self-assessment

Service provider self-assessment is a parallel process for the community scorecard that is conducted with local officials. All officials from health centres, primary schools, and commune administrative attended the commune level meeting to give score on their performance. The service provider self-assessment will be completed by end June 2018. The detail data of service provider self-assessment will be presented in the next reporting period.

Through service provider self-assessment, networking and partnership between citizen representative and local authority has been strengthened. According to reports from implementing partners, local authorities have become more available to participate in meetings and I-SAF activities. This example highlights the positive relationship CARE and the development partners have with the Royal Government of Cambodia, and it signals that the NCDSS and Ministry of Interior are in support of decentralisation in Cambodia.

As the national election approaches in July 2018, the situation is expected to become more challenging for NGO partners to conduct meeting and coordinate activities with members of the government. For example, a self-assessment meeting in Koh Sdach Health Centre in Koh Koh province was suspended by Operational District. Because, they required MOU between CARE and Ministry of Health and permission letter from provincial administrative. CARE and its partners will coordinate closely to monitor the situation and try to continue uninterrupted project implementation.

Indicator covered SR3: 60% of officials/service providers in target districts report feeling better informed about priorities and concerns of citizens, including women, youth and ethnic minorities.

Result: 90% of officials/service providers who participated in I-SAF activities reported that they are better informed about the priorities and concerns of citizen including women, youth, and ethnic minorities. Local officials and service providers actively support and participate in I-SAF activities, including I4C awareness meeting, community scorecard and self-assessment meetings.

Activity 2.2 The LNGO, in collaboration with CAFs, produce Joint Accountability Action Plans, disseminates JAAPs and conducts interface meetings to agree on multi-sector Joint Accountability Action Plan (JAAP). (SR4)

Indicator covered: 60% of officials/service providers in target districts agree that the JAAP satisfactorily captures priority actions to improve local service delivery.

Result: 84% of officials interviewed agreed that the JAAP, developed in late 2017 and implemented in 2018, satisfactorily captures priority actions to improve local service delivery. ISAF focal points have shown ownership in project implementation, led and coordinated quarterly meetings and engaged in community social accountability activities. Demand side and supply side cooperated together better compare to last year. However, government officials are very concern about availability of national budget to support both Three Year Implementation Plan Phase III (IP3-III) and ISAF phase II 2019-2021.

Indicator covered: 60% of citizens (include women, youth and ethnic minorities) in target districts agree that the JAAP satisfactorily captures priority actions to improve local service delivery.

Result: The JAAP for 2018 is expected to be formulated in July, however feedback on the JAAP 2017 shows that 74% of citizens including women, youth and ethnic minorities in target districts who participated in the JAAP meetings agree that the JAAP satisfactorily captures priority actions to improve local service delivery.

Activity 2.3 Form a joint JAAP follow up committee (JAAPC), which in collaboration with commune officials, CAFs and the LNGO, supports and monitors the implementation of the JAAP. (SR4)

To date 72 Joint Accountability Action Plans (JAAP) were developed in 72 communes. One third of the activities proposed in these JAAPs are able to be implemented without external financial support. It has been noted that community participation and donations to facilitate the implementation of JAAPs were supported including provision of toilets, primary school yard, and play grounds for children.

Table 4: JAAP Follow up

Year	JAAP Activities			Following up of JAAP Implementation		
	Internal	External	Total	Integrated into CIP	Completed Implementation	On-going implementing
2016	199	157	255	101	21	133
2017	576	288	724	405	n/a	n/a
2018	767	446	1213	230	10	300

Component 3: Strengthened capacities of local NGO partners, CBOs, Community Accountability Facilitators through Facilitation and Capacity Building

Activity 3.1 The national implementing NGO trains and builds the capacity of its staff to support the implementation of the SAF process. (SR5)³

CARE's Social Accountability Capacity Building Officer and Monitoring and Evaluation Officer attended the National ToT on I-SAF workshop during this reporting period. The event was organised by

³ Staff attended these training which were paid for by the government at the sub-national level. CARE allocated the M&E budget line (1.3.2) their daily subsistence allowance (DSA), travel and accommodation to attend the workshop. The cost associated with senior program manager's training course was funded through a scholarship from the Australian Government.

the NCDDS and aimed to build participants' understanding of the I-SAF project; the different roles of those on the supply and demand sides of the initiative; the I4C updating process; the citizen-led monitoring process; and the JAAP monitoring process.

A Senior communication officer and senior M&E officer attended community and visibility training by the Communication Unit of the European Union in Phnom Penh on 4 April 2018. The EU is emphasizing on the importance of communication & visibility, for this reason, the meeting focused on communication networking, EU action in Cambodia, updated visibility and communication guidelines and vision. Participants discussed the Communications Strategy 2018, and brainstormed on how to be more innovative in our communication strategy and products for future partnerships.

Activity 3.2 The NATIONAL IMPLEMENTING NGO contracts LNGO partners through the sub-grant facility and builds the staff capacity of the LNGO partners to support the implementation of the SAF process. (SR5)

Indicator covered: 60% of I-SAF-related local NGO staff report enhanced capacity to support local level social accountability processes.

Result: 100% of ISAF related local NGO staff reported enhanced capacity to support local level social accountability processes, an increase from 95% compared to 2017. This evaluation was based on four criteria including: (i) 100% of staff completed 5 day core curriculum; (ii) over 100% mobilized and trained of the planned number of CAFs; (iii) 100% of planned number of CSCs (CSC and Self-Assessments) completed; (iv) 100% completed Interface meeting.

Indicator covered: 60% of community accountability facilitators judge the capacity of local NGO partners to support local level social accountability processes to be effective.

Result: 99% of community accountability facilitators who participated in the evaluation survey judged the capacity of local NGO partners to support social accountability process to be effective, an increase from 90 % in 2016. The enhancement was the result of refresher training to all CAFs after completed the training in the first year. LNGO partners' staff have provided on going backstopping support to CAFs during implementing ISAF activity.

Indicator covered: 60% of local government officials and service providers judge the capacity of local NGO partners to support local level social accountability processes to be effective.

Result: 98% of local government officials and service providers who participated in the evaluation survey judged the capacity of local NGO partners to support local level social accountability processes to be effective, an increase from 88% in previous years. Local government officials at district and commune levels conveyed their satisfaction in the capacity of LNGO partner to support local level social accountability processes.

Topic covered: LNGOs partner recruitment and contract extension

To date 27 NGOs have partnered with CARE on civil society and democracy development: 18 of which were contracted since 2016 and an additional seven contracted in 2017. Three NGOs partners work on cross-cutting sectors including: (i) capacity building on financial management and (ii) capacity building on monitoring and evaluation, and (iii) gender empowerment.

The majority of LNGOs partner performance is satisfactorily meeting CARE's requirements. However, there is only one LNGO partner performed below CARE's requirement due to internal conflict and incompliance of rule. Initially, through the compliant mechanism, CARE received a complaint about CCD-Kratie in March 2018, CARE audit and program team assessed program functioning and financial management of CCD-Kratie and found that a case of an advance for the Executive Director of USD 4,000 for activity was not compliant per CARE Country Officer Financial Manual (COFM) and a potential case of fraud. As a result, CARE followed its internal anti fraud policy including; (i) Immediate suspension of cash transfer to CCD, (ii), Meeting with the Executive Director to inform him of CARE's

decision and present official notification letter for his acceptance, including requirement of reimbursement to CARE for unspent cash advance, (iii) Termination of the contract with CCD after the return of the unspent funds to CARE, in accordance with contract obligation, and (iv) Direct implementation of the remaining activities by CARE staff..

Table 5: List of current LNGO partners 2018

No.	Name of NGOs	Category	Starting Year
	<i>Kampot Province</i>		
1	The Advocacy and Policy Institute (API)	HP ⁴	2016
2	Cambodian Agency Development of Disability and the Poor (CADDP)	IP ⁵	2016
3	Prom Vihear Thor (PVT)	IP	2016
4	Youth Council of Cambodia (YCC)	IP	2016
5	Occupation of Rural Economic Development and Agriculture (OREDA)	IP	2017
6	Children and Women Development Centre in Cambodia (CWDCC)	IP	2017
	<i>Koh Kong Province</i>		
7	Health and Development Alliance (HEAD)	HP	2016
8	Family Health Development (FHD)	IP	2016
9	Minority Rights Organization (MIRO)	IP	2016
10	Genesis Community of Transformation (GCT)	IP	2016
11	Mlup Promviheathor Center (MPC)	IP	2016
12	Action for Health Development (AHEAD)	IP	2016
	<i>Ratanakiri Province</i>		
13	Cambodian Civil Society Partnership (CCSP)	HP	2016
14	Coalition for Integrity and Social Accountability (CISA)	IP	2016
15	Save Vulnerable Cambodians (SVC)	IP	2016
16	Community Development Center (CDC)	IP	2017
17	Cambodian Community Development (CCD-Kratie) ^{6*}	IP	2017
18	Nak Akphivath Sahakum (NAS)	IP	2017
19	The Affiliated Network for Social Accountability-Cambodia (ANSA)	IP	2017
	<i>Mondul Kiri Province</i>		
20	The Alliance for Conflict Transformation (ACT)	HP	2016
21	Indigenous People Health Improvement Association (IPHIA)	IP	2016
22	Mondulkiri Indigenous People's Association for Development (MIPAD)	IP	2016
23	My Villages (MVi)	IP	2016
24	Khmer Association For Development of Country-Side Cambodia (KAFDOC)	IP	2016
25	Gender and Development for Cambodia (GADC)	Gender Specialist	2017

⁴ Horizontal Partner LNGO (HP), there are 4 HPs in each province. HPs are responsible to build capacity to local NGOs partners to on I-SAF technical and provide constantly coaching and backstopping support after properly trained by CARE.

⁵ Implementing Partner LNGO (IP), there are 20 IPs in all 20 districts within 4 provinces of CARE I-SAF target. IPs are responsible to do ground work and a direct implementer with villagers and local authority as per I-SAF activity cycle.

^{6*} CCD-Kratie is the only NGOs that did not meet requirement of CARE and dissolved the contract after extension in 2018.

26	VBNK (assessed in 2017 and start working in 2018)	Finance Specialist	2018
27	SILAKA (assessed in 2017 and start working in 2018)	M&E Specialist	2018

Topic Covered: LNGO partners' capacity to support the implementation of the SAF process

At the beginning of this financial year, LNGO partners were re-assessed on both M&E and financial management capacity to implement social accountability. Based on the assessment, CARE provided a programme implementing orientation workshop for all 27 of its LNGO partners. The objective of the workshop was to update all on the current situation, challenges and way forward of ISAF programs, ISAF cycles and contract period covering 2018. Participants included Executive Directors, program technical staff and financial staff and topics included grant management policy, supporting documentation, accounting recording, fund flow tracking, report submission timelines, payment instalment, refunds, budget flexibility, record retentions, and fraud and zero tolerance policies.

Training on Financial Management

VBNK developed a Training curriculum and session plan for Financial Management and conducted two trainings on Financial Management to CARE-ISAF partners. The training sessions were divided into four topics as prioritized topics in the TNA conducted from 05 February to 14 March 2018. The training topics are included: (i) Financial Policy and Procedures development/revision, (ii) Budget planning and management, (iii) Internal Management Control, and (iv) Quick Books.

At the end of the training, the evaluation was done by the participants. The training evaluation included: 1) general impression of the training; 2) usefulness of the training; 3) the training responds to the expectation; 4) Duration of the training; 5) Facilitator clearly explains each topic; and 6) Venue and logistics preparation. The participants were asked to complete the training evaluation form by rating the scores from 1 to 4 (1= Dissatisfied, 2= somewhat satisfied, 3= Satisfied, and 4= Very satisfied) with the focused criterial. Based on the evaluation sheets shown that:

- **General expression:** There are 61% (11 of 18⁷) and 39% (7 of 18) participants expressed “satisfied” and “very satisfied” respectively with the 4-day training in general aspects.
- **Meaning and Usefulness:** Among 20 participants who completed the evaluation form, there are 60% (12 of 20) of the participants rated “satisfied” and 40% (8 of 20) of them rated “very satisfied” with the designed topics of the training due to the importance and relevance to their works in the organization. They raised that they learnt a lot from trainings as below:
 - Know how to develop/revise financial policy effectively
 - Know the importance of internal control and the steps on how to conduct the internal control of financial works in the organization
 - Know how to use QuickBooks (posting, reporting, export data to excel for reporting)
 - Know how to manage the organizational budgets effectively
 - Know how to develop the budget planning
 - Know how to develop chart of accounts
 - Know how to do the reflection of financial implementation in the organization
 - Know how to review the reports (Profit, loss statement and balance sheet report)
- **Respond to the expectation:** There were 70% (14 of 20) and 20% (4 of 20) of them they were “satisfied” and “very satisfied” respectively that they gained knowledge as their expectations. Only two of the participants expressed “not satisfied” for gain knowledge from the training as their expectation.
- **Training Duration:** there were 65% (13 of 20) of participants reported that the duration of 4-day training was suitable to cover four topics, while 30% (6 of 20) of them said that the training was a bit short to cover these four topics.
- **Facilitator:** There were 65% (13 of 20) of participants raised “satisfied” and 30% (6 of 20) of them raised “very satisfied” respectively with the trainer/facilitator who provided

⁷ There are 20 participants completed the evaluation, however, only 18 participants complete the question related to satisfactory of the training in general.

clear explanation and use proper method in each training topic to make participants were easy to understand the topics.

- Venue and food preparation: There are 75% (15 of 20) and 20% (4 of 20) of them expressed “satisfied” and “very satisfied” respectively with the venue and food preparation and only one participant expressed “not satisfied” with these arrangements.

The participants suggested VBNK providing coaching on basic QuickBooks (create new company, create organizational chart of accounts, posting, and reporting) and supporting on Financial policy revision. Based on the evaluation sheet shown that the participants are committed and be able to applying the knowledge they gained from the training to improve their financial management both documents and implementations in their organization as following:

- To review and revise the financial policy to include more key contents and clear procedures to respond the needs of the organization.
- To strengthen the system and implementation of the internal control in the organization.
- To consider to use Accounting system of QuickBooks to record all transections of the income and expense, after the development of organizational Chart of Accounts.
- To monitor the organizational budget and management more effectively
- And to produce the reports for donors and organization timely.

Training on Monitoring and Evaluation

SILAKA, CARE’s M&E specialized partner, completed several key activities such as Training Need Assessment (TNA), Training Curriculum and Materials, a three day training workshop on M&E guideline, a three day training workshop on report writing and data collection and coaching visit with three LNGO partners in Phnom Penh, Mondul Kiri and Kampot. CARE’s Program team is in process of developing M&E related tools to be used with selected LNGO partners.

The result of TNA indicated that LNGO partners require support on M&E topics such as (i) Overview of Project Management Cycle focusing on result based management (RBM) logical framework, (ii) Fundamental concepts of M&E, (iii) Practical M&E data collection tools and data tracking system, and (iv) M&E Reporting and communications/learning of findings. Monitoring visits and on-site coaching to local NGO project sites are required to ensure understanding and compliance with the guidelines, and conduct selected sites data verification in a randomized manner. This will ensure that IPs and HPs are able to keep track and report on the performance indicators of the project results (outputs and outcomes/impacts). A learning and reflection workshop will be conducted after completed training course, and an M&E manual will be developed and provided for LNGO partners.

Two of M&E training Modules (M1&M2) were delivered to 24 LNGOs partners on project monitoring and evaluation to enhance staff skills in planning, coordinating and managing M&E components, which are key to ensuring the effectiveness, efficiency and accountability of M&E systems. The module1 training workshops held on 16-20 March 2018 at Ly Chou Hotel Kratie Province for LNGO partners implementing ISAF in Ratanak Kiri and Mondul Kiri provinces. A second workshop was conducted 25-29 March 2018 at Grand Seagull Hotel Sihanoukville Province for LNGO partner implementing ISAF in Koh Kong and Kampot provinces. Participants included Executive Directors, Senior Management Officers and ISAF Technical from the 24 LNGOs under CARE’s ISAF project. (See training Report attached as annex).

Table 7: participants of module 1 and 2 training on M&E

No.	Description of Activities	Date	Venue	Participants	
				# Male	# Female
1	Training module1 on M&E	16-20 March 2018	Ly Chou Hotel Kratie	18	06

2	Training module1 on M&E	25-29 March 2018	Grand Seagull Hotel Sihanoukville	13	09
3	Training module2 on M&E	19-21 April 2018	Memoire” hotel in Siem Reap province	19	04
4	Training module2 on M&E	23-25 April 2018	Memoire” hotel in Siem Reap province	17	07

Overall course evaluation assessment score:

<i>Module1 Average score:</i>	(i)	<i>Pre-test: 54.53/100 points</i>	<i>Post-test: 78.33/100 points</i>
	(ii)	<i>Pre-test: 46.97/100 points</i>	<i>Post-test: 82.66/100 points</i>
<i>Module2 Average score:</i>	(i)	<i>Pre-test: 29.13/100 points</i>	<i>Post-test: 80.87/100 points</i>
	(ii)	<i>Pre-test: 24.57/100 points</i>	<i>Post-test: 73.26/100 points</i>

Result of pre-test and post-test of overall course evaluation assesses overall satisfactions of participants: (i) preparing and training methods; (ii) appropriateness of the course objectives and schedule; and (iii) participants’ interests on the topics and feedbacks for the next training. The average post-test score in the second training increased more than three times compared to pre-test scores in four training. This indicates a significant progress in knowledge of the participant after the training workshop.

A key outcome from the training is that participants understand and are able to apply the knowledge, skill and experiences gained from the training, including : (i) development of internal M&E System, (ii) M&E framework, data collection analysis and report, (iii) sharing knowledge, skill and experiences gained with other staff, (iv) M&E data management, (v) applying SPSS in M&E, and (vi) evaluation design and questions.

Participants noted that the use of “Computer Software” such as SPSS, MS Excel and Google Form is an efficient tool to M&E process for LNGOs including, data collection, record, analysis and report, although most participants have limited knowledge and skill on this statistical software. Therefore, it is a need to provide with staff members of LNGOs with practical sessions on “MS Excel for M&E Dataset”.

Activity 3.3 The LNGO makes contact with local officials and service providers and conducts initial outreach at commune level. (SR6)

Indicator: 60% of citizens in target districts report enhanced capacity to productively engage government.

Result: 95% of citizens in target districts who participated in evaluation survey reported enhanced capacity to productively engage government. Through participating in I-SAF activities citizens felt they had increased capacity to engage with the government official in a productive way.

Indicator covered:60 % of women, youth and ethnic minorities report enhanced capacity to productively engage government.

Result:

- 95% of women who participated in the evaluation survey reported enhanced capacity to productively engage government.
- 94% of youth participated in the evaluation survey report enhanced capacity to productively engage government.
- 95% of ethnic minorities participated in the evaluation survey report enhanced capacity to productively engagement.

Though high percentage women, youth and ethnic minority reported enhanced capacity, when questioned about levels of confidence only 56.25% indicated strong confidence to engage with local authority or government officials.

Topic Covered: Commune level outreach activity

Commune level outreach was completed in the first quarter 2018. The majority of targeted districts report that commune level outreach was conducted smoothly because LNGO partners already build strong connection with local authority in their assigned districts. Commune and primary school was reported to be more open and supportive to social accountability, whereas a small number of health centres indicate they must still strictly follow administrative processes which require official letter to Operational District (OD) and sign Agreement of Action (AoA) before proceeding with actions.

To date all implementing partners had completed commune level outreach in their individual areas. The most notable change in this reporting period is that ownership of sub-national government to social accountability is improved. For instance, provincial officials in Kampot, Ratanak Kiri, Mondul Kiri and Koh Kong have been actively leading the initial coordination and quarterly meetings at provincial level.

Activity 3.4 The LNGO identifies and engages strategic CBO partners in each commune. (R6) organizes an inception meeting with key stakeholders in each commune, and undertakes awareness airing on citizen monitoring and social accountability processes. (SR6)

Topic Covered: Inception meeting

Inception Meetings were organised in all target communes to disseminate updated ISAF strategy and processes including access to information (I4C), community scorecard and self-assessment, interface meeting and ISAF implementation plan, ensuring that all relevant stakeholders and partners are well aware of and will fully engage with ISAF implementation plan. The meeting gave opportunity for local service providers and citizen representatives to discuss and agree on detailed schedules to carry out all related ISAF activities.

LNGO partners conducted 73 inception meetings with stakeholders at the sub-national level during first quarter of reporting period. According to reports from the LNGO partners, participants of the inception meetings showed enthusiasm for the project and were eager to improve their services. A notable achievement is the number of officials attending the inception meetings, which signal strong local cooperation to improve accountability at local level. Table 8 lists the number of inception meetings that were conducted during this reporting period in each province, and who attended these events:

Table 8: Inception Meetings Conducted with Local Authority

Province	Number of Inception Meeting	Citizen participant						Official	
		Male	Female	Youth	ID Poor	Ethnic Minority	PwD	Male	Female
Kampot	20	194	89	40	0	14	18	93	43
Ratanak Kiri	21	219	164	146	13	314	0	78	23
Mondul Kiri	14	198	89	104	21	161	2	84	55
Koh Kong	18	96	72	64	2	15	0	200	59
Sub-total	73	707	414	354	36	504	20	455	180
Total		1,112						635	

Activity 3.5. The LNGO selects, mobilizes, trains and mentors four Community Accountability Facilitators (as well as selected local officials and service providers) from each commune. (R7)

Refresher trainings were conducted by 20 LNGO partners for CAFs, with participation reaching a gender and inclusive balance of representatives: 53% women, 60% youth, and 31% ethnic minorities.

By the end of this reporting period, 99% of CAFs had completed training on three modules include Module I: Introduction to social accountability, Module II: I4C awareness raising and Module III: Citizen monitoring and scorecard. The remaining module IV will be rolled out in the next quarter. The most notable result of these trainings is that CAFs are able to conduct I4C awareness raising and actively participate in community development. Table 9 lists the number of male, female, ethnic minority and youth CAFs recruited in the project up to the end of this reporting period.

Table 9: Selection of Community Accountability Facilitators

Province	Number of CAFs						
	Male	Female	Youth	ID Poor	Ethnic Minority	People with disability	Drop-out
Kampot	41	41	28	0	1	1	13
Ratanakiri	41	43	74	0	68	0	1
Mondulakiri	18	32	41	9	20	0	6
Koh Kong	42	45	39	4	5	0	14
Sub-total	142	161	182	13	94	1	34
Total	303						

Component 4: Contribute to dialogue on improved government policies, guidelines and practices through enhanced learning, feedback and monitoring

Activity 4.1 Formulation of an innovative learning strategy and action plan, and conduct studies by a specialized Learning Partner to support ongoing development of SAF policy and implementation (R8)

During the first quarter of 2018, CARE's Assistance Country Director Programs and I-SAF Senior Program Manager regularly attended I-SAF Civil Society Coordination (CSO) meetings, the NCDD technical working group's bi-monthly meeting, and the Partnership Steering Committee's (PSC) quarterly meeting. CARE and NCDD co-organized two PSC trip in this reporting period to foster positive relations and open communications between the civil societies, development partners, and government, to ensure the I-SAF operational principles and guidelines were realised and implemented at the sub-national level on both the supply and demand side. These meetings also gave participants an opportunity to share experiences, examples of best practice and any obstacles that have arisen during implementation of the I-SAF project activities. Moreover, the PSC trip also allowed for opportunity to meet with municipality officials to discuss possibility to expand ISAF to municipality and town levels in 2019.

CARE's ISAF team accompanied a monitoring visit by CARE Germany on a field visit to the I-SAF project in Kampot province 24-26 April 2018. During this visit, they met with two implementing partners, project beneficiaries, CAFs, local authorities and the NCCD district officials. The result of the visit indicate that project implementation is on track for completion and the existing work plan is relevant. A concerted focus on the sustainability of the project will be prioritized in the coming period.

Activity 4.2 Prepare and disseminate instruments and guidance materials, Feedback and learning forums are held regularly and establish feedback and policy revision process (R8)

Indicator covered: # of lessons learned that have been discussed between citizens and government.

Result: Regular review and reflection of lessons learnt is an on going component of this project implementation, with discussions facilitated between citizens and government to continually improve implementation. A variety of topics discussed includes learning approach, means of communication between supply-side and demand-side, dissemination strategies, citizen engagement methods related to

financial support mechanism, scale up of ISAF and its sustainability. Documentation of lessons learnt and best practices will be prepared for ISAF II.

Topic Covered: Feedback and Review of ISAF for Phase II (2019 – 2023)

CARE and CSO partners discussed and drafted a paper on ISAF Phase II with a goal to achieve full national coverage of communes and establish permanent systems, within government and civil society, to ensure that (both supply-side and demand-side) ISAF activities can be sustained in the long term with minimal external financial support.

The primary audience for the implementation strategy is the RGC (NCDD-S), ISAF implementing partners and potential donors. Due to lack of clarity regarding future available resources, the strategy will explore cost alternative scenarios.

The methodology includes:

- Desk research – Including review of: (i) government guidelines, (ii) project documents, (ii) monitoring/assessment documents, and (iii) learning products
- Interviews with key actors
- Circulate and seek feedback on an annotated outline
- Consultations on annotated outline with stakeholder groups (at local to national level)
- Circulate and seek feedback on draft implementation strategy
- Participatory workshop to collectively review and discuss draft implementation strategy
- Finalize the ISAF Phase II Implementation Plan

ISAF Phase II will aim to cover key elements including: (i) supply-side implementation, (ii) demand-side implementation, (iii) and coordination mechanism. CAF roles have been discussed in several scenarios aiming to embed a more sustainable role in the community. Geographic and service coverage will also aim to be extended, with a view to pilot implementation of ISAF at municipal level in 2019.

Activity 4.3 Undertake monitoring of results, conduct impact evaluation, process audits, mid-term review and final evaluation, and discuss in bi-annual policy review.

Topics Covered: End of Project Evaluation

The end of project evaluation will be conducted by an independent consultant during June -July 2018 with the objective of providing a full assessment of the progress made versus the baseline and mid-term review, following the key indicators as stated in the project logical framework. The evaluation also includes key evaluation related to relevance, effectiveness, efficiency, impact and sustainability and indicators relevant for a potential ISAF II project.

The following key questions will guide the end of project evaluation:

- To what extent does the project achieve overall, specific objectives and key result indicators according to the logical framework? Does the intervention contribute to improve key local services performance (primary school, health centre, and commune administrative)? What positive changes as a result of project intervention?
- Does the four key intervention component (Access to information and open budget, Citizen monitoring, Facilitation and capacity building, Learning and monitoring) were effectively implemented and achievable?
- To what extent are the benefits of the projects likely to be sustained after the completion of this project?

- What are the key lesson learnt and key recommendation to improve future project intervention or share future government and donor funding?
- Have the project intervention been efficient, including comparative value for money and outcomes of interventions in four provinces coverage areas?
- Does the intervention model through local partners, vertical and capacity building partners (27 partners), were effectively implemented, it is a good approaches for building capacity of local NGO and were considerably added value?
- What have been the most successful or unsuccessful interventions and why? Where any deemed as innovative? What lessons have we learnt from these? What potential multiplying effects could be observed? Are there external opportunities and challenges that have impacted positively or negatively on successes and limitations?

The evaluation will look at the following areas: project management, project activities, reflection of grant coordination engagement, partnerships with the National Committee for Sub-National Democracy Development (NCDD), partnerships Local NGOs and with other development partners. It will address the results achieved, the partnerships established, as well as issues of capacity and approach.

The Methodology will include components such as:

- Literature review
- Project design documents / proposal and workplan
- Project report – semi annual and annual report
- Baseline of Impact Evaluation report
- Project midterm review report
- Relevant policy documents, e.g. ISAF implementation framework
- Population base survey with in the four provinces coverage areas.
- Semi-structured interviews and/or focus group discussions with key implementing partners, stakeholders, donors, Government of Cambodia officials, partners and beneficiaries.
- Fieldwork to hear the views of beneficiaries and other stakeholders and to observe service delivery.

2.3. Internal Audit

CARE's Internal Audit team provides on- going continual oversite to project and support to partner in compliance matters within fiscal year 2018. The purpose of this audit was to ensure the LNGOs are compliance with CARE's policies and to identify areas, which CARE can provide capacity building to these partners. Within the reporting period, one LNGO – CCD-Kratie, had its contract terminated by CARE due to poor financial management, non-compliance and potential fraud.

CARE provided capacity building on financial management to specific partners according to audit results. This activity is scaling up in early of 2018 sub-granting with VBNK to build capacity to local NGOs partner on financial management.

2.4. Program Monitoring

CARE provides on-going support and backstopping to all LNGO partners on M&E with its M&E Advisor and Senior Officer. The M&E officer provides technical assistant to LNGOs partner regularly to ensure the output data collected accurately and M&E plan implemented accordingly ensuring program implementation progress is on track.

In this reporting period, CARE sub-granted SILAKA to provide training on monitoring and evaluation to its 24 LNGO partners on the ISAF project. With this this training LNGOs were provided with guidance on enhanced programme implementation quality and sustainable operations for longer term programming after this project concludes.

2.5. Lessons learnt and recommendation

Within the reporting period lessons learned include:

- Taking more advantage of social media such as Facebook groups, video calls, etc provide greater opportunity to share information regularly and discuss solutions to challenges in a timely and effective manner.
- The use of Kobo Toolbox as a mobile data collection tool enables LNGO and CAF to effectively collect real time data however resources must be factored adequately as this requires provision of and training on tablets or android smart phones.
- The use of participatory approaches resulted in positive outcomes for training workshops and capacity building activities. This approach involved giving participants ample opportunities to share their opinions and provide feedback. Also, the use of practical and visual learning methodologies, such as group discussions, role playing, drawing, and the use of photos and posters, were found to be the most effective way to deliver the training content used in workshops.
- I4Cs awareness raising using portable AP system is effective to engage more youth and male participants.
- Routine (quarterly) supply-side and demand-side local level meetings (commune or district) are recommended to strengthen cooperation at local levels.

2.6. Activity Plan

Table 10 outlines the activity plan for the I-SAF project over the 2017-2018 financial year. This plan does not include the on-going backstopping support, audit and coaching provided by CARE to the implanting and horizontal partners during this period.

Table 10: CARE Cambodia I-SAF Activity Plan for 2017-2018 financial year

Period	Q4 - 2017	Quarters 1 & 2 & 3										Remark
		2018 (month)										
Activity	D	J	F	M	A	M	J	J	A		Implementer	
Expected Result 1: Enhanced Access to Information and budgets												
Activity 1.1 The local NGO partner (LNGO) collects, reviews and compiles core data, and designs and produces information for I-SAF Information for Citizens (I4C) packs, and reviews and validates the public dissemination of. (SR1)	X	X	X	X							CAR Local NGO partner	

Activity 1.2 The local NGO partner (LNGO) compiles, reviews and simplifies budget information. CAFs, with the support of the commune council and the LNGO, conduct village and commune-level outreach activities to raise citizen awareness and understanding of I4Cs and enhance budget literacy. (SR2)	X	X	X	X	X	X	X	X	X	X	Local NGO partner
Activity 2.1 The LNGO, in collaboration with CAFs, prepares and conducts the citizen monitoring process through facilitation of service provider self-assessment meetings, implementation of annual community scorecards, and community scorecard meetings. (SR3)	X	X	X	X							Local NGO partner
Activity 2.2 The LNGO, in collaboration with CAFs, produce Joint Accountability Action Plans (JAAP), disseminates JAAPs and conducts interface meetings to agree on multi-sector JAAP. (SR4)			X	X	X	X					Local NGO partner
Activity 2.3 Form a joint JAAP follow up committee (JAAPC), which in collaboration with commune officials, CAFs and the LNGO, supports and monitors the implementation of the JAAP. (SR4)	X	X	X	X	X	X	X	X	X	X	Local NGO partner
Activity 3.1 The NATIONAL IMPLEMENTING NGO trains and builds the capacity of its staff to support the implementation of the SAF process. (SR5)	X	X	X	X							CARE
Activity 3.2 The NATIONAL IMPLEMENTING NGO contracts LNGO partners through the sub-grant facility and builds the staff capacity of the LNGO partners to support the implementation of the SAF process. (SR5)	X	X	X	X							CARE
Activity 3.3 The LNGO makes contact with local officials and service providers and conducts initial outreach at commune level. (SR6)	X	X	X	X							Local NGO partner
Activity 3.4 The LNGO identifies and engages strategic CBO partners in each commune. (R6) organizes an inception meeting with key stakeholders in each commune, and undertakes awareness			X	X	X						Local NGO partner

raising on citizen monitoring and social accountability processes. (SR6)										
Activity 3.5. The LNGO selects, mobilizes, trains and mentors four Community Accountability Facilitators (as well as selected local officials and service providers) from each commune. (R7)	X	X	X	X						Local NGO partner
Activity 4.1 Formulation of an innovative learning strategy and action plan, and conduct studies by a specialized Learning Partner to support ongoing development of SAF policy and implementation(R8)	X	X	X	X	X	X	X	X	X	Specialized Training Partner (TP)
Activity 4.2 Prepare and disseminate instruments and guidance materials, Feedback and learning forums are held regularly and establish feedback and policy revision process (R8)	X	X	X	X	X	X	X			Specialized Training Partner (TP)
Activity 4.3 Undertake monitoring of results, conduct impact evaluation, process audits, and final evaluation, and discuss in bi-annual policy review.						X	X	X	X	Specialized Training Partner (TP)

3. Beneficiaries/affiliated entities and other Cooperation

- 3.1. How do you assess the relationship between the Beneficiaries/affiliated entities of this grant contract (i.e. those having signed the mandate for the Coordinator or the affiliated entity statement)? Please provide specific information for each Beneficiary/affiliated entity.

All project partners who signed the Partnership agreement with CARE for the implementation of the Action were dedicated, industrious and creative during this reporting period. CARE provides overall planning / coordination of project activities, and leads a number of critical functions such as community mobilization, organization of grant competition, provision of organizational support to cooperatives, procurement / transfer of grant assets to the co-operators, and support for stakeholder relations.

- 3.2. How would you assess the relationship between your organisation and State authorities in the Action countries? How has this relationship affected the Action?

During the previous reporting period, the implementing and development partners signed separate MOUs with the Ministry of Interior's NCDDDS. This activity was the result of a long negotiation process that lasted from May 2015 until the 9 March 2016. An official launching campaign to announce this agreement took place on the 5 December 2016. The project implementation strongly depended on level of cooperation with government actors.

During this reporting period, CARE was elected as official member of Partnership Steering Committee (PSC). In the first quarter 2018, CARE participated in PSC quarterly meetings and joined in a PSC study tour in Prey Peng province. Lastly, a district level meeting with government officials in Kampot province was conducted in April 2018.

- 3.3. Where applicable, describe your relationship with any other organisations involved in implementing the Action:

- Associate(s) (if any)
- Contractor(s) (if any)
- Final Beneficiaries and Target groups
- Other third parties involved (including other donors, other government agencies or local government units, NGOs, etc.)

The World Bank funded World Vision International and Save the Children, RACHA funded by USAID, and CARE have developed an excellent and trusted partnership over the last year. CARE has been involved in social accountability activities for several years, actively implementing the Community Score Card (developed by CARE International) in a Global Fund-supported Health Strengthening Program in three of the four I-SAF provinces until 2015. Prior to this EU-supported action CARE had joined these Implementing Partners meetings to keep abreast of the developments. CARE was elected as official member of the Partnership Steering Committee in 2017 and actively engaged in policy review and coordination ISAF at national and sub-national level. The original governance arrangements included a technical working group for all the Implementing Partners, but it was cancelled by the Ministry of Interior. There are two disadvantages to this decision: the Partnership Steering Committee needs to deal with too many technical issues, as demonstrated in the last PSC on 19 February 2016. Decisions need to be postponed until the next quarterly meeting of the PSC which delays the progress of the I-SAF. An ad-hoc technical working group consisting of the I-SAF Demand Side Coordinator and members of the NGO representatives of the PSC frequently meets with the NCDDDS to compensate for this construct. The frequent meetings of the main Implementing Partners have contributed to an excellent cooperation and trusted partnerships.

- 3.4. Where applicable, outline any links and synergies you have developed with other actions.

CARE's previous work on the Community Score Card in the Global Fund health project retains ongoing practise within community work by villagers and local authorities in Ratanak Kiri, Mondul Kiri and Koh Kong, and has already seen successful introduction of the "community scorecards"-tool to promote social accountability. CARE experienced that stakeholders are generally very receptive to empowerment issues and accountability, if given the opportunity and with appropriate facilitation.

- 3.5. If your organisation has received previous EU grants in view of strengthening the same target group, in how far has this Action been able to build upon/complement the previous one(s)? (List all previous relevant EU grants).

Cambodian Highland Integrated Food Security Project (CHIFS) grant: building on the Village Action Plans, which were incorporated in the Commune Investment Plan (CIP) and the District Investment Plan (DIP).

4. Visibility

CARE's communications unit provides technical support to this project to ensure that all European Union visibility and branding requirements, including use of the EU logo, follow compliance requirements. CARE communications staff follow-up regularly with the Implementing Partners to ensure the correct visibility. Furthermore, CARE displays EU logo on the CARE website and all external communications materials, i.e. I-SAF profile, operational guideline and t-shirt.

In addition, an I-SAF fact sheet is uploaded on the CARE German website (in German language), where the EU is mentioned as a donor and the EU logo is shown. The factsheet can be view at the following website address: https://www.care.de/fileadmin/user_upload/Einsaetze/Asien/Kambodscha/Projektbeschreibung_kambodscha.pdf

The EU logo is displayed on the websites of the 27 NGO partners, and stickers with EU logo are applied on all grant assets handed over to cooperatives (book, backdrop, training event and equipment, etc.). Stickers with EU logos on printed project material and folders with project related information and documents are distributed to project participants; and displayed on project banner with EU logos at all public events organized by the Action (e.g. information meetings, expert workshops, etc.).

The European Commission may wish to publicise the results of Actions. Do you have any objection to this report being published on the EuropeAid website? If so, please state your objections here.

No Objections.

Name of the contact person for the Action: Von Der Dellen, Katrin

Signature: {.....}

Location: Bonn

Date report due: 01/05/2018

Date report sent: 31/05/2018