



INTERNAL AUDIT DIVISION

AUDIT REPORT

HIV/AIDS Unit operations in UNAMID

Inadequate staffing levels and ineffective reporting lines have hindered the HIV/AIDS Unit from fully implementing its mandate

4 March 2011

Assignment No. AP2010/634/10

United Nations  Nations Unies

INTEROFFICE MEMORANDUM

MEMORANDUM INTERIEUR

OFFICE OF INTERNAL OVERSIGHT SERVICES · BUREAU DES SERVICES DE CONTRÔLE INTERNE
INTERNAL AUDIT DIVISION · DIVISION DE L'AUDIT INTERNE

TO: Mr. Ibrahim Gambari, Joint Special Representative
A: African Union-United Nations Hybrid Operation in Darfur

DATE: 4 March 2011

REFERENCE: IAD: 11-00263

FROM: Fatoumata Ndiaye, Director
TO: Internal Audit Division, OIOS



SUBJECT: **Assignment No. AP2010/634/10 – Audit of HIV/AIDS Unit operations in UNAMID**
OBJET:

1. I am pleased to present the report on the above-mentioned audit.
2. Based on your comments, we are pleased to inform you that we will close recommendations 7, 9 and 10 in the OIOS recommendations database as indicated in Annex 1. In order for us to close the remaining recommendations, we request that you provide us with the additional information as discussed in the text of the report and also summarized in Annex 1.
3. Please note that OIOS will report on the progress made to implement its recommendations, particularly those designated as high risk (i.e., recommendations 2 and 8), in its annual report to the General Assembly and semi-annual report to the Secretary-General.

cc: Mr. Corentin Ki-Doulaye, Acting Principal Deputy Joint Special Representative, UNAMID
Mr. Mohamed Yonis, Deputy Joint Special Representative for Operations and Management, UNAMID
Mr. Swatantra Goolsarran, Executive Secretary, UN Board of Auditors
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INTERNAL AUDIT DIVISION

FUNCTION

“The Office shall, in accordance with the relevant provisions of the Financial Regulations and Rules of the United Nations examine, review and appraise the use of financial resources of the United Nations in order to guarantee the implementation of programmes and legislative mandates, ascertain compliance of programme managers with the financial and administrative regulations and rules, as well as with the approved recommendations of external oversight bodies, undertake management audits, reviews and surveys to improve the structure of the Organization and its responsiveness to the requirements of programmes and legislative mandates, and monitor the effectiveness of the systems of internal control of the Organization” (General Assembly Resolution 48/218 B).

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EXECUTIVE SUMMARY

Audit of HIV/AIDS Unit operations in UNAMID

The Office of Internal Oversight Services (OIOS) conducted an audit of HIV/AIDS Unit operations in the African Union-United Nations Hybrid Operation in Darfur (UNAMID). The overall objective of the audit was to assess the adequacy and effectiveness of internal controls over the operations of the HIV/AIDS Unit in support of UNAMID's mandate. The audit was conducted in accordance with the International Standards for the Professional Practice of Internal Auditing.

Overall, internal controls over the operations of the HIV/AIDS Unit needed to improve, as UNAMID's substantive sections had not integrated HIV/AIDS concerns in their respective work plans as required by the Department of Peacekeeping Operations' Policy Directive. Moreover, the Unit had not provided substantive sections with adequate technical input and support for their operational plans. The other main audit results were as follows:

- Primarily due to unsuitable reporting lines and also because HIV/AIDS activities were not viewed as critical compared to other mainstream activities, there was no indication that the Mission had made efforts to resolve the lack of capacity faced by the HIV/AIDS Unit. This impeded effective implementation of HIV/AIDS activities in the Mission.
- Outreach activities had not been adequately implemented. Since the start of the HIV/AIDS Unit operations in 2008, only two Quick Impact Projects were submitted to the Civil Affairs Section for approval in January 2009 and September 2010. To date, the Unit had not received approval or feedback on these proposals.
- The voluntary confidential counseling and testing services (VCCT) provided by the HIV/AIDS Unit needed improvement. For example, facilities to conduct VCCT counseling were often inadequate, and VCCT services were not provided in Sector South and in the Khartoum Liaison Office.

OIOS issued 12 recommendations to address the issues identified during the audit and to strengthen internal controls over the operations of HIV/AIDS Unit.

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I. INTRODUCTION

1. The Office of Internal Oversight Services (OIOS) conducted an audit of the HIV/AIDS Unit operations in the African Union - United Nations Hybrid Operation in Darfur (UNAMID). The audit was conducted in accordance with the International Standards for the Professional Practice of Internal Auditing.
2. Security Council resolution 1308 of July 2000 sets out the obligation of the Department of Peacekeeping Operations (DPKO) to provide HIV/AIDS awareness and prevention programme for all peacekeeping personnel in order to reduce the risk of peacekeepers contracting and spreading the virus.
3. To address this concern, DPKO issued a Policy Directive on 1 December 2007 on the role and functions of HIV/AIDS Units in United Nations peacekeeping operations. This Policy Directive outlines the framework within which HIV/AIDS Units should operate and provides the rationale for integrating HIV/AIDS activities in peacekeeping operations.
4. UNAMID's HIV/AIDS Unit is responsible for providing awareness and prevention programmes to all Mission personnel and to integrate HIV/AIDS issues in the Mission's mandates. The services provided by the HIV/AIDS Unit include awareness, counseling training, Voluntary Confidential Counseling and Testing (VCCT), distribution of condoms, provision of Post Exposure Prophylaxis (PEP) kits, and establishment of an outreach programme in partnership with United Nations agencies, programmes and funds and other international organizations operating in Darfur.
5. The activities of the HIV/AIDS Unit in UNAMID support approximately 24,000 United Nations personnel including military, United Nations police, and international and national civilian personnel. The Chief of the HIV/AIDS Unit reports directly to the Head of the Humanitarian Liaison Office (HLO). The Unit has 23 approved posts (three professional, eight United Nations Volunteers, and twelve national staff) of which 16 posts were encumbered.
6. Comments made by UNAMID are shown in *italics*.

II. AUDIT OBJECTIVES

7. The main objectives of the audit were to assess: (a) the adequacy and effectiveness of internal controls over the operations of the HIV/AIDS Unit; and (b) the support provided by the Unit to integrate HIV/AIDS concerns in the Mission's programmes.

III. AUDIT SCOPE AND METHODOLOGY

8. The audit covered the period from 1 July 2009 to 30 September 2010 and included the programmes implemented and services provided by the HIV/AIDS Unit.
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9. The audit methodology included a review of relevant documents and records, interviews with relevant personnel, field visits to selected sites in the Mission's area of operation, and analysis of data.

IV. AUDIT RESULTS

A. Mandate

HIV/AIDS concerns have not been adequately incorporated into the work of other Mission components

10. According to Section 25 of the Policy Directive, the Chief HIV/AIDS Officer should identify which Mission components can integrate HIV/AIDS concerns into their respective programmes, and provide technical input and support to the relevant policy and operational plans of these components. However, none of the Mission's substantive sections had integrated HIV/AIDS components in their respective work plans. Moreover, the HIV/AIDS Unit had not provided the relevant substantive sections with technical input and support for their operational plans. This was largely because the Unit only made informal requests of these sections to have HIV/AIDS issues included in their work plans and did not formally follow up with them.

11. The lack of a methodology to identify HIV/AIDS issues reduced the effective integration of HIV/AIDS concerns into the Mission's programmes. This may lead to missed opportunities to draw on existing capacities such as pooling of resources, sharing training materials and developing joint outreach projects to implement integrated Mission concepts.

Recommendation 1

(1) The UNAMID Management should identify which Mission components need to integrate HIV/AIDS concerns into their work plans and ensure that the HIV/AIDS Unit provides technical input and support to the relevant policy and operational plans of those components.

12. *The UNAMID Management accepted recommendation 1 and stated that the HIV/AIDS Unit will coordinate with the relevant substantive sections to have the HIV/AIDS component included in their respective work plans. Recommendation 1 remains open pending receipt of documentation showing that the Chief HIV/AIDS Officer has provided technical input to substantive units and that the HIV/AIDS component has been included in their work plans.*

B. Governance

Reporting lines did not facilitate resolution of issues facing the HIV/AIDS Unit

13. In its regular reports to the HLO, the HIV/AIDS Unit set out a number of challenges being faced, such as under staffing, inadequate VCCT facilities, and

unavailability of HIV/AIDS test kits. However, there was no documentation indicating that the Mission had adequately addressed these issues.

14. This situation arose largely due to unsuitable reporting lines for the Unit. The HIV/AIDS Unit currently reports to the HLO who views HIV/AIDS activities as less critical than other mainstream activities and therefore does not fully incorporate HIV/AIDS concerns in its reports to Senior Management. In most peacekeeping missions, it is the practice for the HIV/AIDS Unit to report directly to the Deputy Special Representative of the Secretary-General.

15. The failure of the HLO to fully address the issues and challenges facing the Unit has resulted in the Mission not effectively implementing the HIV/AIDS programme.

Recommendation 2

(2) The UNAMID Management should consider having the HIV/AIDS Unit report directly to the Principal Deputy Joint Special Representative in order to deal effectively with the challenges faced by the Unit and allow its activities to be better monitored.

16. *The UNAMID Management accepted recommendation 2 and stated that the HIV/AIDS Unit started to submit monthly reports to the Principal Deputy Joint Special Representative. OIOS takes note of the action taken to submit reports to the Principal Deputy Joint Special Representative. Recommendation 2 remains open pending Management's reconsideration of the HIV/AIDS Unit reporting directly to the Principal Deputy Joint Special Representative to ensure issues are addressed at the appropriate level.*

C. Operations

HIV/AIDS induction and training programmes need to be fully implemented

17. Section 9 of the Policy Directive states that the HIV/AIDS Unit shall provide mandatory HIV/AIDS awareness training for all mission personnel including international and national staff, contractors and uniformed personnel. The HIV/AIDS Unit should make direct site visits within six weeks of deployment of national contingents and formed police units and provide refresher training to contingents deployed for more than six months. The Policy Directive also states that providing HIV peer education to selected staff is a key strategy to maximize HIV awareness capacity and impacts positively on the risk-behaviour environment.

18. Some UNAMID contingents were not provided with the mandatory training. For example, the Ethiopian contingents (El Geneina), the Senegalese contingents (El Geneina, Tine and Um Barru), and the Senegalese Formed Police Unit (FPU) in El Geneina were not provided with training. Furthermore, except in Zaleingi and North Darfur, peer education training had not been conducted. These trainings were not done mainly due to inadequate staffing in the

HIV/AIDS Unit. Lack of awareness training on HIV/AIDS issues impedes the Mission's ability to control high-risk behavior and to reduce vulnerability to the virus.

Recommendations 3 and 4

The UNAMID Management should:

(3) Ensure that all troops are trained within six weeks of deployment in order to increase HIV/AIDS awareness and decrease the risk of transmission; and

(4) Ensure that peer education training is provided to selected United Nations personnel in all Mission sectors to increase HIV/AIDS awareness and lower the risk of transmission among peacekeepers.

19. *The UNAMID Management accepted recommendation 3 and stated that once additional staffing, programme-based training and the travel budget are approved, the Unit will be able to train troops not covered by the Integrated Mission Training Center induction training. Recommendation 3 remains open pending confirmation that contingents are being given the required training.*

20. *The UNAMID Management accepted recommendation 4 and stated that the lack of training is due to an insufficient budget and the non-release of the selected civilian staff by their supervisors. The peer education training will be done once the budget is approved during the next cycle. Recommendation 4 remains open pending verification that peer education training is being done.*

The HIV/AIDS outreach programme should be given higher priority

21. The objective of the HIV/AIDS Unit's outreach activities is to provide the local population with the tools to develop and implement projects, and to develop training capacity. In collaboration with the Sudan National AIDS Programme (SNAP), the Unit submits Quick Impact Projects (QIPs) proposals to the Mission's Civil Affairs Section for review and approval.

22. Since the creation of the HIV/AIDS Unit in 2008, only two QIP proposals were submitted to the Civil Affairs Section. One QIP was submitted in January 2009 and the other in September 2010. To date, the Unit had not received any feedback on the status of these proposals from the Civil Affairs Section. In addition, the Unit had not given sufficient priority to developing outreach activities. This was due to understaffing in the HIV/AIDS Unit, the lack of responsiveness from the Civil Affairs Section on proposals submitted, and the low priority given by UNAMID Management to the HIV/AIDS outreach programme. This situation seriously hampered the ability of the Mission to provide HIV/AIDS programmes for the benefit of the Darfur population.

Recommendations 5 and 6

The UNAMID Management should:

(5) Ensure that the two Quick Impact Projects submitted to the Civil Affairs Section for approval by the HIV/AIDS Unit are reviewed in a timely manner; and

(6) Ensure that the HIV/AIDS Unit has sufficient capacity to increase the number of Quick Impact Project proposals, in collaboration with the Sudanese National AIDS Programme.

23. *The UNAMID Management accepted recommendation 5 and stated that the team leaders in Nyala and El Fasher will follow up with the Civil Affairs Section focal point. Recommendation 5 remains open pending receipt of evidence that the two QIPs have been reviewed and approved, if relevant, by the Civil Affairs Section.*

24. *The UNAMID Management accepted recommendation 6 and stated that if the Unit obtains four P-3 posts as requested, it will be able to provide optimum leadership and managerial capacity in the sectors and outposts. Recommendation 6 remains open pending verification that additional capacity has been provided to the HIV/AIDS Unit to properly discharge its duties in providing technical assistance to the SNAP in writing QIPs proposals.*

Work plan implementation reporting needs to be strengthened

25. Reporting on the progress of the implementation of the HIV/AIDS Unit's work plan would enable Management to assess the Unit's performance. However, there were no reports prepared by the Unit linking its goals and activities with its accomplishments. The Unit did not report on its activities because it had not been required by Management to do so.

26. The lack of reporting by the Unit and monitoring of its activities by Management may result in HIV/AIDS concerns not being adequately addressed.

Recommendation 7

(7) The UNAMID Management should require the HIV/AIDS Unit to report on its progress to implement its work plan and these progress reports should be systematically monitored by Mission Management so that action can be taken in a timely manner.

27. *The UNAMID Management accepted recommendation 7 and stated that the work plan format has been revised to include the outcome for each activity allowing Mission Management to monitor the Unit's progress. Based on the action taken, recommendation 7 has been closed.*

Provision of VCCT services need improvement

28. Section 14 of the Policy Directive states that the Mission shall ensure that all United Nations personnel, including uniformed personnel, can easily access VCCT services. The availability of these services needed to improve, as is evident from the following:

- In all sectors, VCCT rooms did not assure confidentiality as they were in close proximity to other offices or waiting rooms.
- There were no HIV/AIDS test kits available in Sector South. In addition, in Zaleingi, medical supplies such as alcohol swab, buffers, and bioline test kits were stored in areas where the temperature often exceeded the norm of 30 degrees Celsius.
- In Sector South, VCCT services had not been provided since the establishment of the office in November 2009.
- There was no presence of HIV/AIDS Unit staff in remote sites like Um Barru and Tine. Many of these sites have never been visited by the Unit.

29. The lack of adequate VCCT services was attributed to insufficient counseling facilities, lack of cold storage for medical supplies, and understaffing in the Unit. Inadequate provisions of VCCT services deprived Mission personnel the opportunity to know their HIV/AIDS status and receive confidential counseling and treatment, if necessary. This is critical in influencing behaviour and preventing further transmission.

Recommendation 8

(8) The UNAMID Management should ensure that all staff have full access to quality voluntary confidential counseling and testing (VCCT) services by: (a) improving VCCT counseling facilities; (b) having HIV/AIDS Unit personnel conduct visits to all team sites; and (c) providing proper storage for HIV/AIDS medical supplies.

30. *The UNAMID Management accepted recommendation 8 and stated that: (a) the HIV/AIDS Unit will seek intervention from the Director of Mission Support (DMS) to get additional space allocations for VCCT; and (b) ensure that there are scheduled visits to remote areas to provide mobile VCCT services.* Recommendation 8 remains open pending confirmation that adequate VCCT services are available to staff in all locations in the Mission area.

Insufficient provision of condoms

31. According to the Policy Directive, male and female condoms shall be available to all United Nations personnel in the Mission and possible communal sites should be identified for condom dispensers. The Chief HIV/AIDS Officer

should: (a) identify needs, costing and budgeting for condoms; (b) develop a mission supply plan in consultation with the Supply and Medical Sections; and (c) liaise with Medical and Supply Sections regarding monitoring of availability and tracking usage and distribution to the sectors, to ensure there are sufficient stocks in the Mission.

32. Out of six UNAMID sites visited by OIOS, male condoms were only available at a few communal places in El Fasher. None of the team sites had female condoms at communal sites. Furthermore, there was no plan for monitoring the distribution and to ensure availability of condoms. Unavailability of condoms in public places where United Nations personnel can in confidence have easy access to them may result in unsafe practices.

Recommendation 9

(9) The UNAMID Management should put in place a plan to ensure the continuing and unhindered access of all staff to condoms, in compliance with the DPKO Policy Directive.

33. *The UNAMID Management accepted recommendation 9 and stated that an electronic template has been designed to monitor condom use as well as to track the availability of condoms in selected strategic sites. Based on the action taken, recommendation 9 has been closed.*

D. Policies and procedures

Mission-specific standard operating procedures should be developed

34. Section 23 of the Policy Directive states that the Chief HIV/AIDS Officer should assist the Chief Medical Officer (CMO), in consultation with the United Nations Medical Services Division (MSD), in the development of Mission-specific standard operating procedures (SOPs) regarding referral, support and management of HIV positive cases. UNAMID had developed SOPs on HIV/AIDS strategy and quality assurance for VCCT services. However, the Unit had not developed SOPs for referral, support and management of HIV positive cases. This was attributed to an oversight on the part of the Unit.

35. The lack of SOPs may result in inadequate guidance and diminished effectiveness of diverse approaches which may be taken on similar HIV cases. Moreover, compliance with internationally accepted standards and the delivery of HIV/AIDS programmes may be affected by the lack of Mission-specific SOPs.

Recommendation 10

(10) The UNAMID Management should, in collaboration with the Chief Medical Officer and the Force Medical Officer, develop Mission-specific standard operating procedures on referral, support and management of HIV positive cases.

36. *The UNAMID Management accepted recommendation 10 and stated that SOPs for the referral, support and management of HIV positive cases have been developed. Based on the action taken, recommendation 10 has been closed.*

E. Administrative matters

The HIV/AIDS Unit's staffing level is inadequate to meet the needs of the Mission

37. The HIV/AIDS Unit has an approved staffing level of 23 personnel. However at the time of the audit, the Unit had on board 16 staff as shown in Table 1, which was insufficient to support approximately 24,000 UNAMID personnel located in a wide geographical area. Lack of key staff in strategic positions has resulted in poor implementation of the core activities of the HIV/AIDS programme in the Mission.

Table 1: HIV/AIDS Unit staffing levels

Category	Approved	Actual on-board
P-5	1	1
P-4	1	1
P-2	1	1
UNVs	8	5
NPO	1	1
GS	11	7
Total	23	16

Recommendation 11

(11) The UNAMID Management should review the staffing level of the HIV/AIDS Unit and ensure that it is adequate to meet the needs of the Mission, and also ensure that key positions in the sectors are filled to enable the HIV/AIDS Unit to effectively implement its plan.

38. *The UNAMID Management accepted recommendation 11 and stated that the HIV/AIDS Unit will submit a request for additional staffing in the next budget cycle. Recommendation 11 remains open pending confirmation that the vacant posts have been filled, and if necessary, additional posts have been requested to increase the capacity of the Unit.*

Budgeting for the HIV/AIDS Unit's activities should be clarified

39. Section 30 of the Policy Directive states that the HIV/AIDS Unit should ensure that provisions are made for the allocation of adequate resources to facilitate implementation of the standards outlined in the Policy Directive. Budget submissions should clearly indicate funds being allocated for HIV/AIDS related activities under the different cost centers.

40. The Unit's budget was included in various cost centers, making it difficult for it to access funds in a timely manner. For example, there was uncertainty in the procurement of information education and communication (IEC) material for the World AIDS Day held on 1 December 2010. The Unit's request was made through the Medical Section (budget owner) on 29 August 2010 in the amount of \$92,600. On 30 August 2010, the Budget Section rejected the requisition and asked the Medical Section to make the request through the Public Information Office (PIO). However, the PIO did not have sufficient funds for the request.

41. The issue was finally resolved on 4 October 2010. However, the Procurement Section informed the HIV/AIDS Unit that due to time constraints and the lengthy procurement process, only goods valued at \$39,800 could be procured. The indecisiveness of the Budget Section to determine who was responsible to initiate the request seriously delayed the procurement of IEC material and prevented the implementation of all activities planned for the World AIDS Day.

Recommendation 12

(12) The UNAMID Management should ensure that the HIV/AIDS Unit has full access, without hindrance from the cost centers, to the budget allocated to implement its activities.

42. *The UNAMID Management accepted recommendation 12 and stated that for the next financial year, the HIV/AIDS Unit will request that its budget be placed under the Medical Section.* Recommendation 12 remains open pending confirmation that action has been taken to ensure that the HIV/AIDS Unit has access to its budget in order not to delay it in carrying out its functions.

V. ACKNOWLEDGEMENT

43. We wish to express our appreciation to the Management and staff of UNAMID for the assistance and cooperation extended to the auditors during this assignment.

STATUS OF AUDIT RECOMMENDATIONS

Recom. no.	Recommendation	Risk category	Risk rating	C/O ¹	Actions needed to close recommendation	Implementation date ²
1	The UNAMID Management should identify which Mission components need to integrate HIV&AIDS concerns into their work plans and ensure that the HIV&AIDS Unit provides technical input and support to the relevant policy and operational plans of those components.	Governance	Medium	O	Receipt of documentation showing that the Chief HIV/AIDS Advisor has provided technical input to substantive units and that the HIV/AIDS component has been included in their work plans.	June 2011
2	The UNAMID Management should consider having the HIV&AIDS Unit report directly to the Principal Deputy Joint Special Representative in order to deal effectively with the challenges faced by the Unit and allow its activities to be better monitored.	Governance	High	O	Reconsideration of the HIV/AIDS Unit reporting directly to the Principal Deputy Joint Special Representative to ensure issues are addressed at the appropriate level.	January 2011
3	The UNAMID Management should ensure that all troops are trained within six weeks of deployment in order to increase HIV&AIDS awareness and to decrease the risk of transmission.	Operational	Medium	O	Confirmation that contingents are being given the required training.	January 2011
4	The UNAMID Management should ensure that peer education training is provided to selected United Nations personnel in all Mission sectors to increase HIV&AIDS awareness and lower the risk of transmission among peacekeepers.	Human Resources	Medium	O	Confirmation that peer training has been done.	February 2011
5	The UNAMID Management should ensure that the two Quick Impact Projects (QIPs) submitted to the Civil Affairs Section for approval by the HIV&AIDS Unit is reviewed in a timely manner.	Compliance	Medium	O	Receipt of evidence that the two QIPs have been reviewed and approved, if relevant, by the Civil Affairs Section.	February 2011
6	The UNAMID Management should ensure that the HIV&AIDS Unit has sufficient	Operational	Medium	O	Confirmation that additional capacity has been provided to the HIV/AIDS Unit to	July 2011

Recom. no.	Recommendation	Risk category	Risk rating	C/O ¹	Actions needed to close recommendation	Implementation date ²
	capacity to increase the number of quick impact project proposals, in collaboration with the Sudanese National AIDS Programme.				properly discharge its duties in providing technical assistance to the SNAP in writing QIPs proposals.	
7	The UNAMID Management should require the HIV/AIDS Unit to report on its progress to implement its work plan and these progress reports should be systematically monitored by Mission Management so that action can be taken in a timely manner.	Governance	Medium	C	Action taken	Implemented
8	The UNAMID Management should ensure that all staff have full access to quality voluntary confidential counseling and testing (VCCT) services by improving VCCT counseling facilities, having HIV&AIDS Unit personnel conduct visits to all team sites, and providing proper storage for HIV&AIDS medical supplies.	Compliance	High	O	Confirmation that adequate VCCT services are available to staff in all locations in the Mission area.	February 2011
9	The UNAMID Management should put in place a plan to ensure the continuing and unhindered access of all staff to condoms, in compliance with the DPKO Policy Directive.	Governance	Medium	C	Action taken	Implemented
10	The UNAMID Management should, in collaboration with the Chief Medical Officer and the Force Medical Officer, develop Mission-specific standard operating procedures on referral, support and management of HIV positive cases.	Governance	Medium	C	Action taken	Implemented
11	The UNAMID Management should review the staffing level of the HIV&AIDS Unit and ensure that it is adequate to meet the needs of the Mission, and also ensure that key positions in the sectors are filled to enable the HIV&AIDS Unit to effectively implement its plan.	Governance	Medium	O	Confirmation that the vacant posts have been filled, and if necessary additional posts have been required to increase the capacity of the Unit.	February 2011

Recom. no.	Recommendation	Risk category	Risk rating	C/O¹	Actions needed to close recommendation	Implementation date²
12	The UNAMID Management should ensure that the HIV&AIDS Unit has full access, without hindrance from the cost centers, to the budget allocated to implement its activities.	Operational	Medium	O	Confirmation that action has been taken to ensure that the HIV/AIDS Unit has access to its budget in order not to delay it in carrying out its functions.	February 2011

1. C = closed, O = open

2. Date provided by UNAMID in response to recommendations.