



## General Grant Information

Country	Myanmar				
Grant Number	MYN-S10-G06-M	Component	Malaria	Round	SSF
Grant Title	Intensified Malaria Control in Myanmar				
Principal Recipient	Save the Children, Myanmar				
Total Lifetime Budget	\$ 25,815,816	Current Commitment	\$ 10,553,701	Phase 2 Grant Amount	Not Applicable
Grant Start Date	01 Jan 2011	Current Commitment End Date	31 Dec 2012	Phase 2 End Date	Not Applicable
Disbursed Amount	\$ 5,538,564	% of Grant Amount	52%	Latest Rating	
Time Elapse (at the end of the latest reporting period)	3 months	% of Grant Duration	13%	Proposal Lifetime	Not available

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## 1. Program Description and Contextual Information

### 1.1. Program Description Summary

### 1.2. Country Latest Statistics

Background and Health Spending	Estimate	Year	Source
Total population (in 1000s)	50,496	2010	United Nations. World Population Prospects: .The 2008 Revision
Pop age 0-4 (in 1000s)	4,633	2010	United Nations. World Population Prospects: .The 2006 Revision
Pop age 15-49 (in 1000s)	28,295	2010	United Nations. World Population Prospects: .The 2006 Revision
Physicians (number)	17,791	2000-2009	WHO. World Health Statistics 2010
Nursing and midwifery personnel (number)	49,341	2000-2009	WHO. World Health Statistics 2010
Infant mortality rate (per 1,000 live births)	54	2009	UNICEF. Child mortality database (http://www.childinfo.org/mortality_ufrmrcountryd ata.php) accessed on 31 March 2011
Under-5 mortality rate (per 1,000 live births)	71	2009	UNICEF. Child mortality database (http://www.childinfo.org/mortality_ufrmrcountryd ata.php) accessed on 31 March 2011
Income level	Low income	2010	World Bank. World Development Indicators database
Total health expenditure per capita (USD)	7	2007	WHO. World Health Statistics 2010
ODA commitments in health sector (Current US\$ millions)	64	2009	.OECD
ODA commitments in all sectors (Current US\$ millions)	364	2009	.OECD
Malaria	Estimate	Year	Source
Reported malaria cases (suspected)	1,095,474	2009	.WHO. World malaria report 2010
Reported malaria cases (probable and confirmed)	591,492	2009	.WHO. World malaria report 2010
Reported malaria deaths	972	2009	.WHO. World malaria report 2010
Estimated malaria deaths	9,097	2006	.WHO. World malaria report 2008
DALYs ('000), Malaria	303	2004	WHO. (http://www.who.int/healthinfo/global_burden_di sease/gbddeathdalycountryestimates2004.xls) accessed on 01 April 2011
Nets distributed (ITNs and LLINs)		mid 2011	Global Fund-supported programs, mid 2011 results

## 1.3. Comments on Key Discrepancies between Approved Proposal and Grant

## 1.4. Conditions Precedent

CP #	Condition Precedent	CP Type	Tied To	Terminal Date	Is currently met?	Comments
1	1. Conditions Precedent to Disbursement to Sub-recipients. In addition to what is provided for in Article 13(d) and Article 14 of the Standard Terms and Conditions of this Agreement, the disbursement of Grant funds from the Global Fund to the Principal Recipient for activities implemented by Sub-recipients or the disbursement of Grant funds by the Principal Recipient to any Sub-recipients is subject to the delivery by the Principal Recipient to the Global Fund of a plan, in form and substance satisfactory to the Global Fund, for the audit of the expenditures of Sub Recipients under the Program.		Disbursement	01.Jan.11	In Progress	
2	2. Conditions Precedent to Disbursement for Procurement of Health Products. In accordance with Article 19(b) of the Standard Terms and Conditions of this Agreement, the disbursement of Grant funds by the Global Fund to the Principal Recipient for the Procurement of Health Products is subject to the following conditions: a. the delivery by the Principal Recipient to the Global Fund of a plan for the procurement, use and supply management of Health Products (the "PSM Plan"); and b. the written approval of the PSM Plan by the Global Fund.		Disbursement	01.Jan.11	Yes	
3	3. Condition Precedent to Disbursement for the Upgrading of the Storage and Distribution System (Terminal Date as stated in block 7A of the Face Sheet) The disbursement by the Global Fund or use by the Principal Recipient of Grant funds to finance the upgrading of the storage and distribution system of Health Products is subject to the satisfaction of each of the following conditions: a. the delivery by the Principal Recipient to the Global Fund, in form and substance satisfactory to the Global Fund, of an assessment report of the storage and distribution system of Health Products; and b. the delivery by the Principal Recipient to the Global Fund, in form and substance satisfactory to the Global Fund, of a costed work plan for such upgrading, which shall include timeframes and deliverables for priority improvements.		Disbursement		In Progress	
4	C. SPECIAL TERMS AND CONDITIONS FOR THIS AGREEMENT 1. The parties to this Agreement acknowledge that as of the date of this Agreement, the Global Fund has received the commitment of the Host Government to the following: (a) to issue renewable annual multi-entry visas for the Principal Recipient and the Local Fund Agent personnel in advance of their start dates of employment as notified by either the Principal Recipient or the Local Fund Agent and (b) to allow the Principal Recipient, the Local Fund Agent, and the Global Fund representatives ad-hoc access to project implementation sites.		Disbursement		Yes	

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5	2. The Parties to this Agreement acknowledge and agree that expenditure of Grant funds or implementation of the Program activities shall not take place in locations where staff members or individuals contracted and acting on behalf of the Principal Recipient, Sub recipients, the Local Fund Agent or the Global Fund are denied access. The Principal Recipient acknowledges and agrees that in the event that the Principal Recipient, Sub-recipients, Local Fund Agent or the Global Fund are denied access to project sites, the Global Fund may discontinue the funding for activities occurring in such project site or resort to remedies of suspension and termination under this Agreement.		Disbursement	15.Feb.11	Yes	
6	3. In the event that an additional Sub-recipient is selected during the Commitment Period, the Parties to this Agreement acknowledge and agree that prior to the disbursement of Grant funds by the Principal Recipient to such Sub-recipient, the Principal Recipient shall furnish to the Global Fund, in form and substance satisfactory to the Global Fund, the following: i. evidence demonstrating that the Principal Recipient has conducted a comprehensive assessment of the Sub-recipient; ii. evidence demonstrating that the Principal Recipient has signed an agreement with the Sub-recipient, which, without limitation, shall include a budget, work plan, implementation and financial and programmatic reporting responsibilities of the Sub-recipient; iii. details identifying the financial institution or institutions into which Grant funds will be disbursed for the benefit of the Sub-recipient; and iv. documentation demonstrating that the Sub-recipient has received training on monitoring and evaluation responsibilities sufficient to meet its requirements under the Program.				Yes	
7	4. Notwithstanding Section C.3 above, the Global Fund reserves the right to request the assessment by the Local Fund Agent of any additional Sub-recipient selected in accordance with this Agreement.				Not started	
8	5. The conversion of Grant funds to local currency and controls over local currency transactions shall be made in accordance with procedures established by the Principal Recipient and approved by the Global Fund.				In Progress	
9	6. The Principal Recipient shall not advance Grant funds to any Sub-recipient or implementing entity unless the Global Fund has previously approved that advance in writing. With exception of the funding provided by the Principal Recipient to Sub-recipients for which the advance of funds has been approved by the Global Fund in writing, the Principal Recipient shall provide funding to implementing entities only on a reimbursable basis by adhering to a zero cash balance policy, which limits funding to either a) reimbursing actual expenditures made in accordance with budgets and work plans which have been approved in advance by the Principal Recipient or b) by the Principal Recipient making direct payments to vendors for goods and services procured to support the activities of such implementing entities.				In Progress	

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CP #	Condition Precedent	CP Type	Tied To	Terminal Date	Is currently met?	Comments
10	<p>7. The Principal Recipient and the Global Fund acknowledge and agree that the financing of activities implemented by the Sub-recipients within, or for the support of, the public sector shall be subject to the foregoing conditions:</p> <p>a. Grant funds shall only be used to provide support for the following:</p> <p>i) health care and service provision,  ii) patient support costs,  iii) the supply management function,  iv) provision of essential equipment,  v) monitoring, supervision and coordination of Program activities,  vi) training,  vii) technical and management support to enable decentralised levels of civilian administrations to manage and monitor service delivery, and  viii) domestic travel and accommodation costs incurred in the course of implementation of the Program.</p> <p>b. Domestic travel and accommodation costs incurred in the course of the implementation of the Program shall be harmonized with the policies of the Three Diseases Fund.</p> <p>c. International travel and accommodation expenses incurred in the course of the implementation of the Program shall be subject to Global Fund approval.</p> <p>d. Program activities in support of the government agencies at national, divisional/state, district, township health authority or local civilian administrative level or below must be included in the work plans and budgets of pre-approved Sub Recipients and such actions, including fund disbursement and commodity provision, shall be monitored by the Principal Recipient at least on a quarterly basis.</p> <p>e. Support to government-implemented components of the national programs shall not include staff salaries and allowances, recruitment fees, international fellowships, recurrent costs or expenses for rehabilitation of Ministry of Health facilities without prior written approval of the Global Fund; and</p> <p>f. Support to patients using public health facilities at township level or below can be made for supporting the care for patients suffering from HIV, tuberculosis and malaria in the form of provision of cash</p>				Yes	
11	<p>8. The Principal Recipient acknowledges and agrees that percentage-based overheads or cost recovery fees of Sub-recipients shall not exceed the amounts established in the budget approved by the Global Fund, unless the Global Fund has expressly authorized in writing the payment of higher amounts. The entities receiving such payments may be requested to provide their organization's Audited Annual Financial Statements.</p>				Yes	
12	<p>9. The parties to this Agreement acknowledge and agree that cost recovery charges levied by the Principal Recipient under this Agreement shall be made in accordance with rates mutually agreed by the Principal Recipient and the Global Fund.</p>				Yes	

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13	10. The Parties to this Agreement agree that the Principal Recipient shall ensure that vehicles or other fixed assets procured or leased by the Principal Recipient or any implementing entity, including the Sub-recipients, using Grant funds may be made available to the Host Government or national entities only on a loan basis. The Principal Recipient shall use its best efforts to ensure that vehicles and other fixed assets which have been made available to the Host Government or national entities, by the Principal Recipient of any other implementing entity, including Sub-recipients, on a loan basis are used for Program activities only. The Principal Recipient and implementing entities, including Sub-recipients shall maintain a log books for all vehicles and fixed assets. The Principal Recipient and implementing entities, including Sub-recipients shall ensure that the location of such vehicles and/or fixed assets are known at all times and are available for inspection by staff of the Principal Recipient, Sub-recipient, Local Fund Agent and/or the Global Fund.				Not started	
14	11. The Principal Recipient shall notify the Global Fund in advance of any proposed change to the implementation arrangements described in this Agreement. Any such change in the implementation arrangements shall be subject to the prior written approval of the Global Fund.				Not started	
15	12. The Principal Recipient will provide evidence that it is fully implementing the Global Fund-approved Sub Recipient oversight plan with every Periodic Report (as defined in Article 15(b) of the Standard Terms and Conditions of this Agreement).				In Progress	
16	13. The Principal Recipient undertakes to conduct an annual internal audit whose scope of work shall cover the implementation arrangements, including internal financial controls, for the Global Fund grants implemented by Save the Children. The Principal Recipient agrees furthermore that: a. the Principal Recipient shall provide the Global Fund with opportunity to provide input into the scope of work. b. the Principal Recipient shall share the findings of the audit with the Global Fund including the responses to any recommendations made or weaknesses identified in the report.				In Progress	
17	14. The Global Fund reserves the right to conduct reviews of the Procurement and Supply Management function of the Principal Recipient.				Yes	
18	15. The Principal Recipient acknowledges and agrees that the procurement of Health Products with the use of Grant funds shall be done through a suitably qualified Procurement Agent (as assessed by the Local Fund Agent and approved by the Global Fund in writing) until the Global Fund has agreed in writing, upon relevant assessment by the Local Fund Agent, that such procurement can be properly managed by the Principal Recipient.				Yes	

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19	16. No later than 30 June 2011, the Principal Recipient shall deliver to the Global Fund evidence, in form and substance satisfactory to the Global Fund, that the Principal Recipient has established a functional system for recording and reporting on patient and inventory related information (management information system), including a system for validating analyzing and utilizing the reported information in the management of the programs.				Not started	
20	17. No later than 30 June 2011, the Principal Recipient shall deliver to the Global Fund, Standard Operating Procedures for storage, distribution of health products, and recording and reporting and utilization of information to manage the program. The procedures shall also take into account the requirements of the Global Fund, Quality Assurance Policy on Finished Pharmaceutical Products and the reporting requirements with respect to the Price and Quality Reporting (PQR).				Not started	
21	18. The Principal Recipient shall use its best efforts to co-ordinate the development of a national monitoring and evaluation plan for Malaria (the "National M&E Plan") and to submit a copy to the Global Fund. Prior to submission of the National M&E Plan to the Global Fund, the Principal Recipient shall, upon request, provide progress updates to the Global Fund.				In Progress	
22	19. No later than 1 February 2011, the Principal Recipient shall deliver to the Global Fund a Conflict of Interest Policy signed by all staff working for the Principal Recipient on the Program.				In Progress	
23	20. For the purposes of this Agreement, implementing entities shall include the Principal Recipient, Sub-recipients, Sub-sub-recipients and any other entity or individual that receives Grant funds for implementation of Program activities.				Yes	



## 2. Key Grant Performance Information

### 2.1. Program Goals, Impact and Outcome Indicators

**Goal 1** To reduce malaria morbidity by at least 50% and malaria mortality by at least 50% by 2015 (baseline 2007 data), and contribute towards socio-economic development and the Millennium Development Goals.

Impact indicator	Proportion of all deaths that are due to malaria (per confirmed malaria diagnosis)							Baselines		
								Value	Year	
								9.47%	2008	

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target	N: D: P: 10%	N: D: P: 9%	N: D: P: 7%	N: D: P: 6%	N: D: P: 5%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %

Impact indicator	Number and proportion of malaria (confirmed) admission among all hospital admissions							Baselines		
								Value	Year	
								6.42% 47,514	2008	

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target	N: D: P: 7%	N: D: P: 7%	N: D: P: 5%	N: D: P: 4%	N: D: P: 4%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %

Impact indicator	Number of malaria (confirmed) cases reported by health workers (in facilities and outreach)							Baselines		
								Value	Year	
								399,559	2008	

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target	828,647	939,876	914,732	890,631	770,616					
Result										

Impact indicator	Positive rate: Percentage of people found positive in slide or rapid diagnosis testing among all slides or rapid diagnostic tests taken							Baselines		
								Value	Year	
								Slide positivity=42.4% RDT; not available	2009	

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target	N: D: P: 42%	N: D: P: 42%	N: D: P: 42%	N: D: P: 35%	N: D: P: 30%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %

Outcome indicator	Percentage of households with at least one LLN/ITN							Baselines		
								Value	Year	
								5.65%	2008	

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target	N: D: P: 53%	N: D: P: 94%	N: D: P: 98%	N: D: P: 100%	N: D: P: 98%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %

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Outcome indicator	Percentage of population at risk sleeping under an LLIN/ITN the previous night							Baselines		
								Value	Year	
								not available	Jun-10	
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target	baseline established									
Result										

Outcome indicator	Proportion of confirmed malaria cases treated in accordance with national malaria treatment guidelines within 24 hours of onset of symptoms							Baselines		
								Value	Year	
								25%	2008	
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target	N: D: P: 30%	N: D: P: 50%	N: D: P: 60%	N: D: P: 60%	N: D: P: 60%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %

## 2.2. Programmatic Performance

## 2.2.1. Reporting Periods

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
N/A	01.Jan.11 31.Mar.11	01.Apr.11 30.Jun.11	01.Jul.11 30.Sep.11	01.Oct.11 31.Dec.11	01.Jan.12 31.Mar.12	01.Apr.12 30.Jun.12	01.Jul.12 30.Sep.12	01.Oct.12 31.Dec.12

## 2.2.2. Program Objectives, Service Delivery Areas and Indicators

**Objective 1 - Prevent malaria using insecticide-treated nets and long lasting insecticidal nets in high and moderate villages in 180 townships****Prevention: Insecticide-treated nets (ITNs)**

## Indicator 1.1 - Number of LLIN distributed free of charge to people at risk

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	282846	2008	Top 10 Equ.	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	2,000	65,000	179,549	254,549	4,500	9,000	49,500	107,000
Result	Pending result							
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	18,637							
Result								

## Indicator 1.2 - Number of LLINs sold through social marketing

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	not available	2010	N	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target		70,000					70,000	
Result								

## Indicator 1.3 - Number of mosquito nets treated with insecticide

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	852762	2008	Top 10 Equ.	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	0	65,735	124,401	273,069	37,069	89,836	142,603	240,369
Result								
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	30,000							
Result								

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**Objective 2 - Strengthen public and private sector diagnostic and treatment services and maximise access to an utilization of these services by the public****Treatment: Diagnosis**

## Indicator 2.1 - Number of blood slides taken and examined

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	499296	2008	N	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	105,000	215,000	330,287	446,148	106,537	213,074	319,611	426,148
Result	Pending result							
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	96,537							
Result								

## Indicator 2.2 - number of rapid diagnostic tests done and read

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	543941	2008	N	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	12,500	39,011	102,370	155,728	32,858	76,717	123,575	165,441
Result	Pending result							
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	32,583							
Result								

## Indicator 2.3 - number of people with confirmed malaria treated with recommended ACT (disaggregated by age group and sex)

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	394529	2008	Top 10 Equ.	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	39,250	88,202	147,755	203,809	48,365	99,844	153,472	205,819
Result	Pending result							
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	43,830							
Result								

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Indicator 2.4 - Number of people with malaria (probable and confirmed) treated with chloroquine (disaggregated by age group and sex)

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)													
	Value	Year			Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8					
No Level	239751	2008	Top 10 Equ.	N													
Target	25,775	57,283	104,769	149,255	31,611	66,847	105,583	143,944									
Result	Pending result																
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16									
Target	41,600																
Result																	

Indicator 2.5 - percentage of health facilities with no reported stock outs of nationally recommended antimalarial drugs lasting more than 1 week at anytime during the past 3 months

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)													
	Value	Year			Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8					
No Level	not available	June-10	N	N													
Target	N: D: P: %	N: D: P: %	N: D: P: 80%	N: D: P: 80%	N: D: P: 80%	N: D: P: 90%	N: D: P: 90%	N: D: P: 90%	N: D: P: 90%								
Result																	
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16									
Target	N: D: P: 90%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %								
Result																	

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**Objective 4 - Strengthen community based malaria control activities**

**Supportive Environment: Coordination and partnership development (national, community, public-private)**

**Indicator 4.1 - Number of village health volunteers trained and supported for malaria prevention and control**

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	136	2008	Top 10 Equ.	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	539	2,520	2,753		1,920	2,720		
Result	Pending result							

	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	212							
Result								

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**Objective 5 - Strengthen technical and administrative management capacity for malaria control at all levels**

**HSS: Human resources**

**Indicator 5.1 - Number of health staff trained/retrained**

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	8147	2008	Top 10 Equ.	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	24	77	354		20	73	301	
Result	Pending result							

	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	20							
Result								

## 2.2.3. Cumulative Progress To Date

Latest reporting due period : 1 (01.Jan.11 - 31.Mar.11)

<b>Objective 1</b>	<b>Prevent malaria using insecticide-treated nets and long lasting insecticidal nets in high and moderate villages in 180 townships</b>
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<b>SDA</b>	<b>Prevention: Insecticide-treated nets (ITNs)</b>
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**Indicator 1.1 - Number of LLIN distributed free of charge to people at risk**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	1	2,000	N/A	Not Found						0%

**Indicator 1.2 - Number of LLINs sold through social marketing**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	N/A		N/A	Not Found						Cannot Calculate

**Indicator 1.3 - Number of mosquito nets treated with insecticide**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	N/A		N/A	Not Found						Cannot Calculate

<b>Objective 2</b>	<b>Strengthen public and private sector diagnostic and treatment services and maximise access to an dutilization of these services by the public</b>
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<b>SDA</b>	<b>Treatment: Diagnosis</b>
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**Indicator 2.1 - Number of blood slides taken and examined**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	1	105,000	N/A	Not Found						0%

**Indicator 2.2 - number of rapid diagnostic tests done and read**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	1	12,500	N/A	Not Found						0%

**Indicator 2.3 - number of people with confirmed malaria treated with recommended ACT (disaggregated by age group and sex)**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	1	39,250	N/A	Not Found						0%

**Indicator 2.4 - Number of people with malaria (probbale and confirmed) treated with chloroquine (disaggregated by age group and sex)**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	1	25,775	N/A	Not Found						0%

**Indicator 2.5 - percentage of health facilities with no reported stock outs of nationally recommended antimalarial drugs lasting more than 1 week at anytime during the past 3 months**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	N/A		N/A	Not Found						Cannot Calculate



<b>Objective 4</b>	<b>Strengthen community based malaria control activities</b>									
<b>SDA</b>	<b>Supportive Environment: Coordination and partnership development (national, community, public-private)</b>									
<b>Indicator 4.1 - Number of village health volunteers trained and supported for malaria prevention and control</b>										
	<b>Target</b>		<b>Result</b>							
	<b>Period</b>	<b>Value</b>	<b>Period</b>	<b>Value</b>	<b>0%</b>	<b>30%</b>	<b>60%</b>	<b>90%</b>	<b>100%</b>	
No Level	1	539	N/A	Not Found						0%

<b>Objective 5</b>	<b>Strengthen technical and administrative management capacity for malaria control at all levels</b>									
<b>SDA</b>	<b>HSS: Human resources</b>									
<b>Indicator 5.1 - Number of health staff trained/retrained</b>										
	<b>Target</b>		<b>Result</b>							
	<b>Period</b>	<b>Value</b>	<b>Period</b>	<b>Value</b>	<b>0%</b>	<b>30%</b>	<b>60%</b>	<b>90%</b>	<b>100%</b>	
No Level	1	24	N/A	Not Found						0%

**2.3. Financial Performance****2.3.1. Grant Financial Key Performance Indicators (KPIs)**

Grant Duration (months)	24 months	Grant Amount	10,553,701 \$
% Time Elapsed (as of end date of the latest PU)	13%	% disbursed by TGF (to date)	52%
Time Remaining (as of end date of the latest PU)	21 months	Disbursed by TGF (to date)	5,538,564 \$
Expenditures Rate (as of end date of the latest PU)	103%	Funds Remaining (to date)	5,015,137 \$

**2.3.2. Program Budget**

	Budget Period 1	Budget Period 2	Budget Period 3	Budget Period 4	Budget Period 5	Budget Period 6	Budget Period 7	Budget Period 8
Period Covered From:	01.Jan.11	01.Apr.11	01.Jul.11	01.Oct.11	01.Jan.12	01.Apr.12	01.Jul.12	01.Oct.12
Period Covered To:	31.Mar.11	30.Jun.11	30.Sep.11	31.Dec.11	31.Mar.12	30.Jun.12	30.Sep.12	31.Dec.12
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	3,322,715	4,374,737	5,427,177	6,499,454	8,724,485	9,730,401	10,707,639	11,726,333
Summary Period Budget:	3,322,715	1,052,022	1,052,440	1,072,277	2,225,031	1,005,916	977,238	1,018,694

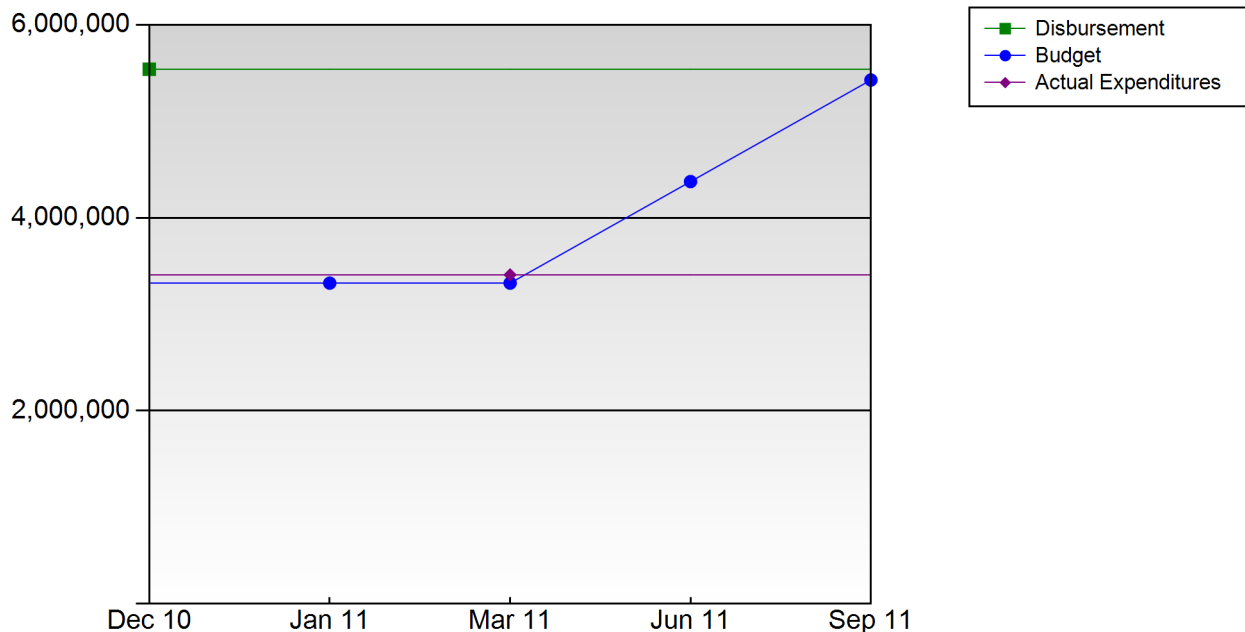
**Expenditure Categories****Program Activities****Implementing Entities****- Comments and additional information****2.3.3. Program Expenditures**

Period PU1: 01.Jan.11 - 31.Mar.11	Actual Expenditures	Cumulative Budget	Cumulative Expenditures	Variance	Reason for variance
<b>1. Total actual expenditures vs. budget</b>	\$ 3,408,595	\$ 3,322,715	\$ 3,408,595	\$ -85,880	
1a. PR's Total expenditure	\$ 270,534		\$ 270,534		
1b. Disbursements to sub-recipients	\$ 3,138,061		\$ 3,138,061		
<b>2. Health product expenditures vs. Budget (already included in "Total Actual" above)</b>	\$ 1,059,002		\$ 1,059,002		
2a. Pharmaceuticals	\$ 4,474		\$ 4,474		
2b. Health products, commodities and equipment	\$ 1,054,528		\$ 1,054,528		

**2.3.4. Cumulative Program Budget, Expenditures and Disbursement to Date**

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2.4. Progress Update and Disbursement Information

Rating	Description
A1	Exceeding expectations
A2	Meeting expectations
B1	Adequate
B2	Inadequate but potential demonstrated
C	Unacceptable

Progress Updates					Disbursement Information				
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
0			N/A	1	01.Jan.11 - 30.Sep.11	5,538,564	\$ 5,392,766	13 Dec 2010	
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
N/A					The variance between the requested amount and disbursement amount is due to the removal of training budgets from this disbursement following instructions from the Director of Country Programs.				
Progress Updates					Disbursement Information				
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
0			N/A	1.1	01.Jan.11 - 30.Sep.11		\$ 145,798	20 Dec 2010	
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
N/A					including training activities				

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Progress Updates				Disbursement Information					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
1	01.Jan.11 - 31.Mar.11		N/A					N/A	
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
<p>Programmatic achievements not to be reported before next PUDR.</p> <p>Financial performance:                      The overall absorption rate in Q1 is 103% (US\$3'408K/US\$3'328K), which is composed by the PR Budget burn rate of 73% (1) pre grant financing 2010: 73% (US\$128K/US\$176K), (2) PR budget burn rate Q1: 74% (US\$142K/US\$193K). The main cash outflow represent the disbursements to SRs which represent 106% of the originally budgeted amount. It has to be mentioned that the disbursements to SR took place at the end of Q1 due to delayed grant agreements between PR and SRs. The disbursed amount is composed by (1) disbursement to 5/7 SRs for Q1 of US\$2'081K and (2) Disbursement from PR on behalf of 5/7 SRs for procurement oayments to UNOPS IPO of US\$1'057K. The disbursed amounts to SRs do not coincide with forecasted cash needs in DR#1 dated 25 November 2010 for Q1. No work plan, forecasted cash need and analysis of PR and SRs variances had been presented by the PR, as the program implementation had started mainly in Q2 the work plan and forcecasts for next periods will have to be submitted with next PUDR.</p>									

### 2.5. Contextual Information

Title	Explanatory Notes

### Time-bound Actions

Issues	Description

