

General Grant Information

Country	Peru				
Grant Number	PER-202-G02-T-00	Component	TB	Round	2
Grant Title	Strengthening Prevention and Control of Tuberculosis in Peru				
Principal Recipient	CARE Peru				
Board Approved Lifetime Budget	\$ 25,552,603	Phase 1 Grant Amount	\$ 20,153,818	Phase 2 Grant Amount	\$ 5,447,632
Grant Start Date	01 Dec 2003	Phase 1 End Date	01 Dec 2005	Phase 2 End Date	31.Dec.08
Disbursed Amount	\$ 24,765,106	% of Grant Amount	97%	Latest Rating	A
Time Elapse (at the end of the latest reporting period)	49 months	% of Grant Duration	80%	Proposal Lifetime	61 months

New GPR Report - Table of Contents *(For ExternalVersion)*

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1. Program Description

1.1. Program Description Summary

The Program will significantly contribute to existing national efforts to control tuberculosis in Peru. This will be achieved by optimizing resource allocation of funds for tuberculosis, improving the quality and effectiveness of current interventions and expanding the scope of national actions. In addition, it is expected that there will be a consolidation of alliances among the public and private sectors, non-governmental organizations and tuberculosis patients.

A specific dimension of this Program will be the direct social participation of tuberculosis patients, their families, social grassroots organizations, churches and non-governmental organizations involved in the national fight against tuberculosis. This will be achieved through coordinating groups and round tables in association with local governments.

The Program will support activities designed to reduce the prevalence and incidence of tuberculosis in high-risk tuberculosis transmission areas; expand and increase the DOTS-Plus coverage in order to prevent and control multi-drug resistant tuberculosis (MDR-TB); and extend DOTS coverage in prisons and improve the quality of care in these facilities.

1.2. Comments on Key Discrepancies between Approved Proposal and Grant

There are no major discrepancies between the approved proposal and the grant agreement.

1.3. Initial PR Assessments

Assessment Area	Rating	Summary of Recommendations/Action Required and Taken
Background Analysis	x	Not applicable
Financial Management and Systems	A2	<p>The PR should consider the possibility of initiating the selection and contracting process of program personnel as soon as possible so that they can be adequately trained in time.</p> <p>The PR should develop the profile for the administrative posts (taking into account those which will require knowledge in the use of Enterprise Resource Planning (ERP) systems and financial and accounting methods).</p> <p>The induction program for administrative personnel should be adapted to the needs of the Global Fund project.</p> <p>The PR should develop a training program for those sub-recipients who will be using the procedures, policies and systems of CARE in regards to financial control of disbursements and settlement of expenditures.</p> <p>Responsibilities and frequency related to the reporting of information (as they were not detailed the proposal), should be established.</p>
Institutional and Programmatic	A2	<p>The PR should accelerate the approval of the Organizational Manual and the official acknowledgement of CONAMUSA. This will allow for the clear definition of roles and responsibilities, as well as the establishment of coordination mechanisms with CARE PERU in its role as Principal Recipient. The PR should also accelerate the approval of the operational plan for the 1st year of program execution in way that it will be able to adopt the necessary actions which will allow for the project to begin quickly. Due to the fact that the governing body of CARE is in Atlanta, the PR should have a consultative committee which should facilitate recommendations to the National Direction in terms of strategic themes, institutional image, etc.</p>
Procurement and Supply Management	A2	<p>It is strongly recommended to make best use of best practices in pharmaceutical management and ART available in the country, e.g. ProVida for pharmaceutical management, EsSalud and health services of the FFAA for improving ARV prescribing practices; Hospital Dos de Mayo and groups of PLWHAs for designing patient care systems, etc.</p> <p>The PR should finalize the budgeting information on the various categories of health products, using pricing information currently requested from IDA and UNICEF.</p> <p>The PR should address outstanding issues related to a national treatment strategy, resistance of some health professionals and/or institutions to use generic ARVs, involvement of PLWHAs in comprehensive patient care in health facilities and as independent groups.</p>

Assessment Area	Rating	Summary of Recommendations/Action Required and Taken
Monitoring and Evaluation	B2	<p>At the time of the assessment it was unclear whether or not the PR would be undertaking M&E responsibilities. Regardless, some key recommendations came out of the assessment and are listed below:</p> <p>It is recommended that the current project management software (SGP) be adapted to the needs of the project. This should be done so that M&E activities can be integrated with the rest of the financial and administrative project information.</p> <p>M&E specialists should be hired and put through a rapid induction process using the diverse tools (Knowledge Center and self-learning courses) that CARE has.</p> <p>The PR should try to influence CONAMUSA to finalize and share the operational plan so that this can be used to as a base to prepare the M&E plan. Detailed budgets for M&E activities need to be prepared. The detailed M&E plan for the tuberculosis component has been received (March 2005).</p>
Overall	B1	N/A

1.4. Conditions Precedent

Condition Precedent	Tied To	Terminal Date	Is currently met?	Comments
Condition Precedent to 1st disbursement: An organizational chart defining the general structure of the team that will be dedicated to the administration of the Grant and outlining all available positions, whether staffed or unstaffed, plus a description of duties for each position.			Yes	
Condition Precedent 2nd disbursement: the final version of all procurement and other plans described under article 18 of the agreement.			Yes	
Condition Precedent 2nd disbursement: a written statement by an authorized representative of the WHO Green Light Committee confirming that Peru has the authorization to start procuring second-line tuberculosis drugs under the Program			Yes	
Condition Precedent 2nd disbursement: the names of the persons occupying the positions defined in the general organizational chart, accompanied by a copy of each person's curriculum vitae, contract with the Principal Recipient, and a description of each person's level of engagement with the Program.			Yes	
Condition Precedent 2nd disbursement: evidence that the PR has designed an introductory training module for sub-recipients and contractors; such training program shall aim at clarifying sub-recipient roles and responsibilities under the Program as well as all processes and procedures regarding administrative and logistical functions to be carried out by these entities.			Yes	
Condition Precedent 3rd disbursement: a detailed plan for the monitoring the program, as described in article 14 of the agreement			Yes	
Condition Precedent 3rd disbursement: baseline data that further clarifies, to the satisfaction of the Global Fund, all coverage and impact indicators covered in Attachment 1 to Annex A.			Yes	
Special Term and Condition: the annual report required under Article 13b(2) of the Agreement shall be due no later than 90 days after the close of each fiscal year of the Principal Recipient.			Yes	
Special Term and Condition: the Principal Recipient shall deposit any Grant funds in insured accounts.			Yes	
Special Term and Condition: No later than July 31, 2004 the Principal Recipient shall deliver an updated Attachment 1 to this Annex A with an updated table of key quarterly progress indicators as per objective and a budget for the second year of the Program			Yes	

Condition Precedent	Tied To	Terminal Date	Is currently met?	Comments
Condition for Phase 2: By no later than 30 June 2006, a statement confirming that the Principal Recipient has established a special bank account solely for the Program into which the Grant funds will be disbursed as indicated in block 10 of the face sheet of this Agreement.			Yes	
Condition for Phase 2: the delivery by the Principal Recipient to the Global Fund, in form and substance satisfactory to the Global Fund, by no later than 15 June 2006, a plan (the "Stock Management Plan"), to improve the procurement and supply management system for the Program (and the program funded by the Round 5 Global Fund grant (no. 506-G04-T));			Yes	
Condition for Phase 2: by no later than 30 June 2006, the delivery by the Principal Recipient to the Global Fund of a plan for the procurement, use and supply management of the Health Products for the Program (and the program funded by the Round 5 Global Fund grant (no. 506-G04-T)) as described in subsection (c) of Article 19 of the Standard Terms and Conditions of this Agreement (the "PSM Plan") and which includes the Stock Management Plan; the written approval by the Global Fund of the PSM Plan (including the Stock Management Plan);			Yes	

2. Key Grant Performance Information

2.1. Program Goals, Impact and Outcome Indicators

Goal 1	1										
Impact indicator	Incidence rate of smear-positive tuberculosis cases in the Peruvian population							Baselines			
								Value	Year		
								66.39/100,000	2004		
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	
Target			66.39/100,000	64/100,000	55/100,000						
Result				64.5/100,000							
Impact indicator	Mortality rate caused by all forms of tuberculosis							Baselines			
								Value	Year		
								3.82/100,000	2004		
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	
Target			3.44/100,000	2.79/100,000	2.1/100,000						
Result				2.96/100,000							
Impact indicator	Number of high risk transmission areas for TB (HRTA-TB)							Baselines			
								Value	Year		
								70	2003		
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	
Target		45	40	20	0						
Result				54							
Impact indicator	Percentage of failures of primary schemes (suspected cases of MDR-TB)							Baselines			
								Value	Year		
								3%	2000		
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	
Target					1.5%						
Result											
Outcome indicator	MDR-TB- cure rate							Baselines			
								Value	Year		
								46.9%	2003		
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	
Target				85%	85%						
Result				90.9%							
Outcome indicator	Treatment success rate in DOTS							Baselines			
								Value	Year		
								89.6%	2004		
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	
Target		90%	90%	90%	91%						
Result				91.6%							

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
Periods per Attachment	01.Dec.03 29.Feb.04	01.Mar.04 31.May.04	01.Jun.04 31.Aug.04	01.Sep.04 30.Nov.04	01.Dec.04 28.Feb.05	01.Mar.05 31.May.05	01.Jun.05 31.Aug.05	01.Sep.05 30.Nov.05
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Periods per Attachment	01.Dec.05 28.Feb.06	01.Mar.06 31.May.06	01.Jun.06 31.Aug.06	01.Sep.06 30.Nov.06	01.Dec.06 28.Feb.07	01.Mar.07 31.May.07	01.Jun.07 31.Aug.07	01.Sep.07 31.Dec.07
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24
Periods per Attachment	01.Jan.08 31.Mar.08	01.Apr.08 30.Jun.08	01.Jul.08 30.Sep.08	01.Oct.08 31.Dec.08	01.Jan.09 31.Mar.09	01.Apr.09 30.Jun.09	01.Jul.09 30.Sep.09	01.Oct.09 31.Dec.09

2.2.2. Program Objectives, Service Delivery Areas and Indicators

Objective 1 - Stimulating and strengthening the participation of TB patients, their families and district populations in the reduction of smear positive TB in areas of High Risk TB Transmission Areas (HRTBTAs)

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

Indicator 1.1 - Number of districts that have a plan for participatory TB control as part of their local government and development plan (Note: this indicator is not measured in Attachment 3)

Level	Baseline									
	Value	Year								
Level 2-Service Points supported	0	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	8	5	7	10	16		
Result	0	0	0	3	8	12	19	19		

Indicator 1.2 - Number and percentage of districts with TB-HRTAs working with active ASET or GO-TB or ASDEN (Note: new indicator in Attachment 2) (Note: this indicator is not measured in Attachment 3)

Level	Baseline									
	Value	Year								
Level 2-Service Points supported	0 (0%)	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	0	0	4	4	4		
Result	0	0	0	0	0	13	16	16		

Indicator 1.3 - Number of people with TB or their relatives which receive vocational training in micro-enterprise generation (Note: indicator from Att.1 re-worded in Attachment 2) (Note: this indicator is not measured in Attachment 3)

Level	Baseline									
	Value	Year								
Level 1-People trained	0	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	300	285	385	460	500		
Result	0	0	0	127	243	396	459	554		

SDA - Treatment: Timely detection and quality treatment of cases

Indicator 1.4 - Number of health staff trained to improve the quality of services from a human rights perspective (Note: indicator from Att.1 reworded and included in indicator 1.6 of Att.2. This is a non-cumulative indicator as health staff will receive continued training in YR 2) (Note: this indicator is not measured in Attachment 3)

Level	Baseline									
	Value	Year								
Level 1-People trained	N/A									
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	525	525	525	525	105	525	525		
Result	0	0	0	337	540	166	447	548		

Indicator 1.5 - Number of health units from 70 target HRTBAs with health staff trained to improve the quality of services from a Human Rights perspective (Note: new indicator in Att.2. This is a non-cumulative indicator as health unit staff will be continue training in YR 2.) (Note: this indicator is not measured in Attachment 3)

Level	Baseline									
	Value	Year								
Level 2-Service Points supported	0	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	70	70	14	70	70		
Result	0	0	0	54	70	8	70	70		

Indicator 1.6 - Percentage of contacts under 15 years of age receiving chemical preventative treatment for 6 months (Note: new indicator inAtt.2) (Note: this indicator is not measured in Attachment 3)

Level	Baseline									
	Value	Year								
Level 3-People reached	85%	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	0	0	0	0	90%		
Result	0	0	0	86%	86%	86%	86%	86.4%		

Indicator 1.7 - Number and percentage of people who drop out of DOTS Strategy (Note: new indicator in Att.2)

Level	Baseline																	
	Value	Year																
Level 3-People reached	676 (4.8%)	2003																
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8										
Target	0	0	0	0	0	0	0	3%										
Result	0	0	0	565 (4.1%)	565 (4.1%)	565 (4.1%)	565 (4.1%)	565 (4.1%)										
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16										
Target	3%	3%	3%	3%	TBD	TBD	TBD	2.50%										
Result	665 (4.2%)	665 (4.2%)	359 (4.3%) (not verified)	TBD		3.20%		3.3% (540)										

Indicator 1.8 - Number of patients receiving treatment under DOTS (Note: new indicator in Att.2)

Level	Baseline									
	Value	Year								
Level 3-People reached	18,546	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	0	0	0	0	20,000		
Result	0	0	0	0	0	0	18,289	26,442		
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16		
Target	51,249	56,249	61,249	64,904	TBD	TBD	TBD	83,933		
Result	36,779	36,779	36,779 (not verified)	36,779 (not verified)		56,030 (cumulative)		72,319		
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24		
Target				101,819						
Result										

Indicator 1.9 - Number of patients cured of TB (Note: new indicator in Att.2) (Note: this indicator is not measured in Attachment 3)

Level	Baseline									
	Value	Year								
Level 3-People reached	14,081 (75.92%)	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	0	0	0	0	18,000		
Result	0	0	0	0	16,000	16,000	16,000	16,000		

Indicator 1.10 - Case detection rate of DOTS Program (Note: this is a new indicator in Att.3)

Level	Baseline									
	Value	Year								
Level 2-Service Points supported	83%	2004								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target										
Result										
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16		
Target	90% (Note: there is no Q9 target in the attachment but results have been reported. Q10 target has been used)	90%				90%		90%		
Result	96.7% (18,490)	96.7% (18,490)				90%		95.2%		

SDA - Supportive Environment: Health systems strengthening

Indicator 1.11 - Number of HRTBTA clinics with improved infrastructure (Note: not measured in Attachment 2)

Level	Baseline									
	Value	Year								
Level 2-Service Points supported	N/A									
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	35	35						
Result	0	0	0	20						

SDA - Prevention: Behavioral Change Communication - Community Outreach

Indicator 1.12 - Number and percentage of TB patients and families from high-risk tuberculosis transmission districts who receive educational programs on integrated tuberculosis control and in human rights advocacy (Note: this is a new indicator in Att.3)

Level	Baseline									
	Value	Year								
Level 3-People reached	5.1%	2004								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target										
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: %	
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16		
Target		50%	50%	70%	TBD	TBD	TBD	75%		
Result	N: D: P: %	5.2%	5.2%	TBD	N: D: P: %	76.8% patients and 33.7% families	N: D: P: %	N: D: P: 77%		
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24		
Target				80%						
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: %	

Indicator 1.13 - Number of promoters (people cured of TB, their relatives and students) trained (Note: Not measured in Attachment 2)

Level	Baseline									
	Value	Year								
Level 1-People trained	N/A									
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	100	100	100						
Result	0	0	0	105						

Indicator 1.14 - Number of educational promoters (TB patients) trained (Note: not measured in Attachment 2)

Level	Baseline									
	Value	Year								
Level 1-People trained	N/A									
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	120	300	450						
Result	0	0	0	462						

SDA - Care and Support: Supporting patients through direct observation of treatment

Indicator 1.15 - Number of HRTBTAs that have nutritional support plans (Note: not measured in Attachment 2)

Level	Baseline									
	Value	Year								
Level 2-Service Points supported	N/A									
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	35	35	35	35						
Result	0	0	0	22						

SDA - Prevention: Identification of Infectious Cases

Indicator 1.16 - Percentage of new smear positive cases detected through contacts examined (Note: new indicator for Attachment 2. This is a non cumulative indicator) (Note: this indicator is not measured in Attachment 3)

Level	Baseline									
	Value	Year								
Level 3-People reached	0.4%	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	0	0	0	0	0	0.8%	
Result	0	0	0	0.4%	0.3%	0.3%	0.3%	0.3%	0.3%	

SDA - Other: HIV/TB Prevention

Indicator 1.17 - Number and percentage of people living with HIV/AIDS (PLWHA) who receive chemoprophylaxis for tuberculosis (INH) (Note: new indicator in Attachment 2. This is a non cumulative indicator. Note 2: this indicator has been reworded in Att.3)

Level	Baseline																	
	Value	Year																
Level 3-People reached	1,241	2003																
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8										
Target	0	0	0	0	0	0	0	0	1,550									
Result	0	0	0	1,397	598	598	598	598	598 (updated information pending)									
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16										
Target	1,550	49%	49%	50%	50%	50%	50%	50%	52%									
Result	1230 (56%)	1230 (56%)	(1241) 100%	TBD					71,9% (1485)									
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24										
Target				55%														
Result																		

Objective 2 - Reducing the incidence of smear-positive TB in 9 of the country's biggest prisons

SDA - Treatment: Control of drug resistance

Indicator 2.1 - Number of prisons in the country (out of a total of 83) that have a manual to treat HIV and TB (TB and MDR-TB) (Note: not measured in Attachment 2)

Level	Baseline									
	Value	Year								
Level 2-Service Points supported	N/A									
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	83						
Result	0	0	0	83						

Indicator 2.2 - Number of new MDR-TB cases diagnosed per year (Note: new indicator for Attachment 2)

Level	Baseline									
	Value	Year								
Level 3-People reached	10	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	0	0	0	0	0	20	
Result	0	0	0	0	0	0	0	0	information not available	
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16		
Target	58	72	76	81	TBD	TBD	TBD	91		
Result	52	21	22	12		15		88		
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24		
Target				96						
Result										

Indicator 2.3 - Proportion of registered MDR-TB cases under treatment with DOTS Plus (Note: new indicator in Att.2. Note2: This is a non cumulative indicator)

Level	Baseline									
	Value	Year								
Level 3-People reached	100%	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	0	0	0	0	100%		
Result	0	0	0	0	0	0	100%	100%		
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16		
Target	100%	100%	100%	100%	100%	100%	100%	100%		
Result	92% (48)	100% (21)	100% (22)	100%	N: D: P: %	100%	N: D: P: %	N: D: P: 100%		
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24		
Target				100%						
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: %	

Indicator 2.4 - Proportion of drop outs from DOTS Plus strategy (Note: new indicator in Att.2) (Note: this indicator is not measured in Attachment 3)

Level	Baseline								
	Value	Year							
Level 3-People reached	10%	2003							
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8	
Target	0	0	0	0	0	0	0	10%	
Result	0	0	0	0	0	0	0	Information not available	

SDA - Treatment: Timely detection and quality treatment of cases

Indicator 2.5 - Number of prisons in the country with regulations on TB prevention and control and biosecurity programs in order to control TB infections (Note: this indicator was reworded from Att.1, and it is not cumulative since in Y2 there will continued monitoring and support for the implementation of regulations in 9 prisons) (Note: this indicator is not measured in Attachment 3)

Level	Baseline								
	Value	Year							
Level 2-Service Points supported	0	2003							
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8	
Target	0	0	0	9	9	9	9	9	
Result	0	0	0	0	0	9	9	9	

Indicator 2.6 - Number of INPE health staff trained in DOTS, DOTS Plus, HIV-TB co-infection, and infectious TB control (Note: non-cumulative indicator as staff will continue training in Y2) (Note: this indicator is not measured in Attachment 3)

Level	Baseline								
	Value	Year							
Level 1-People trained	N/A								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8	
Target	0	0	0	249	249	249	249	249	
Result	0	0	0	0	236	236	236	236	

Indicator 2.7 - Proportion of drop outs from DOTS strategy (Note: new indicator in Att.2) (Note: this indicator is not measured in Attachment 3)

Level	Baseline								
	Value	Year							
Level 3-People reached	2%	2003							
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8	
Target	0	0	0	0	0	0	0	2%	
Result	0	0	0	0	0	0	0	information not available	

Indicator 2.8 - Number and percentage of cases of TB cured in prisons under DOTS (Note: this is a new indicator in Att.3)

Level	Baseline									
	Value	Year								
Level 3-People reached	66, 69%	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target										
Result										
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16		
Target	402, 80.4%	402, 80.4%	402, 80.4%	410; 82%	TBD	TBD	TBD	830, 84%		
Result	90 (88%)	90 (88%)	90 (88%) (2004 study)	262 (88%)		361 (89.1%)		555, 89%		
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24		
Target				830, 84%						
Result										

SDA - Prevention: Behavioral Change Communication - Community Outreach

Indicator 2.9 - Number of health promotion and IEC workshops held in 9 focus prisons to promote the participation in and organization of IEC activities against TB (Note: not measured in Attachment 2)

Level	Baseline									
	Value	Year								
Level 0-Process/Activity Indicator	N/A									
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	18	36	54						
Result	0	0	0	11						

Indicator 2.10 - Number of persons in prisons reached by BCC activities

Level	Baseline									
	Value	Year								
Level 3-People reached	0	2005								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target										
Result										
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16		
Target	2,000	6,000	10,500	15,000	TBD	TBD	TBD	30,000		
Result	2,018	7,665	14,253	15,561		22,940		36,093		
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24		
Target				45,000						
Result										

SDA - Supportive Environment: Health systems strengthening

Indicator 2.11 - Number of health units at the 9 targeted prisons with adequate environment to avoid TB transmission (Note: re-worded from Attachment 1) (Note: this indicator is not measured in Attachment 3)

Level	Baseline									
	Value	Year								
Level 2-Service Points supported	0	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	4	4	4	6	8	9		
Result	0	0	0	0	0	0	3	3		
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16		
Target									27	
Result									21	

SDA - Other: HIV/TB Prevention

Indicator 2.12 - Number of people at the 27 targeted prisons receiving HIV rapid tests and pre-tests / post-test counseling (Note: re-worded in Attachment 2 and reworded in Attachment 3)

Level	Baseline									
	Value	Year								
Level 3-People reached	0	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	3,500	8,000	11,908	11,908	15,908	18,908	20,839		
Result	0	0	0	0	3,996	13,063	17,038	19,635		
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16		
Target	22,339	23,839	25,339	26,839	TBD	TBD	TBD	33,839		
Result	20,438	23,100	26,073	28,493		37,198		45,812		
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24		
Target				40,839						
Result										

Indicator 2.13 - Number of prisoners receiving ARV treatment

Level	Baseline									
	Value	Year								
Level 3-People reached	0	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target										
Result										
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16		
Target	23 (23%)	32 (32%)	41 (41%)	50 (50%)	52 (52%)	54 (54%)	56 (56%)	60 (60%)		
Result	19 (86%)	20 (90.91%)	30 (68%)	40 (73%)		42 (93.3%)		69 (83.8%)		

Indicator 2.14 - Number HIV/AIDS patients confined to prisons who receive medical follow-up and assistance (Note: re-worded from Attachment 1)

Level	Baseline									
	Value	Year								
Level 3-People reached	132	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	72	72	144	144	144		
Result	0	0	0	128	128	179	179	137		
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16		
Target	180 (49%)	190	200	220	TBD	TBD	TBD	270		
Result	139 (80.47%)	75 (44%)	35 (16%)	49		340		145		
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24		
Target				330						
Result										

SDA - Prevention: Identification of Infectious Cases

Indicator 2.15 - Number of symptomatic patients examined in the nine prisons (Note: new indicator in Att.2) (Note: this indicator is not measured in Attachment 3)

Level	Baseline									
	Value	Year								
Level 3-People reached	4,464	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	0	0	0	0	5,000		
Result	0	0	0	0	0	0	4,705	4,705		

Indicator 2.16 - Number of new TB cases in prisons diagnosed per year (Note: this indicator has been reworded in Att.3)

Level	Baseline									
	Value	Year								
Level 3-People reached	317	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	0	0	0	0	360		
Result	0	0	0	0	0	0	320	320		
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16		
Target	510	660	710	760	TBD	TBD	TBD	1,168		
Result	318	391	542	392		621		884		
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24		
Target				1,590						
Result										

Indicator 2.17 - Number of health units at the targeted prisons with adequate environment to avoid transmission of TB (Note: this is a new indicator in Attachment 3)

Level	Baseline	
	Value	Year
Level 2-Service Points supported	0	2003

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target								
Result								
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	9	9	9	19	19	19	19	27
Result	6	9	9	9		7		
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24
Target				27				
Result								

Objective 3 - Expanding the coverage of DOTS-Plus and improving the cure rate among MDR-TB patients in the country**SDA - Supportive Environment: Health systems strengthening**

Indicator 3.1 - Number of health centers specialized in DOTS-PLUS with biosafety infrastructure and sufficient supply of drugs (Note: not measured in Att.2)

Level	Baseline		Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
	Value	Year								
Level 2-Service Points supported	0	2003								
Target	0		43	86	129					
Result	0		0	0	15					

SDA - Treatment: Timely detection and quality treatment of cases

Indicator 3.2 - Number of patients referred to the residential units for homeless people (Note: new indicator in Att.2. This indicator refers to MDR-TB patients specifically) (Note: this indicator is not measured in Attachment 3)

Level	Baseline		Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
	Value	Year								
Level 3-People reached	33 (PIH)	2003								
Target	0		0	0	0	100	115	160	205	250
Result	0		0	0	0	73	73	170	233	292

SDA - Care and Support: Supporting patients through direct observation of treatment

Indicator 3.3 - Number of residential units for homeless patients or socially vulnerable patients established (Note: new indicator in Att.2. Units are for MDR-TB patients. Non-cumulative indicator as continued support will provided to rest homes in YR 2) (Note: this indicator is not measured in Attachment 3)

Level	Baseline		Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
	Value	Year								
Level 2-Service Points supported	3	2003								
Target	0		0	0	0	2	2	2	2	2
Result	0		0	0	0	2	2	2	2	2

SDA - Treatment: Control of drug resistance

Indicator 3.4 - Number and percentage of patients diagnosed with MDR-TB who receive DOTS Plus strategy (Note: indicator re-worded in Att.2. In Att.1 number of patients on individualized and standardized treatment were separated. Indicator now combines both) (Note: this indicator has been reworded in Attachment 3 and is listed below)

Level	Baseline		Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
	Value	Year								
Level 3-People reached	860 (51.2%)	2003								
Target	0		0	0	0	2082 (100%)	1481 (53%)	2091 (74%)	2572 (92%)	2,807
Result	0		0	0	0	960 (46%)	1,093	1,526	2,193	2,875

Indicator 3.5 - Number of cases of TB-MDR who are enrolled to begin DOTs PLUs treatment per year (Note: this indicator replaces the above indicator for attachment 3. Note 2: This indicator included the 2,807 patients enrolled during Phase 1 of the project)

Level	Baseline									
	Value	Year								
Level 3-People reached	860	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target										
Result										
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16		
Target	3,431	4,055	4,679	5,307	5,932	6,557	7,182	7,807		
Result	3,934	4450 (82.5%)	5414 (84.69%)	5,823		6,495		7,738		
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24		
Target				10,307						
Result										

Indicator 3.6 - Number of DISAS that have a network of health promoters trained in DOTS-PLUS Strategy (Note: this indicator is not measured in Attachment 3)

Level	Baseline									
	Value	Year								
Level 2-Service Points supported	9 (PIH-MOH)	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	7	9	11	11	11		
Result	0	0	0	9	9	9	9	11		

Indicator 3.7 - Number of reference laboratories established to carry out 1st line drug sensitivity testing (Note: new indicator in Att.2) (Note: this indicator is not measured in Attachment 3)

Level	Baseline									
	Value	Year								
Level 2-Service Points supported	0	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	0	0	3	5	6	6	6		
Result	0	0	0	0	2	5	5	5		

Indicator 3.8 - Number of health workers trained in DOTS-Plus (Note: indicator was incorrectly worded in Att.1 and targets were incorrectly calculated therefore YR2 target is lower than YR1 target. YR1 target was number of people trained x amount of days they were trained (Note: this indicator is not measured in Attachment 3)

Level	Baseline									
	Value	Year								
Level 1-People trained	0	2003								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
Target	0	1,570	3,236	4,352	1,796	2,711	2,861	2,861		
Result	0	0	0	636	1,060	2,231	2,898	3,412		

Indicator 3.9 - Number of DISAS with available centers for treatment of MDR-TB cases (Note: new indicator in Att.2) (Note: this indicator is not measured in Attachment 3)

Level	Baseline	
	Value	Year
Level 2-Service Points supported	5	2003

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	0	0	0	5	5	5	5	9
Result	0	0	0	5	5	10	10	10

2.2.3. Cumulative Progress To Date

Objective 1	Stimulating and strengthening the participation of TB patients, their families and district populations in the reduction of smear positive TB in areas of High Risk TB Transmission Areas (HRTBTAs)							
SDA	SDA - Supportive Environment: Coordination and partnership development (national, community, public-private)							
Indicator 1.1 - Number of districts that have a plan for participatory TB control as part of their local government and development plan (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	8	16	19					118%
Indicator 1.2 - Number and percentage of districts with TB-HRTAs working with active ASET or GO-TB or ASDEN (Note: new indicator in Attachment 2) (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	8	4	16					400%
Indicator 1.3 - Number of people with TB or their relatives which receive vocational training in micro-enterprise generation (Note: indicator from Att.1 re-worded in Attachment 2) (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 1-People trained	8	500	554					110%
SDA	SDA - Treatment: Timely detection and quality treatment of cases							
Indicator 1.4 - Number of health staff trained to improve the quality of services from a human rights perspective (Note: indicator from Att.1 reworded and included in indicator 1.6 of Att.2. This is a non-cumulative indicator as health staff will receive continued training in YR 2) (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 1-People trained	8	525	548					104%
Indicator 1.5 - Number of health units from 70 target HRTBAs with health staff trained to improve the quality of services from a Human Rights perspective (Note: new indicator in Att.2. This is a non-cumulative indicator as health unit staff will be continue training in YR 2.) (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	8	70	70					100%
Indicator 1.6 - Percentage of contacts under 15 years of age receiving chemical preventative treatment for 6 months (Note: new indicator in Att.2) (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	8	90%	86.4%					96%
Indicator 1.7 - Number and percentage of people who drop out of DOTS Strategy (Note: new indicator in Att.2)								
	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	12	3%	TBD					0%
Indicator 1.8 - Number of patients receiving treatment under DOTS (Note: new indicator in Att.2)								
	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	16	83,933	72,319					86%
Indicator 1.9 - Number of patients cured of TB (Note: new indicator in Att.2) (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	8	18,000	16,000					88%
Indicator 1.10 - Case detection rate of DOTS Program (Note: this is a new indicator in Att.3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	14	90%	90%					100%
SDA	SDA - Supportive Environment: Health systems strengthening							
Indicator 1.11 - Number of HRTBTA clinics with improved infrastructure (Note: not measured in Attachment 2)								
	Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	4	35	20					57%

SDA	SDA - Prevention: Behavioral Change Communication - Community Outreach							
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Indicator 1.12 - Number and percentage of TB patients and families from high-risk tuberculosis transmission districts who receive educational programs on integrated tuberculosis control and in human rights advocacy (Note: this is a new indicator in Att.3)								
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	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	12	70%	TBD					0%

Indicator 1.13 - Number of promoters (people cured of TB, their relatives and students) trained (Note: Not measured in Attachment 2)								
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	Period	Target	Result	0%	30%	50%	80%	
Level 1-People trained	4	100	105					105%

Indicator 1.14 - Number of educational promoters (TB patients) trained (Note: not measured in Attachment 2)								
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	Period	Target	Result	0%	30%	50%	80%	
Level 1-People trained	4	450	462					103%

SDA	SDA - Care and Support: Supporting patients through direct observation of treatment							
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Indicator 1.15 - Number of HRTBTAs that have nutritional support plans (Note: not measured in Attachment 2)								
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	Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	4	35	22					63%

SDA	SDA - Prevention: Identification of Infectious Cases							
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Indicator 1.16 - Percentage of new smear positive cases detected through contacts examined (Note: new indicator for Attachment 2. This is a non cumulative indicator) (Note: this indicator is not measured in Attachment 3)								
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	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	8	0.8%	0.3%					37%

SDA	SDA - Other: HIV/TB Prevention							
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Indicator 1.17 - Number and percentage of people living with HIV/AIDS (PLWHA) who receive chemoprophylaxis for tuberculosis (INH) (Note: new indicator in Attachment 2. This is a non cumulative indicator. Note 2: this indicator has been reworded in Att.3)								
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	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	12	50%	TBD					0%

Objective 2	Reducing the incidence of smear-positive TB in 9 of the country's biggest prisons							
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SDA	SDA - Treatment: Control of drug resistance							
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Indicator 2.1 - Number of prisons in the country (out of a total of 83) that have a manual to treat HIV and TB (TB and MDR-TB) (Note: not measured in Attachment 2)								
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	Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	4	83	83					100%

Indicator 2.2 - Number of new MDR-TB cases diagnosed per year (Note: new indicator for Attachment 2)								
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	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	16	91	88					97%

Indicator 2.3 - Proportion of registered MDR-TB cases under treatment with DOTS Plus (Note: new indicator in Att.2. Note2: This is a non cumulative indicator)								
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	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	14	100%	100%					100%

Indicator 2.4 - Proportion of drop outs from DOTS Plus strategy (Note: new indicator in Att.2) (Note: this indicator is not measured in Attachment 3)								
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	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	7	0	0					0%

SDA		SDA - Treatment: Timely detection and quality treatment of cases						
Indicator 2.5 - Number of prisons in the country with regulations on TB prevention and control and biosecurity programs in order to control TB infections (Note: this indicator was reworded from Att.1, and it is not cumulative since in Y2 there will continued monitoring and support for the implementation of regulations in 9 prisons) (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	8	9	9					100%
Indicator 2.6 - Number of INPE health staff trained in DOTS, DOTS Plus, HIV-TB co-infection, and infectious TB control (Note: non-cumulative indicator as staff will continue training in Y2) (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 1-People trained	8	249	236					94%
Indicator 2.7 - Proportion of drop outs from DOTS strategy (Note: new indicator in Att.2) (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	8	2%	information not available					0%
Indicator 2.8 - Number and percentage of cases of TB cured in prisons under DOTS (Note: this is a new indicator in Att.3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	12	410; 82%	262 (88%)					107%
SDA		SDA - Prevention: Behavioral Change Communication - Community Outreach						
Indicator 2.9 - Number of health promotion and IEC workshops held in 9 focus prisons to promote the participation in and organization of IEC activities against TB (Note: not measured in Attachment 2)								
	Period	Target	Result	0%	30%	50%	80%	
Level 0-Process/Activity Indicator	4	54	11					20%
Indicator 2.10 - Number of persons in prisons reached by BCC activities								
	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	16	30,000	36,093					120%
SDA		SDA - Supportive Environment: Health systems strengthening						
Indicator 2.11 - Number of health units at the 9 targeted prisons with adequate environment to avoid TB transmission (Note: re-worded from Attachment 1) (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	8	9	3					33%
SDA		SDA - Other: HIV/TB Prevention						
Indicator 2.12 - Number of people at the 27 targeted prisons receiving HIV rapid tests and pre-tests / post-test counseling (Note: re-worded in Attachment 2 and reworded in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	16	33,839	45,812					135%
Indicator 2.13 - Number of prisoners receiving ARV treatment								
	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	14	54 (54%)	42 (93.3%)					77%
Indicator 2.14 - Number HIV/AIDS patients confined to prisons who receive medical follow-up and assistance (Note: re-worded from Attachment 1)								
	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	16	270	145					54%

SDA		SDA - Prevention: Identification of Infectious Cases							
Indicator 2.15 - Number of symptomatic patients examined in the nine prisons (Note: new indicator in Att.2) (Note: this indicator is not measured in Attachment 3)									
		Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	8	5,000	4,705						94%
Indicator 2.16 - Number of new TB cases in prisons diagnosed per year (Note: this indicator has been reworded in Att.3)									
		Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	16	1,168	884						76%
Indicator 2.17 - Number of health units at the targeted prisons with adequate environment to avoid transmission of TB (Note: this is a new indicator in Attachment 3)									
		Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	14	19	7						37%

Objective 3		Expanding the coverage of DOTS-Plus and improving the cure rate among MDR-TB patients in the country							
SDA		SDA - Supportive Environment: Health systems strengthening							
Indicator 3.1 - Number of health centers specialized in DOTS-PLUS with biosafety infrastructure and sufficient supply of drugs (Note: not measured in Att.2)									
		Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	4	129	15						12%

SDA		SDA - Treatment: Timely detection and quality treatment of cases							
Indicator 3.2 - Number of patients referred to the residential units for homeless people (Note: new indicator in Att.2. This indicator refers to MDR-TB patients specifically) (Note: this indicator is not measured in Attachment 3)									
		Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	8	250	292						116%

SDA		SDA - Care and Support: Supporting patients through direct observation of treatment							
Indicator 3.3 - Number of residential units for homeless patients or socially vulnerable patients established (Note: new indicator in Att.2. Units are for MDR-TB patients. Non-cumulative indicator as continued support will provided to rest homes in YR 2) (Note: this indicator is not measured in Attachment 3)									
		Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	8	2	2						100%

SDA		SDA - Treatment: Control of drug resistance						
Indicator 3.4 - Number and percentage of patients diagnosed with MDR-TB who receive DOTS Plus strategy (Note: indicator re-worded in Att.2. In Att.1 number of patients on individualized and standardized treatment were separated. Indicator now combines both) (Note: this indicator has been reworded in Attachment 3 and is listed below)								
	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	8	2,807	2,875					102%
Indicator 3.5 - Number of cases of TB-MDR who are enrolled to begin DOTs PLUs treatment per year (Note: this indicator replaces the above indicator for attachment 3. Note 2: This indicator included the 2,807 patients enrolled during Phase 1 of the project)								
	Period	Target	Result	0%	30%	50%	80%	
Level 3-People reached	16	7,807	7,738					99%
Indicator 3.6 - Number of DISAS that have a network of health promoters trained in DOTS-PLUS Strategy (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	8	11	11					100%
Indicator 3.7 - Number of reference laboratories established to carry out 1st line drug sensitivity testing (Note: new indicator in Att.2) (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	8	6	5					83%
Indicator 3.8 - Number of health workers trained in DOTS-Plus (Note: indicator was incorrectly worded in Att.1 and targets were incorrectly calculated therefore YR2 target is lower than YR1 target. YR1 target was number of people trained x amount of days they were trained (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 1-People trained	8	2,861	3,412					119%
Indicator 3.9 - Number of DISAS with available centers for treatment of MDR-TB cases (Note: new indicator in Att.2) (Note: this indicator is not measured in Attachment 3)								
	Period	Target	Result	0%	30%	50%	80%	
Level 2-Service Points supported	8	9	10					111%

2.3. Financial Performance

2.3.1. Grant Financial Key Performance Indicators (KPIs)

Grant Duration (months)	61 months	Grant Amount	25,601,450 \$
% Time Elapsed	80%	% disbursed by TGF	97%
Time Remaining (months)	12 months	Disbursed by TGF	24,765,106 \$
Expenditures' Burn Rate	101%	Funds Remaining	836,344 \$

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.Dec.03	01.Mar.04	01.Jun.04	01.Sep.04	01.Dec.04	01.Mar.05	01.Jun.05	01.Sep.05
Period Covered To:	29.Feb.04	31.May.04	31.Aug.04	30.Nov.04	28.Feb.05	31.May.05	31.Aug.05	30.Nov.05
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	2,066,634	4,897,865	7,883,472	5,371,669	10,798,106	11,743,430	15,893,198	20,104,970
Summary Period Budget:	2,066,634	2,831,231	2,985,607	2,911,084	5,426,437	5,426,437	4,149,768	4,149,768

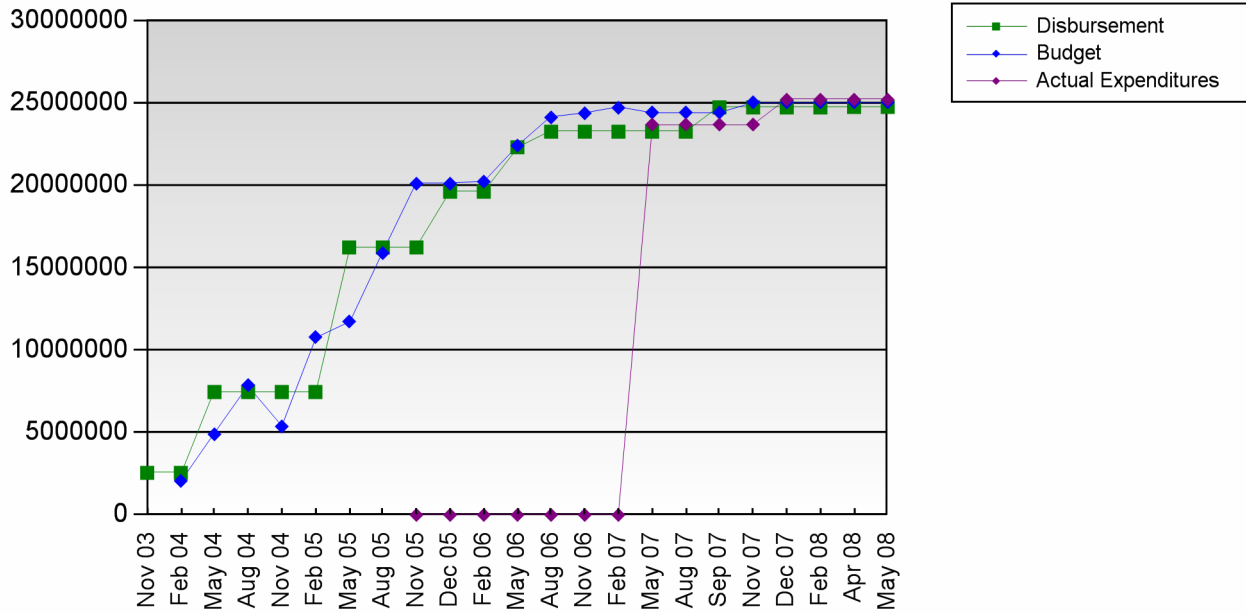
	Budget Period 9	Budget Period 10	Budget Period 11	Budget Period 12	Budget Period 13	Budget Period 14	Budget Period 15	Budget Period 16
Period Covered From:	01.Dec.05	01.Mar.06	01.Jun.06	01.Sep.06	01.Dec.06	01.Mar.07	01.Jun.07	01.Sep.07
Period Covered To:	28.Feb.06	31.May.06	31.Aug.06	30.Nov.06	28.Feb.07	31.May.07	31.Aug.07	30.Nov.07
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	20,231,030	22,417,618	24,127,464	24,379,583	24,710,552	24,428,427	24,428,427	25,046,939
Summary Period Budget:	126,060	2,186,588	1,709,846	252,119	330,969	-282,125		618,512

	Budget Period 17	Budget Period 18	Budget Period 19	Budget Period 20	Budget Period 21	Budget Period 22	Budget Period 23	Budget Period 24
Period Covered From:	01.Dec.07	01.Mar.08	01.Jun.08	01.Sep.08	01.Dec.08	01.Mar.09	01.Jun.09	01.Sep.09
Period Covered To:	29.Feb.08	31.May.08	31.Aug.08	30.Nov.08	28.Feb.09	31.May.09	31.Aug.09	30.Nov.09
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	25,046,939	25,046,939	25,046,939	25,601,446	25,601,446	25,601,446	25,601,446	25,601,446
Summary Period Budget:				554,507				

2.3.3. Program Expenditures

Period PU: 01.Jun.07 - 31.Dec.07	Cumulative Budget	Cumulative Expenditures	Reason for variance
1. Total actual expenditures vs. budget	\$ 25,046,939	\$ 25,203,829	Adjustment from previous period in "disbursement to sub-recipients" due to errors of data migration.
1a. PR's Total expenditure		\$ 15,075,516	
1b. Disbursements to sub-recipients		\$ 10,128,313	
2. Health product expenditures vs. Budget (already included in "Total Actual" above)		\$ 8,177,246	
2a. Pharmaceuticals		\$ 7,320,313	
2b. Health products, commodities and equipment		\$ 856,933	

2.3.4. Cumulative Program Budget, Expenditures and Disbursement to Date



2.4. Progress Update and Disbursement Information

Rating	Description
A	Expected or exceeding expectations
B1	Adequate
B2	Inadequate but potential demonstrated
C	Unacceptable

Progress Updates					Disbursement Information				
PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date	
1	N/A		N/A	1	01.Dec.03 - 29.Feb.04	2,554,864	\$ 2,554,864	19 Nov 2003	
Summary of Progress					Reasons for variance between PR Request and Actual Disbursement				
No recommendations or actions required					No variance				

PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date	
2	N/A		B1	2	01.Mar.04 - 31.May.04	4,906,906	\$ 4,906,906	26 May 2004	
Summary of Progress					Reasons for variance between PR Request and Actual Disbursement				
Since many of the program activities depend on the provision of health products, disbursement was recommended even though little progress was achieved in Quarter 1.					No variance				

PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date	
3	N/A		B1	0	01.Jun.04 - 31.Aug.04				
Summary of Progress					Reasons for variance between PR Request and Actual Disbursement				
Communication mechanisms and flow of information between the PR and certain sub-recipients should be improved. The PR should concentrate on the monitoring and strict accomplishment of the goals proposed in the reprogramming of activities in order to avoid delays.					No variance				

PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date	
4	N/A		B1	0	01.Sep.04 - 30.Nov.04				
Summary of Progress					Reasons for variance between PR Request and Actual Disbursement				
Communication mechanisms and flow of information between the PR and certain sub-recipients should be improved. The PR should concentrate on the monitoring and strict accomplishment of the goals proposed in the reprogramming of activities in order to avoid delays.					No variance				

PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date	
5	N/A		B1	0	01.Dec.04 - 28.Feb.05				
Summary of Progress					Reasons for variance between PR Request and Actual Disbursement				
Communication mechanisms and flow of information between the PR and certain sub-recipients should be improved. The PR should concentrate on the monitoring and strict accomplishment of the goals proposed in the reprogramming of activities in order to avoid delays.					No variance				

PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date
6	N/A		B1	3	01.Mar.05 - 31.May.05	8,773,624	\$ 8,773,624	03 May 2005
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement				
Overall progress has improved				No variance				

PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date
7	N/A		B1	7	01.Sep.05 - 30.Nov.05	3,818,424		
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement				
Good progress on the implementation of activities				PR request includes funds for MDR-TB drugs to be consumed in Y3. The Phase 2 decision of 24.10.05 includes conditions related to the continued funding of the DOTS + which have yet to be fulfilled. The PR request has been then reduced, but to an amount which covers purchase of drugs up to August 2006, ensuring treatment of patients who have entered the DOTS+ Program in Y2.				

PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date
7	N/A		B1	7	01.Jun.05 - 31.Aug.05			
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement				
Progress during Q6 has been adequate. The PR had sufficient funds on hand to carry out activities for Q7 and Q8.				No variance				

PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date
8	01.Sep.05 - 30.Nov.05		B1	8	01.Dec.05 - 28.Feb.06	2,743,233	\$ 3,384,354	08 Dec 2005
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement				
During this quarter implementation improvements continues in acceleration, as seen in previous quarters. The large majority of indicators have achieved their Y2 targets.				\$48,847 has been reduced from this request as these cover VAT return received by the PR during the quarter.				

PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date
9	01.Dec.05 - 28.Feb.06		B1	9	01.Mar.06 - 31.May.06	3,690,950	\$ 2,694,386	03 May 2006
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement				
During Q9 implementation slowed down a bit, this in part was due to the time that was required on the part of the PR to finalize documents required for the Phase 2 extension.				The PR did not include the last disbursement as cash in transit and therefore that amount (\$2,694,386) was reduced from the PR request. In addition VAT funds that have been recovered were reduced from the PR Request.				

PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date
10	01.Mar.06 - 31.May.06		B1	10	01.Jun.06 - 31.Aug.06	1,388,276	\$ 947,717	30 Aug 2006
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement				
Average performance of 99%. Level 3 indicators at 80% and 100% for the level 2 indicator. Due to lack of information from SRs, 3 indicators did not report new results. Difficulties in getting accurate information from prison reports.				Enough cash on hand for Q12 and Q13				

PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date
11	01.Jun.06 - 31.Aug.06		B1	11	01.Sep.06 - 30.Nov.06			
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement				
Indicators for activities in prisons are not reaching their targets				No variance				

PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date
12	01.Sep.06 - 30.Nov.06		B1	12	01.Dec.06 - 31.May.07			
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement				
<p>During Q12, overall programmatic performance was adequate in spite of the fact that the PR was unable to report results for 4 out of 14 indicators. This was due to the fact that data was not available from the National TB program before the report was submitted. As of the beginning of Year 4, this grant will report on a semester basis which should allow sufficient time for the PR to collect the necessary information for all results.</p> <p>At the end of Q12, 15,561 prisoners were reached by BCC activities, 28,493 prisoners had received VCT (including the provision of the test result) and 5823 persons were enrolled to begin DOTS Plus treatment. At the end of Q12, 19 prisons should have had health units with an adequate environment to avoid TB transmission, however only 9 prisons were equipped by the end of the period.</p>				No funds were requested or disbursed as the PR had sufficient resources for activities scheduled for the next semester plus an additional quarter.				

PU	Period covered by PU		FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date
13	01.Dec.06 - 31.May.07		A	13	01.Jun.07 - 29.Feb.08	1,612,139	\$ 1,475,055	13 Sep 2007
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement				

NOTE: this is first time that the PR is submitting a semester report. This progress report covers Semester 7 (Q13-Q14).

During Semester 7, overall programmatic performance met expectations. Of the 15 indicators with targets for the period, 6 met or exceeded their targets. The Cluster notes that as with the previous period, the PR has been unable to report on the number and percentage of PLWHA who receive chemoprophylaxis for tuberculosis (INH) due to the fact that the National Statistics Office (ESN) has yet to formally report 2006 figures. The official figures are expected to be available in September-October 2007. This has affected the average performance. Please note that for some indicators targets were not defined for this semester (TBDs in attachment 3&4), and the FPM & PR have agreed to use an average of the agreed Year 3 and Year 4 targets for this semester. The update of the attachment is delayed as the grant is being consolidated with the Round 5 TB grant.

At the end of Year 3 (Q12) the PR was expected to report on the impact and outcome indicators contained in the Grant Agreement, however at the end of November this information was not yet available. The PR has reported with progress report on the following impact and outcome indicators:

1. Incidence rate of smear positive TB cases (Target: 66.39/100,000; Result: 67.91/100,000)= 98% achievement
2. Mortality rate of Tuberculosis (Target: 3.44/100,000; Result: 3.51/100,000)= 97% achievement
3. Number of high-risk transmission areas for TB (HRTA-TB) (Target: 40; Result 54) = 74% achievement (a decline in the HRTA-TB was to have been evidenced in Year 3)
4. Treatment Success Rate in DOTS (Target: 90%; Result: 91%) = 101%

In all 4 cases, the information corresponds to the calendar year of 2006. It should be noted that these indicators were not taken into consideration in the overall quantitative assessment.

The Cluster's rationale for disbursement is based on the PR's revised cash forecast; the LFA has revised the request on a performance basis and based on a review of what activities are likely to be implemented in the disbursement period.

PU	Period covered by PU	FPM Rating	DR	Disbursement Period Covered	PR Request	Disbursement Amount	Disbursement Date
15	01.Jun.07 - 31.Dec.07	A	15	01.Jan.08 - 30.Sep.08	28,200	\$ 28,200	14 Apr 2008

Summary of Progress	Reasons for variance between PR Request and Actual Disbursement
The overall performance during Q16 was satisfactory. During this period, programmatic results have improved for most indicators. Sub-recipients have speeded up their activities in order to meet the established targets. This was also facilitated by an additional month granted by the Global Fund to the PR due to the Earthquake occurred in Peru on 15 August 2007.	No variance.

2.5. Phase 2 Grant Renewal	
Performance Rating	Recommendation Category
Rationale for Phase 2 Recommendation Category	
Rationale for Phase 2 Recommendation Amount	
Time-bound Actions	
Issues	Description of time-bound actions

3. Contextual Information

3.1. Country Latest Statistics

Background and Health Spending	Estimate	Year	Source
Total population (in 1000s)	27,274	2005	United Nations. World Population Prospects: The 2006 Revision.
Pop age 0-4 (in 1000s)	2,822	2005	United Nations. World Population Prospects: The 2006 Revision.
Pop age 15-49 (in 1000s)	14,455	2005	United Nations. World Population Prospects: The 2006 Revision.
GNI per capita (USD)	2,610	2005	World Bank. World Development Indicators database (http://devdata.worldbank.org/data-query/) accessed on January 24, 2007
Income level	Lower middle income	2005	World Bank. World Development Indicators database (http://devdata.worldbank.org/data-query/) accessed on January 24, 2007
Child mortality rate (per 1000)	29	2004	WHO. The World health report 2006: Working together for health.
Total health expenditure per capita (USD)	98	2003	WHO. The World health report 2006: Working together for health.
Physicians, Number	29,799	1999	WHO. The World health report 2006: Working together for health.
Nurses, Number	17,108	1999	WHO. The World health report 2006: Working together for health.
Tuberculosis	Estimate	Year	Source
People with TB	57,603	2005	WHO. WHO report 2007. Global tuberculosis control: surveillance, planning, financing.
TB incidence	47,976	2005	WHO. WHO report 2007. Global tuberculosis control: surveillance, planning, financing.
TB mortality	5,697	2005	WHO. WHO report 2007. Global tuberculosis control: surveillance, planning, financing.
New SS+ TB cases	21,492	2005	WHO. WHO report 2007. Global tuberculosis control: surveillance, planning, financing.

3.2. Contextual Information

Title	Explanatory Notes
Major changes in the nature of the epidemic	The number of patients introduced to MDR-TB therapy through this grant constitutes a world record in this area. Nonetheless the number of people requiring treatment continues to grow as MDR-TB incidence continues to increase in Peru
Major changes in the program supporting environment (e.g. changes in th partner relationships, introduction of new partners, etc.)	The development and implementation of the project has been accompanied by an increasing willingness and commitment on behalf of the Ministry of Health to tackle sexual and reproductive health issues. With this project ARV treatments are available for the first time, for the 80% of Peru's population that rely on the Ministry of Health for health services. The project continues to benefit by a strong project partnership in teh CCM and commitment from the MOH. In 2007 teh Council of Ministries approved the Multi-sectorial strategy for HIV/AIDS.
Significant adverse external influences (e.g. force majeure, change in government, natural disaster, etc.)	N/A
External financial issues (e.g. inflation, currency depreciation, etc.)	N/A
Program management issues (e.g. changes in PR/sub-recipients, problems with data collection, quality assurance, etc.)	Delays have occurred in activities supporting prisons due to the need to follow public procedures carefully; specifically in relation to preparing technical documentation and procuring contractors for the construction of health facilities in prisons.
Issues with the CCM (e.g. changes in membership, composition, etc.)	The CCM exercises a strong oversight of the project, bringing together a broad range of multi-sectoral partners into the strategic implementation of the project. The Ministry of Health see the work of the CCM as a model for their efforts to increase the co-ordination of health polices.
Additional Contextual Issues	<p>The project has a number of special features which show the relative sophistication of TB interventions in Peru. In particular the broad civil society involvement in the project, which builds on a long history of civil society participation in Peru's TB interventions. Indeed, Peru is one of very few countries in the world with a well organised civil society movements focused on tuberculosis.</p> <p>The special focus on prisons is relatively rare in TB programmes. It is a reflection of the very high TB incidence rates that occur in Peru's prisons, and also the recognition by the project's promoters of the fundamental right to health services. Moreover the unchecked spread of the disease in prisons could have a severe impact on wider efforts to fight the epidemic.</p> <p>Another special feature of the project is the large focus on multi-drug resistant tuberculosis (MDR-TB) interventions and the rolling out of the DOT-PLUS strategy on a national scale.</p> <p>In year 2 progress was marked with the delays in the development of health facilities in prisons causing delays to targets related to Objective 2. Once opened these centres trated less patients than expected</p> <p>The project has also encountered some delays during the process of selecting sub-recipients. In the highly participatory setting of governance in Peru, it was not possible to conduct a selection process of sub-recipients without the engagement of civil society in a participatory and inclusive public tender procedure with clear transparency rules. The need to follow such procedures set the project back by approximately 4 months.</p> <p>The Global Fund has requested that the PR and Ministry of Health improve its procurement systems to ensure adequate forecasting of need for health products, in particular pharmaceuticals, to support the large increase of people starting treatment.</p>

3.3. Summary of Financial Accountability Issues from PR Annual Audit Report

Date Received		Expected Date	31.May.08
Period Covered From	01.Dec.06	To	30.Nov.07
The project's fiscal year commenced with the program start date (1st December 2004). The audit for Year 2 for the Program has been received.			