

## General SSF Information

Country	Indonesia				
SSF Agreement Number	IND-T-AISYIYA	Component	Tuberculosis	Last Round	13
SSF Title					
Principal Recipient	Central Board of Aisyiyah				
SSF Status	In Progress - Period 1				
SSF Start Date	01 Jan 2014	SSF End Date	30 Jun 2016		
Current* Implementation Period Start Date	01 Jan 2014	Current* Implementation Period End Date	30 Jun 2016	Latest Rating	
Current* Implementation Period Signed Amount	\$ 9,598,184	Current* Implementation Period Committed Amount	\$ 4,011,514	Current* Implementation Period Disbursed Amount	\$ 1,905,934
Cumulative Signed Amount	\$ 9,598,184	Cumulative Committed Amount	\$ 4,011,514	Cumulative Disbursed Amount	\$ 1,905,934
				% Disbursed	48%
Time Elapsed (at the end of the latest reporting period)	0 months				

\* Latest Implementation Period if SSF is closed

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*(For ExternalVersion)*

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## 1. Program Description and Contextual Information

### 1.1. Grant Summary - Web

### 1.2. Country Latest Statistics

Background and Health Spending	Estimate	Year	Source
Total population (in 1000s)	239871	2010	United Nations. World Population Prospects: .The 2010 Revision
Pop age 0-4 (in 1000s)	21579	2010	United Nations. World Population Prospects: .The 2010 Revision
Pop age 15-49 (in 1000s)	134977	2010	United Nations. World Population Prospects: .The 2010 Revision
Physicians (number)	65722	2000-2010	WHO. World Health Statistics 2011
Nursing and midwifery personnel (number)	465662	2000-2010	WHO. World Health Statistics 2011
Infant mortality rate (per 1,000 live births)	27	2010	UNICEF. Child mortality database ( <a href="http://www.childinfo.org/mortality_imrcountrydata.php">http://www.childinfo.org/mortality_imrcountrydata.php</a> ) accessed on 01 December 2011
Under-5 mortality rate (per 1,000 live births)	35	2010	UNICEF. Child mortality database ( <a href="http://www.childinfo.org/mortality_ufrcountrydata.php">http://www.childinfo.org/mortality_ufrcountrydata.php</a> ) accessed on 01 December 2011
Income level	Lower middle income	2011	World Bank. World Development Indicators database
GNI per capita, Atlas method (current US\$)	2580	2010	World Bank. World Development Indicators database
Total health expenditure per capita (USD)	51	2008	WHO. World Health Statistics 2011
ODA commitments in health sector (Current US\$ millions)	175	2009	.OECD
ODA commitments in all sectors (Current US\$ millions)	3770	2009	.OECD
Human development index	medium	2011	UNDP. Human development index ( <a href="http://hdr.undp.org/en/media/HDR_2011_EN_Table1.pdf">http://hdr.undp.org/en/media/HDR_2011_EN_Table1.pdf</a> ) accessed on 01 December 2011
Tuberculosis	Estimate	Year	Source
TB prevalence, all forms (number)	690000	2010	.WHO. Global Tuberculosis Control report 2011
TB prevalence, all forms (rate per 100,000 population)	289	2010	.WHO. Global Tuberculosis Control report 2011
TB incidence, all forms (number)	450000	2010	.WHO. Global Tuberculosis Control report 2011
TB incidence, all forms (per 100,000)	189	2010	.WHO. Global Tuberculosis Control report 2011
TB mortality, all forms excl HIV (number)	64000	2010	.WHO. Global Tuberculosis Control report 2011
TB mortality, all forms excl HIV (per 100,000)	27	2010	.WHO. Global Tuberculosis Control report 2011
TB treatment success rate (%)	91	2009	.WHO. Global Tuberculosis Control report 2011
DALYs ('000), Tuberculosis	2562	2004	WHO. ( <a href="http://www.who.int/healthinfo/global_burden_disease/gbddeathdalycountryestimates2004.xls">http://www.who.int/healthinfo/global_burden_disease/gbddeathdalycountryestimates2004.xls</a> ) accessed on 01 December 2011
New smear-positive TB cases detected and treated	1096716	2012	Global Fund-supported programs, mid 2012 results

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

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## 1.5. Conditions Precedent

CP #	CP Type	Condition Precedent	Functional Area	Tied To	Terminal Date	Is currently met?	Comments
1	Condition Precedent	<p>The transfer of Grant funds from the Global Fund to the Principal Recipient or use by the Principal Recipient of Grant funds to finance training activities for the entire Implementation Period is subject to the satisfaction of the following conditions:</p> <p>a. the delivery by the Principal Recipient to the Global Fund of a costed training plan relating to training activities to be conducted for such period (the "Detailed Training Plan and Budget"). This plan shall be in line with the Global Fund's Budgeting Guidelines (Module 7) and shall demonstrate that no duplication of training activities will occur, that these activities are linked to the Program's objectives and that cash transactions related to cost of logistics and per diem are limited whenever possible; and</p> <p>b. the written approval by the Global Fund of the Detailed Training Plan and Budget.</p>	Finance	Disbursement		In Progress	The PR submitted the training plan and detailed budget for the Global Fund review on 23 May 2014. The PR has been informed to not use the funds against training activities unless the training plan is approved except the two training activities approved by the Global Fund through email on 14 April 2014.
1	Special Condition	1. The use of Grant funds to finance the procurement of technical and/or management assistance consultancy services throughout the Program Term, is subject to the Principal Recipient delivering draft terms of reference, in form and substance satisfactory to the Global Fund, for each proposed consultancy assignment, together with justification and documentation to support the transparent selection of consultants and a detailed budget for such services.	Finance	Procurement		In Progress	The PR has submitted the TA plan which is under review of the LFA. The PR has been informed to not use the funds for activities related to the Technical Assistance unless these are explicitly approved by the Global Fund.

## 2. Key Grant Performance Information

### 2.1. Program Impact and Outcome Indicators

Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028

**Goal 1** To decrease morbidity/mortality caused by tuberculosis and to interrupt the chain of transmission of tuberculosis so that it is no longer a public health problem in entire population of Indonesia.

Impact indicator	TB prevalence rate													
	Baselines													
	Value							Year						
	281							2011						

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
Target	272	266	254												
Result															
Data source of Results															

Impact indicator	TB mortality rate													
	Baselines													
	Value							Year						
	27							2011						

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
Target	27	27	27												
Result															
Data source of Results															

**Goal 2 Improve access to quality DOTS services by expanding community networks and strengthening health systems in order to reduce morbidity and mortality of TB and MDR-TB.**

Outcome indicator	Case notification rate (per 100,000 population), all forms of TB (i.e. bacteriologically confirmed + clinically diagnosed)										Baselines				
											Value	Year			
											135	2012			

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
Target	149	156	164												
Result															
Data source of Results															

Outcome indicator	Case notification rate (per 100,000 population), bacteriologically confirmed TB										Baselines				
											Value	Year			
											82	2012			

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
Target	86	88	90												
Result															
Data source of Results															

Outcome indicator	Treatment success rate – bacteriologically confirmed TB										Baselines				
											Value	Year			
											88%	2012			

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
Target	N: D: P: 90%	N: D: P: 90%	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: %	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: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Data source of Results															

Outcome indicator	Treatment success rate - MDR-TB										Baselines				
											Value	Year			
											71.2% (100/140) (2010 cohort)	2013			

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
Target	N: 359 D: 479 P: 75%	N: 326 D: 435 P: 75%	N: 1,350 D: P: 75%	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: %	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: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Data source of Results															

#### 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.14 30.Jun.14	01.Jul.14 31.Dec.14	01.Jan.15 30.Jun.15	01.Jul.15 31.Dec.15	01.Jan.16 30.Jun.16	01.Jul.16 31.Dec.16	01.Jan.17 30.Jun.17	01.Jul.17 31.Dec.17

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

**Objective 1 - To pursue quality DOTS expansion and enhancement through improved case detection, provision of patient support, uninterrupted drug supply and strengthened supervision and monitoring evaluation**

**High Quality DOTS**

**Indicator 1.1 - Number of hospitals with reduction of drop out rate at least 10% after having signed agreement for CSO support**

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

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target		48			96			
Result								

**Community TB care**

**Indicator 1.2 - Number of suspected TB cases referred by trained community cadres**

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	28990	2012	N	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	16,804	37,809	19,850	39,700	20,842			
Result								

**Indicator 1.3 - Number and percentage of patients with bacteriologically confirmed TB successfully treated out of TB patients referred by community cadres**

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	5276/80 432 7%	2012	Top 10 Equ.	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	N: 3,243 D: 46,323 P: 7%	N: 6,485 D: 92,645 P: 7%	N: 3,405 D: 48,639 P: 7%	N: 6,809 D: 97,278 P: 7%	N: 3,575 D: 51,071 P: 7%	N: D: P: %	N: D: P: %	N: D: P: %
Result								

**Indicator 1.4 - Number and percentage of patients with bacteriologically confirmed TB successfully treated out of TB patients referred by community cadres**

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	976/109 6 89%	2011	Top 10 Equ.	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	N: 1,935 D: 2,150 P: 90%	N: 3,870 D: 4,300 P: 90%	N: 2,032 D: 2,257 P: 90%	N: 4,063 D: 4,515 P: 90%	N: 2,133 D: 2,370 P: 90%	N: D: P: %	N: D: P: %	N: D: P: %
Result								



## 2.2.3. Cumulative Progress To Date

Reporting not due yet

<b>Objective 1</b>	To pursue quality DOTS expansion and enhancement through improved case detection, provision of patient support, uninterrupted drug supply and strengthened supervision and monitoring evaluation								
<b>SDA</b>	High Quality DOTS								
<b>Indicator 1.1 - Number of hospitals with reduction of drop out rate at least 10% after having signed agreement for CSO support</b>									
	<b>Target</b>		<b>Result</b>		0%	30%	60%	90%	100%
	<b>Period</b>	<b>Value</b>	<b>Period</b>	<b>Value</b>					
No Level	N/A		N/A	Not Found					Cannot Calculate

<b>SDA</b>	Community TB care								
<b>Indicator 1.2 - Number of suspected TB cases referred by trained community cadres</b>									
	<b>Target</b>		<b>Result</b>		0%	30%	60%	90%	100%
	<b>Period</b>	<b>Value</b>	<b>Period</b>	<b>Value</b>					
No Level	1	16,804	N/A	Not Found					0%

<b>Indicator 1.3 - Number and percentage of patients with bacteriologically confirmed TB successfully treated out of TB patients referred by community cadres</b>									
	<b>Target</b>		<b>Result</b>		0%	30%	60%	90%	100%
	<b>Period</b>	<b>Value</b>	<b>Period</b>	<b>Value</b>					
No Level	1	N: 3,243 D: 46,323 P: 7 %	N/A	Not Found					0%

<b>Indicator 1.4 - Number and percentage of patients with bacteriologically confirmed TB successfully treated out of TB patients referred by community cadres</b>									
	<b>Target</b>		<b>Result</b>		0%	30%	60%	90%	100%
	<b>Period</b>	<b>Value</b>	<b>Period</b>	<b>Value</b>					
No Level	1	N: 1,935 D: 2,150 P: 90 %	N/A	Not Found					0%

## 2.3. Financial Performance

## 2.3.1. Grant Financial Key Performance Indicators (KPIs)

<b>Grant Duration (months)</b>	30 months	<b>Grant Amount</b>	4,011,514 \$
<b>% Time Elapsed (as of end date of the latest PU)</b>	0%	<b>% disbursed by TGF (to date)</b>	48%
<b>Time Remaining (as of end date of the latest PU)</b>	30 months	<b>Disbursed by TGF (to date)</b>	1,905,934 \$
<b>Expenditures Rate (as of end date of the latest PU)</b>	0%	<b>Funds Remaining (to date)</b>	2,105,580 \$

## 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.14	01.Apr.14	01.Jul.14	01.Oct.14	01.Jan.15	01.Apr.15	01.Jul.15	01.Oct.15
Period Covered To:	31.Mar.14	30.Jun.14	30.Sep.14	31.Dec.14	31.Mar.15	30.Jun.15	30.Sep.15	31.Dec.15
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	1,001,027	2,149,328	3,182,159	4,190,363	5,659,881	6,522,244	7,450,193	8,409,962
Summary Period Budget:	1,001,027	1,148,301	1,032,831	1,008,204	1,469,518	862,363	927,949	959,769

**Expenditure Categories****Program Activities****Implementing Entities**

	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.Jan.16	01.Apr.16	01.Jul.16	01.Oct.16	01.Jan.17	01.Apr.17	01.Jul.17	01.Oct.17
Period Covered To:	31.Mar.16	30.Jun.16	30.Sep.16	31.Dec.16	31.Mar.17	30.Jun.17	30.Sep.17	31.Dec.17
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	9,600,400	10,457,215	10,457,215	10,457,215	10,457,215	10,457,215	10,457,215	10,457,215
Summary Period Budget:	1,190,438	856,815						

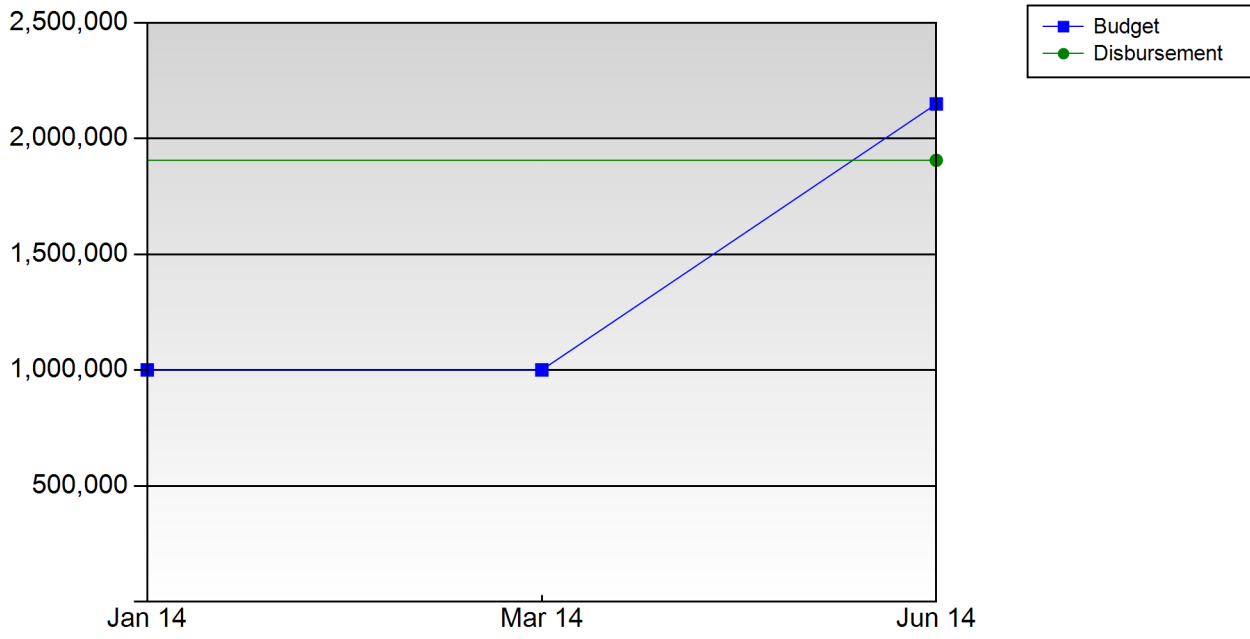
**Expenditure Categories****Program Activities****Implementing Entities****- Comments and additional information****2.3.3. Program Expenditures**

Period PU:	Actual Cash Outflow	Cumulative Budget	Cumulative Cash Outflow	Variance	Reason for variance
<b>1. Total cash outflow vs. budget</b>					
1a. PR's Total expenditure					
1b. Disbursements to sub-recipients					
1c. Expenditure Adjustments					Reason for adjustments
<b>2. Pharmaceuticals &amp; Health Product expenditures vs budget</b>					
2a. Medicines & pharmaceutical products					
2b. Health products and health equipment					

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

IND-T-AISYIYA

Last Updated on: 19 June 2014



## 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	01.Jan.14 -			1	01.Jan.14 - 31.Mar.15	4,589,400	\$ 1,905,934	19 Jun 2014	
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
<p>This is the first disbursement under the SSF grant - the grant rating under the Round 8 grant is B1. The PR has been informed through the attached management letter about GF recommendations regarding the under performance against the relevant top ten indicators.</p>				<p>The total expenditure in Semester 9 (i.e. July - December 2013) was USD 1,403,270 or 97% of the budget for the period - 1,445,308. Of this, USD 630,387 was the expenditure at PR level and USD 772,883 was disbursed to SRs.</p> <p>The negative variance of USD 140,144 at PR level (expenditure of USD 630,387 vs. budget of USD 490,243) was mainly due to:</p> <ul style="list-style-type: none"> <li>• Realisation of previous semester carry forward and obligation amounting to USD 199,254</li> <li>• Expenditure of close-out plan activity (using approved CoP budget) amounting to USD 138,747</li> <li>• Expenditure from SR's current and previous obligation/carry forward budget amounting to USD 33,637</li> <li>• Expenditure based on approved reprogramming amounting to USD 20,422</li> <li>• Under absorption (i.e. 78%) of PR's current semester budget totaling to USD 107,846 (USD 382,397 - USD 490,243) due to the following:             <ol style="list-style-type: none"> <li>1. Under absorption totaling USD 141,054 mainly due to the following:                 <ul style="list-style-type: none"> <li>• Unutilized budget for "Training on Program/Project Management &amp; Fundraising Strategy for Community TB Support Group / CBO.</li> <li>• Unutilized budget for "National Evaluation Meeting for NGHHS"</li> <li>• Under absorption of printed media and radio budget.</li> <li>• Unutilized budget for "Reporting/Recording Forms (A,B,C,D)".</li> <li>• Unutilized budget related to "Donor/CSR Meeting with Community TB Support Group/CBO".</li> <li>• Under absorption of "International / Regional Training" budget</li> <li>• Under absorption of "Leaflet" budget</li> </ul> </li> <li>2. over absorption totaling USD 33,208 mainly due to the following:                 <ul style="list-style-type: none"> <li>• Over absorption of television budget</li> <li>• Over absorption of "External auditor"</li> </ul> </li> </ol> </li> <li>• Under absorption totaling USD 144,070 due to gain in foreign exchange;</li> </ul> <p>At SR level, the disbursed amount was 81% of the budget for the period - USD 772,883 vs. USD 955,065. The variance of USD 182,182 was mainly due to the fact that there was remaining cash at SR level from the previous period, hence the lower disbursement.</p> <p>Cumulatively, the cash outflow for the grant is USD 11,577,568 or 83% of the cumulative budget of USD 13,924,953. The variance of USD 2,347,385 is mostly at SR level (USD 2,004,287) and is due to underspending mostly in the area of training and meetings.</p>					

## 2.5. Contextual Information

Title	Explanatory Notes

## 2.6. Phase 2/ Periodic Review Grant Renewal

Performance Rating	Recommendation Category
Rationale for Phase 2/ Periodic Review Recommendation Category	
Rationale for Phase 2/ Periodic Review Recommendation Amount	

**Time-bound Actions**

**Issues**

**Description**

Issues	Description

