

General Grant Information

Country	Indonesia				
Grant Number	IND-102-G01-T-00	Component	Tuberculosis	Round	1
Grant Title	Strengthening DOTS Expansion in Indonesia				
Principal Recipient	Directorate of Directly Transmitted Disease Control of the Ministry of Health of the Government of The Republic of Indonesia				
Total Lifetime Budget	\$ 51,766,003	Phase 1 Grant Amount	\$ 21,612,265	Phase 2 Grant Amount	\$ 30,153,738
Grant Start Date	01 Aug 2003	Phase 1 End Date	31 Jul 2005	Phase 2 End Date	31.Jul.08
Disbursed Amount	\$ 51,766,003	% of Grant Amount	100%	Latest Rating	B1
Time Elapse (at the end of the latest reporting period)	70 months	% of Grant Duration	117%	Proposal Lifetime	60 months

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1. Program Description and Contextual Information

1.1. Program Description Summary

Indonesia has the third highest TB burden in the world after India and China. The program supported by this grant aims to decrease TB-related illness and death and to interrupt the chain of transmission so that TB is no longer a public health problem among the entire population of Indonesia. Grant monies are being used to promote DOTS; establish a management system at the province and district levels; enhance the capability of health staff units to implement DOTS; and to build partnerships with professional and nongovernmental organizations to introduce DOTS to hospitals, lung clinics and private medical practices.

1.2. Country Latest Statistics

Background and Health Spending	Estimate	Year	Source
(Total population (in 1000s	232,517	2010	United Nations. World Population Prospects: .The 2008 Revision
(Pop age 0-4 (in 1000s	20,560	2010	United Nations. World Population Prospects: .The 2008 Revision
(Pop age 15-49 (in 1000s	129,084	2010	United Nations. World Population Prospects: .The 2008 Revision
(\$GNI per capita, Atlas method (current US	1,650	2007	World Bank. World Development Indicators database (http://devdata.worldbank.org/data-query/) accessed on November 17, 2008
Income level	Lower middle income	2007	World Bank. World Development Indicators database (http://devdata.worldbank.org/data-query/) accessed on November 17, 2008
(Under-5 mortality rate (per 1000	34	2006	WHO. World Health Statistics 2008 (http://www.who.int/whosis/whostat/EN_WHS08_Full.pdf) accessed on 30 May 2008
(Physicians (number	29,499	2003	WHO. World Health Statistics 2008 (http://www.who.int/whosis/whostat/EN_WHS08_Full.pdf) accessed on 30 May 2008
(Nursing and midwifery personnel (number	179,959	2003	WHO. World Health Statistics 2008 (http://www.who.int/whosis/whostat/EN_WHS08_Full.pdf) accessed on 30 May 2008
(Total health expenditure per capita (USD	26	2005	WHO. World Health Statistics 2008 (http://www.who.int/whosis/whostat/EN_WHS08_Full.pdf) accessed on 30 May 2008
(Human Development Index (HDI	Medium	2006	UNDP. Human Development Indices: A statistical update 2008 (http://hdr.undp.org/en/media/HDI_2008_EN_Content.pdf) accessed on 30 March 2009
Tuberculosis	Estimate	Year	Source
(TB prevalence, all forms (number	565,614	2007	WHO. Global tuberculosis control: epidemiology, strategy, financing: WHO report .2009
(TB incidence, all forms (number	528,063	2007	WHO. Global tuberculosis control: epidemiology, strategy, financing: WHO report .2009
(TB mortality, all forms (number	91,368	2007	WHO. Global tuberculosis control: epidemiology, strategy, financing: WHO report .2009
(TB incidence, smear-positive (number	236,029	2007	WHO. Global tuberculosis control: epidemiology, strategy, financing: WHO report .2009
New smear-positive TB cases detected and treated	627,629	end 2009	Global Fund-supported programs, end 2009 results

1.3. Comments on Key Discrepancies between Approved Proposal and Grant

N/A.

1.4. Initial PR Assessments

Assessment Area	Rating	Summary of Recommendations/Action Required and Taken
Background Analysis	x	Not applicable for this round 1 grant
Financial Management and Systems	B2	Capacity gaps pose some manageable risks and certain strengthening measures must be completed before the first disbursement
Institutional and Programmatic	B2	Capacity gaps pose some manageable risks and certain strengthening measures must be completed before the first disbursement
Procurement and Supply Management	B2	Capacity gaps pose some manageable risks and certain strengthening measures must be completed before the first disbursement
Monitoring and Evaluation	B2	Capacity gaps pose some manageable risks and certain strengthening measures must be completed before the first disbursement
Overall	B2	Capacity gaps pose some manageable risks and certain strengthening measures must be completed before the first disbursement

1.5. Conditions Precedent

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CP #	Condition Precedent	CP Type	Tied To	Terminal Date	Is currently met?	Comments
	<p>a. Before first disbursement under the Grant, the Principal Recipient shall, except as the Parties may otherwise agree in writing, furnish to the Global Fund, in form and substance satisfactory to the Global Fund:</p> <p>i. A statement confirming the bank account into which Grant funds will be disbursed and from which the Principal Recipient shall draw funds to implement the Program;</p> <p>ii. A letter signed by the Authorized Representative of the Principal Recipient setting forth the name, title and authenticated specimen signature of each person authorized to sign disbursement requests under Article 1 of the Standard Terms and Conditions of this Agreement and, in the event a request for disbursement may be signed by more than one person, the conditions under which each may sign;</p> <p>iii. Evidence that the Government of the Republic of Indonesia will accord the exemptions from taxes and duties specified in Section I of this Agreement;</p> <p>iv. Identification of appropriate key staff of the Principal Recipient and at the provincial and district levels necessary to implement the Program; a statement of the roles and responsibilities of such staff; and a statement of the criteria for engaging individuals to fill the key staff positions.</p> <p>v. Evidence of the establishment of appropriate mechanisms and evaluation criteria to assess the readiness of the Sub-Recipients to receive and account for Grant funds and to implement Program activities;</p> <p>vi. Evidence of the formal establishment of the organizational structure of Principal Recipient as planned; and</p> <p>vii. A statement of the financial and accounting policies and procedures (including but not limited to procedures for bank reconciliation, chart of account, and cash management) that will apply to the Program.</p>		Disbursement	15.Feb.03	In Progress	
	<p>b. The terminal date for meeting the conditions specified in Section C.5.a is the date specified in block 6A of the face sheet of this Agreement. If the conditions precedent in Section C.5.a have not been met by the stated terminal date, the Global Fund, at any time, may terminate this Agreement by written notice to the Principal Recipient</p>		Other	15.Feb.03	In Progress	

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CP #	Condition Precedent	CP Type	Tied To	Terminal Date	Is currently met?	Comments
	<p>c. Prior to disbursement of Grant funds for procurement of goods and services (except for administrative services in support of the Program), the Principal Recipient shall, except as the Parties may otherwise agree in writing,</p> <p>i. furnish to the Global Fund, in form and substance satisfactory to Global Fund, a plan for monitoring the performance and sustainability of the procurement and supply management systems (the monitoring plan should include tracking of procurement prices, distribution costs, additionality of Global Fund resources to domestic and other international sources, and other measures of procurement and supply system performance and sustainability); and</p> <p>ii. undergo a satisfactory procurement and supply management assessment conducted and approved by the Global Fund.</p>		Multiple Disbursements	15.May.03	Yes	
	<p>d. The terminal date for meeting the conditions specified in Section C.5.c is the date specified in block 6B of the face sheet of this Agreement. If the conditions precedent in Section C.5.c have not been met by the stated terminal date, the Global Fund, at any time, may terminate this Agreement by written notice to the Principal Recipient</p>		Other	15.May.03	Yes	
	<p>e. Unless the Global Fund advises the Principal Recipient otherwise in writing, the Principal Recipient will furnish all items required under this section of the Agreement to the Global Fund and shall ensure that members of the Country Coordinating Mechanism receive copies of the items. The Global Fund will promptly notify the Principal Recipient when the Global Fund has determined that a condition precedent has been met.</p>		Other	15.May.03	Yes	
	<p>Not later than 45 days after the close of each quarter of the Principal Recipient's fiscal year, the Principal Recipient shall submit to the Global Fund, in form and substance satisfactory to the Global Fund, a periodic report on the Program. The report shall reflect (i) financial activity during the quarter in question and cumulatively from the beginning of the Program until the end of the reporting period, using the line items set forth in the Program budget in Annex A; and (ii) a description of progress towards achieving the agreed-upon milestones set forth in Annex A. The Principal Recipient shall explain in the report any variance between planned and actual achievements for the period in question.</p>		Other		Yes	

2. Key Grant Performance Information

2.1. Program Goals, Impact and Outcome Indicators

Goal 1	To reduce morbidity/mortality caused by Tuberculosis and also interrupt the chain of transmission so that Tuberculosis is no longer a public health problem among the entire population of Indonesia (over 200 million people)
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Impact indicator	Estimated number of all active TB cases per 100,000 population (Note that for year 1 the estimation is based on WHO, and from year 2 to 5 are based on Prevalence Survey 2004.							Baselines			
								Value	Year		
								119	2004		
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	
Target	272	119	119	115	113						
Result				105	98						

Outcome indicator	Percentage of new smear-positive TB cases detected under DOTS divided by estimated number of new smear-positive TB cases countrywide.							Baselines			
								Value	Year		
								29.5%	2002		
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	
Target	50%	60%	70%	>70%	>70%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	
Result	N: D: P: %	N: D: P: %	70	67.29	N: 164,096 D: 230,057 P: 71%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	

Outcome indicator	Percentage of new-smear positive pulmonary TB cases that were cured plus the number that completed treatment divided by total number of new smear-positive pulmonary TB cases registered during a specified period.							Baselines			
								Value	Year		
								86%	2003		
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	
Target	>87%	>88%	>88%	>89%	>89%						
Result	N: D: P: %	N: D: P: %	91	88.83	N: 156,056 D: 175,344 P: 89%	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.Aug.03 31.Oct.03	01.Nov.03 31.Jan.04	01.Feb.04 30.Apr.04	01.May.04 31.Jul.04	01.Aug.04 31.Oct.04	01.Nov.04 31.Jan.05	01.Feb.05 30.Apr.05	01.May.05 31.Jul.05
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
N/A	01.Aug.05 31.Dec.05	01.Jan.06 30.Jun.06	01.Jul.06 31.Dec.06	01.Jan.07 30.Jun.07	01.Jul.07 31.Dec.07	01.Jan.08 31.Jul.08	01.Aug.08 30.Sep.08	01.Oct.08 28.Feb.09

2.2.2. Program Objectives, Service Delivery Areas and Indicators

Objective 1 - Achieving a treatment regimen success rate of more than 85% among new smear positive cases beginning in 2003

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Treatment: Timely detection and quality treatment of cases

Indicator 1.1 - Number of and percentage of new sputum smear positive who converted to sputum smear negative after taking intensive treatment for 2 months.

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)								
	Value	Year										
Level 3-People reached	88%	2004	N	N								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8				
Target	3,250	7,215	13,058	19,608	28,016	38,866	49,862	60,917				
Result	3,538	7,913	14,351	21,762	31,094	42,916	54,970	80,698				
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16				
Target	N: 22,537 D: 28,171 P: 80%	N: 90,992 D: 113,740 P: 80%	N: 159,446 D: 199,308 P: 80%	N: 66,732 D: 83,415 P: 80%	N: 133,464 D: 166,830 P: 80%	N: 78,851 D: 98,654 P: 80%	N: 21,898 D: 27,372 P: 80%	N: D: P: %				
Result	N: 30,374 D: 35,134 P: 87%	N: 62,315 D: 75,171 P: 83%	N: 120,834 D: 141,993 P: 85%	N: 78,548 D: 92,123 P: 85%	N: 143,892 D: 168,059 P: 86%	N: 65,826 D: 76,998 P: 86%	N: 35,433 D: 43,265 P: 82%	N: 31,995 D: 37,376 P: 86%				
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24				
Target	N: 32,162 D: 40,203 P: 80%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %				
Result	N: 38,179 D: 43,836 P: 87%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %				

Indicator 1.2 - Number and percentage of new sputum smear positive who were cured and completed treatment within a 12 month period .

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)								
	Value	Year										
Level 3-People reached	80%	2001	Y	N								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8				
Target	3,472	7,047	10,218	14,731	21,020	29,929	38,093	48,235				
Result	3,767	7,608	11,046	15,971	22,780	31,821	40,637	64,237				
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16				
Target	N: 18,288 D: 21,515 P: 85%	N: 28,734 D: 33,805 P: 85%	N: 28,734 D: 33,805 P: 85%	N: 70,558 D: 83,010 P: 85%	N: 151,116 D: 166,020 P: 91%	N: 82,719 D: 97,317 P: 85%	N: 20,148 D: 22,639 P: 89%	N: 66,679 D: 74,921 P: 89%				
Result	N: 29,333 D: 32,804 P: 89%	N: 30,563 D: 36,101 P: 85%	N: 54,434 D: 61,905 P: 88%	N: 76,258 D: 84,210 P: 91%	N: 156,745 D: 172,269 P: 91%	N: 76,246 D: 88,608 P: 86%	N: 29,167 D: 34,723 P: 84%	N: 31,582 D: 37,286 P: 85%				
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24				
Target	N: 52,200 D: 58,653 P: 89%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %				
Result	N: 33,139 D: 39,997 P: 83%	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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Treatment: Systematic monitoring of performance in case management

Indicator 1.7 - Number of district and province submitting timely and complete report

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
Level 2-Service Points supported	8 prov., 110 Dist.	2003	N	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	8 Prov 110 Dist.	8 Prov 110 Dist.	8 Prov 110 Dist.	16 Prov. 158 Dist.	19 Prov. 194 Dist.	20 Prov. 230 Dist.	20 Prov. 240 Dist.	20 Prov. 240 Dist.
Result	8 Prov. 110 Dist.	8 Prov. 110 Dist.	9 Prov. 110 Dist.	16 Prov. 158 Dist.	19 Prov. 194 Dist.	20 Prov. 230 Dist.	20 Prov. 228 Dist.	20/228

	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	25 Prov. 295 Dist.	25 Prov. 295 Dist..	25 Prov. 295 Dist.	33 Prov. 444 Dist.	33 Prov. 444 Dist.	33 Prov. 444 Dist.	33 Prov. 444 Dist.	33 Prov. 444 Dist.
Result	24 Prov. 145 Dist.	25 Prov. 198 Dist.	29 Prov. 223 Dist.	0	0	0 provinces 213 districts	2 provinces 228 districts	4 prov. 176 Dis

	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24
Target	33 Prov 444 Dist.							
Result	14 Prov. 225 Dist.							

Treatment: Control of drug resistance

Indicator 1.8 - Number and percentage of cases who failed compared to total number of cases treated

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
Level 3-People reached	4%	2003	N	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	N: 204 D: 4,085 P: 5%	N: 414 D: 8,291 P: 5%	N: 610 D: 12,021 P: 5%	N: 866 D: 17,330 P: 5%	N: 1,236 D: 24,729 P: 5%	N: 1,760 D: 35,210 P: 5%	N: 2,240 D: 44,815 P: 5%	N: D: P: %
Result	134/ 4085	327/ 8291	489/ 12021	709/ 17330	1,001/ 24537	1427/ 34876	1879/ 44650	3130/70591

	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	N: 1,076 D: 21,515 P: 5%	N: 1,690 D: 33,805 P: 5%	N: 1,690 D: 33,805 P: 5%	N: 4,151 D: 83,010 P: 5%	N: 8,302 D: 83,010 P: 10%	N: 4,866 D: 97,317 P: 5%	N: 1,132 D: 22,639 P: 5%	N: D: P: %
Result	N: 1,789 D: 32,804 P: 6%	N: 2,915 D: 68,905 P: 4%	N: 5,912 D: 130,810 P: 5%	N: 4,062 D: 84,210 P: 5%	N: 8,420 D: 172,269 P: 5%	N: 4,087 D: 88,608 P: 5%	N: 938 D: 34,723 P: 3%	N: D: P: %

	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24
Target	N: 2,933 D: 58,653 P: 5%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: 897 D: 39,997 P: 2%	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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Prevention: Identification of Infectious Cases

Indicator 1.9 - Number of new smear positive TB cases detected among the total estimated number of new smear positive cases per year.

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)								
	Value	Year										
Level 3-People reached	5115/60651	2003	Y	N								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8				
Target	N: 6,329 D: 60,651 P: 10%	N: 12,658 D: 60,651 P: 21%	N: 18,987 D: 60,651 P: 31%	N: 28,085 D: 60,651 P: 46%	N: 12,088 D: 80,586 P: 15%	N: 24,176 D: 80,856 P: 30%	N: D: P: %	N: 48,352 D: 80,586 P: 60%				
Result	5115/ 60651	12449/ 60/651	19322/ 60651	28463/ 60651	13308/ 80586	27388/ 80586	40867/ 80586	54674/ 80586				
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16				
Target	N: 28,171 D: 96,586 P: 29%	N: 113,740 D: 341,068 P: 33%	N: 199,308 D: 341,068 P: 58%	83,415	166,830	98,864	27,372					
Result	N: 36,477 D: 96,586 P: 38%	N: 76,675 D: 341,068 P: 23%	N: 144,766 D: 341,068 P: 42%	88,085	159,353	82,305	37,239					
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24				
Target	40,203											
Result	40,842											

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Objective 2 - Providing comprehensive support, including uninterrupted supply of drugs to implement DOTS in resource-poor settings**Supportive Environment: Health systems strengthening**

Indicator 2.2 - Number of health center staff (doctors & paramedics), laboratory technicians and hospital staff (doctors and paramedics) trained.

	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		
Level 1-People trained	749	2002	Y	Y										
Target	380	895	1,108	1,621	2,557	3,347	4,102	4,102						
Result	374	723	861	1,241	1,870	2,720	3,422	6,323						
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16						
Target	6,099	9,181	12,262	13,521	14,779	16,419	16,419	16,419						
Result	8,058	9,729	10,762	11,002	11,062	11,262	11,730	13,840						
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24						
Target	16,419													
Result	14,551													

Indicator 2.5 - Number of district, province and central supervisor trained on drugs management

	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		
Level 1-People trained	18	2004	Y	Y										
Target				18	33	48	193	338						
Result	N/A	N/A	N/A	18	33	111	111	111						
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16						
Target	338	374	410	446	482	554	554	554						
Result	131	173	173	173	173	257	553	1,010						
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24						
Target	554													
Result	1,116													

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

Indicator 2.6 - Number of NGO and other institution involved in IEC and community mobilization activities linked to DOTS.

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
Level 2-Service Points supported	5	2007	N	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	4	6	6	7	7	7	9	10
Result	4	4	6	7	8	11	11	13

	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	15	16	16	70	70	75	75	
Result	15	35	36	37	36	36	36	

	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24
Target	75							
Result	36							

Indicator 2.8 - Number of DOTS treatment observers trained from the NGO and other sectors.

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
Level 1-People trained	204	2004	Y	Y

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target		204	204	204	900	1,100	1,300	1,500
Result	N/A	204	204	204	1,332	1,534	1,534	1,710

	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	1,600	1,850	2,100	2,450	2,800	3,500	3,500	3,500
Result	1,710	1,710	1,710	1,710	1,710	1,710	1,710	3,803

	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24
Target	3,500							
Result	4,062							

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Supportive Environment: Procurement and supply management capacity and building

Indicator 2.9 - Number of health center with no stock out TB drugs and laboratory supplies

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
Level 2-Service Points supported	1918	2003	N	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	1,918	1,918	1,918	2,212	2,741	3,000	3,300	3,300
Result	1,918	1,918	1,918	2,212	3,462	3,492	3,492	3,492

	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	N: 3,937 D: 3,937 P: 100%	N: 3,937 D: 3,937 P: 100%	N: 3,937 D: 3,937 P: 100%	N: 7,465 D: 7,465 P: 100%	N: 7,465 D: 7,465 P: 100%	N: 7,465 D: 7,465 P: 100%	N: 7,800 D: 7,800 P: 100%	N: 7,800 D: 7,800 P: 100%
Result	N: 1,373 D: 3,937 P: 35%	N: 3,908 D: 3,937 P: 99%	N: 6,814 D: 3,937 P: 173%	N: 2,065 D: 7,465 P: 28%	N: 4,085 D: 7,465 P: 55%	N: 5,921 D: 7,465 P: 79%	N: 5,921 D: 7,465 P: 79%	N: 5,562 D: 7,800 P: 71%

Indicator 2.10 - Number of hospitals with no stock out TB drugs and laboratory supplies

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
Level 2-Service Points supported	82	2004	N	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	N: D: P: %	N: D: P: %	N: D: P: %	N: 82 D: 533 P: 15%	N: 100 D: 533 P: 19%	N: 140 D: 533 P: 26%	N: D: P: %	N: 150 D: 533 P: 28%
Result	N/A	N/A	N/A	82	135/533	179/533	179/533	179/533

	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	N: 189 D: 533 P: 36%	N: 189 D: 533 P: 36%	N: 189 D: 533 P: 36%	N: 212 D: 1,145 P: 19%	N: 235 D: 1,145 P: 21%	N: 235 D: 1,145 P: 21%	N: 250 D: 1,430 P: 18%	N: 250 D: 1,430 P: 18%
Result	N: 120 D: 1,145 P: 11%	N: 275 D: 1,145 P: 24%	N: 458 D: 1,145 P: 40%	N: 154 D: 1,145 P: 13%	N: 255 D: 1,145 P: 22%	N: 429 D: 1,145 P: 38%	N: 429 D: 1,145 P: 38%	N: 473 D: 1,430 P: 33%

	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24
Target	N: 250 D: 1,430 P: 18%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: 440 D: 1,430 P: 31%	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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Objective 3 - Expanding and improving current activities to achieve World Health Organization global targets for tuberculosis control by 2005**Care and Support: Supporting patients through direct observation of treatment**

Indicator 3.1 - Number of all form TB cases (new sputum smear positive, sputum smear negative, relapse & extra pulmonary) registered having DOTS

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)								
	Value	Year										
Level 3-People reached	27,278	2002	N	N								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8				
Target	11,392	22,784	34,175	50,551	72,633	96,453	120,897	147,546				
Result	7,842	17,767	26,971	39,166	57,479	77,102	95,753	140,656				
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16				
Target	43,464	108,660	173,856	150,146	300,292	177,415	54,744	80,000				
Result	51,439	109,836	214,896	92,473	273,262	145,562	67,408	72,152				
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24				
Target	80,406											
Result	72,152											

Indicator 3.2 - Number of village implementing community based approach in DOTS strategy

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)								
	Value	Year										
Level 2-Service Points supported	N/A	N/A	N	N								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8				
Target	N/A	N/A	N/A	N/A	160	160	160	190				
Result	N/A	N/A	N/A	N/A	162	162	162	212				
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16				
Target	200	250	250	380	400	655	685	715				
Result	341	355	642	682	655	667	703	703				
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24				
Target	755											
Result	703											

2.2.3. Cumulative Progress To Date

Latest reporting due period : 17 (01.Mar.09 - 31.May.09)

Objective 1 Achieving a treatment regimen success rate of more than 85% among new smear positive cases beginning in 2003

SDA Treatment: Timely detection and quality treatment of cases

Indicator 1.1 - Number of and percentage of new sputum smear positive who converted to sputum smear negative after taking intensive treatment for 2 months.

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
Level 3-People reached	17	N: 32,162 D: 40,203 P: 80 %	17	N: 38,179 D: 43,836 P: 87.1 %						109%

Indicator 1.2 - Number and percentage of new sputum smear positive who were cured and completed treatment within a 12 month period .

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
Level 3-People reached	17	N: 52,200 D: 58,653 P: 89 %	17	N: 33,139 D: 39,997 P: 82.9 %						93%

SDA Treatment: Systematic monitoring of performance in case management

Indicator 1.7 - Number of district and province submitting timely and complete report

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
Level 2-Service Points supported	17	33 Prov 444 Dist.	17	14 Prov. 225 Dist.						Cannot Calculate

SDA Treatment: Control of drug resistance

Indicator 1.8 - Number and percentage of cases who failed compared to total number of cases treated

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
Level 3-People reached	17	N: 2,933 D: 58,653 P: 5 %	17	N: 897 D: 39,997 P: 2.2 %						44%

SDA Prevention: Identification of Infectious Cases

Indicator 1.9 - Number of new smear positive TB cases detected among the total estimated number of new smear positive cases per year.

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
Level 3-People reached	17	40,203	17	40,842						102%

Objective 2	Providing comprehensive support, including uninterrupted supply of drugs to implement DOTS in resource-poor settings
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SDA	Supportive Environment: Health systems strengthening
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Indicator 2.2 - Number of health center staff (doctors & paramedics), laboratory technicians and hospital staff (doctors and paramedics) trained.
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	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 1-People trained	17	16,419	17	14,551						89%

Indicator 2.5 - Number of district, province and central supervisor trained on drugs management
--

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 1-People trained	17	554	17	1,116						120%

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

Indicator 2.6 - Number of NGO and other institution involved in IEC and community mobilization activities linked to DOTS.
--

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 2-Service Points supported	17	75	17	36						48%

Indicator 2.8 - Number of DOTS treatment observers trained from the NGO and other sectors.

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 1-People trained	17	3,500	17	4,062						116%

SDA	Supportive Environment: Procurement and supply management capacity and building
------------	--

Indicator 2.9 - Number of health center with no stock out TB drugs and laboratory supplies

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 2-Service Points supported	16	N: 7,800 D: 7,800 P: 100 %	16	N: 5,562 D: 7,800 P: 71.3 %						71%

Indicator 2.10 - Number of hospitals with no stock out TB drugs and laboratory supplies
--

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 2-Service Points supported	17	N: 250 D: 1,430 P: 17.5 %	17	N: 440 D: 1,430 P: 30.8 %						57%

Objective 3	Expanding and improving current activities to achieve World Health Organization global targets for tuberculosis control by 2005
--------------------	--

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

Indicator 3.1 - Number of all form TB cases (new sputum smear positive, sputum smear negative, relapse & extra pulmonary) registered having DOTS

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 3-People reached	17	80,406	17	72,152						90%

Indicator 3.2 - Number of village implementing community based approach in DOTS strategy

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 2-Service Points supported	17	755	17	703						93%

2.3. Financial Performance

2.3.1. Grant Financial Key Performance Indicators (KPIs)

Grant Duration (months)	60 months	Grant Amount	51,766,003 \$
% Time Elapsed (as of end date of the latest PU)	117%	% disbursed by TGF (to date)	100%
Time Remaining (as of end date of the latest PU)	-10 months	Disbursed by TGF (to date)	51,766,003 \$
Expenditures Rate (as of end date of the latest PU)	74%	Funds Remaining (to date)	

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.Aug.03	01.Nov.03	01.Feb.04	01.May.04	01.Aug.04	01.Nov.04	01.Feb.05	01.May.05
Period Covered To:	31.Oct.03	31.Jan.04	30.Apr.04	31.Jul.04	31.Oct.04	31.Jan.05	30.Apr.05	31.Jul.05
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	533,822	1,240,300	1,672,550	2,725,864	5,549,362	8,559,234	15,085,749	21,612,265
Summary Period Budget:	533,822	706,478	432,250	1,053,314	2,823,498	3,009,872	6,526,515	6,526,516

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.Aug.05	01.Nov.05	01.Feb.06	01.May.06	01.Aug.06	01.Nov.06	01.Feb.07	01.May.07
Period Covered To:	31.Oct.05	31.Jan.06	30.Apr.06	31.Jul.06	31.Oct.06	31.Jan.07	30.Apr.07	31.Jul.07
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	26,906,126	35,043,368	40,855,743	45,411,781	45,411,781	45,411,781	49,155,370	52,898,960
Summary Period Budget:	5,293,861	8,137,242	5,812,375	4,556,038			3,743,589	3,743,590

Expenditure Categories

Program Activities

Implementing Entities

	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.Aug.07	01.Nov.07	01.Feb.08	01.May.08	01.Aug.08	01.Nov.08	01.Feb.09	01.May.09
Period Covered To:	31.Oct.07	31.Jan.08	30.Apr.08	31.Jul.08	31.Oct.08	31.Jan.09	30.Apr.09	31.Jul.09
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	55,886,489	58,874,018	58,874,018	58,874,018	62,573,913	66,271,632	66,495,103	66,495,103
Summary Period Budget:	2,987,529	2,987,529			3,699,895	3,697,719	223,471	

Expenditure Categories

Program Activities

Implementing Entities

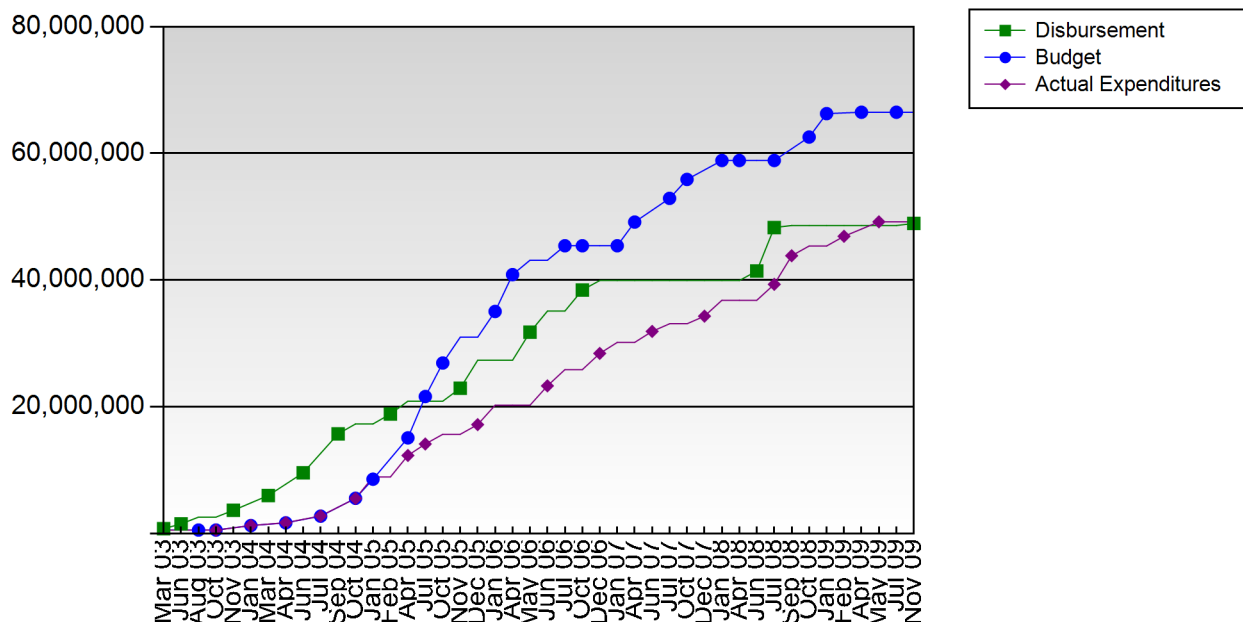
- Comments and additional information

Period 8 budget corresponds to the Phase 1 grant amount of USD 21,612,265

2.3.3. Program Expenditures

Period PU16: 01.Mar.09 - 31.May.09	Actual Expenditures	Cumulative Budget	Cumulative Expenditures	Variance	Reason for variance
1. Total actual expenditures vs. budget	\$ 2,284,118	\$ 66,495,103	\$ 49,192,909	\$ 17,302,194	
1a. PR's Total expenditure	\$ 1,329,686		\$ 24,877,593		
1b. Disbursements to sub-recipients	\$ 954,432		\$ 24,315,316		
2. Health product expenditures vs. Budget (already included in "Total Actual" above)			\$ 7,678,130		
2a. Pharmaceuticals			\$ 5,288,807		
2b. Health products, commodities and equipment			\$ 2,389,323		

2.3.4. Cumulative Program Budget, Expenditures and Disbursement to Date



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

Date Received	22.Sep.09	Expected Date	30.Jun.05
Period Covered From	01.Jan.07	To	28.Feb.09

The PR delivered its external audit report for year 2007 and 2008 (until 28 February 2009) with over a year of delay and the CCM Secretariat requested the external audits for years 2007 and 2008 and up to February 2009 to be combined in one external audit. The auditing firm, Doli, Bambang, Sudarmadji and Dadang indicated that the Statements of sources and Uses of Fund for the program from January 2007 to 28 February 2009 are presented fairly in all material aspects according to the Government Standards of Accounting.

However, the auditor pointed out at significant internal control weaknesses that could impact negatively on the financial accountability of the program. The regional team of the Secretariat informed the CCM oversight committee and requested the PR and the CCM oversight committee to design a plan of action by mid October 2009 to mitigate the exposure of TGF assets and to strengthen its internal control department.

2.4. Progress Update and Disbursement Information

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

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Progress Updates					Disbursement Information				
PU	PU Period	TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date		
0	01.Aug.03 -	N/A	1	01.Aug.03 - 31.Oct.03	1,500,000	\$ 750,000	13 Mar 2003		
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
Condition Precedent for tax exemption letter has not yet been obtained. There will be no purchases during the first 3 months, the first major purchases are planned in the 4th month. Therefore the initial programme expenditure will be mostly for training and per diem/travel reimbursements and will not incur significant tax.				Condition Precedent for tax exemption letter has not yet been obtained. There will be no purchases during the first 3 months, the first major purchases are planned in the 4th month. Therefore the initial programme expenditure will be mostly for training and per diem/travel reimbursements and will not incur significant tax.					
0	01.Aug.03 -	N/A	1.1	01.Aug.03 - 30.Oct.03		\$ 750,000	06 Jun 2003		
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
Condition Precedent for tax exemption letter has not yet been obtained. There will be no purchases during the first 3 months, the first major purchases are planned in the 4th month. Therefore the initial programme expenditure will be mostly for training and per diem/travel reimbursements and will not incur significant tax.				The PR complied with outstanding conditions and accordingly the second batch of first disbursement of US 750,000 disbursed.					
1	01.Aug.03 - 31.Oct.03		2	01.Nov.03 - 31.Jan.04	2,170,318	\$ 2,150,160	05 Nov 2003		
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
The program appears to be working quite well, but there is a capacity and resource issue which is giving cause for some concern.				Adjustment of the disbursement amount because of the understated of cash on hand balance due to gain on foreign exchange.					
2	01.Nov.03 - 31.Jan.04		3	01.Feb.04 - 30.Apr.04	2,336,949	\$ 2,336,949	12 Mar 2004		
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
Most of the previous LFA recommendations have not been acted upon.				No variance					
3	01.Feb.04 - 30.Apr.04		4	01.May.04 - 31.Jul.04	5,919,816	\$ 3,582,867	16 Jun 2004		
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
Some previous recommendations have been followed up during this quarter but further actions need to be taken.				The PR disbursement request did not take into account the \$2,336,949 that was already disbursed in the previous period.					

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PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request		Disbursement Amount	Disbursement Date
4	01.May.04 - 31.Jul.04			5	01.Aug.04 - 30.Oct.04	6,143,921		\$ 6,143,921	06 Sep 2004
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
Some significant recommendations have been followed up during this quarter but further actions need to be taken.				No variance.					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request		Disbursement Amount	Disbursement Date
5	01.Aug.04 - 30.Oct.04			6	01.Nov.04 - 31.Jan.05	3,144,662		\$ 3,144,384	01 Feb 2005
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
Most of LFA recommendations have been actioned upon.				The amount has been reduced because there was a slight error on the "cash Reconciliation Section of the six disbursement request", Part V: 1. opening of disbursement period. This section indicates an opening balance of 3,231,371, with an explanatory remark. However, the correct amount for cash reconciliation (line 7 from previous disbursement request) should be \$3,231,650. Because of this adjustment, the disbursement amount was reduced by \$279.					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request		Disbursement Amount	Disbursement Date
6	01.Nov.04 - 30.Apr.05			7	01.Feb.05 - 30.Apr.05	4,051,216		\$ 4,051,216	15 Nov 2005
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
Progress Update covers from 1 Nov 06 to 30 Apr 05.				No variance.					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request		Disbursement Amount	Disbursement Date
7	01.May.05 - 31.Jul.05		A	8	01.May.05 - 31.Jul.05	8,862,667		\$ 8,862,667	02 May 2006
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
This grant has been performing well through the end of Phase one. Of the 21 indicators, twenty indicators had an achievement of 100% or higher with one indicator achieving below 50%.				No variance.					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request		Disbursement Amount	Disbursement Date
8	01.Aug.05 - 31.Dec.05		B1						N/A
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
Most of the target indicators determined for this period have been achieved. However, several new findings noted during the LFA's review (i.e maximum limit of cash on hand at provinces exceeded the required balance, maximum limit of petty cash disbursement exceeded the allowable amount, payment transaction were not properly authorized, long outstanding advance balance, competitive bidding and vendor selection procedures in some cases are yet to be implemented, salary paid were not in accordance with the signed APW). In additions, some of the previous recommendations were not followed up and completed by the PR.									

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PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request		Disbursement Amount	Disbursement Date
9	01.Jan.06 - 30.Jun.06		B1	9	01.Jul.06 - 30.Mar.07	5,430,577		\$ 6,657,033	23 Oct 2006
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
<p>This grant is performing reasonably well, with 13 out of 21 indicators having exceeded their targets. While the grant has made improvements in terms of absorption of funds, it still behind on a cumulative basis.</p>				<p>Based on a review of the cash reconciliation and the forecast expenditures (July 2006 to March 2007) noted as follows: There were some errors in the cash reconciliation resulting in difference in the cash ending balance as at 30 June 2006 between the PR report and the LFA verification amounting to USD 393,790.47 (the PR report= USD 6,880,863.15; LFA verification= USD 7,274,653.62). The appropriate disbursement amount recommended by the LFA was calculated as follows: July to Dec 06 budget: US\$10,188,098 plus Jan to Mar 07 budget: US\$3,743,589 minus cash balance as of 30 June 2006: US\$7,274,653.62.</p>					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request		Disbursement Amount	Disbursement Date
10	01.Jul.06 - 31.Dec.06		C	10	01.Jan.07 - 30.Sep.07	3,239,642			N/A
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
<p>Disb. 10 is a disbursement request for the procurement of first line TB drug to cover a shortfall. The funds will be transferred directly to the supplier's account as indicated below (beneficiary details section). This payment includes (a) cost and supply of required items, including transport and insurance to CIP Jakarta, (b) pre-shipment inspection and laboratory analysis of all batches, and (c) handling fee of the procurement agent. The signed contract between the Principal Recipient and GTZ and LFA verification of the third party bank information are attached herewith. Out of 21 indicators, the PR exceeded the cumulative targets for 13 indicators and met more than 80% of cumulative target for 2 indicators. There were also 5 indicators with achievements ranging from 20% to 80%, while 1 indicator only achieved 16% of the cumulative target. The PR partially fulfilled the CP regarding the tax exemption letter as the PR has not obtained the tax exemption for domestic procurements, neither did the PR fulfill the CP regarding the submission of the annual report. To date, the PR has not submitted the annual report for the year 2007. There were still errors in the PR's Programmatic Periodic Progress Report.</p>				<p>No amount was recommended by the LFA due to ongoing investigations.</p>					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request		Disbursement Amount	Disbursement Date
11	01.Jan.07 - 30.Jun.07		B2	11	01.Jul.07 - 29.Mar.08	5,666,672	5,666,672	\$ 3,000,000	27 Jun 2008
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					

The Board of the Global Fund approved on 12 April 2008 an RCC Interim Bridge Funding request for this grant for 10 months with no additional funding. The LFA is currently reviewing the PR IBF documentation.

The performance of the period indicated above is rated B1 while the corresponding Verification of Implementation (VOI) performed by the Local Fund Agent (PWC) has highlighted several performance weaknesses which are in the process of being addressed. The rating is however only attached to the reporting period during which a restriction on disbursements was imposed thus limiting the capacity of the PR to achieve its targets. (80 % of the staff resigned during the restriction period and only life-saving activities were funded. Up to the end of Semester 4, the PR has only absorbed USD 33,587,447 or 60% of the total cumulative budget amounting to USD 56,087,498. The performance of the reporting period is rated B1 by the algorithm and be examined contextually in light of the restriction that was imposed on all Indonesia grants. The fact that financial irregularities occurred during the last reporting period (July to December 2006) downgraded the previous rating from B2 to C. the bulk of the issues have been addressed since then and the next VOI will confirm the solving of all of them (please see attached management letter, last section).

Since then, a comprehensive review of the managerial structure of the PR took place and the PR managerial team was changed. A Program Implementation Manual (PIM) for the use of the PRs was issued and related sessions were organised nationwide. The recruitment of additional staff was completed and work plans allowing for up-scaling have been approved.

Based on the VOI, from a total of 13 indicators and up to the end of Period 13, the PR has managed to exceed cumulative targets for 5 indicators and has met more than 80% of the cumulative targets for 2 indicators. There were also 4 indicators with achievements ranging from 20% to 80%. However, 2 targets only achieved below 15% of the cumulative target. The PR only achieved 13% of the intended targets for the indicator "Number of health centers with no stock out of TB drugs and laboratory supplies". The actual results of the health centers with no stock-out of the TB drugs and laboratory supplies decreased compared to previous periods due to the restriction on disbursements period and the related supervisory activities to monitor the stock status were not conducted and the information on the status of the stocks was therefore not reported. There was also lack of coordination between the drug suppliers and health staff of the Directorate of Communicable Disease Control Centre (CDC) in districts and in a few cases, the drug warehouse staff did not cooperate with the CDC staff when monitoring the availability of stocks of TB drugs and laboratory supplies.

In the case of "Number of districts and provinces submitting timely and complete reports", out of 66 districts, not one province submitted the complete reports on a timely basis. In addition, the M & E Coordinator reported that the number of provinces submitting timely and complete reports decreased compared to previous periods and noted that the discipline of the provinces to submit the required reports significantly decreased.

The performance of this reporting period should therefore be analyzed in light of the significant challenges generated by imposing a restriction on disbursements for close to 6 months. This reporting period accounts for close 70% of the restriction on disbursements period.

The amount requested by the PR is lower than our original recommendation (i.e. USD 7,254,295) since adjustments were made by the LFA to the PR's ending cash balance. However, the remaining balance to be recommended for disbursement will be detailed in the LFA S5 report that is scheduled to be issued on 11 July 2008. This is however a partial payment.

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PU	PU Period	TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
12	01.Jul.07 - 31.Dec.07	B1	12	01.Jan.08 - 31.Jul.08	9,391,651	6,861,429	\$ 6,861,429 31 Jul 2008

Summary of Progress	Reasons for variance between PR Request and Actual Disbursement
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Background :

The Board approved in mid May 2008 the extension of the grant via Interim Bridge Funding (IBF) with no incremental funding for a period up to ten months. The grant was the subject of a restriction on disbursements from 15 March to 20 August 2007. The PR could therefore not spend most of its projected budget in 2007 which resulted in having a significant amount of funding undisbursed at the closing date of the grant. The PR was declared in compliance with the 29 time-bound actions of the OIG on 22 November 2008.

During the IBF negotiations, the budgets allocated for trainings were significantly reduced. The IBF budget went from USD 8,831,529 to USD 7,621,085. In addition, the January to July 2008 budget for trainings was reduced by USD 1.3 million. Accordingly, the initial disbursement request amount of USD 9,391,651 revised downward to USD 6,861,429.06.

Performance:

It is important to analyze the performance of the grant within the adverse context of the restrictions during which funding was made available for life-saving activities only. Full scale activities with normal level of funding resumed only in January 2008 after the PR was declared in compliance on 22 November 2007. The quarter 4 of 2007 was dedicated in implementing the 29 time bound actions this leaving somehow implementation aside.

However, from a total of 13 indicators, up to the end of Semester 5, the PR has managed to over achieve the cumulative targets for 5 indicators and has met more than 80% of the cumulative target for 2 indicators. In addition, 5 indicators scored achievements ranging from 20% to 80%, while 1 indicator achieved below 15% of the cumulative target. Please refer to pages 6 to 10 of the LFA report dated 2 July 2008. Please see the "LFA_Section 1A (1)" in the attached LFA On-going Progress Review and Disbursement Recommendation for the detailed explanations regarding the PR's achievements and action plans. The performance of the grant has improved since the lifting of the restrictions and capacity building activities have started to produce results. The issues linked to the low scoring for some indicators will be addressed in the management letter to the PR.

Those are however indicators for which funding was not provided during the restriction period which focused on life-saving activities.

PU	PU Period	TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
13	01.Jan.08 - 31.Jul.08	B1	13	01.Aug.08 - 30.Sep.08	3,399,458		N/A

Summary of Progress	Reasons for variance between PR Request and Actual Disbursement
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Out of 13 indicators, the PR exceeded the cumulative targets for 5 indicators and met more than 80% of the cumulative target for 2 indicators. In addition there were 6 indicators with achievement ranging from 20% to 80%. Although the PR's financial performance was low, the PR showed efforts to maintain its programmatic achievement. The low absorption can be attributed to the restriction period when the PR lost 9 months of implementation as well as the late approval of the January to July 2008 disbursement request and the IBF period work plan and budget which resulted in the late disbursement from GF.

The initial request of the PR endorsed by the LFA was amounting to USD 9,391,651. During the negotiations with the PR to extend the grant via IBF (IL attached), the DR was reduced to USD 6,861,429 since the DR included a buffer part of the IBF period. The IBF budget is attached for your ease of reference.

The calculation is as follows:

During the restriction period, many intended targets were not achieved. The PR planned to accelerate their activities in order to achieved the intended targets by executing the approved workplan for January - July 2008 totalling USD 13,094,748.

The implementation period for Semester 6 will be over in the next 1 week and that the PR will enter the IBF Period. The budget of IBF period from August to September 2008 amounting USD 4,910,339 in included as a buffer to enable the PR to execute their planned activities.

PR's Disbursement Request USD 8,244,764.89

Adjustments:

Differences in cash balance: beginning of period USD 157,516.00

Cash Disbursement from GF during Semester 5 USD (1,791,624.00)

Difference in interest and other income received USD 99,819.00

Difference in total program expenditures USD 2,046,778.02

Difference in other expenditure incurred USD 61.82

Difference in forecast expenditures Semester 6 (Jan - Jul 08) USD (1,276,003.32)

Difference in forecast expenditures IBF Period (Aug - Sept 08) USD 4,910,339.00

Cash in Transit as per disbursement request #14 USD (3,000,000.00)

Total Adjustments USD 1,146,886.52

Adjusted PR's Disbursement Request per LFA recommendation USD 9,391,651.06

From that total, during the negotiations related to the IBF, the amount of US\$ 2,530,222 was cut out of which over USD 1.3 millions from the balance from the last DR (USD 3 million out of a total DR of USD 5.6 were released in June 2008).

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PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request		Disbursement Amount	Disbursement Date
14	01.Aug.08 - 30.Sep.08		B1	14	01.Oct.08 - 28.Feb.09	833,856	833,856		N/A

Summary of Progress

The PR has exceeded the cumulative targets for 6 indicators and has met 80% of the cumulative targets for 3 indicators while 4 indicators range from 48 to 71 percent. The performance is therefore consolidating at the B1 level.

Reasons for variance between PR Request and Actual Disbursement

Disbursement amount subject to be revised by the PR. There is a disbursement kept pending by TGF subject to the delivery by the PR of the external audits for years 2007 and 2008 which have to date not being conducted as per the Standards Terms and Conditions of the Grant Agreement.

PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request		Disbursement Amount	Disbursement Date
15	01.Oct.08 - 28.Feb.09		B1	15	01.Mar.09 - 31.May.09	1,053,552	600,477		N/A

Summary of Progress

During Oct 08 to 28 Feb 09 the programmatic performance was good and rated as A2. However, due to the listed below issues, the overall rating is downgraded to B1.

- (1) During October 2008 – February 2009, the PR had only absorbed 52% of the original current available budget.
- (2) There is no progress on the 1 outstanding condition precedent from the previous period (i.e. Tax exemption for domestic procurement using the Global Fund's funds). However, this is the common issue facing all GF grants in Indonesia.
- (3) The quality of the PR's Programmatic Periodic Progress Report was unsatisfactory due to the fact that the PR's report contained several inaccuracies and instances of non-compliance with the Global Fund Guidelines for PU/DR preparation. Furthermore, the quality of the PR's Financial Periodic Progress Report also needs to be enhanced due to the fact that the PR has reported inaccurate information for several transactions (i.e. there were overstatements and/or understatements of the bank interest income and bank fees due to misclassification of these expenditures).
- (4) Most of the previous follow-up items were not yet resolved.

Reasons for variance between PR Request and Actual Disbursement

External audit for 2007 and 2008 were not delivered in breach of the program grant agreement. No additional funding will be transferred under those documents will be delivered by the PR.

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Last Updated on: 04 November 2009

PU	PU Period	TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
16	01.Mar.09 - 31.May.09	B1	17	01.Jun.09 - 31.Aug.09	660,642	640,967	\$ 640,947 04 Nov 2009

Summary of Progress	Reasons for variance between PR Request and Actual Disbursement
<p>This is the last progress update of the program. Even though the programmatic performance of the period was good and rated as A2, due to the listed below issues, the overall rating is downgraded to B1.</p> <p>(1) The absorption rate of the PR's expenditures: During March – May 2009, the PR had only absorbed 54% of the original current available budget. The low absorption of the budget for IBF Period 3 was mainly due to time constraints in conducting most of the IBF Period 3 activities.</p> <p>(2) Condition Precedent (CP): There is no progress on the 1 outstanding condition precedent from the previous period (i.e. Tax exemption for domestic procurement using the Global Fund's funds). However, this is the common issue facing all GF grants in Indonesia.</p> <p>(3) Quality of reports submitted by the SRs and PRs : The quality of the PR's Programmatic Periodic Progress Report was unsatisfactory due to the fact that the PR's report contained several inaccuracies and instances of non-compliance with the Global Fund Guidelines for PU/DR preparation. Furthermore, the quality of the PR's Financial Periodic Progress Report also needs to be enhanced due to the fact that the PR has reported inaccurate information for several transactions (i.e. there were overstatements and/or understatement of the bank interest income and bank fees due to misclassification of these expenditures).</p> <p>(4) Follow up on the previous items: most of the previous follow-up items were not yet resolved.</p> <p>In general, and as pointed out by the report related to the external audit of the financial statements of the PR for years 2007 and 2008 (recently delivered), the internal financial control capacity of the PR remains weak and needs to be strengthened. All the reasons listed above justify a downgrading of the grant from A2 to B1.</p>	<p>This disbursement includes the Close Out Period until 31 August 2009. The gap is due to the rate of exchange. A combined external audit of the PR financial statements for fiscal years 2007 and 2008 were delivered in October 2009 with therefore significant delays which explains the late release of funding by the GF Secretariat.</p>

2.5. Contextual Information

Title	Explanatory Notes
Major changes in the nature of the epidemic	<p>On 15 March 2007, following audits conducted by the Office of the Inspector General in December 2006 and the subsequent work done by the LFA in February 2007 identified weaknesses in management of conflict of interest, weak program oversight and weak financial and management controls in the Global Fund funded programs in Indonesia, the Global Fund temporarily ceased disbursement and restricted expenditures, while ensuring continuity of life-saving treatment.</p> <p>On 20 August 2007, the Global Fund lifted the funding restrictions as the Principal Recipient and the CCM provided an update on progress towards meeting the conditions required to revoke the funding restrictions.</p>
Major changes in the program supporting environment (e.g. changes in the partner relationships, introduction of new partners, etc.)	Following the temporary restriction, the Principal Recipient prepared and the Project Implementation Manual (PIM) which has been approved by the Global Fund on 11 October 2006. The Principal Recipient is setting a series of trainings to operationalize the PIM and the relevant budget and workplan are going to be adjusted accordingly.
Significant adverse external influences (e.g. force majeure, change in government, natural disaster, etc.)	
External financial issues (e.g. inflation, currency depreciation, etc.)	
Program management issues (e.g. changes in PR/sub-recipients, problems with data collection, quality assurance, etc.)	
Issues with the CCM (e.g. changes in membership, composition, etc.)	

Title	Explanatory Notes
Additional Contextual Issues	<p>RCC Interim Bridge Funding: In April 2008, the Global Fund Board approved the request of the Indonesia CCM to extend the Program Ending Date in the Grant Agreement for a period of up to ten months from 1 August 2008 to 31 May 2009, without the Global Fund committing any additional funding, in order to allow the PR to continue to implement Program activities until the CCM has another opportunity to apply for funding through the Rounds-based Funding Channel.</p> <p>The Global Fund will, in its sole discretion, make disbursements of Grant funds to the Principal Recipient in accordance with the Grant Agreement and subject to specific milestones as stated below:</p> <ol style="list-style-type: none"> 1. The first disbursement of Grant funds will cover the period starting from the previously agreed Program Ending Date, being 31 July 2008, to the deadline for submission of a Round 8 proposal, being 30 September 2008. 2. If the CCM submits a Round 8 tuberculosis (TB) proposal for continued funding of the same activities that are currently funded under this Grant, the Global Fund will make a second disbursement of Grant funds to the Principal Recipient that will cover the period starting from 1 October 2008, being the date after the submission of such a proposal, to 28 February 2009, being the date that is three months after the date by which the Board will decide whether to approve that proposal. If, at its next meeting in November 2008, the Board does not approve the CCM's Round 8 TB proposal, the Global Fund will not disburse any further Grant funds to the Principal Recipient and the Principal Recipient will be required to close the grant in accordance with the procedures prescribed by the Global Fund. The Program Ending Date in the Grant Agreement will be reduced to 28 February 2008. 3. If, on the other hand, the Board approves the CCM's Round 8 TB proposal, the Global Fund will make a third disbursement of Grant funds that cover the period starting from 1 March 2009 to 31 May 2009, being the date six months following the Global Fund Board's approval of the CCM's Round 8 TB proposals. It is expected that a new Grant Agreement for the Round 8 TB proposal would be negotiated and signed within a six-month period after the Board approval of that proposal. <p>*****</p> <p>Phase One: The Ministry of Health of the Government of Indonesia shall procure TB drugs through the Global Drug Facility (GDF). Procurement of microscopes shall be conducted through the Royal Netherlands Tuberculosis foundation (KNCV) and or KNCV pre-qualified suppliers.</p> <p>As provided in the grant agreement, the Principal Recipient shall ensure that procurement by sub-recipients shall only be conducted in conformity with the approved Plan, the sub-recipients procurement policies and procedures, and the Global Funds guidelines on procurement. The PR shall coordinate the selection and coordination of the procurement committee contemplated in the Plan (the Committee with the Country Coordinating Mechanism Technical Working Group on Tuberculosis), and will ensure broad representation within the Committee. The PR shall provide representatives of the Technical Working Group on Tuberculosis and the Global Funds Local Fund Agent (LFA) access to all procurement procedures and practices throughout the program implementation period including, but not limited to, the right to review all procurement transactions and to observe all meetings of the Committee.</p>

2.6. Phase 2 Grant Renewal			
Performance Rating	Please select rating from the list	Recommendation Category	Select
Rationale for Phase 2 Recommendation Category			
Rationale for Phase 2 Recommendation Amount			

Time-bound Actions	
Issues	Description

