

## General Grant Information

Country	India				
Grant Number	IDA-405-G05-H	Component	HIV/AIDS	Round	04
Grant Title	Access to care and treatment (ACT)				
Principal Recipient	Population Foundation of India				
Grant Status	In Progress - RCC I				
Grant Start Date	01 Apr 2005	Grant End Date	31 Mar 2013		
Current* Phase Start Date	01 Apr 2007	Current* Phase End Date	31 Mar 2013	Latest Rating	B1
Current* Phase Signed Amount	\$ 14,051,016	Current* Phase Committed Amount	\$ 14,051,016	Current* Phase Disbursed Amount	\$ 13,027,131
Cumulative Signed Amount	\$ 45,052,382	Cumulative Committed Amount	\$ 34,088,843	Cumulative Disbursed Amount	\$ 32,935,052
				% Disbursed	97%
Time Elapsed (at the end of the latest reporting period)	90 months	Proposal Lifetime	132 months	% of Grant Duration	94%

\* Latest Phase if grant is closed

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*(For ExternalVersion)*

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## 1. Program Description and Contextual Information

### 1.1. Grant Summary - Web

The Indian government estimates that approximately 2.4 million people in India were living with HIV as of 2007. The epidemic is highly varied across states and regions but the states identified as being most affected in 2006 are the four southern states of Andhra Pradesh, Karnataka, Tamil Nadu and Maharashtra, and the northeastern state of Manipur. The program supported by this grant is a partnership between the public and private sectors on HIV and AIDS prevention, treatment, care and support in high prevalence states. Grant funds are used to train counselors, social workers, health care providers and field staff; select and train peer counselors; advocate with the corporate sector to get health facilities to provide quality antiretroviral therapy services; and to select and build capacities of 100 nongovernmental organizations and community-based organizations to provide home- and community-based care. In view of strong program performance and demonstrated potential for impact, the grant activities are to be scaled up throughout the country under recently approved additional funding. The grant is being consolidated with IDA-607-G10-H.

### 1.2. Country Latest Statistics

Background and Health Spending	Estimate	Year	Source
Total population (in 1000s)	1224614	2010	United Nations. World Population Prospects: .The 2010 Revision
Pop age 0-4 (in 1000s)	127979	2010	United Nations. World Population Prospects: .The 2010 Revision
Pop age 15-49 (in 1000s)	654884	2010	United Nations. World Population Prospects: .The 2010 Revision
Physicians (number)	660801	2000-2010	WHO. World Health Statistics 2011
Nursing and midwifery personnel (number)	1430555	2000-2010	WHO. World Health Statistics 2011
Infant mortality rate (per 1,000 live births)	48	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)	63	2010	UNICEF. Child mortality database ( <a href="http://www.childinfo.org/mortality_ufmrcountrydata.php">http://www.childinfo.org/mortality_ufmrcountrydata.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\$)	1340	2010	World Bank. World Development Indicators database
Total health expenditure per capita (USD)	45	2008	WHO. World Health Statistics 2011
ODA commitments in health sector (Current US\$ millions)	263	2009	.OECD
ODA commitments in all sectors (Current US\$ millions)	4159	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
HIV/AIDS	Estimate	Year	Source
People living with HIV	2400000	2009	UNAIDS report on the global AIDS epidemic .2010
AIDS-related deaths	170000	2009	UNAIDS report on the global AIDS epidemic .2010
Reported number of people receiving antiretroviral therapy	424802	2010	WHO. GLOBAL HIV/AIDS RESPONSE Epidemic update and health sector progress .towards Universal Access 2011
DALYs ('000), HIV/AIDS	3852	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
People currently on ART	404882	2012	Global Fund-supported programs, mid 2012 results

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

No changes

**1.5. Conditions Precedent**

CP #	Condition Precedent	CP Type	Tied To	Terminal Date	Is currently met?	Comments
1	The first disbursement of Grant funds by the Global Fund to the Principal Recipient is subject to the delivery by the Principal Recipient to the Global Fund of 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 10 of the Standard Terms and Conditions of this Agreement and, in the event a disbursement request may be signed by more than one person, the conditions under which each may sign.	Others	Disbursement	15.Jun.11	Yes	A revised letter due to change in the Authorized Representative of PFI was sent to the Global Fund on 16 November 2010. The letter complies with the requirements of this condition.
2	Evidence that the Principal Recipient has conducted assessment, of each Sub-recipient's capacity to implement Program activities ("SR Assessment"). The SR Assessment shall include an Action Plan for enhancing the capacity of Sub-recipients including time bound milestones. (Terminal Date as stated in block 7E of the Face Sheet i.e., 15th November 2010)	Others	Disbursement	15.Nov.10	Yes	The PR submitted the SR assessment for all the SRs along with action plan on 01 December 2010. Assessment for INP+ and the underlying action plan has not been submitted because of the ongoing fiduciary audit of INP+ and the PR has not entered into any agreement with INP+ under the RCC grant.
3	The delivery by the Principal Recipient to the Global Fund, in form and substance satisfactory to the Global Fund, of an updated plan for monitoring and evaluating Program activities ("Updated M&E Plan") that is aligned with the National M&E system.	M&E	Disbursement	15.Nov.10	Yes	The PR submitted the M&E Plan for the RCC grant on 15 November 2010 which was approved by the Global Fund on 25 February 2011.
4	The delivery by the Principal Recipient to the Global Fund of a plan outlining the procurement, use and supply management of the Health Products for the Program (the "PSM Plan"); and the written approval of the Global Fund of the PSM Plan.	Procurement	Disbursement	01.Jul.07	Yes	The PR has submitted its M&E plan to the Global Fund. This CP was met during the previous reporting period.
5	In order to facilitate coordination with NACO, with other Principal Recipients implementing HIV programs and with State AIDS Control Societies (SACS) in the states of Andhra Pradesh, Karnataka, Tamil Nadu, Maharashtra, Manipur, Nagaland, Uttar Pradesh, West Bengal, Bihar, Orissa, Madhya Pradesh, Chhattisgarh, Rajasthan, Gujarat and Jharkhand, the Principal Recipient shall: a) actively participate in quarterly coordination meetings at the national level with NACO and other Principal Recipients implementing HIV programs; b) hold quarterly consultation meetings with the Project Director of the SACS ; c) share quarterly progress updates with the SACS; d) facilitate regular (at a minimum annual) monitoring visits to program sites by the Project Director of the SACS and e) submit relevant information and updates with respect to above activities to the Global Fund, upon request from the Global Fund	Others			Yes	Despite the fact that this condition applies in equal measure to PFI and India's 6 other PRs working on NACP III and is therefore was not wholly under this PR's control, PFI has worked actively with NACO, SACS and other stakeholders during the implementation of RCC-1.

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Last Updated on: 26 April 2013

CP #	Condition Precedent	CP Type	Tied To	Terminal Date	Is currently met?	Comments
6	No later than 30 September 2010, the Principal Recipient shall deliver to the Global Fund a revised Performance Framework for the Program Term reflecting, the revision of national guidelines or strategy on CCCs and national ART projections. The revised targets for the Indicator "Number of PLHIV provided care at Community Care Centers" will be represented as quarterly, non-cumulative targets in order to better reflect the actual number of PLHIV using CCCs.	Others	Other	30.Sep.10	Yes	The PR submitted its revised PF to GF on 21st April 2011 which is currently under the review of the India Country Team.
7	If the revised Performance Framework entails amendments to the Program budget as included this Grant Agreement, the Principal Recipient shall submit a revised budget for the Program Term (the "Revised Budget").	Finance	Other		Yes	he PR submitted its revised Budget to the Global Fund on 21st April 2011 which is currently under the review of the India Country Team.
8	No later than 30 September 2010, the Principal Recipient shall provide an Implementation Plan from CII, prepared in coordination with NACO, for the Laboratory Accreditation Mechanism.	Others	Other	30.Sep.10	Yes	This condition was met during the previous period.
9	Prior to disbursement of Grant funds by the Principal Recipient to any Sub-recipient for overhead costs, the Principal Recipient shall provide evidence, to the Global Fund, that the relevant Sub-recipient has delivered to the Principal Recipient, in writing, an organizational policy note on the use of overheads and an itemization of these charges attributed to the overheads with appropriate assumptions and justifications.	Others	Other		Yes	The PR submitted its policy note, together with specific SR policies, to the Global Fund on 2 August 2011. The Global Fund conditionally approved the submitted policies, subject to implementation of requested actions shared with the PR in a communication of 30 August 2011. We have excluded INP+ from this condition because it is subject to the more stringent requirements detailed in the Global Fund's 27 June 2011 management letter.
10	No later than 31 July 2010, the Principal Recipient shall submit evidence that it has submitted to the Country Coordinating Mechanism a report concerning the payment of taxes and duties on the purchase of goods and services for Program purposes (the "Report on Taxes and Duties"). The Report on Taxes and Duties shall include, among other things, (i) a general approximation of the aggregate amount of taxes and duties paid on a yearly basis by the Principal Recipient on purchases of goods and services with Global Fund Grant funds (the "taxes on Grant funds"); (ii) an explanation of the obstacles faced by the Principal Recipient in obtaining exemption from taxes and duties; and (iii) a request to the Country Coordinating Mechanism for support in addressing the issue of the imposition of taxes on Grant funds.	Finance	Other	31.Jul.10	Yes	The PR has sent letters (having details of the taxes and duties) to the CCM chair on June 11, 2010 and July 23, 2010. A reminder letter was sent by PFI on 20 December 2011. PFI also participated in a meeting with other PRs to inform the CCM in this regard on 01 March 2011.

## 2. Key Grant Performance Information

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

Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
2005	2006	2007	2008	2009	2010	2011	2012	2013	2014

**Goal 1** The goal of the program is to improve survival and quality of life of people living with HIV/AIDS and reduce HIV transmission in selected States of India

Impact indicator	% of adults aged 15-49 who are HIV infected										Baselines	
											Value	Year
											0.36	2006

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target			0.36	0.36	0.36	0.33				
Result			0.34	0.34	0.29	0.31%				
Data source of Results										

Impact indicator	Adults and children who are still alive and on ART at 12 months after initiating treatment (percentage)										Baselines	
											Value	Year
											78	2007

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target			78	79	85	80				
Result	N: D: P: %	N: D: P: %	80	N: D: P: %	89	N: D: P: 82%	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.Apr.05 30.Jun.05	01.Jul.05 30.Sep.05	01.Oct.05 31.Dec.05	01.Jan.06 31.Mar.06	01.Apr.06 30.Jun.06	01.Jul.06 30.Sep.06	01.Oct.06 31.Dec.06	01.Jan.07 31.Mar.07

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

**Objective 2 - To strengthen care and support services to improve drug adherence to over 95% (NACO and PFI)**

**Prevention: Behavioral Change Communication - Community Outreach**

**Indicator 2.1 - Number of support nets of PLHIV formed**

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level		2009	N	N

	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								
Result								
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24
Target						0	450	900
Result						337	Pending result	1,091
	Period 25	Period 26	Period 27	Period 28	Period 29	Period 30	Period 31	Period 32
Target	1,255	1,255	1,255	1,255	1,255	1,255	1,255	1,255
Result	Pending result	1,231	Pending result	1,247	Pending result	1,247	Pending result	Pending result

**Care and Support: Care and support for the chronically ill**

**Indicator 2.2 - Number of newly identified PLHIV contacted at community/household level for care and support services through district level/support nets of PLHIV**

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)								
	Value	Year										
No Level			Top 10 Equ.	N								
	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												
Result												
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24				
Target						0	0	11,200	34,000			
Result							0	Pending result	23,144			
	Period 25	Period 26	Period 27	Period 28	Period 29	Period 30	Period 31	Period 32				
Target	66,000	98,000	130,000	162,000	194,000	226,000	258,000	290,000				
Result	Pending result	65,050	Pending result	100,604	Pending result	140,429	Pending result	Pending result				

**Indicator 2.3 - Number and % of PLHIV undergone initial assessment for ART eligibility**

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)								
	Value	Year										
No Level		2009	Top 10 Equ.	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: 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: %			
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16				
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 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24				
Target						0	0	N: 6,608 D: 11,200 P: 59%	N: 20,060 D: 34,000 P: 59%			
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	0	Pending result	N: 7,316 D: 34,000 P: 22%			
	Period 25	Period 26	Period 27	Period 28	Period 29	Period 30	Period 31	Period 32				
Target	N: 41,580 D: 66,000 P: 63%	N: 61,740 D: 98,000 P: 63%	N: 81,900 D: 130,000 P: 63%	N: 102,060 D: 162,000 P: 63%	N: 129,980 D: 194,000 P: 67%	N: 151,420 D: 226,000 P: 67%	N: 172,860 D: 258,000 P: 67%	N: 194,300 D: 290,000 P: 67%				
Result	Pending result	N: 21,610 D: 98,000 P: 22%	Pending result	N: 39,975 D: 162,000 P: 25%	Pending result	N: 62,578 D: 201,865 P: 31%	Pending result	Pending result				



**IDA-405-G05-H**

*Last Updated on: 26 April 2013*

**Indicator 2.4 - Number of PLHIV provided care at Community Care Centers**

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)								
	Value	Year										
No Level			Top 10 Equ.	N								
	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												
Result												
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24				
Target						4,193	8,385	12,578	16,771			
Result					Pending result	16,704	Pending result	31,169				
	Period 25	Period 26	Period 27	Period 28	Period 29	Period 30	Period 31	Period 32				
Target	6,388	6,388	6,388	6,387	0	15,504	7,752	7,751				
Result	Pending result	49,735	Pending result	10,414		25,600	Pending result	Pending result				

**Care and Support: Support for orphans and vulnerable children**

**Indicator 2.5 - Number of infected and affected children receiving educational support provided by district level networks**

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)								
	Value	Year										
No Level	1639	2009 (P18)	Top 10 Equ.	N								
	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												
Result												
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24				
Target						6,900	6,900	6,900	6,900			
Result					Pending result	1,947	Pending result	6,123				
	Period 25	Period 26	Period 27	Period 28	Period 29	Period 30	Period 31	Period 32				
Target	13,800	13,800	13,800	13,800	20,700	20,700	20,700	20,700				
Result	Pending result	12,895	Pending result	12,970	Pending result	20,233	Pending result	Pending result				

**Objective 3 - To build capacities and strengthen Health System for mainstreaming and long term sustainability of services (NACO and PFI)****Supportive environment: Strengthening of civil society and institutional capacity building**

## Indicator 3.1 - Number of DLN staff and support net members trained on peer education (Master trainers)

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)								
	Value	Year										
No Level			Top 10 Equ.	N								
	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												
Result												
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24				
Target					120	320	480	715				
Result					Pending result	0	Pending result	737				
	Period 25	Period 26	Period 27	Period 28	Period 29	Period 30	Period 31	Period 32				
Target	955	1,295	1,535	1,915	2,275	2,675	2,995	2,995				
Result	Pending result	1,115	Pending result	1,790	Pending result	2,455	Pending result	Pending result				

## Indicator 3.3 - Number of corporate plants/units reached by meetings to facilitate the set up of ART Centres at corporate health facilities

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)								
	Value	Year										
No Level	78	2009 (P18)	N	N								
	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												
Result												
	Period 17	Period 18	Period 19	Period 20	Period 21	Period 22	Period 23	Period 24				
Target					0	30	55	75				
Result						10	Pending result	26				
	Period 25	Period 26	Period 27	Period 28	Period 29	Period 30	Period 31	Period 32				
Target	75	95	95	125	125	155	180	200				
Result	Pending result	63	Pending result	76	Pending result	140	Pending result	Pending result				


**HSS: Community Systems Strengthening**


Indicator 3.2 - Number of staff at Community Care Centers trained (including Doctors, Nurses, Outreach Workers and project support staff) - Regular/Refresher Trainings


	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)														
	Value	Year			Top 10 Equ.	N	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8				
No Level			Top 10 Equ.	N														
Target																		
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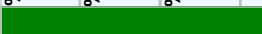
### 2.2.3. Cumulative Progress To Date


Latest reporting due period : 32 (01.Jan.13 - 31.Mar.13)

<b>Objective 2</b>	To strengthen care and support services to improve drug adherence to over 95% (NACO and PFI)									
<b>SDA</b>	Prevention: Behavioral Change Communication - Community Outreach									
<b>Indicator 2.1 - Number of support nets of PLHIV formed</b>										
	Target		Result							
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	32	1,255	30	1,247						99%

<b>SDA</b>	Care and Support: Care and support for the chronically ill									
<b>Indicator 2.2 - Number of newly identified PLHIV contacted at community/household level for care and support services through district level/support nets of PLHIV</b>										
	Target		Result							
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	32	290,000	30	140,429						48%

<b>Indicator 2.3 - Number and % of PLHIV undergone initial assessment for ART eligibility</b>										
	Target		Result							
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	32	N: 194,300 D: 290,000 P: 67 %	30	N: 62,578 D: 201,864.5 P: 31 %						46%

<b>Indicator 2.4 - Number of PLHIV provided care at Community Care Centers</b>										
	Target		Result							
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	32	7,751	30	25,600						120%

<b>SDA</b>	Care and Support: Support for orphans and vulnerable children									
<b>Indicator 2.5 - Number of infected and affected children receiving educational support provided by district level networks</b>										
	Target		Result							
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	32	20,700	30	20,233						98%

**Objective 3** To build capacities and strengthen Health System for mainstreaming and long term sustainability of services (NACO and PFI)

**SDA** Supportive environment: Strengthening of civil society and institutional capacity building

**Indicator 3.1 - Number of DLN staff and support net members trained on peer education (Master trainers)**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	32	2,995	30	2,455					82%	

**Indicator 3.3 - Number of corporate plants/units reached by meetings to facilitate the set up of ART Centres at corporate health facilities**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	32	200	30	140					70%	

**SDA** HSS: Community Systems Strengthening

**Indicator 3.2 - Number of staff at Community Care Centers trained (including Doctors, Nurses, Outreach Workers and project support staff) -Regular/Refresher Trainings**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	32	905	30	299					33%	

## 2.3. Financial Performance

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

Grant Duration (months)	96 months	Grant Amount	34,088,843 \$
% Time Elapsed (as of end date of the latest PU)	94%	% disbursed by TGF (to date)	97%
Time Remaining (as of end date of the latest PU)	6 months	Disbursed by TGF (to date)	32,935,052 \$
Expenditures Rate (as of end date of the latest PU)	54%	Funds Remaining (to date)	1,153,791 \$

## 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.Apr.05	01.Jul.05	01.Oct.05	01.Jan.06	01.Apr.06	01.Jul.06	01.Oct.06	01.Jan.07
Period Covered To:	30.Jun.05	30.Sep.05	31.Dec.05	31.Mar.06	30.Jun.06	30.Sep.06	31.Dec.06	31.Mar.07
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	401,410	827,493	1,196,337	1,812,773	2,166,428	2,933,392	3,566,819	4,158,466
Summary Period Budget:	401,410	426,083	368,844	616,436	353,655	766,964	633,427	591,647

## 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.Apr.07	01.Jul.07	01.Oct.07	01.Jan.08	01.Apr.08	01.Jul.08	01.Oct.08	01.Jan.09
Period Covered To:	30.Jun.07	30.Sep.07	31.Dec.07	31.Mar.08	30.Jun.08	30.Sep.08	31.Dec.08	31.Mar.09
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	5,325,114	6,439,749	7,583,787	8,714,740	10,036,611	11,249,931	12,602,863	13,739,876
Summary Period Budget:	1,166,648	1,114,635	1,144,038	1,130,953	1,321,871	1,213,320	1,352,932	1,137,013

## 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.Apr.09	01.Jul.09	01.Oct.09	01.Jan.10	01.Apr.10	01.Jul.10	01.Oct.10	01.Jan.11
Period Covered To:	30.Jun.09	30.Sep.09	31.Dec.09	31.Mar.10	30.Jun.10	30.Sep.10	31.Dec.10	31.Mar.11
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	14,956,518	16,214,452	17,482,472	18,606,443	21,310,554	23,699,085	26,178,054	28,770,367
Summary Period Budget:	1,216,642	1,257,934	1,268,020	1,123,971	2,704,111	2,388,531	2,478,969	2,592,313

## Expenditure Categories

## Program Activities

## Implementing Entities

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	Budget Period 25	Budget Period 26	Budget Period 27	Budget Period 28	Budget Period 29	Budget Period 30	Budget Period 31	Budget Period 32
Period Covered From:	01.Apr.11	01.Jul.11	01.Oct.11	01.Jan.12	01.Apr.12	01.Jul.12	01.Oct.12	01.Jan.13
Period Covered To:	30.Jun.11	30.Sep.11	31.Dec.11	31.Mar.12	30.Jun.12	30.Sep.12	31.Dec.12	31.Mar.13
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	32,059,455	34,736,148	37,395,549	40,013,129	43,139,288	45,789,064	48,439,007	50,976,668
Summary Period Budget:	3,289,088	2,676,693	2,659,401	2,617,580	3,126,159	2,649,776	2,649,943	2,537,661

### Expenditure Categories

### Program Activities

### Implementing Entities

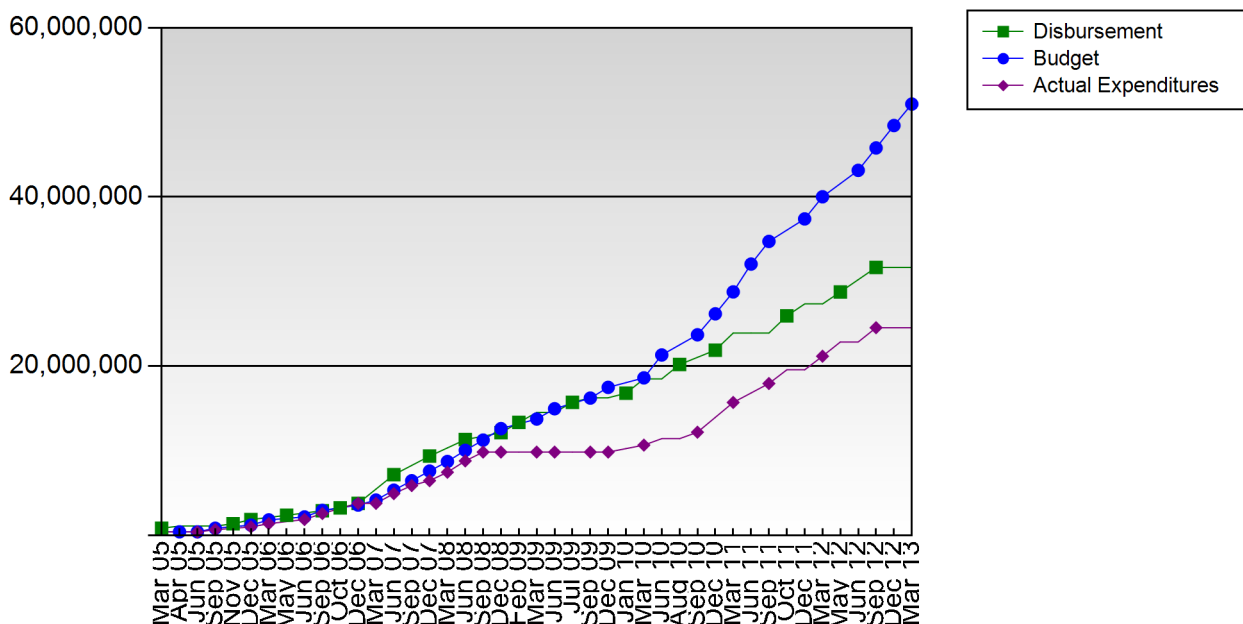
### - Comments and additional information

Budget for Q13, 14 and 15 amounts to USD 3,888,125 while the forecasted budget amounts to USD 3,952,960. It is noted that PR had received funds short of USD 64,835 in its previous DR. Thus, PR has included the same in its current fund request. Accordingly, cash request amounts to USD 1,953,537.

### 2.3.3. Program Expenditures

Period PU26: 01.Apr.12 - 30.Sep.12	Actual Cash Outflow	Cumulative Budget	Cumulative Cash Outflow	Variance	Reason for variance
<b>1. Total cash outflow vs. budget</b>	\$ 3,366,969	\$ 45,789,064	\$ 24,533,584	\$ 21,255,480	
<b>1a. PR's Total expenditure</b>	\$ 654,596		\$ 4,595,833		
<b>1b. Disbursements to sub-recipients</b>	\$ 2,712,373		\$ 20,600,268		
<b>1c. Expenditure Adjustments</b>			\$ -662,517		Reason for adjustments
<b>2. Pharmaceuticals &amp; Health Product expenditures vs budget</b>	\$ 67,151		\$ 982,512		
<b>2a. Medicines &amp; pharmaceutical products</b>	\$ 48,101		\$ 387,188		
<b>2b. Health products and health equipment</b>	\$ 19,050		\$ 343,252		

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



## 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.Apr.05 -		N/A	1	01.Apr.05 - 30.Jun.05	827,493	\$ 827,493	15 Mar 2005	
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
This is the first disbursement. There are not CP to first disbursement. Amount of USD 827,493 may be released.					No variance				
Progress Updates					Disbursement Information				
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
1	01.Apr.05 - 30.Jun.05		B1	2	01.Jul.05 - 30.Dec.05	521,259	\$ 521,259	10 Nov 2005	
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
This is the report for the first quarter: physical targets have been fully achieved and financial expenditure is 95% of the budgeted amount. It would be premature to have a higher rating. There are few issues of coordination which need to be attended to.					No variance				
Progress Updates					Disbursement Information				
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
2	01.Jul.05 - 30.Sep.05		B1	3	01.Oct.05 - 31.Dec.06	509,094	\$ 509,094	23 Dec 2005	
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
This report covers the 2nd quarter: all targets except one have been fully met and financial expenditure are delay in recruitment of budgeted staff and savings in the traveling expenses.					No variance				



Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
3	01.Oct.05 - 31.Dec.05			A	4	01.Jan.06 - 31.Mar.06	500,391	\$ 500,391	30 May 2006
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
While most of the physical targets have been achieved fully, there was some delays in commissioning the centre at Guntur and finalizing MOU with ACC. Expenditure figure is somewhat lower than what was budgeted. PR is making efforts to show better results by the end of 4 quarters. The disbursements have been on schedule. Thus, far US\$1,857,823 has been disbursed against the grant, which constitutes 45% of the total grant amount. The expenditure rate in the reported period is 91%. The program has significantly accelerated its activities in the last 3 months and it is expected that I will continue the acceleration and thus, will be able to adequately absorb additional funds.					No variance				
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
4	01.Jan.06 - 31.Mar.06			B1	5	01.Apr.06 - 30.Jun.06	514,481	\$ 541,481	14 Sep 2006
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
The PR is implementing the program as a consortium of partners. While most of the partners have been able to achieve targets very close to the original estimates, there is a shortfall in the performance of Freedom Foundation. This was because of the delay in making the Care and Support Centre operational. But for that PR could have earned "A" rating. However, program or the manner of its implementation does not need any change.					No variance				
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
5	01.Apr.06 - 30.Jun.06			B1	6	01.Jul.06 - 30.Sep.06	337,648	\$ 337,648	30 Oct 2006
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
Achievement has been in excess of the set targets.					N/A				
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
6	01.Jul.06 - 30.Sep.06			A	7	01.Oct.06 - 31.Dec.06	524,137	\$ 524,137	19 Dec 2006
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
The grant performance is good and implementation is on track. 8 out of 9 coverage indicators have either met or exceeded the targets.					No variance				

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Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
7	01.Oct.06 - 31.Dec.06			A	8	01.Apr.07 - 31.Dec.07	3,392,343	\$ 3,392,341	25 Jun 2007
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
Overall performance is excellent. The A rating is provided because all indicators show that the PR has either met the target or exceeded the target for the reporting period. Two key indicators show excellent performance and these are: (1) number of PLWHAs enrolled in care and support; (2) number of PLWHAs receiving care and support.  LFA has verified the PR cash reconciliation and found the same to be correct. Funds utilisations rate is over 90%. Actual expenditures from 1 October 2006-31 March 2007 was \$1,199,845, thus PR has a balance of \$32,979.00. Total budget for the DR requested period amounts to \$3,425,320 which includes Q9, Q10 and buffer of one quarter Q11. The funds required after adjusting the cash in hand for the period ending 30 September 2007 amounts to USD 3,392,341.					No variance				
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
8	01.Jan.07 - 31.Mar.07								N/A
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
9	01.Apr.07 - 30.Jun.07			A					N/A
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
10	01.Jul.07 - 30.Sep.07			A	9	01.Oct.07 - 30.Mar.08	2,261,356	\$ 2,196,521	20 Dec 2007
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
Overall performance is above average. 8 out of 9 indicators have 90% plus performance with 2 key indicators exceeding 100%.					The small variance is due to minor adjustments made by the LFA with respect to cash balance.				
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
11	01.Oct.07 - 31.Dec.07			A					N/A
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
See information for PU 11, which covers both period 11 and 12 (i.e. 1 Oct 2007-31 Mar 2008)									

Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
12	01.Jan.08 - 31.Mar.08			A1	10	01.Apr.08 - 30.Sep.08	1,953,537	\$ 1,953,537	27 Jun 2008
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
Overall achievement of the program is satisfactory. PR has reported the expenses for Q12 being USD 102,063 against a budget of USD 297,731. LFA however has based its reporting on the entire semester from October 1, 2007 to March 31, 2008 (Q11 and Q12), as the same were not required to be by LFA reviewed during the submission of PUDR 11 by the PR. There has been an overall utilization of approximately 95%. Out of 9 indicators, 7 indicators have been met or exceeded. The performance of one indicator "Number of health facilities (corporate sector) providing quality ART services" has been slow due to modalities of its operationalisation. This shortfall has been discussed with concerned SR and NACO and efforts are underway to expedite the process.					n/a				
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
13	01.Apr.08 - 30.Jun.08			A1					N/A
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
See information for PU 13, which covers both period 13 and 14 (i.e. 1 Apr 2008-30 Sep 2008)									
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
14	01.Jul.08 - 30.Sep.08			A1	11	01.Oct.08 - 31.Mar.09	2,030,327	\$ 813,685	19 Dec 2008
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
The program performance for the period 1 April -30 September 2008 is very good. Achievement for six out of nine indicators is 100% or above. Average performance on Top Ten indicators is at 131%. "Number of health facilities (corporate sector) providing quality ART services" is at 75% (6 out of 8), due to the delay in the setting up of ART centers as it involves coordination with NACO for identification of sites, site assessment, signing MOU with corporate sector and training of staff as well. PR is confident that the shortfall will be made up by the end of the next quarter.					The PR requested US\$ 2,030,327. The amount included US\$ 2,432,575 forecasted in accordance with the agreed budget for Period 15 and 16 plus US\$ 1,216,642 for buffer period 17 (minus) US\$ 1,618,890 cash balance as of 30 September 2008. The LFA recommended the full amount requested by the PR. However, budget and targets for Year 5, which includes Period 17 (April-June 2009), are yet to be negotiated. That is why the Regional Team recommended a disbursement of US\$ 813,685 to cover Period 15 and 16. The remaining amount of US\$ 1,216,642 is to be disbursed in January once the Performance Framework and budget for Year 5 have been finalized.				

Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
14	01.Jul.08 - 30.Sep.08			A1	11.1	01.Oct.08 - 30.Jun.09	2,030,327	\$ 1,216,642	24 Feb 2009
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
The program performance for the period 1 April -30 September 2008 is very good. Achievement for six out of nine indicators is 100% or above. Average performance on Top Ten indicators is at 131%. "Number of health facilities (corporate sector) providing quality ART services" is at 75% (6 out of 8), due to the delay in the setting up of ART centers as it involves coordination with NACO for identification of sites, site assessment, signing MOU with corporate sector and training of staff as well. PR is confident that the shortfall will be made up by the end of the next quarter.					The full amount of US\$ 2,030,327 requested by the PR and recommended by the LFA could not be disbursed in DR11, as Year 5 budget and targets were not finalized at the time of the disbursement request. Therefore, only US\$ 813,685 has been disbursed on 19 December 2008 to cover period of 1 October 2008-31 March 2009. The balance amount of US\$ 1,216,642 is to be disbursed now after the Performance Framework and Budget for Year 5 has been approved.				
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
15	01.Oct.08 - 31.Dec.08			A1	12	01.Apr.09 - 30.Sep.09	2,378,796	\$ 2,378,796	13 Jul 2009
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
The performance of the PR is at par with the expectations.					n/a				
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
16	01.Jan.09 - 31.Mar.09			A1					N/A
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
The performance of the PR is at par with the expectations.									
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
17	01.Apr.09 - 30.Jun.09			A1					N/A
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
PR has been able to achieve/ over achieve all the targets except for 1 (i.e. Number of health facilities providing quality ART services) in which there is under-achievement. It may be noted that under achievement in the aforesaid indicator is not completely under the PRs control; the same is due to pending approvals/consent from NACO for setting up of ART centres set up by corporate sector.									

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Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
18	01.Jul.09 - 30.Sep.09			A1	12	01.Oct.09 - 31.Mar.10	1,075,609	\$ 1,075,609	15 Jan 2010
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
<p>A rating is given during this period. The PR has been able to achieve/ over achieve all the targets except for 1 (i.e. Number of health facilities providing quality ART services) in which there is under-achievement. It may be noted that under achievement in the aforesaid indicator is not completely under the PRs control; the same is due to pending approvals/consent from NACO for setting up of ART centres set up by corporate sector.</p> <p>Utilization rate of 92% has been achieved in the reporting period (Q17 &amp; Q18) despite under achievement in the 1 indicators.</p>					n/a				
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
19	01.Oct.09 - 31.Dec.09			N/A	13	01.Apr.10 - 31.Dec.10	8,171,129	\$ 3,392,446	31 Aug 2010
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
This is the first disbursement on RCC grant agreement.					<p>This is the first disbursement on RCC grant agreement.</p> <p>The disbursement amount is calculated verified cash balance for Rounds 4 and 6 on 31 March 2010 US\$ 4,778,683 (includes the corrections for rent etc. previously discussed). Forecasted expenditure for P21-23, US\$ 8,171,129, includes the activities carried forward and cost of the audit. The recommended disbursement amount is the balance of US\$ 3,392,446.</p>				

Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
20	01.Jan.10 - 31.Mar.10				13	01.Apr.10 - 30.Sep.10	539,364		N/A
Summary of Progress					Reasons for variance between PR Request and Actual Disbursement				
<p>A rating of B1 is considered appropriate for the PR due to the following reasons:</p> <p>1. Indicators/Targets: PR has been able to achieve/over achieve all the targets except for 2 (i.e. Number of health facilities providing quality ART services and Number of ART health facilities providing treatment counselling) in which there is under-achievement. It may be noted that under achievement in the aforesaid indicators is not completely under the PRs control; the same is due to pending approvals/consent from NACO for setting up of ART centres by corporate sector and change in strategy to merge TCC with the DLN</p> <p>2. Program Expenditure: Utilization rate of 87% has been achieved in the reporting period (Q19 &amp; Q20) despite under achievement in the 2 indicators. Further, cumulative expenditure till March, 2010 is 88%.</p> <p>3. Data Quality: Some issues on the data quality were observed during the PU/DR review. Refer point 4 below.</p> <p>4. Action taken against GF recommendations: The recommendation from previous PUDR has not been fully implemented</p> <p>5. Other issues/potential future risks: As explained in detail in point no. 5 below, due to the on-going issue at INP+, the related investigative audit and current arrangement of working directly with DLNs; there is a possibility of the program performance getting impacted during the RCC grant period.</p>					<p>This is the last progress update (PU) under Round 4 grant and does not have a cash request</p>				
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
21	01.Apr.10 - 30.Sep.10			B2	14	01.Oct.10 - 29.Mar.11	2,767,951	\$ 1,701,722	21 Dec 2010
Summary of Progress					Reasons for variance between PR Request and Actual Disbursement				
<p>The PR is in a state of transition with high level of uncertainty regarding one its prime SRs, INP+. All the indicators pertaining to SR INP+ have been underachieved by 25 - 100%. Due to a situation arising from the investigative audit of INP+, PFI could not disburse funds to this SR, INP+ since April 2010. This is the primary reason for underachievement in both programmatic and financial progress. As an interim measure, the PR took some steps to minimize the impact of this situation on the program as a whole by having a direct MOU with the implementing entities, DLNs (SDPs). In the event that this interim measure continues, there is a distinct possibility that there will be a major programmatic impact for this SR dependent part of the programme. Utilisation rate of PR and SR for the current reporting period is approx. 37% and 60% respectively. During the review of the PUDR, the PR was unable to initiate certain activities planned in reporting period and the same have been carried forward to the subsequent quarters.</p> <p>Out of 10 CPs, the PR has been able to achieve 3 so far and rest are either in progress or not achieved.</p>					<p>The PR has requested US\$ 2,767,951 based on a cash balance of US\$ 4,608,168 and forecasted expenditure of US\$ 7,376,119. The forecast is in line with the budget for the three upcoming quarters. In addition the forecast includes the carry forward amount from Period 2 to Periods 3 and 4 pertaining to delayed activities. Slight adjustments were made to the PR requested amount, recommending a higher total amount of US\$ 2,787,761. However, while the Global Fund/OIG decision regarding further investigation of INP+ is still pending, the forecasted budget of US\$ 1,086,039, relating directly to INP+, should be withheld, leading to a recommended net disbursement to PFI of US\$ 1,701,722.</p>				

Progress Updates				Disbursement Information					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
23	01.Oct.10 - 31.Mar.11		B1	15	01.Apr.11 - 30.Sep.11	6,275,461	\$ 4,040,461	20 Oct 2011	
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
<p>The India Round 4 HIV RCC grant contributes to the National AIDS Control Program, which is soon to move into its fourth 5-year period of implementation. This is the fourth progress update and the third disbursement under the RCC Grant Agreement.</p> <p>The PR's performance during the reporting period covering Q3 and Q4 of the RCC grant, i.e. from 1 October 2010 to 31 March 2011, was satisfactory; PFI exceeded its targets for 2 out of 8 coverage indicators; namely number of People Living with HIV provided care at Community Care Centers (186% capped at 120% by the Grant Rating Tool) and number of DLN staff and support net members trained on peer education (Master trainers) (103%). The PR could not fully achieve targets on indicators pertaining to INP+ mainly because of the on-going OIG investigation and the challenges of directly managing over 200 DLNs. Nevertheless, the PR's performance relative to these indicators is improving. Further, the PR could not fully reach its target for two indicator related to the number of staff at Community Care Centers trained (including Doctors, Nurses, Outreach Workers and project support staff)- Regular/Refresher Trainings (49%) and number of corporate plants/units reached by meetings to facilitate the setup of ART centers at corporate health facilities (35%). The Global Fund's grant rating algorithm generated a quantitative B1 indicator rating for the reporting period, which reflects PFI's technical achievement to date. Six out of the eight coverage indicators are Top 10 also generating a B1 rating. Average performance of the grant on all indicators is 73%.</p>				<p>The PR presented an expenditure forecast of US\$ 9,914,354 for Q5 and Q6 of the RCC period plus a one quarter buffer. Reducing the cash balance with the PR (US\$ 2,932,371) and SR cash balance (US\$ 589,183), the PR requested US\$ 6,392,800 for the period of the disbursement request (01 April 2011 to 31 December 2011). Based on the necessary adjustments, the Global Fund recommended a disbursement of US\$ 4,040,461 to the PR to ensure continued program implementation in Q5 and Q6 of the RCC period plus a Q7 buffer.</p>					

Progress Updates				Disbursement Information					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
24	01.Apr.11 - 30.Sep.11		B1	17	01.Oct.11 - 31.Mar.12	5,059,606	\$ 2,843,454	15 May 2012	
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
<p>The PR's performance during the reporting period covering Q5 and Q6 of the RCC grant, i.e. from 1 April 2011 to 30 September 2011, was satisfactory; PFI exceeded its targets for one out of eight coverage indicators "Number of People Living with HIV provided care at Community Care Centers (CCCs)" (186% capped at 120% by the Grant Rating Tool). The PR achieved over 80% of its targets for three indicators.</p> <p>The PR could not fully achieve targets on all the indicators pertaining to INP+ mainly because of the on-going OIG investigation and the challenges of directly managing over 200 DLNs. Nevertheless, the PR's performance relative to these indicators is improving and we expect that the PR will be able to catch up on its targets following actions mandated in the Global Fund's June 2011 management letter. A brief breakdown of the relevant indicators follows.</p> <p>Further, the PR could not fully reach its target for an additional indicator reflecting CBCI and HLLFPPT activities:</p> <ul style="list-style-type: none"> <li>- Number of staff at CCCs (including Doctors, Nurses, Outreach Workers and project support staff)-Regular/Refresher Trainings (28% of the target). This indicator relates to CBCI and HLLFPPT. This partial result can be traced mainly to delays in formation of 22 CCCs pending an approval from NACO and a high turnover of counselors and outreach workers in CCCs. If these 22 CCCs were formed within the due time, an estimated additional 176 staff of the 22 CCCs mentioned above could be trained following (resulting in nearly 100% achievement rate). Now that NACO has issued the revised CCC guidelines, we expect that the 22 CCCs will be formed and the staff will be trained in the next quarters.</li> </ul> <p>Finally, due to NACO objections beyond the PR's control and other reasons, PFI was unable to meet its target for an indicator reflecting work to be conducted by the Confederation of Indian Industries (CII) a private sector trade group that serves as an SR under the RCC program.</p>									



Progress Updates				Disbursement Information					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
25	01.Oct.11 - 31.Mar.12		B1	20	01.Apr.12 - 29.Sep.12	6,979,471	\$ 2,896,998	27 Sep 2012	
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
<p>Based on the results reported and as verified by LFA, the grant rating tool shows a "B1" rating as the "all indicators rating" and "final quantitative rating." Despite LFA concerns about PR and SR spending rates, we note that the lag is due to restriction on setup of new CCCs put up by NACO and the direct management of DLNs by PFi following INP+'s withdrawal from the grant.</p> <p>The Country Team also considers the PR's progress in complying with Global Fund management letter recommendations as *not* meriting a downgrade in the quantitative grant rating.</p> <p>- There has been delay in initiation / completion of various activities which has led to the slow rate of utilisation such as completion of web based MIS implementation at the DLNs level, installation of financial software across SRs/SSRs, program evaluation, external studies, external data quality assurance, technical assistance to SNGs, etc.</p>				<p>The difference of USD 392,518 between approved budget and forecast for the period April 2012 to September 2012 is due to addition of carried forward activity amounting to USD 624,455 and reduction of SRs balance amounting to USD 223,609 and reduction of USD 793,364 towards INP+ secretariat budget and SLNs budget out of INP+ component. These carried forward activities has been planned to be completed in Q9 and Q10.</p> <p>The difference of USD 374,287 between approved budget and forecast for the period October 2012 to December 2012 is due to reduction of INP+ secretariat budget and SLNs budget out of INP+ component.</p> <p>The LFA adjusted the PR's request to account for an likewise adjusted total fund requirement of \$US 9,226,792 and reductions to account for:</p> <ol style="list-style-type: none"> <li>1. Activities not expected to be performed in Q9-11 of the RCC (through December 2012) amounting to some US \$1,518,852;</li> <li>2. Reductions of US \$390,462 for training activities;</li> <li>3. An adjusted PR cash balance of US \$1,575,574 (The GF is placing into abeyance the previously-anticipated US \$433,692 adjustment of recoverable costs from INP+, moving this number to US \$2,009,266);</li> <li>4. SR cash balance of US \$268,380; and</li> <li>5. Cash in transit of US \$2,843,454.</li> </ol> <p>We also note that INP+ was also an SR under PFI's Round 4 and Round 6 grants and reported a closing balance of INR 7,734,504 as of the effective 31 March 2010 end date of those grants prior to the start of the RCC (US \$171,763 as of that date). The same was not adjusted initially in the RCC grant with the expected continuation of INP+ as a SR in R4 RCC grant. This amount is now adjusted.</p> <p>Therefore, the CT's recommended disbursement amount of US \$2,896,998 is derived from the LFA recommendation of US \$2,635,069, plus US \$433,692, minus US \$171,763.</p>					
Progress Updates				Disbursement Information					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
26	01.Apr.12 - 30.Sep.12		B1	21	01.Oct.12 - 31.Mar.13	3,397,456		N/A	
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
<p>The PR's performance during the reporting period was satisfactory which is reflected by satisfactory achievement rate on the key indicators. The PR merited a technical "B1" rating generated by the Global Fund's grant rating tool.</p>				<p>Cash Balance and closeout budget adjustments mainly resulted in the variance between the PR's request and the LFA recommendation.</p>					

## 2.5. Contextual Information

IDA-405-G05-H

Last Updated on: 26 April 2013

Title	Explanatory Notes
Program management issues (e.g. changes in PR/sub-recipients, problems with data collection, quality assurance, etc.)	<p>The Global Fund is working to permit ongoing implementation of grant IDA-405-G05-H RCC in the absence of an OIG report on the situation surrounding INP+, its major sub-recipient and the country's leading grass-roots organization for HIV positive individuals.</p> <p>The situation surrounding this grant has become untenable. The PR is unable to directly manage 212 separate contracts with as many state and district networks, which are now close to collapse. The CCM has expressed its commitment to recovering any funds deemed to have been misspent under the grant. INP+ has placed US \$336 thousand in escrow pending a GF determination on next steps. Its general secretary has resigned from his position. The PFI is willing to implement the recommendations of the KPMG report released to limited circulation last October. Partner agencies, including USAID which counts PFI as a Cooperating Agency are imploring us to support the grant with whatever safeguards we may deem necessary so as not to destroy PFI and INP+ in the process.</p>
Issues with the CCM (e.g. changes in membership, composition, etc.)	CCM is fully compliant with GF requirements. CCM membership was revised to ensure broader inclusion of the civil society. The CCM elections took place in April 2009.
Major changes in the nature of the epidemics	While there were no major changes in the nature of the epidemics, in 2007 the HIV/AIDS prevalence rate has been revised from 0.9 to 0.3%.
Major changes in the program supporting environment (e.g. changes in the partner relationships, introduction of new partners, etc.)	n/a
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.)	Significant fluctuations in the exchange rate of the rupee (between INR 39.27 to INR 50.52 for 1USD in 2008).
Additional Contextual Issues	<p>This is the NGO consortium led program. The PR has excellent performance and very high funds utilization rate. The grant has been qualified for RCC. The RCC proposal will be submitted by end of July 2009. PFI has improved coordination with NACO and States AIDS Control Societies (SACS). Partnership with sub recipient NGOs and private sector is also very good. Overall management team is strong. Disbursements have been released as per schedule. The disbursement requests are submitted in accordance with the SOEs received from the consortium members. PFI has developed a system to ensure that adequate funds are available to the sub-recipients, service delivery points and periodic disbursements are made by PR to ensure smooth operation of the activities. The SOEs and programmatic details are received in time from all the members. Overall, the quality of reporting is quite satisfactory.</p>

**2.6. Phase 2/ Periodic Review Grant Renewal**

<b>Performance Rating</b>	B1. Adequate	<b>Recommendation Category</b>	Go
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**Rationale for Phase 2/ Periodic Review Recommendation Category**

India's Round 4 HIV/AIDS proposal was divided into two grant agreements with two Principal Recipients. The larger portion of the grant is managed by the National AIDS Control Organization (NACO) of the Ministry of Health, India. The Principal Recipient for this grant is Population Foundation of India (PFI). The PR implements the program through four NGOs in six states with high HIV prevalence.

**Program performance:**

The PR's overall performance is good and it has met over 90% of the target for 7 of the 9 performance indicators at the time of Phase 2 review.

**Commendable results include:**

- 2,612 people receiving care and support / palliative care (305% of target);
- 37,403 people living with HIV/AIDS enrolled in care and support services provided by civil society organizations (151% of target);
- 234 counselors, social workers, health care providers and field staff from the NGO sector trained in home-based and community-based care (100% of target);
- 17 antiretroviral therapy (ART) health facilities providing treatment counseling (94% of target); and
- 93 district level networks of people living with HIV/AIDS and civil society organizations (91% of target).

At the time of the Phase 2 review, the PR has not reported any performance regarding private sector health facilities providing ART services. The Corporate ART program had a very slow start due to difficulties in convincing private companies to invest in setting up ART centers to provide services to the communities. From Quarter 4, the sub recipient (SR) Confederation of Indian Industries was able to identify two corporations and two locations for the ART centers. By Quarter 7 the first center was operational and certified by NACO. The work on the second ART center has been completed and it is planned to be operational by Quarter 8.

Given the good overall performance to date the PR should increase targets above those contained in the proposal for key indicators, including more 'people reached' indicators and increasing measures of impact for Phase 2.

**Program management and governance:**

The PR has demonstrated satisfactory management of the grant to date. Programmatic achievement is good and implementation continues to proceed as planned. The PR has in place a strong management framework with sound financial management and monitoring and evaluation (M&E) systems. The PR's relations with the SRs are good, and the PR has consistently made timely and effective disbursements to the SRs which has enabled the smooth implementation of activities.

In Phase 2, the PR should focus efforts on ensuring the establishment of ART centers in the corporate sector through effective public/private partnership strategies. For this to be achieved, the PR should intensify advocacy efforts in an attempt to increase corporate sector contributions.

The CCM has strong multi-sectoral representation and has been actively engaged in grant oversight since the start of the Program.

The Secretariat classifies this Request as a "Go".

**Rationale for Phase 2/ Periodic Review Recommendation Amount**

In light of good performance and satisfactory grant management, the Secretariat concludes that the maximum amount of US\$14,447,978 is appropriate for continued funding. As US\$396,962 of undisbursed Phase 1 funds are available to partially fund this amount the Secretariat recommends to the Board to commit an incremental Phase 2 funding amount of US\$14,051,016 for this program.

Time-bound Actions	
Issues	Description
None.	.

