

## General Grant Information

Country	India				
Grant Number	IDA-910-G18-T	Component	Tuberculosis	Round	9
Grant Title	Providing Universal Access to DR TB Control Services and Strengthening Civil Society Involvement in TB Care and Control				
Principal Recipient	Department of Economic Affairs, Ministry of Finance of India				
Total Lifetime Budget	\$ 199,544,948	Phase 1 Grant Amount	\$ 45,187,531	Phase 2 Grant Amount	
Grant Start Date	01 Oct 2010	Phase 1 End Date	30 Sep 2012	Phase 2 End Date	
Disbursed Amount	\$ 12,880,382	% of Grant Amount	29%	Latest Rating	
Time Elapse (at the end of the latest reporting period)	0 months	% of Grant Duration	0%	Proposal Lifetime	121 months

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*(For ExternalVersion)*

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## 1. Program Description and Contextual Information

### 1.1. Grant Summary - Web

Tuberculosis (TB) is one of the deadliest and most devastating health burdens in India over the past decades. India bears 21 percent of the global burden of incident TB cases and has the highest estimated incidence of multidrug-resistant-TB (MDR-TB) and extensively drug resistant TB (XDR-TB). The program supported by this grant implements all components of the World Health Organization Stop TB Strategy in 2006 and has made great strides in achieving global targets for a new smear positive case detection (NSP CDR) of 70 percent and treatment success of 85 percent, as per the Millennium Development Goals (MDGs) and the related Stop TB Partnership's Global Plan from 2006 to 2015. Round 9 proposal is implemented along with two civil society Principal Recipients and a partnership of 16 non-governmental organizations aiming to consolidate and sustain current achievements uniformly across the country, and to increase access to quality TB care for all. The current grant implements activities to address challenges such as insufficient laboratory, capacity for detection and follow up of requisite DR cases in the country and funding gaps for procurement of second line drugs for all MDR-TB cases planned to initiate on treatment.

### 1.2. Country Latest Statistics

Background and Health Spending	Estimate	Year	Source
Total population (in 1000s)	1,214,464	2010	United Nations. World Population Prospects: .The 2008 Revision
Pop age 0-4 (in 1000s)	125,648	2010	United Nations. World Population Prospects: .The 2006 Revision
Pop age 15-49 (in 1000s)	647,003	2010	United Nations. World Population Prospects: .The 2006 Revision
Physicians (number)	643,520	2000-2009	WHO. World Health Statistics 2010
Nursing and midwifery personnel (number)	1,372,059	2000-2009	WHO. World Health Statistics 2010
Income level	Lower middle income	2010	World Bank. World Development Indicators database
Total health expenditure per capita (USD)	40	2007	WHO. World Health Statistics 2010
ODA commitments in health sector (Current US\$ millions)	263	2009	.OECD
ODA commitments in all sectors (Current US\$ millions)	4,159	2009	.OECD
Tuberculosis	Estimate	Year	Source
TB prevalence, all forms (number)	3,000,000	2009	.WHO. Global Tuberculosis Control report 2010
TB prevalence, all forms (rate per 100,000 population)	249	2009	.WHO. Global Tuberculosis Control report 2010
TB incidence, all forms (number)	2,000,000	2009	.WHO. Global Tuberculosis Control report 2010
TB incidence, all forms (per 100,000)	168	2009	.WHO. Global Tuberculosis Control report 2010
TB mortality, all forms excl HIV (number)	280,000	2009	.WHO. Global Tuberculosis Control report 2010
TB mortality, all forms excl HIV (per 100,000)	23	2009	.WHO. Global Tuberculosis Control report 2010
TB treatment success rate (%)	87	2008	.WHO. Global Tuberculosis Control report 2010
DALYs ('000), Tuberculosis	7,286	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 April 2011
New smear-positive TB cases detected and treated	790,000	mid 2011	Global Fund-supported programs, mid 2011 results

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

## 1.5. Conditions Precedent

CP #	Condition Precedent	CP Type	Tied To	Terminal Date	Is currently met?	Comments
1	The second 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, in form and substance satisfactory to the Global Fund, of evidence that the addendum to the National Monitoring and Evaluating Plan (the "Updated M&E Plan") has been completed which incorporates the following: a. aspects of M&E relating to DOTS Plus mentioned in the DOTS Plus guidelines and work plan; b. detailed guidelines and formats for data collection, analysis and reporting for MDR-TB; and c. aspects of M&E related to advocacy, communication and social mobilization (ACSM).		Disbursement	28.Feb.11	No	
2	the delivery by the Principal Recipient to the Global Fund of a report, in form and substance satisfactory to the Global Fund, assessing the capacity of Sub-recipient Foundation for Innovative New Diagnostics (FIND) to implement Program activities and report thereon in accordance with the Global Fund's requirements, and an evaluation of the achievements of Sub-recipient FIND against the set objectives		Disbursement	31.Dec.11	No	
3	in accordance with the results of the report described under 3a. above, the Principal Recipient shall take remedial actions, as required, to fill any capacity gaps of Sub-recipient FIND identified during the evaluation and assessment		Disbursement	31.Dec.11	No	
4	the delivery by the Principal Recipient to the Global Fund of a plan for the procurement, use and supply management of the Health Products for the Program as described in subsection (b) of Article 19 of the Standard Terms and Conditions of this Agreement (the "PSM Plan")	Procurement	Disbursement		Yes	
5	the written approval of the Global Fund of the PSM Plan	Procurement	Disbursement		Yes	
6	the delivery by the Principal Recipient to the Global Fund of the Green Light Committee (GLC) of the World Health Organization's written approval of the Principal Recipient's application for the procurement of second-line anti-tuberculosis drugs for the treatment of MDR-TB	Procurement	Disbursement		In Progress	
7	the delivery by the Principal Recipient to the Global Fund of the annual MDR-TB patient registration targets approved by the GLC for the relevant twelve-month period and the price and quantities of the drugs that will be procured by the Principal Recipient in accordance with the application approved by the GLC and the approved PSM Plan	Procurement	Disbursement		In Progress	
8	delivery by the Principal Recipient to the Global Fund of revised budget and PSM Plan for the Program Term, if the annual MDR-TB patient registration targets approved by the GLC necessitate amendments to the budget and PSM Plan for the Program Term that were approved by the Global Fund with effect from the Grant Starting Date ("Revised Program Budget")	Procurement	Disbursement		In Progress	

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CP #	Condition Precedent	CP Type	Tied To	Terminal Date	Is currently met?	Comments
9	The Global Fund's written approval of the Revised Program Budget and revised PSM Plan	Procurement	Disbursement		No	
10	The delivery by the Principal Recipient to the Global Fund, in consultation with National Reference Laboratories (NRL), of written guidelines, in form and substance satisfactory to the Global Fund, for management and reporting of FIND that shall include, without limitation, the following: i. procedures for effective Program planning and coordination between the Principal Recipient and FIND; ii. procedures for reporting of financial and programmatic progress by FIND, together with the standard reporting forms to be used by Sub-recipients, that include periodicity, formats, indicators, and information to be included in Sub-recipient reports; and iii. procedures for monitoring and evaluating the performance of FIND	M&E	Disbursement		No	
11	SPECIAL TERMS AND CONDITIONS: 1. Notwithstanding Article 3(c) of the Standard Terms and Conditions of this Agreement, the Global Fund and the Principal Recipient agree that the Phase 1 Starting Date of the Program shall be 1 October 2010			01.Oct.10	No	
12	SPECIAL TERMS AND CONDITIONS: 2. It is understood that as an exceptional interim measure, the Global Fund shall disburse Grant Funds directly to FIND. This waiver of the Global Fund's policy on non-direct payment to Sub-recipients shall not exceed 18 months. During this time the Principal Recipient shall deliver to the Global Fund on a six-monthly basis, a report on FIND's progress in obtaining its change of registration				In Progress	
13	SPECIAL TERMS AND CONDITIONS: 3. The Department of Economic Affairs of the Government of India confirms that the Central TB Division (CTD) of the Ministry of Health and Family Welfare will be the implementing agency for the purposes of this Agreement				No	
14	SPECIAL TERMS AND CONDITIONS: 4. The parties to this Agreement acknowledge and agree that the Auditor selected by the Principal Recipient in accordance with Article 13 (c) of the Standard Terms and Conditions of this Agreement shall be the Controller and Auditor General of the Government of India				No	
15	SPECIAL TERMS AND CONDITIONS: 5. The Principal Recipient represents that the policy of the Government of India prohibits the purchase of insurance for Program property for which insurance is required under Article 20 (a) of this Agreement. The Global Fund acknowledges that the Principal Recipient is unable to purchase insurance until such time as the insurance becomes legally available under the laws of India, but notes that nothing in this Special Condition affects the application or interpretation of Article 20 (b)				No	
16	SPECIAL TERMS AND CONDITIONS: 6. Following each procurement of health products the Principal Recipient shall update the information for key health products in the Global Fund's on-line Price and Quality Reporting (PQR) database, in accordance with Global Fund guidelines on Price and Quality Reporting				No	

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CP #	Condition Precedent	CP Type	Tied To	Terminal Date	Is currently met?	Comments
17	SPECIAL TERMS AND CONDITIONS: 7. The Principal Recipient shall ensure that Grant funds are not used to finance the payment of any taxes or duties referred to in Article 12 of the Standard Terms and Conditions of this Agreement. In the event that such taxes or duties are imposed on this Agreement or on the procurement of any goods or services using Grant funds by the Principal Recipient or Sub-recipient, the Principal Recipient shall ensure that such taxes and duties are paid from sources other than Grant funds				No	
18	SPECIAL TERMS AND CONDITIONS: 8. The Principal Recipient shall ensure that the Health Products procured with Grant funds are stored under appropriate conditions at all levels, including the National Store Depot and State-level depots. If any Health Products purchased with Grant funds cannot be used for their intended purpose due to being stored in conditions that are inappropriate or due to poor procurement and supply management practices, as determined by the Global Fund, the purchase price of such Health Products shall be deducted from the disbursements of Grant funds made by the Global Fund to the Principal Recipient. Any such deduction shall not give the right to an adjustment of either Program Budget or Program Objectives. Such lost or spoiled Health Products shall be replaced by the Principal Recipient at its own cost				No	
19	SPECIAL TERMS AND CONDITIONS: 9. The parties to this Agreement agree that the Global Fund will disburse US\$50,000 of Grant funds for each relevant year of the Program Term directly to the Green Light Committee of the Stop TB Partnership for assistance with the procurement of pharmaceuticals for MDR-TB				No	

## 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
2011	2012	2013	2014	2015	2016	2017	2018	2019	2020

<b>Goal 1</b>	<b>Decrease morbidity and mortality due to drug resistant TB (DR-TB) in India and improve access to quality TB care and control services through enhanced civil society participation</b>
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Impact indicator	TB incidence rate						Baselines			
							Value	Year		
							75 new smear positive (NSP) cases per 100,000 population	2002		

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target		67 NSP cases per 100,000 population			60 NSP cases per 100,000 population					
Result										
Data source of Results										

Impact indicator	TB prevalence rate						Baselines			
							Value	Year		
							370 bacillary positive TB cases per 100,000 population	2000		

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target		280 bacillary positive cases per 100,000 population								
Result										
Data source of Results										

Impact indicator	TB mortality rate						Baselines			
							Value	Year		
							28 deaths per 100,000 population	2006		

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target	26	25	24	23	21					
Result										
Data source of Results										

Outcome indicator	Case detection							Baselines		
								Value	Year	
								54 new smear positive cases per 100,00 population (72%)	2009	

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target	51 (70%)	51 (70%)	51 (70%)	51 (70%)	51 (70%)					
Result										
Data source of Results										

Outcome indicator	Treatment success rate							Baselines		
								Value	Year	
								87%	2008	

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target	N: D: P: 85%	N: D: P: 85%	N: D: P: 85%	N: D: P: 85%	N: D: P: 85%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Data source of Results										

Outcome indicator	Average default rate of smear positive re-treatment patients in 374 target districts							Baselines		
								Value	Year	
								14%	2008	

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Target	N: D: P: 13%	N: D: P: 12%	N: D: P: 11%	N: D: P: 10%	N: D: P: 9%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
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.Oct.10 31.Dec.10	01.Jan.11 31.Mar.11	01.Apr.11 30.Jun.11	01.Jul.11 30.Sep.11	01.Oct.11 31.Dec.11	01.Jan.12 31.Mar.12	01.Apr.12 30.Jun.12	01.Jul.12 30.Sep.12

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

**Objective 1 - Establish and enhance capacity for quality assured rapid diagnosis of DR-TB suspects in 43 Culture and DST laboratories in India by 2015 (CTD)****MDR-TB**

## Indicator 1.1 - Number of laboratories performing Line Probe Assay

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
Level 0-Process/Activity Indicator	5	2009	Top 10 Equ.	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target		5		12		15		25
Result		Pending result						

## Indicator 1.2 - Number of laboratories with enhanced sputum processing capacity

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
Level 0-Process/Activity Indicator	0	2009	Top 10 Equ.	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target				9		14		24
Result								

## Indicator 1.3 - Laboratory staff trained on line probe assay

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
Level 1-People trained	5	2009	Top 10 Equ.	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	21	42	70	98	119	140	168	217
Result	Pending result	Pending result	Pending result					

## Indicator 1.4 - Number of DR TB suspects examined for MDR TB

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
Level 3-People reached	6398	2009	Top 10 Equ.	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	4,000	7,500	15,000	9,000	19,000	30,000	43,000	16,000
Result	Pending result	Pending result	Pending result					

**Objective 2 - Scale-up care and management of DR-TB in 35 states/Union Territories of India resulting in the initiation of treatment of 55,450 additional cases of drug Resistant over the project period (2010-2015) (CTD)**

**MDR-TB**

**Indicator 2.1 - Number of lab-confirmed MDR-TB patients enrolled in second-line anti-TB treatments (DOTS Plus treatment)**

	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 3-People reached	1163	2009	Top 10 Equ.	N												
Target	1,050	2,250	5,050	3,300	6,700	10,300	14,100	4,200								
Result	Pending result	Pending result	Pending result													

**Indicator 2.2 - Number and percentage of lab-confirmed MDR- TB patients successfully treated among those enrolled in second line anti-TB treatment (according to program guidelines) during a specified period of time**

	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 3-People reached		2009	Top 10 Equ.	N												
Target	N: D: P: %	21	N: 45 D: 64 P: 70%	N: 35 D: 50 P: 70%	N: 54 D: 77 P: 70%	N: 86 D: 123 P: 70%	N: 135 D: 193 P: 70%	N: 107 D: 153 P: 70%								
Result		Pending result	Pending result													

## 2.2.3. Cumulative Progress To Date

Latest reporting due period : 3 (01.Apr.11 - 30.Jun.11)

<b>Objective 1</b>	<b>Establish and enhance capacity for quality assured rapid diagnosis of DR-TB suspects in 43 Culture and DST laboratories in India by 2015 (CTD)</b>
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<b>SDA</b>	<b>MDR-TB</b>
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**Indicator 1.1 - Number of laboratories performing Line Probe Assay**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 0-Process/Activity Indicator	2	5	N/A	Not Found						0%

**Indicator 1.2 - Number of laboratories with enhanced sputum processing capacity**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 0-Process/Activity Indicator	N/A		N/A	Not Found						Cannot Calculate

**Indicator 1.3 - Laboratory staff trained on line probe assay**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 1-People trained	3	70	N/A	Not Found						0%

**Indicator 1.4 - Number of DR TB suspects examined for MDR TB**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 3-People reached	3	15,000	N/A	Not Found						0%

<b>Objective 2</b>	<b>Scale-up care and management of DR-TB in 35 states/Union Territories of India resulting in the initiation of treatment of 55,450 additional cases of drug Resistant over the project period (2010-2015) (CTD)</b>
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<b>SDA</b>	<b>MDR-TB</b>
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**Indicator 2.1 - Number of lab-confirmed MDR-TB patients enrolled in second-line anti-TB treatments (DOTS Plus treatment)**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 3-People reached	3	5,050	N/A	Not Found						0%

**Indicator 2.2 - Number and percentage of lab-confirmed MDR- TB patients successfully treated among those enrolled in second line anti-TB treatment (according to program guidelines) during a specified period of time**

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 3-People reached	3	N: 45 D: 64.3 P: 70 %	N/A	Not Found						0%

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

Grant Duration (months)	24 months	Grant Amount	45,187,531 \$
% Time Elapsed (as of end date of the latest PU)	0%	% disbursed by TGF (to date)	29%
Time Remaining (as of end date of the latest PU)	24 months	Disbursed by TGF (to date)	12,880,382 \$
Expenditures Rate (as of end date of the latest PU)	0%	Funds Remaining (to date)	32,307,149 \$

## 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.Oct.10	01.Jan.11	01.Apr.11	01.Jul.11	01.Oct.11	01.Jan.12	01.Apr.12	01.Jul.12
Period Covered To:	31.Dec.10	31.Mar.11	30.Jun.11	30.Sep.11	31.Dec.11	31.Mar.12	30.Jun.12	30.Sep.12
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	130,563	837,926	12,880,382	13,449,821	14,248,427	36,544,441	37,685,625	50,208,368
Summary Period Budget:	130,563	707,363	12,042,456	569,439	798,606	22,296,014	1,141,184	12,522,743

## Expenditure Categories

## Program Activities

## Implementing Entities

## - Comments and additional information

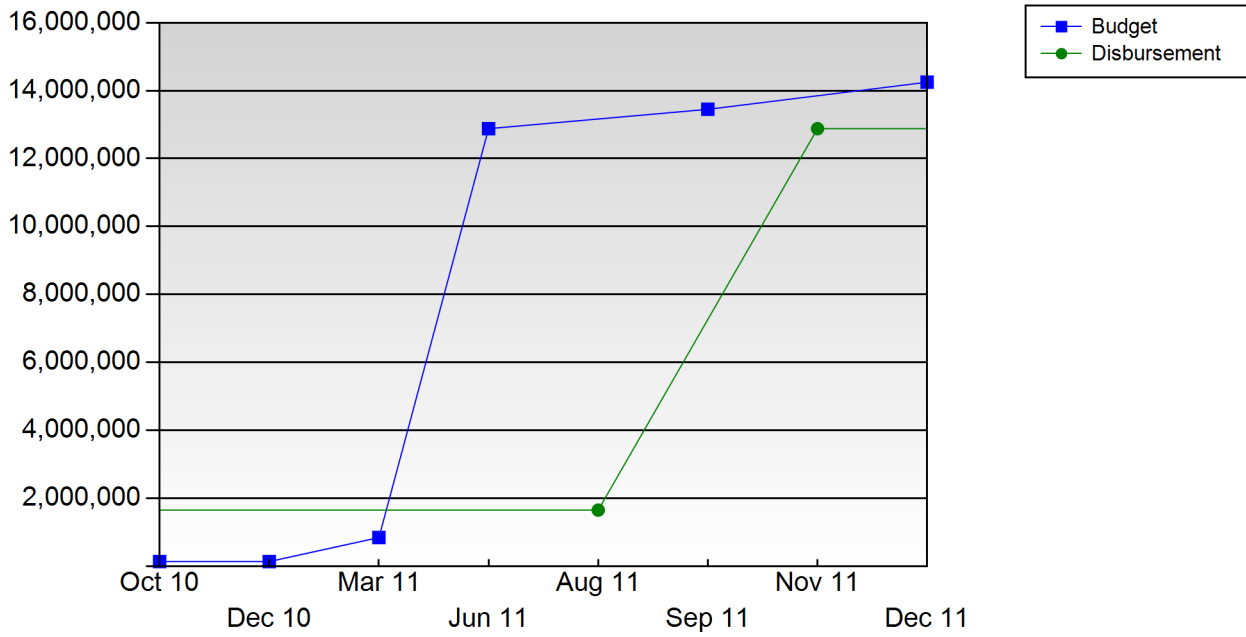
## 2.3.3. Program Expenditures

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

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

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#### 2.4. Progress Update and Disbursement Information

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

Progress Updates					Disbursement Information				
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
0	01.Oct.10 -		N/A	1	01.Oct.10 - 31.Mar.11	13,033,232	\$ 1,595,382	26 Aug 2011	
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
1st disbursement; late submission by PR following government approval of grant					<p>This is the first disbursement request under this grant agreement.</p> <p>The PR has requested a total amount of US\$ 13,033,232 to be split and sent directly to the International Dispensary Association Foundation (IDA), Geneva-based Foundation for Innovative New Diagnostics (FIND) and the Green Light Committee of the WHO Stop TB Partnership (GLC). The PR's disbursement request includes:</p> <p>US\$ 11,235,000 for the procurement of Second Line anti-TB drugs (SLD) through a Global Drug Facility (GDF) tender via IDA; US\$ 1,748,232 to FIND per Special Condition C.2 of Annex A of the grant agreement; and US\$ 50,000 to GLC per Special Condition C.9 of Annex A of the grant agreement.</p> <p>The LFA recommended only US\$ 134,406 for disbursement (US\$ 84,406 to FIND and US\$ 50,000 to GLC). The amount requested by the PR for P1 and P2 and the amount for the procurement of second-line anti-tuberculosis drugs (pending the receipt of pro-forma invoices from the procurement agent) has been excluded from this disbursement by the LFA.</p> <p>The Global Fund recommends a total amount of US\$ 1,645,382 to be split as follows:</p> <p>US\$ 50,000 to be disbursed directly to GLC; and</p> <p>US\$ 1,595,382 to be disbursed directly to FIND (as per the approved summary budget for FIND, the Q1, Q2 and Q3 (buffer) are US\$ 80,563, US\$ 707,364 and US\$ 807,455, respectively). While these original quarters have passed, CTD and FIND signed their own memorandum of understanding only on 7 July 2011. Therefore, for the purposes of orderly implementation of the CTD-FIND sub-agreement, FIND's Q1-Q3 budget should be projected for Q4-Q6.</p> <p>The remaining amount of US\$ 11,235,000 for the procurement of second-line anti-tuberculosis drugs will be disbursed directly to the procurement agent upon receipt of pro-forma invoices following the requisite GDF tenders.</p>				
<b>Progress Updates</b>					<b>Disbursement Information</b>				
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
0	01.Oct.10 -		N/A	1.1	01.Oct.10 - 31.Mar.11	13,033,232	\$ 50,000	26 Aug 2011	
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
1st disbursement; late submission by PR following government approval of grant					Disbursement to GLC				
<b>Progress Updates</b>					<b>Disbursement Information</b>				
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
0	01.Oct.10 -		N/A	1.2	01.Oct.10 - 31.Mar.11	13,033,232	\$ 11,235,000	24 Nov 2011	
<b>Summary of Progress</b>					<b>Reasons for variance between PR Request and Actual Disbursement</b>				
1st disbursement; late submission by PR following government approval of grant					Disbursement for 2nd line-drugs				

**2.5. Contextual Information**

Title	Explanatory Notes

<b>2.6. Phase 2/ Periodic Review Grant Renewal</b>	
<b>Performance Rating</b>	<b>Recommendation Category</b>
<b>Rationale for Phase 2/ Periodic Review Recommendation Category</b>	
<b>Rationale for Phase 2/ Periodic Review Recommendation Amount</b>	

<b>Time-bound Actions</b>	
<b>Issues</b>	<b>Description</b>



