

On-going Progress Update and Disbursement Request

GENERAL GRANT INFORMATION

Country:	REPUBLIC OF MOLDOVA
Disease:	Tuberculosis
Grant Number:	MOL-607-202-T
Principal Recipient:	Project Coordination, Implementation and Monitoring Unit, Ministry of Health
Program Start Date:	October 01, 2007
Currency:	USD

PROGRESS UPDATE PERIOD

Progress Update - Reporting Period:	Cycle:	Select	Number:	3
Progress Update - Period Covered:	Beginning Date:	1-Oct-2008	End Date:	31-Mar-2009
Progress Update - Number:		3		

DISBURSEMENT REQUEST PERIOD

Disbursement Request - Disbursement Period:	Cycle:	Semester	Number:	4
Disbursement Request - Period Covered:	Beginning Date:	1-Apr-2009	End Date:	30-Sep-2009
Disbursement Request - Number:		4		

TERMS AND ACRONYMS USED IN THIS PROGRESS UPDATE AND DISBURSEMENT REQUEST HAVE THE MEANING GIVEN TO THEM IN THE GRANT AGREEMENT RELATING TO THE ABOVE GRANT

Section 1: Programmatic and Financial Progress Update

A. PROGRAM PROGRESS

i. Program Objectives	
Objective No.	Objective Description
1	Strengthening DOTS realisation to improve TB detection and case management
2	Management of drug resistant tuberculosis by extension of implemented DOTS-Plus Project
3	Strengthening the management and coordination of the National Healthcare System for TB patients and management of project
4	Increase public awareness of tuberculosis and reduce stigmatization
Select	

ii. Impact / Outcome Indicators						
Impact / Outcome	Indicator Description	Baseline (if applicable)		Intended Yearly Targets	Actual Yearly Results	Reasons for deviation and any other comments
		Value	Year			
Outcome	TB case notification rate - Number of new and relapse TB cases reported annually per 100,000 population	130	2006	120	120.5	A total of 4,940 TB cases (new and relapses) were registered in 2008 with evolutive tuberculosis (denominator: 4100,645 population of Republic of Moldova, both banks, source: National Bureau of Statistics, 2008 for Right Bank and TB Hospital, Bender for left bank). The decreasing trend of case notification rate from last years continued in 2008 with a steady pace (120,5 TB cases per 100,000 population in 2008 versus 129,4 in 2007, 132,5 in 2006, 133,4 in 2005).
Outcome	Case detection rate - Number and percentage of new smear-positive TB cases detected under DOTS out of the total estimated number of new smear-positive TB cases per year	66%	2006	68.5%	64,4% (1,533 / 2,382)	1,533 new smear positive TB cases diagnosed in 2008. Denominator for 2008 has been used from WHO TB budgeting template v3 (February, 2008).
Impact	TB mortality rate - Estimated number of deaths due to TB (all forms) per year, per 100,000 population	18,9	2006	13	17,4	714 deaths among TB patients occurred during year 2008 (17,4 deaths due to TB (all forms) per 100,000 population). The value of the indicator remains high due to the chronically cases from prevalence most of them with MDR TB. In 2008 there has been registered a slight decrease of mortality rate in comparison with previous year (20,2 deaths due to TB per 100,000 population) mostly resulting from the extension of DOTS Plus program. Although the actual result is beyond intended target it is in line with WHO estimations of 18-19% for Moldova while the targets intended for first years of implementation are by far too ambitious.
Outcome	Treatment success rate - Number and percentage of new smear-positive pulmonary TB cases registered under DOTS that are successfully treated	61,5%	2005	69%	61,4%	A total of 989 new SS+ TB cases from 1,610 diagnosed in 2007 were successfully treated. There is a slight decrease in treatment success rate for TB cases compared with previous year (62,3% in 2006). The low level of the success rate is determinata by the high level MDR TB between new SE positive cases (22,7%, source: Drug Resistance Surveillance data, 2007, reported to WHO on 10.09.2008), high level of failures and defaulters cases. 94 new SS+ cases from 1,610 registered in 2007 have been diagnosed with MDR TB and transferred for treatment on DOTS Plus scheme.
Outcome	Default rate among new smear-positive cases - Number of new smear-positive pulmonary TB cases registered in a specified period that interrupted treatment for more than two consecutive months out of total new smear-positive pulmonary TB cases registered during the specified period	10,9%	2005	8,5%	11,0%	A total of 177 new SS+ TB cases from 1,610 diagnosed in 2007 were defaulters.
Select						
Select						
Select						
Select						
Select						
Select						
Select						

On-going Progress Update and Disbursement Request

PROGRESS UPDATE PERIOD

Grant number:	MOL-607-G02-1		
Progress Update - Reporting Period:	Cycle:	Number:	3
Progress Update - Period Covered:	Beginning Date:	End Date:	31-Mar-2009
Progress Update - Number:	3		

iii. Service Delivery Areas, Indicators, and Targets

Objective No.	Service Delivery Area	Indicator Description	Directly Tied?	Level	Baseline (if applicable)		Intended Targets to date	Actual Results to date	Reasons for programmatic deviation and any other comments
					Value	Year			
1	TB: Timely detection and quality treatment of cases	Number of new smear-positive TB cases detected	No	3	1,679	2006	2,964	2,233	A total of 2,233 new SS+ cases have been detected during 18 months of project implementation (Q.4.2007 - Q.1.2009). The intended target has not been reached due to the decreasing trend of case notification rate registered during last years. Moldova entered into a stabilisation stage of TB epidemic.
1	TB: Timely detection and quality treatment of cases	Number of people receiving DOTS treatment - (Absolute number of TB patients with instituted treatment (directly observed treatment, short course (DOTS) based)	No	3	18,569	March 2006	11,700	8,641	2,671 patients have started DOTS treatment during reported period and 8,641 during project implementation. During the last two years there is a stable decrease in the number of all TB cases diagnosed in the country which directly impact on the number of patients included on DOTS treatment
1	TB: Timely detection and quality treatment of cases	Number and percentage of new smear-positive TB cases registered under DOTS who are successfully treated	No	3	61.5%	2005	Absolute numbers to be reported	465/805	A total of 465 of new SS+ TB cases from the cohort of preceding 12 months (805 patients registered under DOTS during quarter 4, 2007 and quarter 1, 2008) have been successfully treated. Treatment success rate for year 2007 is 61.4%.
1	TB: Timely detection and quality treatment of cases	Number of medical staff trained in DOTS activities	Yes	1	1,448	March 2006	635	892	534 medical staff have been trained during reported semester: 44 TB doctors and 490 PHC personnel (175 PHC doctors and 315 nurses). A total of 892 people have been trained since the beginning of grant implementation: 91 TB doctors, 751 PHC personnel (312 doctors and 439 nurses), and 50 laboratory specialists in bacteriological and microscopical TB diagnosis. Note: following the validation of data the result reported for Semester II has been adjusted from 359 to 358 (less one PHC medical staff (nurse) trained).
1	TB/HIV collaborative activities: Prevention of HIV in TB patients	Number of healthcare providers trained in collaborative TB/HIV activities	Yes	1	0	2006	100	97	A total of 97 healthcare providers (TB specialists and infectionists) have been trained on collaborative TB/HIV activities.
1	TB/HIV collaborative activities: Prevention of HIV in TB patients	Number of TB doctors trained in voluntary counseling and testing (VCT) among TB patients	Yes	1	0	2006	175	243	The nature of this activity has been adjusted to the VCT concept in Moldova, developed later than the application to GFATM Round 6. According to this concept TB patients that require VCT services will be referred to local VCT cabinets, consequently it has been decided to train VCT counselors in TB control so they provide appropriate VCT services to TB patients. At the same time the necessity of training TB specialists from outpatient facilities in VCT became evident. Though during reported period TB specialists have been involved in VCT and TB treatment adherence. During reported period 154 specialists have been trained, from them 58 VCT counselors and infectionists from established VCT sites and 96 specialists responsible for TB treatment of outpatients. A total of 243 people have been trained since the beginning of grant implementation: 147 VCT specialists and 96 TB specialists. Note: The data for Semester II have been updated based on data verification and validation operated by the M&E Unit of the National Center of Health Management (the actual result reported changed for
1	TB/HIV collaborative activities: Prevention of HIV in TB patients	Number and percentage of TB patients counseled and tested for HIV	No	3	57.3% (3,229/5,632)	2005	Not Applicable	1,834/2,329	A total of 1,834 registered TB patients from 2,329 (new and relapses) diagnosed in Q4.2008 and Q1.2009 have been tested to HIV/AIDS which represents 78.75%.
2	TB: MDR-TB	Number of MDR-TB patients enrolled in DOTS-Plus treatment	Yes	3	72	June 2006	300	450	340 MDR TB patients have been enrolled on DOTS Plus treatment during reported semester, using funds Global Fund Round 6 Grant. The first delivery of drugs from Global Fund R6 TB Grant for 250 patients has been performed during 4th quarter of year 2008. Note: following the validation of data the result reported for Semester II has been adjusted from 92 to 110.
2	TB: MDR-TB	Treatment success rate among MDR-TB patients enrolled in DOTS-Plus treatment	Yes	3	Not Applicable	June 2006	Not Applicable	59.09% (52/88) 2006 cohort	A total of 52 MDR TB patients from 88 who started DOTS Plus treatment in 2006 were successfully treated (cured and with treatment completed). Treatment success rate data became available 27 months after initiation of MDR TB treatment.
2	TB: MDR-TB	Number of medical staff trained in DOTS-Plus activities	Yes	1	159	June 2006	250	421	270 people have been trained on DOTS Plus activities during reported semester: 77 TB doctors and 193 PHC workers. A total of 421 people have been trained since the beginning of grant implementation: 159 TB doctors and 262 PHC personnel, including from Transnistria region. Note: following the validation of data the result reported for Semester II has been adjusted from 145 to 151 (plus 6 PHC workers trained).
2	Infrastructure	Number of TB facilities providing DOTS-Plus treatment services	No	2	2	June 2006	Not Applicable	6	There are 6 functional MDR TB departments. National TB Institute, Penitentiary "Pruncui" Hospital, Voronin TB Hospital, Chisinau Municipal TB Hospital, Bender TB Hospital and Balti Municipal Hospital, TB dispensary.
3	Human resources	Number and percentage of reporting districts submitting complete and timely quarterly reports according to DOTS using the upgraded surveillance system	No	0	14/52 27.5%	2006	38/52 73.1%	48/52 92.3%	48/52 (92.3%)
4	Prevention: BCC - community outreach	Percentage of population who can identify three most important symptoms of TB	Yes	0	48.8%	2004	Not Applicable	58.9%	The KAP survey on TB in general population has been launched in quarter III, 2008 and survey report submitted by the research company at the end of December, 2008 though data was not available to be reported in due time (Semester 2). According to the KAP Survey 58.9% of population can identify three most important symptoms of tuberculosis as follows: cough with smear lasting longer than 3 weeks, fatigue and cough with smear and blood (integrated indicator of knowledge about tuberculosis symptoms). The survey covered the right bank of Dniester River. Note: Intended target for Semester II was of 55%.

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Progress Update - Number:	3		

iv. Overall evaluation of performance

From 13 process indicators 4 are Not Applicable and for one absolute numbers are to be reported for the third semester of Grant implementation. From reported indicators: the performance of two indicators is between 60% and 89% from target (the explanation is presented in the comments column), the performance of one indicator is between 90% and 100% from target, for 5 indicators the performance is exceeding 100% from target, and for one indicator the result due for Semester II is presented ('Percentage of population who can identify three most important symptoms of TB').

v. Planned changes in the program, if any.

NA

vi. Other program results, success stories, issues or lessons learned

NA

B. PR COMMENTS ON THE FULFILLMENT OF CONDITIONS PRECEDENT AND/OR SPECIAL CONDITIONS UNDER GRANT AGREEMENT

Conditions Precedent and/or other special conditions	Fulfilled? (Yes/No)	PR Comments
	N/A	
	Select	

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Progress Update - Period Covered:	Beginning Date:	End Date:	31-Mar-2009
Progress Update - Number:	3		

C. PROGRAM EXPENDITURES

All amounts are in: USD	Budget for Reporting Period	Actual for Reporting Period	Variance	Reason for Variance	Cumulative Budget through period of Progress Update	Actual through period of Progress Update	Variance	Reason for Variance
1. Total actual expenditures vs. budget	1,301,135.36	866,802.79	434,332.57		4,530,564.74	4,162,339.06	368,225.68	
1a. PR's total expenditures	1,186,130.66	721,690.39	464,440.27	The tenders were made and contracts signed for delivery of health products in the amount of 134197 USD. The procurement of 1st line TB drugs (230000USD) will be decided after the monitoring visit of GDF in the country. Aprox. 100000 savings were obtained, the utilization will be decided by CCM technical working group.	4,082,794.04	3,762,471.41	320,322.63	The procurement of 1st line TB drugs (230000USD) will be decided after the monitoring visit of GDF in the country. Aprox. 100000 savings were obtained, the utilization will be decided by CCM technical working group.
1b. Disbursements to sub-recipients	115,004.70	145,112.40	(30,107.70)	The overpayment is caused by payments for delayed activities related to social assistance for MDR TB patients on DOTS plus treatment.	447,770.70	399,867.65	47,903.05	Due to the fact than social assistance for MDR TB patients on DOTS plus treatment implemented from the GF Round 1 funds were prolonged during close-out period of the GF R1 Grant (till September 01, 2008), there is a delay in implementation of social assistance activities for MDR TB patients from Round6 TB Grant. The activity has started in September 2008. During quarter 3, 2008 the first payment will be made.
2. Health product expenditures vs. budget <i>(already included in "Total actual" figures above)</i>	876,054.66	308,224.32	567,830.34		2,678,444.04	2,277,177.11	401,266.93	
2a. Pharmaceuticals	646,253.25	35,896.62	610,356.63	The procurement of 1st line TB drugs (230000USD) will be decided after the monitoring visit of GDF in the country. The stabilization of TB situation with decreasing of number of patients lead to decreasing of necessities in 1st line TB drugs. The utilization of the savings are utilized for other activities by the decision of CCM technical working group.	1,751,770.43	1,525,132.26	226,638.17	The procurement of 1st line TB drugs (230000USD) will be decided after the monitoring visit of GDF in the country.
2b. Health products, commodities and equipment	229,801.41	272,327.70	(42,526.29)	There was an advance payment for X-Ray films.	926,673.61	752,044.85	174,628.76	The tenders were made and contracts signed for delivery of health products in the amount of 134197 USD.

Program expenditures were used for the procurement of health products:

Yes

If yes, information about procurements have been included in the Global Fund's Price Reporting Mechanism:

Yes

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DISBURSEMENT REQUEST PERIOD

Grant number:	MOL-607-G02-T			
Disbursement Request - Disbursement Period:	Cycle:	Semester	Number:	4
Disbursement Request - Period Covered:	Beginning Date:	1-Apr-2009	End Date:	30-Sep-2009
Disbursement Request - Number:	4			

Section 2: Cash Reconciliation and Disbursement Request

A: CASH RECONCILIATION FOR PERIOD COVERED BY PROGRESS UPDATE

1. Cash Balance: Beginning of period covered by Progress Update (line 6 from Cash Reconciliation section of the period covered by the previous Progress Update):		294,923.04
<hr/>		
Add:	2. Cash disbursed to the PR by the Global Fund during the period covered by this progress update: ⁽¹⁾	1,896,959.00
	3. Interest received on bank account and other income received:	1,446.36
		1,898,405.36
<hr/>		
Less:	4. Total program expenditures during period covered by Progress Update (value entered in Section 1C. "Total actual expenditures"):	866,802.79
	5. Other expenditures incurred (bank fees, other transaction costs, net exchange rate gains/losses):	866,802.79
		866,802.79
<hr/>		
6. Cash Balance: End of period covered by Progress Update:		1,326,525.61

B: DISBURSEMENT REQUEST

Total forecasted net cash expenditures by the Principal Recipient for the period immediately following the period covered by the Progress Update ^(2, 3):

7. Period beginning date:	1-Apr-2009	end date:	30-Sep-2009	amount as originally budgeted:	1,144,942.74	forecasted amount:	1,518,348.19
8. Additional quarter (cash "buffer") beginning date ⁽⁴⁾ :	1-Oct-2009	end date:	31-Dec-2009	amount as originally budgeted:	0.00	forecasted amount:	0.00
							1,518,348.19

Please explain any variance between the forecasted amounts and the amounts as originally budgeted

The difference is caused by cumulative variance between budgeted and actual figures as of April 01, 2009.

Less:	Cash Balance: End of period covered by Progress Update (number 6 above):	1,326,525.61
	9. Cash received from the Global Fund after the period covered by Progress Update or cash "in transit" ⁽⁵⁾ (if any):	1,326,525.61
<hr/>		
10. PR's Disbursement Request from the Global Fund for the period immediately following the period covered by the Progress Update, plus additional period (cash buffer):		191,822.58

11. Does the PR's Disbursement Request include funds for health product procurement? Yes

12. Exchange Rate (used to translate local currency into USD): 10.4818

Footnotes:

- 1 - Gross amount disbursed by the Global Fund (i.e., any associated bank fees or transaction costs should not be deducted in this line, but included in line 5. "Other expenditures incurred")
- 2 - Expenditures listed must be covered by current budget forecasts
- 3 - Total forecasted net cash expenditures should include any commitments made in the period covered by the Progress Update that are forecasted to be spent during the period covered by the Disbursement Request
- 4 - Additional period (cash "buffer"): disbursement of funds for Q9 is contingent upon the signing of Phase 2 or as otherwise stipulated per implementation letter
- 5 - "Cash in transit" includes amounts disbursed but not yet received by the PR and disbursement requests not yet approved by the Global Fund.

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Country:	REPUBLIC OF MOLDOVA
Disease:	Tuberculosis
Grant number:	MOL-607-G02-T
Principal Recipient:	Project Coordination, Implementation and Monitoring Unit, Ministry of Health
Program Start Date:	October 01, 2007
Currency:	USD

PROGRESS UPDATE PERIOD

Progress Update - Reporting Period:	Cycle:		Number:	3
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DISBURSEMENT REQUEST PERIOD

Progress Update - Reporting Period:	Cycle:	Semester	Number:	4
Progress Update - Period Covered:	Beginning Date:	1-Apr-2009	End Date:	30-Sep-2009
Progress Update - Number:	4			

Section 3: Cash Request and Authorization

A: CASH REQUEST

On behalf of the PR, the undersigned hereby requests the Global Fund to disburse funds under the above-referenced Grant Agreement as follows:

1. Cash amount requested from the Global Fund (from Section 2.B line 10, in: USD):

191,822.58

2. Amount requested in words (in: USD):

One hundred ninety one thousands eight hundred twenty two US Dollars 58 cents

B: AUTHORIZATION

The undersigned acknowledges that: (i) all the information (programmatic, financial, or otherwise) provided in this Progress Update and Disbursement Request is complete and accurate; (ii) funds disbursed in accordance with this request shall be deposited in the bank account specified in block 9 of the face sheet of the Grant Agreement unless otherwise specified herein; and (iii) funds disbursed under the Grant Agreement shall be used in accordance with the Grant Agreement.

Signed on behalf of the Principal Recipient:
(signature of Authorized Designated Representative)

Name:

Victor Volovei

Title:

Executive Director

Date and Place:

October 31, 2008

Bank Account Details (if different than the account details specified on block 9 of the face sheet of the Grant Agreement)

Owner of Bank Account:	_____
Account Title:	_____
Account number:	_____
Bank name:	_____
Bank address:	_____
Bank SWIFT Code:	_____
Bank Code:	_____
Routing instructions:	_____

Comments (e.g. changes to PR's bank account details, "split disbursements" to the PR and third parties etc.):

<p>The account was opened after signing of Grant Agreement on May 14, 2007.</p>

On-going Progress Update and Disbursement Request

GENERAL GRANT INFORMATION

Country:	REPUBLIC OF MOLDOVA		
Disease:	Tuberculosis		
Grant number:	MOL-607-G02-T		
Principal Recipient:	Project Coordination, Implementation and Monitoring Unit, Ministry of Health		
Program Start Date:	October 01, 2007		
Currency:	USD		

PROGRESS UPDATE PERIOD

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Progress Update - Period Covered:	Beginning Date:	End Date:	31-Mar-2009
Progress Update - Number:	3		

DISBURSEMENT REQUEST PERIOD

Progress Update - Reporting Period:	Cycle:	Semester:	Number:	4
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Progress Update - Number:	4			

Section 3: Cash Request and Authorization

A: CASH REQUEST

On behalf of the PR, the undersigned hereby requests the Global Fund to disburse funds under the above-referenced Grant Agreement as follows:

- Cash amount requested from the Global Fund (from Section 2.B line 10, in: USD):
- Amount requested in words (in: USD):

191 822,58
Paid
May 27, 2009
MBT-3933

One hundred ninety one thousands eight hundred twenty two US Dollars 58 cents

B: AUTHORIZATION

The undersigned acknowledges that: (i) all the information (programmatic, financial, or otherwise) provided in this Progress Update and Disbursement Request is complete and accurate; (ii) funds disbursed in accordance with this request shall be deposited in the bank account specified in block 9 of the face sheet of the Grant Agreement unless otherwise specified herein; and (iii) funds disbursed under the Grant Agreement shall be used in accordance with the Grant Agreement.

Signed on behalf of the Principal Recipient:
(signature of Authorized Designated Representative)

Name:

Victor Volovei

Title:

Executive Director

Date and Place:

May 11, 2009

Bank Account Details (if different than the account details specified on block 9 of the face sheet of the Grant Agreement)

Owner of Bank Account	_____
Account Title:	_____
Account number:	_____
Bank name:	_____
Bank address:	_____
Bank SWIFT Code:	_____
Bank Code:	_____
Routing instructions:	_____

Comments (e.g. changes to PR's bank account details, "split disbursements" to the PR and third parties etc.).

The account was opened after signing of Grant Agreement on May 14, 2007