

**PMI-Kenya FY2010 MOP  
Year 3: Table 2, July 2010**

<b>Proposed Activity</b>	<b>Mechanism</b>	<b>Total Budget</b>	<b>Commodities</b>	<b>Geographic area</b>	<b>Description of Activity</b>
<b>Insecticide Treated Nets</b>					
Procure LLINs for routine distribution	DELIVER	\$7,500,000	\$7,500,000	Endemic/Epidemic districts	Buy 1.5 million nets for routine distribution to meet 18 months of demand in epidemic, endemic and seasonal at risk districts. Nets are estimated at \$5 per net. <b>REPROGRAMMING #1.1: number of nets reduced.</b>
Procure LLINs for rolling mass campaign	DELIVER	\$5,000,000	\$5,000,000	Endemic/Epidemic districts	Buy 1 million nets for rolling mass campaigns epidemic, endemic and seasonal at risk districts. Nets are estimated at \$5 per net <b>REPROGRAMMING #1.1: new activity added</b>
LLIN routine distribution	APHIA II - HCM (PSI)	\$1,500,000	\$0	Endemic/Epidemic districts	Support the routine distribution of 1.5 million LLINs over the course of 18 months <b>REPROGRAMMING #1.1: reduce cost of activity.</b>
ITN mass campaign support	APHIA II - HCM (PSI)	\$1,650,000	\$0	Endemic/Epidemic districts	Provide DOMC assistance in implementing the 2010 sub-national mass campaign by supporting logistical costs, distribution costs and/or post-campaign evaluation <b>REPROGRAMMING #1.1: increase cost of activity.</b>
USAID TDY visit	USAID	\$0	\$0	Endemic/Epidemic districts	1 TDY visit from USAID to provide assistance in implementing ITN program (Core Funded)
<b>Subtotal</b>		<b>\$15,650,000</b>	<b>\$12,500,000</b>		
<b>Indoor Residual Spraying</b>					
IRS implementation and management	TBD IRS Follow-On	\$6,800,000	\$2,744,000	9 Endemic Districts	Spray in three new endemic districts and continue IRS operations in Rachuonyo.
Epidemiologic surveillance in endemic IRS districts	MEASURE Evaluation	\$150,000	\$0	9 Endemic Districts	Support enhanced epidemiological surveillance and monitoring in both highland and lowland districts to provide information that the DOMC can use to make decisions on the best strategy for IRS <b>REPROGRAMMING #1.3a: mechanism change</b>
Entomological monitoring of IRS effectiveness in sprayed districts	CDC IAA (with sub-grant to KEMRI)	\$150,000	\$0	9 Endemic Districts	Continue insecticide resistance monitoring in ten sites in western Kenya and expand to include areas in central and coastal Kenya
Environmental monitoring	EMCAB	\$0	\$0	IRS districts	Continue IRS environmental assessment activities <b>REPROGRAMMING #1.2: cancel activity</b>
CDC TDY visits	CDC IAA (Atlanta)	\$24,200	\$0	9 Endemic Districts	2 visits from CDC to provide assistance in implementing IRS activities
<b>Subtotal</b>		<b>\$7,124,200</b>	<b>\$2,744,000</b>		
<b>Epidemic Response and Surveillance</b>					

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Epidemiologic surveillance in transitioning IRS epidemic districts	MEASURE Evaluation	\$200,000	\$0	Epidemic and Seasonal transmission districts	Support transition from IRS intervention in epidemic districts. Implement epidemic surveillance activities to detect malaria outbreaks. <b>REPROGRAMMING #1.3b: Mechanism change</b>
Epidemic response and surveillance stockpile supplies	DELIVER	\$200,000	\$200,000	Epidemic and Seasonal transmission districts	Support the procurement of supplies for epidemic response stockpiles in the targeted districts, including RDTs for diagnostics and ACTs for large-scale treatment.
<b>Subtotal</b>		<b>\$400,000</b>	<b>\$200,000</b>		
<b>Intermittent Preventative Treatment of Pregnant Women</b>					
Support for roll-out of new IPTp policy guidelines	JHPIEGO bi-lateral	\$375,000	\$0	priority endemic districts	Support the roll out of IPTp policy guidance to health workers in malaria endemic districts. This activity builds on the pilot facility level interventions aimed at strengthening IPTp delivery in targeted areas in Nyanza Province
Support for community mobilization to increase IPTp acceptance	JHPIEGO bi-lateral	\$500,000	\$0	priority endemic districts	Strengthen community interventions by supporting community behavior change communication and social mobilization to increase demand for and uptake of IPTp
<b>Subtotal</b>		<b>\$875,000</b>	<b>\$0</b>		
<b>Case Management</b>					
<b>Diagnostics</b>					
Provide support to the DOMC for roll-out of the new RDT Guidelines in malaria- endemic districts.	New Bilateral Diagnostics Mechanism	\$500,000	\$0	targeted district(s)	Support the introduction of new DOMC RDT policy guidelines in malaria-endemic districts through staff training and supervision to handle, read and use diagnostic findings. Establishment of a QA/QC system for checking the continued accuracy of RDT diagnostic services <b>REPROGRAMMING #1.4: mechanism change, consolidating RDT activities under one partner</b>
	DELIVER	\$300,000	\$300,000	targeted district(s)	Procurement of 500,000 RDTs
	<i>MVDP (Walter Reed)</i>	\$0	\$0	<i>targeted district(s)</i>	<i>Establishment of a QA/QC system for checking the continued accuracy of RDT diagnostic services</i> <b>REPROGRAMMING #1.4: activity combined; funding zeroed out.</b>

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Strengthen capacity for malaria microscopy at the national, provincial and district level	MVDP (Walter Reed)	\$600,000	\$0	targeted district(s)	Increase capacity of national, provincial and district level institutions at these levels to oversee and monitor implementation of the national strategies. Technicians from national, provincial and district level institutions will be trained to supervise diagnostic activities of lower level facilities in the country. Provision of supportive supervision and on-the-job training by national/provincial/district level technicians and technologists trained under Years 1 and 2 of PMI. Supervisors will assess staff capabilities, provide on-site remedial action, conduct internal and external quality assurance of malaria smear preparation and reading, and ensure quality control of reagents and equipment. <b>REPROGRAMMING #1.4: consolidating microscopy activities under one partner</b>
Procure and distribute 100 microscopes, reagents and consumables to support malaria diagnosis	DELIVER	\$300,000	\$300,000	Nationwide	Support increased diagnostic capacity of trained lab technicians with necessary equipment and reagents.
<b>Treatment</b>					
Purchase AL	DELIVER	\$8,040,000	\$8,040,000	Nationwide	Purchase up to 5.8 million treatments of AL. Budget covers cost of AL treatments, freight and insurance, customs clearance and storage and distribution costs at KEMSA. Quantities will meet the estimated stock needs for the next 18 months. <b>REPROGRAMMING #1.5: increased budget by \$500,000.</b>
TA for supply chain management and in-country drug distribution	Logistics Follow On Project	\$786,000	\$0	Nationwide	Pharmaceutical and supply chain strengthening: include support to distribution of AL and SP; end-use verification/monitoring of availability of key antimalarial commodities at the facility level; technical and financial support to the DOMC, DOP and district pharmacists to ensure effective planning and coordination of drug needs, procurement, distribution and supervision of stock monitoring, on-the-job training and antimalarial drug consumption data gathering as well as rational use <b>REPROGRAMMING #1.3e: Mechanism Change.</b>
Strengthen antimalarial drug quality monitoring and surveillance	USP DQI	\$200,000	\$0	Nationwide	Provision of technical, strategic and operational support to the PPB and DOMC to support the detection and removal by the PPB of substandard and counterfeit antimalarials.

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Strengthen malaria supervision	APHIAplus Zone 1, Zone 2	\$600,000	\$0	3 provinces - Nyanza, Coast, Western	Development and support to operationalization of an integrated malaria supervision plan at provincial and district level <b>REPROGRAMMING #1.3c: Mechanism Change</b>
USAID TDY visit	USAID	\$0	\$0	Nationwide	1 USAID TDY to provide assistance for CM/Drug Procurement (Core Funded)
<b>Subtotal</b>		<b>\$11,326,000</b>	<b>\$8,640,000</b>		
<b>IEC/BCC</b>					
Integrated community based IEC/BCC	C-CHANGE	\$500,000	\$0	targeted endemic districts	Continue community-based IEC/BCC efforts through sub-grants to local NGOs <b>REPROGRAMMING #1.6: split funding between two mechanisms for a more strategic implementation</b>
Integrated community based IEC/BCC	APHIA II - HCM (PSI)	\$1,200,000	\$0	targeted endemic districts	Expand community-based IEC/BCC efforts to reach priority populations in malaria endemic districts <b>REPROGRAMMING #1.6: split funding between two mechanisms for a more strategic implementation</b>
National IEC material production	APHIA II - HCM (PSI)	\$345,000	\$0	Nationwide	Support national level IEC material production and dissemination to facilitate communication of new and/or revised DOMC policies and key messages for national-level dissemination, for provincial-level health care workers, local DHMTs, level 2 and 3 facilities, and/or targeted communities. Support the DOMC to conduct donor coordination, undertake advocacy-related activities to ensure that malaria control is sustained as a national priority, and support national malaria-related activities.
Peace Corps community based BCC activities	APHIA II - HCM (PSI)	\$25,000	\$0	priority endemic districts	Support six peace corps volunteers assigned to malaria endemic regions to undertake key BCC activities to create awareness and demand for ITN use, prompt treatment of fever and acceptance of IPTp. <b>REPROGRAMMING #1.3d: Mechanism Change.</b>
USAID TDY visit	USAID	\$0	\$0	Nationwide	1 USAID TDY visit to provide assistance for IEC/BCC Program (Core Funded)
<b>Subtotal</b>		<b>\$2,070,000</b>	<b>\$0</b>		
<b>DOMC</b>					
Support to DOMC	APHIA II - HCM (PSI)	\$200,000	\$0		Support to improve the DOMC's technical capacity, fulfill its supervisory role, and enhance the role of the technical working groups.

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Strengthen DOMC global fund grant management	Capacity Bi-Lateral	\$100,000	\$0		Strengthen DOMC capacity for effective Global Fund grant management and administration to ensure timely and effective implementation of planned activities. <b>REPROGRAMMING #1.3f: mechanism change.</b>
<b>Subtotal</b>		<b>\$300,000</b>	<b>\$0</b>		
<b>M&amp;E</b>					
Support for implementation of the National M&E plan	MEASURE Evaluation	\$200,000	\$0	Nationwide	Provision of technical assistance and capacity building of existing DOMC M&E staff to establish workable processes to monitor and disseminate programmatic performance <b>REPROGRAMMING #1.3g: mechanism change</b>
Train two Field Epidemiology and Laboratory Training Program epidemiologists	CDC IAA	\$100,000	\$0	Nationwide	Train two FELTP trainees for a two-year secondment, upon graduation, to the DOMC M&E and MIP teams to increase the long-term capacity within the DOMC to carry out appropriate program planning, implementation and monitoring and evaluation. The budget for each trainee includes tuition, stipend, laptop, materials, training, travel, and conferences for the two year program.
Provide targeted support to the DOMC's acquisition of routine data through the MIAS and data consolidation and analysis	MEASURE Evaluation	\$150,000	\$0	nationwide	Strengthen the quality and timeliness of data by the various data sources (HMIS, LMIS, PV system, IDSR etc). Collect national and sub-national level data to consolidate and provide evidence of where Kenya is and the progress made to date. <b>REPROGRAMMING #1.3h: Mechanism Change.</b>
<i>In vivo</i> drug efficacy testing	MVDP (Walter Reed)	\$50,000	\$0	targeted district(s)	Continue <i>In vivo</i> drug efficacy monitoring at eight established DOMC sites to test the sensitivity of AL and examine efficacy of new ACT molecules
Conduct the 2010 MIS	MEASURE DHS III	\$700,000	\$0	nationwide	Support the 2010 Malaria Indicator Survey to measure coverage of malaria interventions and malaria case management on the national level <b>REPROGRAMMING #1.5: reduce activity budget.</b>
Complementary data on malaria-related morbidity and mortality in DSS	CDC IAA (with sub-grant to KEMRI)	\$75,000	\$0	district-level, population of 135,000	Support reporting of complementary data on malaria-related morbidity and mortality in DSS
CDC TDY support	CDC IAA (Atlanta)	\$12,100	\$0	Nationwide	Support one CDC TDY to provide technical assistance for HMIS support and M&E capacity building

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Support for the PMI Impact Evaluation	MEASURE Evaluation	\$30,000	\$0	Nationwide	Support for the implementation of the PMI Impact Evaluation. <b>REPROGRAMMING #1.2: Activity Added, **combines with FY09 Reprogramming #1 action of \$50,000 for a total of \$80,000.**</b>
<b>Subtotal</b>		<b>\$1,317,100</b>	<b>\$0</b>		
<b>Staffing and Administration</b>					
In country Administration and Staff	USAID	\$757,000	\$0	Nationwide	USAID Staffing and Mission wide support efforts
In country Administration and Staff	CDC IAA (Atlanta)	\$180,700	\$0	Nationwide	CDC Advisor Staffing and support costs
<b>Subtotal</b>		<b>\$937,700</b>	<b>\$0</b>		
<b>GRAND TOTAL</b>		<b>\$40,000,000</b>	<b>\$23,884,000</b>		

(over)/under budget:                      \$0                      60%