

**Table 2**  
**President's Malaria Initiative--Guinea**  
**Planned Obligations for FY 2015 - Revised 03 November 2015**

Proposed Activity	Mechanism	Budget		Geographic Area	Description
		Total \$	Commodity \$		
<b>PREVENTIVE ACTIVITIES</b>					
<b>Insecticide-treated Nets</b>					
Procurement and delivery of LLINs	USAID/Deliver Project	2,570,000	2,570,000	National	Procure and deliver 1,000,000 LLINs, which will be used for the 2016 universal coverage campaign. If the campaign secures enough additional nets and there becomes a surplus for the campaign, the surplus nets will be used for routine distribution via ANC and EPI.
Distribution of LLINs	Stop Palu	1,000,000	0	National	Pay for distribution costs of 1,000,000 campaign nets (estimated cost of \$1/net).
BCC for LLIN use	Stop Palu	Cost covered under BCC section	0	PMI Target Areas	BCC for ITN use will be part of an integrated communication package including MIP and case management, following national standards and in conjunction with what other donors are doing in their respective target areas.
<b>SUBTOTAL ITNs</b>		3,570,000	2570000		
<b>Indoor Residual Spraying</b>					
Entomological monitoring and capacity building	Stop Palu	180,000	0	National	Entomological monitoring and surveillance of vectors for insecticide resistance, and capacity building for entomologists and insectary development and management.
Entomological equipment	CDC IAA	10,000	0	National	Procure equipment and replacement supplies for insectary, traps, spray and landing catches, storage of specimens and related lab supplies.
Technical assistance for entomological capacity building	CDC IAA	25,000	0	National	Funding for two technical assistance visits from CDC to help develop entomological capacity at the national and prefectural level.
<b>SUBTOTAL IRS</b>		215,000	0		
<b>Malaria in Pregnancy</b>					
BCC for IPTp	Stop Palu	Cost covered under BCC section	0	PMI Target Areas	Support BCC to promote ANC clinic attendance and educate pregnant women and communities on the benefits of IPTp. This activity will include support for community-level approaches, such as training of community-based workers as well as mass media (including local radio stations). Immunization outreach sessions will be used as opportunities for educating women. This will be part of a larger integrated BCC activity to satisfy needs for case management, LLINs, and IPTp.

Training/Refresher training for malaria in pregnancy	Stop Palu	Cost covered under Case Management/Diagnostics section	0	PMI Target Areas	Provide training and refresher training for public and private health facility midwives and nurses to correctly deliver SP in the context of the focused antenatal care approach. Training will include benchmark assessments, on-the-job training of the new treatment algorithm, and coaching. Training will be part of an integrated training package.
Supervise health workers in IPTp to improve quality of service	Stop Palu	Cost covered under Case Management/Diagnostics section	0	PMI Target Areas	On-site supervision for public health facility midwives and nurses to correctly deliver SP in the context of the focused antenatal care approach. Supervision will continue to be part of an integrated approach for supervision at health facilities.
<b>Subtotal Malaria in Pregnancy</b>			0		
<b>SUBTOTAL PREVENTIVE</b>		3,785,000	2,570,000		
<b>CASE MANAGEMENT</b>					
<b>Diagnosis and Treatment</b>					
Procure ACTs	USAID/Deliver Project	1,520,000	1,520,000	National	Procure approximately 1,000,000 ACTs (AL)
Procure gloves	USAID/Deliver Project	15,000	15,000	National	Procure 500,000 gloves to protect health workers while examining and testing suspected malaria cases
Improved malaria diagnostics	Stop Palu	150,000	0	National	Work with the NMCP and National Laboratory to develop and support a comprehensive quality assurance and quality control plan for malaria diagnostics at all levels of the health system. This will include refresher training for lab technicians (and training on malaria microscopy for new laboratory technicians) and regular supervision of microscopy and RDT performance, including systematic review of a predetermined number of positive and negative blood smears and simultaneous use of both tests to assess the quality of RDTs in diagnosing malaria.
Training/refresher training in RDT use and malaria case management	Stop Palu	500,000	0	PMI Target Areas	Training in RDT use, malaria case management, and malaria in pregnancy for health workers at hospitals, health centers, and health posts who have not been trained using previous years funds. Also, M&E training for district and regional level officials. Training of CHWs not yet trained in RDT use, in treatment of uncomplicated malaria and referral for patients with severe malaria, as well as referral of pregnant women to ANCs. Continue implementation of a comprehensive refresher training schedule for health workers and CHWs who have already received initial training.

Supervision of health workers and CHWs in RDT use and malaria case management	Stop Palu	461,000	0	PMI Target Areas	Integrated, regular supervision of health workers and CHWs focusing on microscopy and RDT performance, respect of national guidelines for diagnosis and treatment, and improved data collection and reporting. Equip malaria focal points to conduct routine, supportive supervision using the updated supervision checklist at all levels of the health care system, including hospitals, health centers, health posts, and CHWs. District Health Team staff (Département Préfectoral de Santé) and regional health team staff (Département Régional de Santé) will be actively involved in supervision activities, along with health center staff for supervision of CHWs. Supervision visits will include observation of patient consultations and feedback to providers.
BCC for case management	Stop Palu	Cost covered under BCC section	0	PMI Target Areas	Funds will be used to support integrated behavior change communication and education activities for communities to improve behaviors related to malaria prevention and treatment. The BCC supported will target prevention activities, including use of LLINs and IPTp. BCC activities will also support appropriate care seeking behaviors; particularly at the community level through use of CHWs. Emphasis will be placed on prompt care-seeking for fever and other symptoms of malaria.
Community case management	Stop Palu	480,000	0	PMI Target Areas	Support the scale-up of community case management in PMI target areas, including provision of tools and materials, management and logistic costs, and support for data management for 650 CHWs, as well as training equipment and supportive supervision of an additional 650 CHWs.
Register printing	Stop Palu	93,637	0	National	Print registers to support hospitals, health centers, and health posts to capture patient data and report to routine health information systems, including the monthly malaria reporting system and the HMIS.
<b>Subtotal Diagnosis and Treatment</b>		3,219,637	1,535,000		
<b>Pharmaceutical Management</b>					
Improving logistic management information systems	Systems for Improved Access to Pharmaceuticals and Services	100,000	0	National and Regional Level	Support to strengthen the Logistics Management Information System to enable the pharmaceutical system collect, compile and process consumption data throughout the health system in order to improve the forecasting, the procurement and the distribution of commodities. Includes procurement of computers, support for Internet connectivity, capacity building for quantification at the central level (PCG, DNPL) as well as at the regional, prefectures and district levels.

Pharmaceutical systems reform	Systems for Improved Access to Pharmaceuticals and Services	250,000	0	National	Support the reform of regulations governing the supply chain management system, including advocacy for signing a convention between the Government and PCG and improvement of the governance of PCG (renewal and functioning of the board, information sharing, civil society and private sector's participation, etc.).
Improve drug regulatory capacity	Systems for Improved Access to Pharmaceuticals and Services	250,000	0	National	Support improvement of the regulatory and oversight capacities of the DNPL, revision of national list of essential drugs and enhanced control of compliance to the pharmaceutical policy and regulations by PCG and the private pharmacies network.
Management of pharmaceutical supplies	Systems for Improved Access to Pharmaceuticals and Services	2,250,000	0	National	Manage the distribution of PMI commodities down to the health facility level, including warehousing, transportation, storage and distribution: (1) Improve PCG capacity to store adequately PMI-funded long-lasting insecticide-treated nets. This will include providing select handling equipment and technical assistance to PCG to build capacity in this area; (2) Support the MOH to improve pharmaceutical management in health facilities through supervision by regional pharmacist inspectors. This activity is in addition to trainings, facilitating supportive supervision in health facilities; (3) Support the NMCP to develop a strategic approach to extend access to malaria commodities and case management in the private sector according to the national guidelines. This is based on the recent signing of an agreement with some private sector health facilities by the NMCP to improve access and use of quality antimalaria drugs; (4) Provide support to address key issues relating to the rational use of malaria medicines. PMI has supported the MOH to revise malaria STGs and related job aids however, these tools have not been fully adopted and implemented across facilities. Improving adherence to these job aids will improve malaria case management practices; and, (5) Develop a comprehensive strategic plan for strengthening supply chain management, which will guide priority supply chain interventions and investments by donors, and allocation of resources.
Strengthening of the DNPL and the national laboratory for drug quality testing and monitoring	USP/PQM	100,000	0	National	Review and revise the national policy on drug quality; implementation of quality surveillance through support to the PCG and the DNPL to improve sampling strategies with appropriate techniques; review registration and importation/registration policies; and strengthen national reference lab.
<b>Subtotal Pharmaceutical Management</b>		2,950,000	0		
<b>SUBTOTAL CASE MANAGEMENT</b>		6,169,637	1,535,000		
<b>HEALTH SYSTEM STRENGTHENING / CAPACITY BUILDING</b>					

Management support for NMCP	Stop Palu	150,000	0	National and Prefectural Levels	Support to the NMCP to assist them in team building, logistics and supervision, office management including communication capacity/connectivity, and M&E systems strengthening. Setting up space with basic office equipment to facilitate the in-country PMI team to provide close technical support and program coordination to the NMCP.
<b>SUBTOTAL HSS &amp; CAPACITY BUILDING</b>		150,000	0		
<b>BEHAVIOR CHANGE COMMUNICATION</b>					
BCC for ITNs, IPT, and case management	Stop Palu	500,000	0	PMI Target Areas	BCC will be part of integrated communication package including ITN use and MIP and will include case management at both the facility and community levels, following national standards and in conjunction with what other donors are doing in their respective target areas. This activity will be implemented in health districts targeted by PMI, using the NMCP communication plan.
BCC for integrated health service delivery	TBD	100,000	0	National	Support for integrated BCC activities to be managed by new Mission bilateral program addressing service delivery throughout Guinea.
<b>SUBTOTAL BCC</b>		600,000	0		
<b>MONITORING AND EVALUATION</b>					
End-use Verification survey	Systems for Improved Access to Pharmaceuticals and Services	150,000	0	National	Provide support to monitor the availability and utilization of key antimalarial commodities at the health facility level.
Health facility survey	Stop Palu	150,000	0	National	This will be the second HFS to assess progress in case management after two years.
Health facility-based surveillance	Stop Palu	200,000	0	National	Support to sentinel sites in order to provide longitudinal data on trends in malaria cases throughout the country.
ITN monitoring	Stop Palu	100,000	0	National	Support to monitoring of ITN durability and efficacy.
Therapeutic efficacy study	Stop Palu	100,000	0	National	Evaluate the efficacy of first and second-line ACTs in two of the four monitoring sites in the country using the standard WHO protocol.
Technical assistance for M&E	CDC IAA	25,000	0	National	Technical support to the NMCP and partners for ongoing M&E activities including routine system strengthening/surveillance and monitoring activities (e.g., TES).
<b>SUBTOTAL M&amp;E</b>		725,000	0		
<b>OPERATIONS RESEARCH</b>					
<b>SUBTOTAL OR</b>		0	0		
<b>IN-COUNTRY STAFFING AND ADMINISTRATION</b>					
CDC	CDC IAA	278,863	0		Support for one USAID PMI Advisor and one USAID locally-engaged senior malaria specialist as well as one CDC PMI Advisor, and all related local costs to sitting in USAID Mission.
USAID	USAID	762,500	0		

Technical assistance for program management (In-country TDY support)	GH Pro	29,000	0		TDY technical assistance at the Mission for program management and oversight.
<b>SUBTOTAL IN-COUNTRY STAFFING</b>		1,070,363	0		
<b>GRAND TOTAL</b>		<b>12,500,000</b>	<b>4,105,000</b>		