

Table 2: Budget Breakdown by Activity
President's Malaria Initiative – GUINEA
Planned Malaria Obligations for FY 2016
Revised August 21, 2017

Proposed Activity	Mechanism	Budget		Geographic Area	Description
			Commodity \$		
PREVENTIVE ACTIVITIES					
Insecticide-treated Nets					
Procurement of routine ITNs	GHSC-PSM	2,562,625	2,562,625	National	Procurement of approximately 788,500 nets out of the 1,000,000 required for routine distribution at \$3.25 per net. GF will purchase the balance of nets required.
Distribution of ITNs (routine)	Stop Palu	241,740	0	National	Pay for distribution costs of routine nets in PMI zones. Approximately 1,000,000 nets are being purchased for routine distribution which will cover the gap needed in routine nets (see FY16 MOP gap analysis). PMI zones will require 474,000 nets for routine distribution at an estimated cost (based on analysis from Stop Palu) of \$0.51.
Distribution of ITNs (routine)	New Malaria bilateral-TBD	126,585	0	National	Continue routine distribution of ITNs in PMI zones.
Distribution of ITNs (mass campaign)	Stop Palu	3,033,000	0	PMI Target Areas	Cover distribution costs for 2016 universal coverage campaign (early release)
TA for routine distribution	VectorWorks	200,000	0	National	TA and training to NMCP and USAID implementation partner/GF PR to ensure routine distribution strategically planned and executed.
BCC for ITN 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.
SUBTOTAL ITNs		6,163,950	2,562,625		
Indoor Residual Spraying					
Entomological monitoring and capacity building	Stop Palu	260,000	0	National	Support for surveillance of vectors and insecticide resistance in each of the four ecological zones; establishment of a permanent insectary and laboratory including procurement of equipment and supplies, capacity building for entomologists, and resources for insectary operations; ITN durability monitoring; and support for NMCP staff (<i>per diems</i> , etc.).
Entomological monitoring and capacity building	New Malaria bilateral-TBD	60,000	0	National	Continued support for surveillance of vectors and insecticide resistance in each of the four ecological zones; establishment of a permanent insectary and laboratory including procurement of equipment and supplies, capacity building for entomologists, and resources for insectary operations; ITN durability monitoring; and support for NMCP staff (<i>per diems</i> , etc.).
Support for insectary and laboratory	Stop Palu	60,000	0	National	Operational support for the insectary and associated laboratory to include electricity, internet, general maintenance, security, and support for the biological specimens (mosquitoes and animal blood sources).
Support for insectary and laboratory	New Malaria bilateral-TBD	30,000	0	National	Continued operational support for the insectary and associated laboratory to include electricity, internet, general maintenance, security, and support for the biological specimens (mosquitoes and animal blood sources).
Advanced training for entomological technicians	Stop Palu	40,000	0	National	Four regional technicians based in the sentinel sites will be trained at the Centre Muraz in Bobo-Dioulasso to allow collections of mosquitoes and insecticide resistance tests to be done with reduced supervision from the NMCP.

Entomological monitoring supplies	CDC IAA	10,000	0	National	Procure equipment and replacement supplies for traps, spray and landing catches, storage of specimens, and related lab supplies.
Technical assistance for entomological capacity building	CDC IAA	29,000	0	National	Funding for two technical assistance visits from CDC to help develop entomological capacity at the national and prefectural level.
SUBTOTAL IRS		489,000	0		
Malaria in Pregnancy					
Treatments of SP	GHSC-PSM	187,000	187,000	N/A	Procure approximately 1,565,000 treatments (\$0.12 per treatment) of SP to contribute to covering the majority of nationwide needs (580,351 estimated potential pregnancies receiving 3 doses of SP during pregnancy).
Supplies to ensure consumption of SP at ANC	Stop Palu	6,000	6,000	N/A	N/A
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, ITNs, and IPTp.
Training/Refresher training for malaria in pregnancy	Stop Palu	Cost covered under Case Management 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 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.
Subtotal Malaria in Pregnancy		193,000	193,000		
SUBTOTAL PREVENTIVE		6,845,950	2,755,625		
CASE MANAGEMENT					
Diagnosis and Treatment					
Rapid diagnostic tests (RDTs)	GHSC-PSM	520,000	520,000	National	Procure and distribute approximately 1,000,000 RDTs (\$0.52 per test) for use in health facilities and in communities via CHWs (based on updated projections; to cover 100% of existing national need).
Microscope consumables	GHSC-PSM	20,000	20,000	National	Procure reagents, slides and repair materials for previously purchased microscopes.
AS-AQ	TBD Supply Chain Contract	0	0	National	Procure and distribute approximately 1,400,000 (\$0.48 per treatment) treatments of AS-AQ- Guinea is replacing AS/AQ with AL as first line treatment for malaria.
AL	GHSC-PSM	475,000	475,000	National	Procure and distribute approximately 500,000 (\$0.95 per treatment) treatments of AL (based on updated projections).
Injectable artesunate	GHSC-PSM	143,000	143,000	National	Procure approximately 275,000 vials of injectable artesunate (\$0.52) to treat severe malaria cases referred to the hospital or health center level.
Injectable artemether	GHSC-PSM	36,800	36,800	National	Procure approximately 80,000 ampules of injectable artemether (\$0.46) to treat severe malaria cases referred to the hospital or health center level.
Improved malaria diagnostics	Stop Palu	100,000	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 case management	Stop Palu	200,000	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 case management	Stop Palu	435,000	0	PMI Target Areas	Enhanced clinical supervision at all levels of the health care system, including hospitals, health centers, health posts, and CHWs. District Health Team staff (<i>Département Préfectoral de Santé</i>) and regional health team staff (<i>Département Régional de Santé</i>) 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.
Supervision of health workers and CHWs in RDT use and case management	New Malaria bilateral-TBD	100,000	0	PMI Target Areas	Continued enhanced clinical supervision at all levels of the health care system, including hospitals, health centers, health posts, and CHWs. District Health Team staff (<i>Département Préfectoral de Santé</i>) and regional health team staff (<i>Département Régional de Santé</i>) 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 ITNs 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	543,335	0	PMI Target Areas	Support the scale-up of community case management in PMI target areas, including management and logistic costs, and support for data management, as well as training and supportive supervision of 650 CHWs. Support costs include transport, data collection tools, equipment (boots, gloves, flashlights), supervision, and mobile phones equipped with software to improve reporting on integrated community case management, as well as solar-powered chargers.
Community case management	New Malaria bilateral-TBD	125,000	0	PMI Target Areas	Continued support for the scaled-up community case management in PMI target areas, including management and logistic costs, and support for data management and supportive supervision of 650 CHWs. Support costs include transport and supervision.
Subtotal Diagnosis and Treatment		2,698,135	1,194,800		
Pharmaceutical Management					
Improving logistic management information systems	GHSC-PSM	175,000	0	National and Regional Level	Continued 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	GHSC-PSM	125,000	0	National	Continue to 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	GHSC-PSM	100,000	0	National	Continue to 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	GHSC-PSM	300,000	0	National	Manage the distribution of PMI commodities down to the health facility level, including warehousing, transportation, storage and distribution.
Strengthen pharmaceutical storage capacity	GHSC-PSM	250,000	0	National	This activity will build on current PMI's support to PCG to provide additional equipment and material to improve commodities storage conditions at the central level as well as at regional level.
Strengthen the DNLP and the national laboratory for drug quality testing and monitoring	USP/PQM	100,000	0	National	Implementation of quality surveillance through support to the PCG and the successor to the DNLP to improve sampling strategies with appropriate techniques.
Subtotal Pharmaceutical Management		1,050,000	0		
SUBTOTAL CASE MANAGEMENT		3,748,135	1,194,800		
HEALTH SYSTEM STRENGTHENING / CAPACITY BUILDING					
Management support for NMCP	Stop Palu	250,000	0	National and Prefectural Levels	Support to the NMCP to assist them in team bonding, logistics and supervision, office management including communication capacity/connectivity, and M&E systems
Management support for NMCP	New Malaria bilateral-TBD	50,000	0	National and Prefectural Levels	Support to the NMCP to assist them in team bonding, logistics and supervision, office management including communication capacity/connectivity, and M&E systems
Training of NMCP staff	Stop Palu	50,000	0	National and Prefectural Levels	Support to NMCP to build capacity via conference and workshop attendance, both national and international, to improve program management in M&E as well as BCC.
Imbedded management support for NMCP	Stop Palu	0	0	National and Prefectural Levels	Continue imbedded management support to NMCP, including mentoring for all unit heads.
Equipping renovated NMCP headquarters	Stop Palu	100,000	0	National and Prefectural Levels	Full renovation of NMCP headquarters to funded by GF. PMI will provide funds to equip the newly renovated building.
Strategy review and development	Stop Palu	150,000	0	National and Prefectural Levels	Technical and organizational support to undertake the national malaria program review and subsequent development of the new national malaria strategy.
Improved coordination of malaria activities in the districts.	Stop Palu	700,000	0	PMI Target Areas	Support 19 prefecture-level malaria focal points in each of the PMI-supported prefectures, complementing a structure that has already been implemented with GF support in the remaining prefectures. Malaria focal points will be embedded in the DPS and serve as the liaison with the national program. Specifically, they will support commodity/logistics management activities, facility and community-level supervision, data collection and reporting, and assist with M&E and implementation activities (e.g., surveys, net distribution, SBCC).
Improved coordination of malaria activities in the districts.	New Malaria bilateral-TBD	200,000	0	PMI Target Areas	Continued support for 19 prefecture-level malaria focal points in each of the PMI-supported prefectures, complementing a structure that has already been implemented with GF support in the remaining prefectures. Malaria focal points will be embedded in the DPS and serve as the liaison with the national program. Specifically, they will support commodity/logistics management activities, facility and community-level supervision, data collection and reporting, and assist with M&E and implementation

SUBTOTAL HSS & CAPACITY BUILDING		1,500,000	0		
SOCIAL AND BEHAVIOR CHANGE COMMUNICATION					
BCC for ITNs, IPT, and case management	Stop Palu	490,000	0	PMI Target Areas	SBCC 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 ITNs, IPT, and case management	New Malaria bilateral-TBD	100,000	0	PMI Target Areas	BCC will be part of integrated communication package including ITN use and MIP and 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.
Development of new communication strategy	Stop Palu	75,000	0	National	PMI will provide technical assistance to the NMCP and the BCC TWG to develop and validate the new communications strategy derived from the new national malaria strategy and based on the results of the MICS-Palu.
SUBTOTAL BCC		665,000	0		
MONITORING AND EVALUATION					
End-use Verification	GHSC-PSM	150,000	0	National	The semiannual EUV surveys will continue to be implemented to monitor the availability and use of key malaria control commodities at the health facility level on a national scale. Improved logistics management is directly related to the health system's ability to provide effective case management for malaria.
Health facility survey	TBD	0	0	National	This activity will assess provision of malaria case management services in health facilities. Specific dimensions include health facility readiness to provide services, health worker training and supervision, and health worker performance. The survey will be used to continue to monitor the progress in revitalizing the healthcare delivery system following the Ebola epidemic.
Support for 2017 DHS	MEASURE DHS	400,000	0	National	PMI will contribute to the 2017 Demographic and Health Survey, the follow up to the 2012 DHS. This survey will provide data on coverage data for malaria interventions, and will also provide malaria prevalence estimates which can be used to track progress since 2012, as well as identify high-priority areas for the NMCP.
ITN durability monitoring	Stop Palu	100,000	0	National	Prospective ITN monitoring will continue to follow ITNs distributed during the 2016 universal coverage campaign, and will provide data on: 1) net survivorship and physical integrity; 2) bioefficacy of insecticides; and 3) insecticidal content.
ITN durability monitoring	New Malaria bilateral-TBD	100,000	0	National	Prospective ITN monitoring will continue to follow ITNs distributed during the 2016 universal coverage campaign, and will provide data on: 1) net survivorship and physical integrity; 2) bioefficacy of insecticides; and 3) insecticidal content. (For
Therapeutic efficacy monitoring	Stop Palu	100,000	0	National	Efficacy monitoring of Guinea's first-line ACT will take place in four sites every two years (two sites in one year and the remaining two sites the following year). The activity will follow WHO's standard protocol. Funds are meant to cover monitoring
Therapeutic efficacy monitoring	New Malaria bilateral-TBD	100,000	0	National	Efficacy monitoring of Guinea's first-line ACT will take place in four sites every two years (two sites in one year and the remaining two sites the following year). The activity will follow WHO's standard protocol. Funds are meant to cover monitoring activities in two sites. For CY2018

Routine system strengthening	Stop Palu	100,000	0	National	Routine system strengthening activities will continue to build upon progress made in M&E training at the district, regional, and national levels, but will be coordinated with a broader health sector effort to strengthen the HMIS. Activities will focus on continuing to ensure the quality of malaria data (including completeness, timeliness, and accuracy) while maximizing data use for decision-making and strengthening the system across health sectors. Specific activities will include the development and harmonization of data collection and M&E tools, monthly meetings at the prefectural and health facility level, quality assurance of malaria data at all levels, dissemination of monthly malaria bulletins, and support of the M&E technical group.
Routine system strengthening	New Malaria bilateral-TBD	150,000	0	National	Routine system strengthening activities will continue to build upon progress made in M&E training at the district, regional, and national levels, but will be coordinated with a broader health sector effort to strengthen the HMIS. Activities will focus on continuing to ensure the quality of malaria data (including completeness, timeliness, and accuracy) while maximizing data use for decision-making and strengthening the system across health sectors. Specific activities will include the development and harmonization of data collection and M&E tools, monthly meetings at the prefectural and health facility level, quality assurance of malaria data at all levels, dissemination of monthly malaria bulletins, and support of the M&E technical group.
Health management information systems	MEASURE/Evaluation	100,000	0	National	Support efforts to strengthen the broader integrated HMIS to ensure appropriate malaria data are included in the system, data are of adequate quality, and data are accessible to the NMCP and prefecture-level focal points.
Stock-taking of PMI program in Guinea	Evaluation for Health	0			Support a stock taking of the PMI program in Guinea from the beginning to the present to review challenges, achievements, opportunities, best practices and recommendations for future planning.
Technical assistance for M&E	CDC IAA	20,000	0	National	Support for two M&E TDY visits will provide technical assistance for ongoing M&E activities including routine system strengthening, health facility survey, and therapeutic efficacy monitoring. The country team and USAID mission will help define the priority objectives for the TDYs.
SUBTOTAL M&E		1,320,000	0		
OPERATIONS RESEARCH					
SUBTOTAL OR		0	0		
IN-COUNTRY STAFFING AND ADMINISTRATION					
CDC	CDC IAA	158,415	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	USAID	762,500	0		
USAID	USAID	0	0		PMI will contribute \$70,000 to two separate, required assessments related to the award of the follow-on malaria bilateral: One for a Gender Analysis with a \$35,000 contribution; and a second for a Climate Risk Management review with a \$35,000 contribution. PMI's \$70,000 contribution will be combined with other USAID Mission resources.
SUBTOTAL IN-COUNTRY STAFFING		920,915	0		
GRAND TOTAL		15,000,000	3,950,425		