

Table 2: Budget Breakdown by Activity
President's Malaria Initiative – GUINEA
Planned Malaria Obligations for FY 2016
Revised March 24, 2016

Proposed Activity	Mechanism	Budget		Geographic Area	Description
		Total \$	Commodity \$		
PREVENTIVE ACTIVITIES					
Insecticide-treated Nets					
Distribution of ITNs (routine)	TBD	387,000	0	National	Pay for distribution costs of routine nets, total amount will need to be reviewed based on amount of nets going to 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)
BCC for ITN use	TBD	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		3,420,000	0		
Indoor Residual Spraying					
Entomological monitoring and capacity building	TBD	285,000	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.).
Advanced training for entomological technicians	TBD	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.
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		354,000	0		
Malaria in Pregnancy					
Treatments of SP	TBD-Supply Chain Contract	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	TBD	6,000	6,000	N/A	N/A

BCC for IPTp	TBD	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	TBD	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	TBD	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		3,967,000	193,000		
CASE MANAGEMENT					
Diagnosis and Treatment					
Rapid diagnostic tests (RDTs)	TBD-Supply Chain Contract	2,160,500	2,160,500	National	Procure and distribute approximately 4,155,000 RDTs (\$0.52 per test) for use in health facilities and in communities via CHWs.
Microscope consumables	TBD-Supply Chain Contract	20,000	20,000	National	Procure reagents, slides and repair materials for previously purchased microscopes.
AS-AQ	TBD-Supply Chain Contract	675,000	675,000	National	Procure and distribute approximately 1,400,000 (\$0.48 per treatment) treatments of AS-AQ.
AL	TBD-Supply Chain Contract	570,000	570,000	National	Procure and distribute approximately 600,000 (\$0.95 per treatment) treatments of AL.
Improved malaria diagnostics	TBD	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	TBD	325,000	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	TBD	250,000	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.
BCC for case management	TBD	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	TBD	500,000	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.
Subtotal Diagnosis and Treatment		4,600,500	3,425,500		
Pharmaceutical Management					
Improving logistic management information systems	TBD	250,000	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	TBD	200,000	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	TBD	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	TBD	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	TBD	300,000	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.
Subtotal Pharmaceutical Management		1,150,000	0		
SUBTOTAL CASE MANAGEMENT		5,750,500	3,425,500		
HEALTH SYSTEM STRENGTHENING / CAPACITY BUILDING					
Management support for NMCP	TBD	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.
Training of NMCP staff	TBD	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.
SUBTOTAL HSS & CAPACITY BUILDING		200,000	0		
BEHAVIOR CHANGE COMMUNICATION					
BCC for ITNs, IPT, and case management	TBD	300,000	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.
SUBTOTAL BCC		300,000	0		
MONITORING AND EVALUATION					

End-use Verification	TBD	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	150,000	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	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.
Therapeutic efficacy monitoring	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.
Routine system strengthening	TBD	200,000	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.

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		1,120,000	0		
OPERATIONS RESEARCH					
SUBTOTAL OR		0	0		
IN-COUNTRY STAFFING AND ADMINISTRATION					
CDC	CDC IAA	400,000	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		
SUBTOTAL IN-COUNTRY STAFFING		1,162,500	0		
GRAND TOTAL		12,500,000	3,618,500		