Cover Sheet: Instructions

- This template is compatible with MS Excel 2000 and later versions. Some drop-downs and formulae may not work with earlier versions. Therefore, Principal Recipients with earlier versions of MS Excel are requested to upgrade to MS 2000 or more recent versions.
- Principal Recipients are first required to complete the Cover Sheet with the General Grant Information listed in the boxes below. They can refer to their Grant Face Sheet/Grant Confirmation to fill part of this information.
- Principal Recipients are required to fill in the information related to the periods covered by the progress update and disbursement request.
- Principal Recipients are required to select the type of submission, i.e. whether they are submitting a Mid-Year (or Quarterly) Progress Update or a Year-End Progress Update/Disbursement Request. This is important as the forms will change depending on the type of submission selected.

GENERAL GRANT INFORMATION

Country:	Kyrgyz Republic	
(Disease) Component	HIV/AIDS	
Grant Name/Number:	KGZ-H-UNDP	
Principal Recipient:	UNDP Kyrgyzstan	
LFA Name:	United Nations Office for Project Services	
Program Start Date:	1-Jul-2011	
Currency:	USD	

PROGRESS UPDATE		
Progress Update - Reporting Period: Cycle:	Semester	Number: 9
Progress Update - Period Covered: Beginning Date:	1-Jul-15	End Date: 31-Dec-15

DISBURSEMENT REQUEST		
Disbursement Request - Disbursement Period: Cycle:	Semester	Number: 10
Disbursement Request - Period Covered: Beginning Date:	1-Jan-16	End Date: 30-06-16

Are you submitting:

- A Progress Update (PU); or
- A Progress Update/Disbursement Request (PU/DR).

← PU

☞ PU/DR

Section 1: Programmatic Progress

Note: The table below should contain those Impact/Outcome indicators that are (1) due for reporting during the current year of a grant and (2) those reporting on which is overdue from the previous periods.

. Impact/	Outcome Indicators													For	LFA Use Onl	y		Fo	r the Global Fund Use Only
mpact / Jutcome	Indicator Description		eline licable) Year	Year of Target	Intended Target	Report Due Date	Actual Result	Data Source of Results	Comments on results on Impact/Outcome indicators and data sources, and any other comments	Base (if app	eline licable) Year	Year of Target	Intended Target		Verificatio n Method	Verified Result	LFA comments on (a) verified result, (b) source of information used by the PR to report results, including the status of completion of surveys and other methods to measure	Validate d Result	Country Team comments or validated results
		value	16.0							vande	lear						Impact/Outcome, as applicable,		
Impact	HIV I - other 1: Percentage of adults and children with HIV known to be on treatment 12 months after initiation of antiretroviral therapy	76%	2010	Year 3 2014 2015	85%	15-Mar-16	76%	National HIV Health Statistics	The data is obtained through the reporting system of the Republican AIDS Center and based on electronic PLHIV tracking system. For the cohort enrolled in the period 1 January 2014—31 December 2014, 827 PLHIV started receiving ART (476 men and 351 women). During the next 12 months 72 people died due to different reasons, 126 discontinued/refused receiving treatment. 629 were recorded as PLHIV on treatment by the end of 12 months (363 men and 266 women). The data is preliminary and will be adjusted in the next PU/DR after annual reports are received by RMIC and RAC.	The state of the s		1	-	-	Select			O	
Select		-	-	-	_	-		Select		-	-	-	-	-	Select			0	
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Select		-	-	-	-	-	-	Select		-	-	-	-	-	Select			0	

Impact Outcome Indicators_1A

Section 1: Programmatic Progress

	programmati		ormanec Fra	nenork should be lis	ted, regard	lees of wh	ether there as	re largets o	raulta for l	he period cove	red by the f	rogerss (1)	slate or w	ucther the targets have been met in previous periods,	Langua	0000000000000	CSOSCACON			Die	r Da Tiva Carb	Secret (4) (1) (1)		TOWER ASSESSED		
B. Cover	age Indicato				2550000000	SS4545956945	Baseline	9900000000	<u> </u>	Target	(ACCUS ASSESSED ASSES	Result	32000000		70537085	1 :		Baseline	100000000000000000000000000000000000000	Targei	LFA Use Only Verifical R	rault		Val	dated Result	he Global Fund Use Only
Objective No.	Indicator No.	Indiestor Description	Tied To	Targeta emmulative?	Tup so indical or?	Year	Na Da		N.	De %	N#	(la	**	Remons for programmale deviation from intended target and deviations from the related workplate activities	Targe cumu tive?	a Imilical	ear B	e De -	Na	Dr %	Na Ds	*	LFA malysis on properties to date asist any variance between targetee and results, and any other comments (this should not be a "Cupy and Faste" of the reasons provided by the	Мя	De %	Country Team comments on validated results
1	\$	TVS-1: Percentage of adults and children currently receiving antarcrossical therapy aroung all adults and children fir ing with HIV	Current grant	N-not cumulative	Yes- Tepro	2014	1344 802	21 27%	1800	B021 22 [†] .	2105	9300	23%	In accordance to the official data submitted to the Regulalic ALIS (Center, and January 2016, 2016 Phill Vener receiving ARV.) The major includes 1714 adult (transle 1786 male 1927) and gift full-bring frenche 146, male 1220 (Promission and Center 1786 male 1786) and gift full-bring frenche 1786 male 1786 male 1786 male 1786 (Promission and Center 1786) and gift full-bring frenche 1786 male 1786 (Promission and Center 1786) and gift full-bring frenche 1786 (Promission 1786) and promission 1786 (Promission 1786). As executed, of the chievements 1944, 34. The data is preferanced and willbe adjusted after a smootle reports are reviewed by RAV.	Select	Select								0	g .	
**	A STATE OF THE STA	TCS-others. Number of PLHIV reached with romanusity care and support programmes	Carreot grant	N-not cumulative	Yes. Top 10	2014	903		1050		1473	THE PROPERTY OF THE PROPERTY O		ha a result veil achievement is 140%. The PR continued conducting annual cross- teches of all (VIC) code that prevent the servace in more than one organization were control cally once. Here exchanged depotation specified parts of the coloring exchanged in Here exchanged depotation specified parts of continued exchanged in 1.22 PZIIIV (trachiding, 20% once mort of them were real-body one PZIIIV combined, no PZIIIV (trachiding, 20% once and principle one PZIIIV one principle production of the principle of the pr		Selvet					ALTERNATION OF THE PROPERTY OF			G G	o	
2	3	KP-td. Percentage of FWID reached with IIIV prevention pregions -defined package of servers	Current grant	N-not cumulative	Yes Topia	2014	10 95B 250	no 44°	10.799	25 000 - 13	11847	25000	47 *	As a result - of at however, it is not ". The artificies under this inflicture covered 12 m 5 cleans with education of the generation of MEPA 1 m 2 cleans, 6, 200 MOD effents and 12 m 5 cleans. After exchaling duplication generates the fact of prevention programme a clean to 11 day including 3.324 source. The number represents PMDs who have received a minimal package at least one of uninexity months including SSS cleans. Veroning SWR reports MEPA distributed 2, 707 x 17 m syringes and 234 condoms in the reporting person.	Selec	: Seirci								û	ō	
7		KP-5. Percentage of individuals receiving Quanti Substitution Therzigo who received treatment for at least 6 menths	Cutrent grant	N-mot cumulative	Topio equivale	2014	203 JB	5 43* *				A THE THE PROPERTY OF THE PROP	14-	As a result * of echievement is 74°. During the persions period (January - January 12 and 19 Memberral CR) program and regist them see will on the respit of months after the enteriod after which counts after the enteriod after which counts after the enteriod of the enteriod after the enteriod of the e		Select								U	0	
3	-7	KP-others: Rumber of PWIDs reached by Methadone Substitution Therapy	Current grant	: N-not cumulaine	Yes. Top to	2014	1.378		1000		1313			We result to discherement to 2,3%. At the beginning of the reporting period, 3; OFF tiles were providing nethodor maintenance serve as DWD constructive is stress within the public health system, notice in pendentiary wastern and a stress tends to the CW, 277 tiles and a stress tends to the CW, 277 tiles and a stress tends to be constructed period. PR fillabeled construction most a new 275 site in Doring the reporting period. PR fillabeled construction most as to exercise 5 to the CW of the		L Schret								9	ů	
2	C C	KP-sd-others - Number of PWID in prisons covered with IIV prevention programs defined package of services	Current grant	N-not cumulative	Yea- Topio	2011	1 339		1339		1425			As a result "of a chieve ment (see"). 1.2. (FWID Blockeding 1.5 women in previous received minimum park age of service (MES) at 1.5 VEF so the State Service for Exercises of Sentences and Sentences and Sentences of the State Service for 1.5 Sentences and 9.15 sendoms were distributed among PWID in privious during the reporting period. 2.75 PWID 10.75 who doed number conversal with 11PS or OST) were tracted on 11W and both the Profits and Sentences of NEEs were referred and restricted Sentences and the Sentences of NEEs were referred and restricted Sentences.	Selec	t Select	- The second sec							G G	,	
No. in Constitution of Constitution	,	KP-3d: Percentage of FIVID that have received an IIIV test during the reporting period and know their results	Current gran	: S-not cumulative	les Tepro	2014	3250 250	900 15%	3739	23 6sm 13	. 104p	27,000	20%	As a result "of a chievement is 123". The indicates measured the number of FMT tested by ELIA cert at AIIS center to bloom to its and in the center in part of testing and for based on a pallar Feboul reped testing. In mene that cheeks could be tested more than one cent and offered testing different suchool of testing dumpe. The reporting period is calculation process all displacents were removed. The number of testing displaced on a silva or bloomly a part of the number of testing testing displaced on a silva or bloomly as 2 to 0.75 out of 1,910. The number of testing testing displaced on a silva or bloomly as 2 to 0.75 out of 1,910. The number of testing testing displaced on a silva or bloomly as processed in the part of 1,910. The number of testing testing testing the 1,910. The silva center discress bloom the 1,910. The silva center discress that the 1,910 out of 1,910. The silva center discress bloom the 1,910 out of 1,910	Selec	t Select	***************************************							٠	9	
3	8	KP-10. Percentage of sex notices reached with IIIV prevention programs - defined package of sentiers	Cattern 2100	N-nut cumulatis e	I con 10	2014	3145 71	og 87°4	3789	7103 32	3,462	1103	40%	We recoil "of achievement in a 2". Derrughte reported princip atoms which have been earched with the minimum package of overview which includes conditions, information component IEEE and/or minimum consistent and referral STI and/or IEEE with vestign and/or IEEE and/or		t Select								13	•	
3	· ·	AP-9: Percentage of tex morkers that have received an fifty test during the reporting period and know their results	Current gran	t N-not cumulative	Yes- Top to	2011	1033 71	15**	1063	7103 15	1114 1114 1114 1114 1114 1114 1114	7103	10	tested for ELEX krest at ILDS centers laboratories and/or salies thesed sayable testing and/or lasted on a spillars blood angle testing. It means that cleans could be tested soor than once using different method of Irsting during the reporting period. In calculation presers all displaces were deleted. The remonance the following, high-level as internal and external minution of ON-stages and displaces soon means assuming estimated an internal period for reporting documents be some state partners. During the reported period for recommendations were provided by INTOP and the measures on unprocessment serion implicit states and administration of the state partners. The number of cleans trated by a report declared on salies a law 30 of 1822, of a out of 1823. That reflects that provision of repoil IRI besing at NGOs increases for populations will diagnost as access if Westing.	Selei	t Select								O	9	
3	10	KP- in Percentage of MSM reached with IIIV providing trograms - defined package of services	Cuttent Wan	1 N-not enmulative	Торго	2014	1479	Grosz 183**	1 200	11 092 11	1732	11 6072		has a result "of a know commit as 30 at "a. During the reported period, 7 az 315516 has been reason but which which the minimum plack age of not the on that has beed recommendation component (ID) and/or enformation sections) and referred to 371. For a 3750 has been proposed to 100 at 100	Sele	rt Select						and the second s		47	o .	
3	12	KP-ya Percentage of MSM that have received an HIV test during the reporting period and know their reacits	Custent gran	t N-not rumulative	Yes Tap 10	2944	323 11-	642 3°s	399	11 002 - 7	629	11 542	5*	As a result "of a chiecement is 10%". The substant resourced the number of Matterdo Br. Milks, test at MIS Control file branch and offer a related branching and the substant of Matter and For hand one spill results of the substant and the substant could be result onere than one wing different substant for defense, design, the reporting present and exploitants were deleted. The number of clears tested to supplications process affecting that the substant of the substant is 100 for 3% outstant for the substant of the substant for the substant for the substant is 100 for 5% outstand on the substant is 100 for first that the substant first faithful testing at NiOh increases the sulfingues of riferate to undertake testing.	Sete	st Select	The state of the s							o	•	
3	12/	TB/HIV.3 Percentage of HIV positive patients who were secreted for TB in HIV car or treatment settings	e theteot gran	A Wootenmultine	Top to equivale at	2014	1.556 2:	229 76.	1700	3390 F	2214	2 3 3 5 0	e4*•	The data comes from the National IIIV AIRS Breith Statistics IXX data when healther data from the State Ferniture State Texture of the State of the	'	rt Scleet								17	9	
1	13	Number and serrentage of pregnant violant who know sheir HIV status results	Ourstyn	tt V-comulative annua	Top 10		108 478 223	1643 93*			28170	30.526	94*1	According to the official data submitted in Expublican AIDS ("rate" in 2015, and 25 years and pregnant moment aid ("row were counciled and have their results at 25 years warmed to a first moment as 10 x food to are in this will have be already to the council food of	١	ri Seberi	The second secon	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			A MANAGEMENT OF MA CONTRACTOR			ų	d all all all all all all all all all al	

A. Principal Recipient Cash Reconciliation Statement in Grant Currency

Section 2: Financial Information

A. Frincipai Recipiei	nt Cash Reconciliation	Jaiement in Grant	Principal Recipient		graphical estate.	For	LFA Use Only			For the Global Fund Use C	Only
Description		Cumulative for Previous Periods	Current Period	Comments	Camulative for Previous Periods as validated by Global Fund	LFA Adjustments on current Period	As verified by LFA	Comments	CF Adjustments (incl. External Audit adjustments)	The Global Fund Validated Figures	Comments
Cash Balance: Beginning of	the Period		82 935 182			So	82 935 182			82 935 182	
2. Grant Income											
Add:											
Disbursement made to the Princ	cipal Recipient	\$28 449 744.	\$2 091 109		\$o	\$0	\$2 091 109		Şo	\$2 091 109	
Disbursement to third parties by Principal Recipient	y the Global Fund on behalf of the	so	50		so	\$0	so so		\$o	Sp	
Interest received on bank accoun	nls	\$167.582	\$15.441		so	\$0	\$15,441		\$0	\$15 441	
Revenue from income-generatin	ng activities (if applicable)	\$0	\$o		\$o	\$o	ŝo		\$0	\$0	
	VAT/Other Tax returns, income	\$11 465	\$77 576		\$0	\$0	\$77 576		\$o	\$77.576	
Total Grant Income		\$28 628 791	82 184 126		\$D	\$0	\$2 184 126		80	\$2 184 126	
3. Grant Cash Ontflows			[MIN Description of the least o		[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]		Lyman's and San			1	
	-										
	c (including payments and other	\$15 074 686	\$1 863 537		50	So	\$1 863 537		\$ 0	\$1 863 537	
advance payments)	y the Global Fund on behalf of the	\$13 074 000			\$o	\$0	\$b		\$o	The control of the so	
Principal Recipient					\$0	\$0	\$1 071 086		80	\$1 071 086	
Principal Recipient disbursemen		\$10 517 473	\$1 071 086			\$0 \$0			So.	\$1071 080	
Bank charges on disbursements	and payments	4044	894		\$0		\$94				
Total Grant Cash Outflows	······································	\$25 592 159	82 934 717		\$o	\$0	82 934 717		80	52 934 717	
4. Reconciling Adjustments					1				1		
Other reconciliation adjustment	ts (including for prior periods)	So.	50		\$o	So	\$0		\$0	\$0	
Net exchange gains/losses on tra	austation of balances	\$101 450	\$23 458		so	\$a	\$23 458		\$0	\$23 458	
Incligible transactions from pre- justification was approved by the	vious periods for which e Global Fund	\$0	\$o		\$0	\$0	so		\$o	\$o	
Reimbursement of incligible tra	ursaction from previous periods	\$0	Şo		\$0	\$0	\$0		\$0	\$0	
5. Total Cash Balances: End	of the reporting period										
Principal Recipient Cash Ba	dance		\$2 208 048			. 80	82 208 048			\$2 208 048	
Sub-Recipient Cash Balance	e		\$45 203			80	845 203		\$o	845 263	
Total Cash Balance			82 253 251			\$0	82 253 251		\$0	82 253 251	
6. Commitments & Other Ob	ligations	The state of the s					MANAGE 101				
Unpaid invoices, accrued ex	spenditure for severance pay,	Constitution (Constitution)	\$19.486			\$0	\$19.486		\$0	819 486	······································
leave and other nationies	nding signed contracts not yet										
invoice(i)			\$613 006			\$0	\$613 006		\$o	\$613 006	
Tenders and/or procurement yet signed as contracts	nt contracts initiated but not		\$391 286			\$0	\$391 286		\$0	\$391 286	
Total Commitments & Other	r Obligations		\$1 023 779			80	\$1 023 779			\$1 0±3 779	
B. Principal Recipient Bank	Statement Balance & Cash In	transum Grant Currency					LFA Use Only			For the Global Fund Use (l
			Principal Recipient			LFA Adjustments on				The Global Fund	nt.
			End of Period	Conuncnis		entrent Period	As verified by LFA	Comments	Cf Adjustments	Validated Figures	Comments
Principal Recipient Cash Ba (For Information Only):	lunce as per bank statements		\$2,384,780		_	\$0	\$2 384 780		\$0	\$2 384 780	
Cash in Transit for the reporting	; period		so			\$0	<u> </u>		\$0	So	
Cash in Transit after the current	reporting period		\$0			\$0	\$0		\$o	so	
C. Principal Recipient Inclig	gible Transactions in Grant Cu	rreney									
			Principal Recipient			For	LFA Use Only			For the Global Fund Use C	Inly
		Cumulative for Previous Periods	End of Period	Comments	Canadative for Previous Periods as validated by Global Fund	LFA Adjustments on current Period	As verified by LFA	Comments	CF Adjustments	The Global Fund Validated Figures	Comments
lucligible transactions validated	for the reporting period	So	\$0		\$0	\$0	So		\$0	\$0	
Ineligible transactions from prev justification was approved by the	vious periods for which e Global Fund	\$0	\$o		so	\$0			\$0	\$0	
	asactions from previous periods	\$0	\$0		\$0	\$o	50		\$0	So	
Cumulative ineligible transaction	us for the implementation period	\$0	\$0		\$0	\$0	so			\$0	

PR Cauth Reconclitation_ZAB,C

Section 2: Financial Information

). Principal Recipient Reconciliation of fr	unas provided to Sub	-kecipients for the C	urrent Implemei	mation Per											
			1		Principal Reci	pient T				i i i i i i i i i i i i i i i i i i i	For Local Fund A	gent Use Only		For the Global Fund	Use Only
(1) Sub-Recipient Name	(2) Cumulative Sub- Recipient expenses for prior periods at Principal Recipient level	(3) Sub-Recipient Open Advances at Principal Recipient Level	(4) Disbursements made by Principal Recipient during the Reporting Period	(5) Other Income* during the Reporting Period	(6) Expenditure validated by Principal Recipient during the Reporting Period	(7) Suh-Recipient Closing Balance at Principal Recipient Level	(8) Actual Sub- Recipient Cash Balance (if applicable)	(9) Variances on Sub- Recipient Balances	Comments	LFA Adjustments	As verified by LFA	Comments	Country Team Adjustments (inci. External Audit adjustments)	The Global Fund Validated Figures	Comments
EPUBLICAN CENTER OF NARCOLOGY	3 037 818	30 691	347 403	-	366 157	11 937	10 493	(1 444	Expenditures at 1.444.23\$ are pending for approval upon submission of additional supporing documents and clarification		\$10 493			\$10 493	
Anti-AIDS" Association	116 623	181	31 963	-	32 019	125	67	(58	Expenditures at 58.028 are pending for approval upon submission of additional supporting documents and clarification.		\$61		***************************************	\$67	
SOCIUM" NGO	103 568	ı 8 <u>5</u> 6	19 845	-	21 086	615	616		1) Expenditures at 13.75S are pending for approval upon submission of additional supporing documents and clarification. 2) SR's own funds at the bank account: 14.66S <14.66-13.75=0.91>>		\$616			\$616	***************************************
FEW	2 014 370			-	-						\$c	A STATE OF THE STA		Şo	
epublican AIDS Center under of MoH	255 143	(461,	42 915	•	41 009	1445	The state of the s	(1445	1) Refund of unapproved expenditures at 1 359.768 on 11 Aug'16 2) Expenditures at 96.718 are pending for approval upon submission of additional supporting documents and clarification. 3) SR's own funds: 11.608 <<11.60-1359.76-96.71=-1444.87>>		Şo			\$o	
cientific organization "Preventive Medicine" under of 10H	406 280	0	-		-	•		(0			\$0			So	
INICEF NEW YORK	507 074	17 880	-		+	17880	17 880	٥			\$17 886			\$17 880	
VHO REGIONAL OFFICE FOR EUROPE	453 708	•	-	-	-						So			\$0	· · · · · · · · · · · · · · · · · · ·
Other Minor SR (10 NGOs)	978 070	20 600	127 883	-	146 070	2 413	2 344	(69	1) Timing difference: Expenditures at 66.02\$ were incurred during period 15-31 Dec'15 and were reported in January 2016 4) SR's own funds at the bank accounts: 3.35\$ 4<3.35-66.02=-69.37\$>>	1	So 344			\$2 344	
Jain Department of punishment execution	285 122	(553	-	-	(770)	217		(217	variance at - 216.71 is SR's refund of unused balance on 21 Jul'15		\$c			so	
Other Minor SRs ontracted starting 01.04.2013 (14 NGO)	584 505	13 375	98 946	1	108 936	3385	881	(2 503	1) Timing difference: Expenditures at 2 131.938 were incurred during period 15-31 Dec't5 and were reported in January 2016 2) Expenditures at 156.618 are pending for approval upon submission of additional supporing documents and clarification. 3) Refund of unused balance at 223.70 in Jul and Dec 2015 4) SR's own funds at the bank accounts: 8.798 <<8.79-2131.93-156.61-223.70=-2503.458>>		\$38			\$381	
Other Minor SRs contracted starting 01.07.2013 (14 NGO)	1 498 016	18 799	352 827	-	353 978	17 648	10 193	(7 4s s	1) Timing difference: Expenditures at 3035.835 were incurred during period 15-31 Dec'15 and were reported in January 2016 2) Expenditures at 1188.055 are pending for approval upon submission of additional supporing documen and clarification. 3) Refund of inused balance at 3232.208 in Dec 2015 4) SR's own funds at the bank accounts: 0.918 <<0.91-3035.83-1188.05-3232.20=-7455.178>>	22	\$10 193			\$10 193	
Other Minor SRs contracted starting 01.06.2014 (2 GOV)	74 067	ι 598	40 801	-	39 211	3 189	2 729	(459	1) Timing difference: Expenditures at 425,578 were incurred during period 15-31 Dec'15 and were reported in January 2016 2) Refund of unused balance at 33.668 in Dec 2015 <		\$2.720			S2 729	
Ministry of Health of the KR		-	8 503	-	8 503				on direct payments		Sc			\$o	
Total for the Reporting Period	10 314 363	103 966	1071086		1 116 199	58 853	45 203	(13 650			\$45 203			\$45 203	

* Includes interest income, income generating activites

SR_Cash Reconciliation_2D

E., Total Principal Recipient Budget	Variance and	Funding Abso	anA noitgra	lysia					<u> </u>	
-	Sudget for Reporting Presed	Letnal Coase Cask (Int. 1) to Cash Sasinfo Beporting Period	t Badget # Artis Varios		Plates for Vertices	L'amulative Sudget (freng period of Fregress Lpdat	b Cash Galfless	Arte	duifre 191 Vu Absorption unix (Apacelly Ancen	Process for Victoria
s. Total Zithesput Recipient esak metilom ba. budget	E3 891 103	S 82431	17 65	(13:c# (10)		#31.021 <i>e</i> 0	01 33A 324 A	•• II	50° 516 92.6%	
					1 — Administration design three and specified in 2015 (1915 ***) in a 1 gray in a 1 gray in the foreign processing and a 1 gray in a 1 gra					Chalegorites carried and delicative asset in the control of the co
					Removalier and near at a tax to a triangular distinguishment of processing and control of the first of the state of the st					13 The remaining believe at 24 2 (2 ft is remaining the personne persons ONTH printing restrict and a 12 (2 ft is remaining the printing personne person If y y commenced are materials used in 12 (2 ft is remaining the printing the printi
sa Principal Arcipent vistak rapon diturra inniudis y san direct diskurra most ta ikasid-4 (tura)	1812 (2)	3 1(24;6	34 · · · · · · · · · · · · · · · · · · ·	11 100 kt p-1	COMPARENTIER DE MANAGEMENT (§ 1 ° 1) in the problems of the management of the comparent of	I14 (\$2.)*	4 516 428 ;		\$14 OFT \$3.49	LA positive traitered at 242 bird in the line: 4.1.2 for it is not a comment of commitmental at 12, 12, 12, 12, 12, 12, 12, 12, 12, 12,
- San Carlotte Charles (1997)					COMPARED IN CONTROL OF A STATE OF THE PROPERTY					21 of Polarusquat amount and rift activation and the description with address require and aware gother amount and the development property (i.e. and the company of the development and other proportions and of the company of the com
					A security of the second security of the secur					it to this work of consideration (1) in 2 of this would bing to troop the subset (This to show that after the transfer of the subset (1) is a full for the transfer of the subset (1) is a full for the transfer of the subset (1) is a full for the transfer of the subset (1) is a full for the transfer of the subset (1) is a full for the
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Ongoing Progress Review and Disbursement Request

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				T	The PR undated II	e POR with procure	Comment of ARV drugs, cond	nments	
1. Have you updated the Price Quality Reporting (PQR) with the leasth products received during the period covered by this PU information has not been entered into the PQR, please explain 1 For further guidance on PQR data entry, please refer to the guidelines.	/DR' (if applicable):	ation on the pharma ? If health products	ecuticals and procurement	Yes	The FK updated in	e i Qix wiii procine	ment of Arv drugs, cond	onis and test systems	
2. Based on the most up-to-date stock situation, are there any	alaba of stools onto	an arminian fourthalt	avi alkonas agairtí a	ale & hoolth meadu	ote lietad balan	at the central le	val in the payt period	of implementation? If yes	nlesse comment
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Key Pharmaceuticals & Health Products	Risk of Stock-Out	Risk of Expiry		Comment (i	yes, please pro	vide information	on the specific items	that are at risk of stock-out	or expiry)
1. Anti-malaria medicines	N/A	N/A							
2. Bed nets	N/A	N/A							
3. In-Vitro Diagnostic Products	No	No							
4. Condoms	No	No	-				·		
5. Anti-retrovirals	No	No							
6. Anti-TB medicines	N/A	N/A							
7. Lab supplies (e.g. CD4, Viral Load, Cartridges)	No	No							
8. Other (Please specify in the "Comment" column)	N/A	N/A							
3. Comment on additional issues related to the procurement a	ınd supply managen	ent of pharmaceuti	icals and health p	products.					
For LFA Use Only Section 3B: LFA-Verified Procurement and Su	pply Managem	ent Informatio	on.						
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	PR's response	LFA's response				LFA (Comments/Analysis		
1a. Has the PR updated the Price Quality Reporting (PQR) with the required information on the pharmaceuticals and health products received during the period covered by this PU/DR' (if applicable)? (If health products procurement information has not been entered into the PQR, please explain why in comments box)	Yes	Selcet							
Nalue of Pharmaceuticals and Health Products in the PQR This table is included in the PU/DR form with the aim to improve corpayments and delivery of pharmaceuticals/health products. For further guidance on PQR data entry, please refer to the guideline Reporting Currency.	upleteness of informati	on in the PQR system a	nd not for compari	ng PQR amounts vis-	-vis expenditure p	per se. NB: PQR and		health products may not be equ	and the second of the second o
PQR Product Categories	Value of products	Value of products entered by the PR and verified as				Cumulative value of products	Cumulative value of products verified as correct by the LFA		
	received during reporting period	correct by the LFA in the PQR during reporting period	Variance	Reason for	variance	received since the start of the grant	in the PQR since the start of the grant	Variance	Reason for Variance
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Section 4: Grant Management

A. PR and LFA Comments on the Fulfilment of Conditions Precedent and/or Special Conditions Under the Grant Agreement

1 Please include in this table the Condition Precedent number as per Grant Agreement and full text of Conditions Precedent and/or other special conditions due for fulfilment during this period or outstanding from previous periods.

1 Some Special Conditions may apply to more than one period of grant implementation. Their fulfilment during one period does not automatically imply fulfilment in subsequent periods. The LFA should verify that the status of such conditions is reported by the PR during each period or other special conditions.

concerned.				For LFA Use Only	For the Globa	al Fund Use Only
Conditions Precedent and/or other special conditions	Status	PR Comments on Progress of Implementation	Status	LFA Analysis (this should not be a "Copy and Paste" of the comments provided by the PR)	Validate Status	Country Team Comments
Condition(s) Precedent to the Use of Grant Funds to Finance the Ministry of Health Capacity Building Activities (Torminal Date: 31 March 2015): b. the written approval by the Global Fund of the Detailed Capacity Building Plan.	Met	The Capacity Development plan endorsed by CCM on 5 August and was submitted to GF for approval on 12 August 2015, and GF acknowledged receipt on 13 August 2015. Approval of the document by GF was received on 11th of November 2015.	Select		Select	
	Select		Select		Select	

B. PR & LFA Review of Progress on Implementation of Outstanding Management Actions from Previous Disbursements

! Please list all issues raised in the last Performance Letter from the Global Fund or outstanding from previous Performance Letters, and comment on the progress. Please include the date of the Performance Letter and the item number.

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Global Fund Management Actions	Status	PR Comments on Progress of Implementation	Status	view of PR Progress on Global Fund Management	Validate Status	Country Team Comments of PR Progress on Global Fund Management
Recommendation 1: The PR together with NAC and community of PLHIV (community based NGO) should pay more attention to motivation of PLHIV by provision of incentives and strengthening of self-support.	Unmet - In Progress	During the reporting period PR jointly with the partners implemented the following actions: * During M&E visits (September 2015) the programme specialists have conducted on-job trainings on capacity building (documentation records management, adherence to ART, nutrition and dietary during ART, treatment management of HIV patients), provided informational educational materials, etc. * The motivation strategy system for PLHIV adherenced to ART continued to be implemented in monetary remuneration that were paid via Bishkek AIDS Centre based on information available through the HIV Electronic Case Management System (UICs, percentage of PLHIV adherence to ART) that improve the collaboration between AIDS Centres and NGOs. For clients without documents in civil sector (up to 10% out of all clients) and for all clients in prisons the motivation packages remuneration was provided. * In order to improve the ecoperation between services (AIDS Centre and NGO) FR held one of the regular coordinating meeting in Osh. * In order to improve the services on treatment, care and support of PLHIV in prisons, during the reporting period there were conducted two meetings with the Republic and Bishkek AIDS Centers, SSES and NGO resulting in discussion the regular technical support of SSES by AIDS Centers through visits, consultations, working with complicated cases, cooperation in examination the clients on CD4 and VS, joint working with PLHIV and coordination (reporting system, scheduled visits, trainings, etc.). In order to improve the collaboration between state and non-governmental partners working and to improve the quality of services in prisons there were held several joint M&E visits by Harm Reduction Network and Republican Narcology Centre. * During the planning of the community-based NGO's activities for 2016 PR mandatory requested the following activities: including of the "peer to peer" consultant to each NGO's staff, the conducting of the self help groups and mini-sessions for clients and their family members on the	Select		Select	
Recommendation 2: The PR together with NAC should improve access to laboratory monitoring of ART for all eligible PLHIV. Support for transportation of blood sample to laboratories for viral load or CD-4 tests provision may be useful for the doctors and clients. As the PR already provides support to NCP for material transportation to TB laboratory, it can consider arrangement of outsourcing in case of HIV as well.	Unmet - In Progress	In order to improve the access of PLHIV to laboratory monitoring of the effectiveness of ART (the analysis of viral load, CD4 cell count titers) during the reporting period PR implemented the following activities: 1) Conducting of the preparing works for ensuring the renovation works in Osh AIDS Centre for creation of a separate PCR laboratory based in Osh AIDS Center. During the reporting period the engineer was selected, the tender process for the constructive works was launched. 2) Conducting meetings and discussions with ICAP and RAC on the external resources - outsourcing transport services to private laboratories (e.g. private courier service of Bonetsky, Laboratory - Intelligental LLC) for the transportation of biological samples from the regions to the only existing PCR laboratory in the country - in RAC at present time and then to the Osh PCR laboratory as well. As a result the draft of the Agreement between RAC, ICAP and Intellned LLC was developed. ICAP is planning to finance the transportation services till June 2016. PR included the costs for the mentioned services in the modified Work Plan and Budget for 2nd Semester 2016 – 2017 (BB months). 3) During the reporting period PR bought and transferred - 1 stationary CD4 cell counter to the RAC and two portable mobile CD4 cell counters to the Naryn and Issyk-Kul AIDS Centers.	Select		Select	
Recommendation 3: ASTB diagnoses and TB prevention among PLHIV are crucial for decreasing of mortality and retention at the ART PLHIV, the PR together with NAC, as a SR should pay more attention to early TB diagnoses and prevention, as well as providing treatment, care and support to patients with HIV/TB.	Unmet - In Progress	In accordance with the NAC report for the 2015, 95% of all eligible PLHIV (2.694) were screened for TB. Despite the taken efforts, majority of newly registered HIV/TB patients are enrolled in care on the latest stages of HIV infection (with advanced forms of TB). Therefore, the death rate among these patients is still high. The PR has received the preliminary data from the NAC on percentage of newly registered HIV/TB patients who died from TB during the 2015 and it is 23.5% as of 31 December 2015. A new clinical protocols including HIV/TB were approved in January 2015. In accordance with the protocol new algorithm of the diagnosis of TB for PLHIV was introduced, which includes screening on TB (4 questions) on the first stage and further steps. This algorithm also stipulates that Isoniazid preventive maintenance should be performed every 2 years for PLHIV (without confirmation of Mantoux test) and is necessary to make every effort to implement these recommendations for Isoniazid prophylaxis (Isoniazid prophylaxis Isoniazid prophylaxis (Isoniazid prophylaxis) (Isoniazid prophylaxis (Isoniazid prophylaxis) (Isoniazid prophylaxis (Isoniazid prophylaxis) (Isoniazid prophylaxi	Select		Select	

				For LFA Use Only	For the Glob	al Fund Use Only
Global Fund Management Actions	Status	PR Comments on Progress of Implementation	Status	view of PR Progress on Global Fund Managemen	Validate Status	Country Team Comments of PR Progress on Global Fund Management
Recommendation 4: Activities realized by PR together with Republican Narcology Center demonstrate high level of interest for retention OST clients at the programme. More attention should be paid for organization of motivation sessions and for arrangement of special more comfortable venue for such activity. Unified training materials should be prepared and distributed among OST sites, Such sessions can be organized for several sites at the same time. Merging OST sites and establishing more flexible work (more flexible opening hours for OST points, provision of dosage for several days, working with close environment of the clients) could approve retention of the clients within the programme.	Unmet - In Progress	Despite the joint efforts of the PR, RNC and NGOs working with OST clients there is a trend on reduction of OST programs coverage during the most recent three reporting periods (1,605 – 1,576 – 1,553). The main reason for such reduction of coverage is remaining low retention in the program of the OST clients. Low retention in its turn, caused by the various reasons but mostly by the following: 1) uncertainty of clients in the future of the OST program due to the fact that Kyrgyzstan has joined the Eurasian Economic Union; 2) mandatory registration of the OST clients in the state narcology database; 3) discrimination of the OST clients rights by law enforcement employees and 4) inability for clients to obtain a dosage of methadone for more than one day due to current regulations of the program. During the reporting period, the PR jointly with the RNC have taken the following actions to address the above mentioned reasons: 1) An arrangement for collaboration between RNC and Public Foundation (PF) "Voice of freedom" was achieved which allowed lawyers of this PF to work directly on each case of violation of OST clients rights by the law enforcement. In addition, a video surveillance means as installed at one OST site in Bishkek, where many clients were facing problems with the police. This action has led to the reduction of cases with violation OST clients rights by the police (as per information from OST staff). Due to efficiency of this measure PR included the costs for video surveillance equipment for all OST sites in civil sector in the modified Work Plan and Budget for 2nd Semester 2016 – 2017 (18 months). 2) Two lawyers from the PF Voice of freedom" and Law firm "Addiet" has been contracted by the PR to conduct trainings for social workers and peer consultants of OST points on legal issues and protection of human rights of OST clients. These trainings (one in Bishkels and one in Osh) are planned for the beginning of the next reporting period. 3) Joint instruction for employees of four Ministries (Ministry of	Select		Select	
Recommendation: The PR in collaboration with UN agencies and development partners should arrange special assessment for verification of indicator's achievement, such as Number of pregnant women who know their HIV status; Number of people tested for HIV, including the provision of results; coverage by viral load tests, etc. Such activity may be implemented together with UN agencies and development partners, as well as implemented within State Programme midterm evaluation which will be organized at the year 2015.	Unmet - In Progress	1) These indicators are verified by employees of AIDS centers jointly with UNDP program staff during monitoring visits on a routine basis. 2) During the 2nd Semester 2015 UNAIDS through the specific agency conducted State Programme midterm evaluation and presented the results. Within the evaluation the experts tried to assess the HIV cascade for PVID, using the available data sources. All interested partners discussed the results of the evaluation and planned to develop Plan of actions to address the identified issues in the beginning of 2016. 3) During the reporting period PR discussed with the partners the issue on synchronization of the AIDS Centres and NGO's reporting systems to have a possibility to work with the harmonized data to develop the HIV cascade for each covered key population group (PVID, SWs, MSM): implementation of UIC system to the AIDS Centre's electronic base on HIV cases, streangthening of the cooperation between NGOs and AIDS Centres, discussions with the RAC on the using MIS Data Base by RAC, promotion of the MIS Data Base by MoH among all donors working on HIV prevention in the country. The updated approach will be implemented from 1 January 2016. 4) Upgrading of the MIS Data Base during the reporting period according to the identified needs within the program. 5) Within the Work Plan and Budgets for 1st Semester 2016 and for 2nd Semester 2016 - 2017 PR planned several activities for synchronization of the National MSE system (working group, meetings, etc.). 6) PR included new indicators within the HIV cascade into SR agreements with the partners working on HIV prevention for 2016 and conducted several trainings for SRs staff on case management and peer counseling.	Select		Select	
	Select		Select		Select	

C. Comments on Annual Grant Reporting Requirements

! Please indicate a date for the report due for submission. If a report is	ase indicate a date for the report due for submission. If a report is overdue, indicate the original due date and explain the reason for delay.						For the Global Fund Use Only	
Required Documentation	Due date (dd-numm-yy)	Status	Comments	Due date (dd-mmm-yy)	Status	Comments	Due date (dd-mmm-yy)	Validate Status
PR Audit Report		Select						
Annual Financial Report (AFR) / Enhanced Financial Report (EFR)		Select						

Section 5: PR and LFA Evaluation of Overall Performance

A. PR's Overall Self-Evaluation of Grant Performance (including a summary of how financial performance is linked to programmatic achievements)

1. The self-evaluation should be undertaken by taking into account programmatic achievements, financial performance and program issues in various functional areas (M&E, Finance, Procurement, and Program Management, including management of Sub-Recipients). See Guidelines for more detailed

During the reporting period, the grant has continued to achieve a strong programmatic performance, while at the same time achieving significant savings during the period. Using savings from 2014 and an incremental amount of \$1,618,328 GF approved a budget of \$6,196,002 for the year. UNDP identified critical activities as well as activities which would nent of the targets and included them in the WP& B. By adopting this approach UNDP was able to achieve significant savings on the previous year's budgets. UNDP has ensured continuous provision of prevention services for all key populations as well as diagnostic and treatment.

During the reporting period the PR jointly with the partners achieved the following significant results implemented within the program:

- The mechanism of public monitoring of HIV prevention and treatment programs by Harm Reduction Network continued to be implemented in SSES, due to the collaboration between SSES and RAC was significantly improved;

 Within the training plans for each year the events like the Summer school for HIV positive children, National Forum for PLHIV, SWs and MSM Communities or NGOs were successfully conducted;
- Within the cooperation with ICAP and RAC IBBS was conducted in 2013 and the planning of IBBS in 2016 started during the 2nd Semester 2015;

 During 2016 according to the request from GF PR developed the detailed design of the program for 2016-2017, Which were submitted to the GF, met with the identified

- In order to prevent the interruption of the services provision to the clients and ensured the implementation of all prevention, treatment, care and support activities at the same level during the "transition" period 2015-2016 PR started the tender process of SRs for 2016 in the middle of November 2015. The tender process was identified as a mandatory action

The budget for the reporting period was \$ 2,091,108.43; cash outflow was \$2,934,716.68 and commitments together with other obligations at the end of the reporting period are \$1,023,778.53.

The financial delivery versus budget in the reporting period excluding commitments is 140.3 % whereas including commitments it is 189 %. The current period burn rate is 189% calculated as following: SR and PR cash outflow plus commitments versus current budget. The high burn rate is due to payment in the reporting period of the commitments from the previous periods that are explained in details in the cash outflow variances.

ulative financial rate excluding commitments is 91.9%; whereas including commitments its 95.2%

The cash balance at the end of reporting period is \$2,253,251.34 which covers below activities:
----\$613,006.08 PR commitments as of 31/12/2015;

- ---- \$ 410,772.45 other PR's obligatins i.e. ongoing programmatic activities;
- --- remaining balance would be used to cover activities and procurement of the period January -June 2016 till release of the next disburement from GF in order to ensure continuoued implementation of the program.

In the beginning of the grant (the 2nd Semester 2011) the performance of the grant was assessed by 4 performance indicators, related to PLHIV, ART, OST and PMTCT. Out of them one indicator was surpassed, one indicator was achieved for 100 % and two indicators exceeded 80% achievement.

In 2012 there were identified 17 indicators related to the prevention programs for each key population group, PLHV and ART, HIV testing, PMTCT, STI, community development, trainings, etc. were identified in PF. Out of 17 indicators of PVID, SWs and MSM by the minimal package of services and the coverage by ART) were significantly overachieved as well. The indicators on the number of patients receiving nethadone substitution treatment was achieved for 80% and 77% per Semester accordingly.

In 2013 the evaluation of the grant was conducted through the same 17 indicators. In 1st Semester 11 out of 14 suitable performance indicators were overachieved. The number of IDUs reached by methadone substitution programme was achieved at 64% level due to the heavy pressure on the programme clients by the police, low adherence rate among patients due to availability of cheap heroin, poor referral programmes from NEP and other harm reduction programs and other reasons. In 2nd Semester all vulnerable groups continued receiving minimal package of prevention services and the performance indicators for sex workers and MSM were exactly methodome substitution programs and other reasons. In 2nd Semester all vulnerable groups continued receiving minimal package of prevention services and the performance indicators for sex workers and MSM were exactly methodome substitution programmes and other reasons. In 2nd Semester all vulnerable groups continued receiving minimal package of prevention services and the performance indicators for sex workers and MSM were exactly methodome substitution programme was pity increased comparing to the previous period, which reflected the efforts invested by the PR into the improvement of the programme.

In 2014 despite the delay in the signed Grant Agreement for 2014, all programme activities were continued. The PF was revised, the total number of indicators were included. The new indicators on OST adherence and HIV testing of the clients from PWID, SWs and MSM group were

In 2015 The PF was revised again and 13 program indicators were identified. During last year all key population groups continued receiving minimum package of prevention services for PWID, sex workers and MSM were reached at a very good level or exceeded, the number of PLHIV reached with the care and support programs within the Grant were overachieved. New target indicators on the clients from key population groups receiving an HIV test and know their results during the year was achieved the targets, but the indicator on the "Perentage of individuals receiving OST who received treatment coverage by the OST program increased and achieved the targets, but the indicator on the "Perentage of individuals receiving OST who received treatment coverage by the OST program increased and achieved the targets, but the indicator on the "Perentage of individuals receiving OST who received treatment coverage by the OST program increased and achieved the targets, but the indicator on the "Perentage of individuals receiving OST who received treatment coverage by the OST program increased and achieved the targets, but the indicator on the "Perentage of individuals receiving OST who received treatment coverage by the OST program increased and achieved the targets, but the indicator on the "Perentage of individuals receiving OST who received treatment coverage by the OST program increased and achieved the targets, but the indicator on the "Perentage of individuals receiving OST who received treatment coverage by the OST program increased and achieved the targets, but the indicator on the "Perentage of individuals receiving OST who received treatment coverage by the OST program increased and achieved the targets, but the indicator on the "Perentage of individuals receiving OST who received treatment coverage by the OST program increased and achieved the targets, but the indicator on the "Perentage of individuals receiving OST who received treatment coverage by the OST program increased and achieved the targets, but the indicator on the "Perentage of individuals receiving OST who received the targets and the open coverage by the OST program increased and achieved the targets and the open coverage indicator on the "Perentage of individuals received to the open coverage by the OST program increased and achieved the targets and the open coverage indicator dramatic increase in the estimated data for the number of people living with HIV for 2014. (9,410 latest available data in 2015 compared with 8,021 previously). The % of HIV-positive patients who were screened for TB in HIV care or treatment settings were overachieved in each Semester. It is hoped that this indicates that even with the dramatic scale up of ART the quality of the programme is not being compromised.

In the last Semester 2015 the grant performance is being assessed by one impact indicator. In accordance with the PF other impact indicators will be available from next IBBS, which is planned for 2016. The impact indicator shows that 76 % of adults and children with HIV known to be on treatment 12 months after the initiation of treatment (preliminary data). This achievement is especially important as the Country has scaled up its ART programme

Sub-recipients management: From the beginning of the 2012 PR had 1.4 SRs and 29 SSRs (through one SR - AFEW) in the programme, the Agreements were signed and funds were transferred. The programme and needle exchange points. AFEW and the Narcology Centre were the biggest SRs implementing more than 80% of the entire SRs budget of 2012. Regular trainings on financial management, reporting and M&E were organized. The PR organized several trainings on the Kyrgyz legislation rules and regulations by the Chamber of Tax Advisers. Regular coaching and on the job training of accountants have also been organized to strengthen SRs capacities. In 2012-2013 AFEW had 36 NGO as sub-sub recipients and despite the PR invested substantial effort to clarify the reporting requirements during the reporting period they failed to submit good quality financial and programmatic reports on time.

From the 2013 Regular coaching and on the job training of accountants have also been organized to strengthen SRs capacities. In 2012-2013 AFEW had 36 NGO as sub-sub recipients and despite the PR invested substantial effort to clarify the reporting requirements during the reporting period they failed to submit good quality financial and programmatic reports on time.

From the 2013 the SR agreement with AFEW was reconsidered and PR decided to switch to direct engagement of all NGOs instead of continuing contracting AFEW as umbrella sub-recipients. This decision allowed: 1) improving the timeliness and quality of reporting and payment of advances to SRs, 2) investing into direct capacity building of NGOs, 3) reducing transaction and management costs. PR started to contract all partners directly as SRs to improve timeliness and quality of reporting and to be able to directly strengthen capacity which are being engaged directly and developed risks mitigation plans for each SR. The PR conducted capacity assessment of all sub-recipients which are being engaged directly and developed risks mitigation plans for each SR. The PR conducted as capacity build

During the period of granny implementation PR expanded the program activities to some new regions and signed several additional agreements with the partners. PR conducted a series of training activities to improve capacities of sub-recipients (finance specialists, outreach/sort, outreach/so practiced the series of open door meetings which helped to improve communication with SRs and avoid misunderstandings of GF and UNDP policies.

In 2015, despite on the approval of Work plan/Budget for year by GF in February, the PR was able to manage the SRs and their activities in the beginning of the continuation and prevented the interruption of the provided services to the programme clients, keeping the most of trained staff and effective collaboration and communication with Shs. From the beginning of 2015 in order to optimize the program activities were included into the Agreements with other current SRs was reduced by several organizations, which activities were included into the Agreements with other current SRs or were implemented in another way without loss of the clients and services quality. In accordance with the GF condition for 2015 and to ensure all incentive payments for government SRs are in compliance with the GF budgeting guidelines PR jointly with governments. The plan was approved by GF on 29 April 2015 and become effective for Republic Narcology Centre and in the

The Agreement with MoH was signed 30/04/2015 by PR and 12/05/2015 by MoH, all planned five experts were hired by MoH and started to work within the Agreement by the end of 2015. The Capacity development plan, including the transition plan, was developed by UNDPs Senior Capacity Development Advisor, discussed with the all stakeholders, agreed by

WoH and within the reporting period was approved by GF. The MoH jointly with Fe revised the CD Plan, and main activities within the plan will be implemented during period.

From the beginning of 2015 the Secondment approach of PR programme staff was implemented. These secondments assisted with developing the quality of reports and routine accounting and reporting by SRs by providing technical and practical assistance in the field by consultations and within on-job trainings. In 2015 PR jointly with SRs, working with PLHIV (NGOs and AIDS Centers) started to implement the modified motivation strategy for PLHIV adherent to ART within the monetary remuneration instead of motivation packages via Bishkek City AIDS center that allowed to improve the collaboration between all partners and to improve the quality of the national registration system (electronic data base or

In 2015 UNDP finalized the installation of accounting software 1C to SRs in order to facilitate their financial reporting and ensure timely and regular monitoring of expenditures and their compliance within approved SR agreements and budgets, as most of SRs have been preparing reports manually that caused sometimes discrepancies and other mistakes in their financial reports. Besides, installed software would help SRs to monitore stock level of HP and IEM received from PR for implementation of project activities. PR conducted the trainings for SRs, Finance, Procurement and Logistic PR's teams. Now the system is in testing and updating process by PR and SRs. The installation of one standard accounting software for SR also allowed PR to save funds on maintenance of 1C as PR made one corporate contract with suppliers for provision of services for all SRs.

In the beginning of the grant, the Monitoring and evaluation system needed to be strengthened at the national and programs among SWs and MSM. To improve the overall quality and timeliness of reporting as well as the quality, accuracy and integrity of data, the PR has institutionalized the MIS database developed by CARHAP in over 100 service providers points. UNDP also developed guidelines to work with the database and organized several trainings on the M&E systems and on the use of database, all SRs received IT equipment to operate the database. The PR also conducted trainings on how to use the guidelines as well as the GF reporting forms. Jointly with CDC, UNDP worked on improvement of the national M&E system with regards to HIV, National M&E guidelines were also revised. In 2013 PR jointly with ICAP Project (Columbia University) and the AIDS Centre worked on the survey protocols and solved all issues to conduct good quality sentinel survey - IBBS. The results of IBSS were presented at the Round Table for national and international partners at June 17, 2014.

Population size surveys for IDUs, MSM and sex workers were conducted during 2013-2104, the results were presented to the national partners and the reports were printed. During that period of time PR continued strengthening the M&E systems at the level of sub-recipients and at the level of the national M&E systems through regular M&E visits, updating/publication and dissemination of M&E guidelines and conducting the trainings, the governmental NSEPs and OST points in civil and penitentiary sectors started working with MIS Data Base.

From 2014 a new indicator on adherence to OST for more than 6 months was introduced into the PF. PR jointly with Republican Centre of Narcology and penitentiary system were able to collect reliable data under this indicator. The work with SRs to improve data quality has ensured that more reliable information can be received through the removal of duplicated UIC's for people who receive services from more than one service provider.

According to the Data Quality assessment recommendations from 2015 PR finances two M&E positions under RAC to provide high quality data and to support and increase the capacity of RACs' staff as they are physically working in RAC. As a result the better quality of reporting data was achieved. During the last reporting period the PR continued to ensure the qualitative and effective operation of the existing M&E System on routine basis by working on programme reports, M&E visits, and consultations

The procurement overall self-assessment for 2011-2013 and 2014 was provided in the previous PUDRs.

In 2015, despite the fact that the grant was approved in February 2015 only and the disbursement release has been made in June 2015, UNDP ensured all essential medicines (ARVs and methadone) and health products (mainly diagnostic products) have been procured and delivered to end-users in timely manner.

Lessons learned in 2015: UNDP faced QA issues related to diagnostic products. The HIV tests, procured mainly from Russian manufacturers were not GF QA compliant and the GF communicated this to UNDP. These products were requested by the end-users due to the fact there was a specific equipment requiring a specific manufacturer or there was a need to supply the same tests from three different manufacturers and one of them should be from a Russian manufacturer in order to complete laboratory quality control activities. UNDP in Kyrgyzstan together with the UNDP offices in Geneva and New York reviewed and discussed these problematic issues and set up more strict rules to follow the GF QA requirements

for diagnostic products. In this regard, UNDP before issuing any contract for health products (subject to the GF QA policy) ensures they meet quality standards (are WHO or GHTF founder member approved) i.e. no specific manufacturers from the end-users will be processed unless they meet the GF QA requirements.

Best practice: a) UNDP procured ARV drugs in 2015 with savings to the amount of \$217,000. The savings are due to lower price per unit based on the UNICEF LTA discounts; b) UNDP established and successfully operates "1C" programme (software) to manage procurement and supply chain. The programme allows checking stock level any time, monitoring onthly/annual consumption level and monitoring shelf life of HP being stored at the central warehouse. This experience was shared with other UNDP offices serving as the PR for GF grants. Additionally, UNDP is intended to improve the 1C system with perspective to include peripheral warehouses to the system

D	Dlamad	Changes	in tha	Program.	:fame
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The grant started from 2011 according to the Work Plan & Budget approved by GF.

In July 2014 UNDP signed separate agreements with new SRs - Osh and Jalal-Abad AIDS centers to improve the implementation of the prevention, diagnostics and treatment involves a larger number of people living with HIV from the previously planned. PR made a recalculation of the needs of ARV procurement, revised the need for the combined forms, the proportion of latest has been increased. The activities planned for the procurement of equipment for Blood Center in 2014 was S11.9 million, UNDP was asked to make savings from non-critical activities. As it was explained in the previous reporting period a large proportion of the HIV budget for 2015 consisted of savings requested by GF from the 2014 budget. The workplan and budget was agreed with GF on 26 January 2015, approved via implementation letter in February and first disbursament for 2015 was made by GF on 21 June 2015. Despite the delays in the approval process, UNDP ensured that critical activities continued.

During the 1st Semester of 2015 some urgent needs on the procurement of the Health products were identified. PR recalculated, forecasted and in 2nd Semester 2015 started the procurement process in accordance with the real needs in syringes, needles, condoms till the end of 2015 and 1st Semester 2016 (buffer). In order to improve the HIV treatment cascade, it was discussed and approved the activity on opening the VCT room in Osh AIDS Centre, that was not planned and budgeted. As a result of the consultation with National partners, GF, WHO the creation of the PCR-lab on Osh AIDS Centre basis was approved, and the engineer was hired and the renovation works have been started.

C. External factors beyond the control of the Principal Recipient that have impacted or may impact the Program

The Grant Agreement was not signed until 14 October 2011 due to delays in grant negotiations, so the first disbursement was not made until 6 December 2011. This had an impact on the programming and procurement. The staff of some SRs worked without payment for several months for 5 months until the agreement was signed and the funds disbursed (UNDP then reimbursed the staff). Additionally, UNDP advanced its own funds to procure ARV drugs to ensure uninterrupted supply of ARV drugs, methadone and distribution materials (syringes, condoms, IEM) to prevent the interruption of the treatment and HIV preventive services. In the beginning of the grant implementation (2011-2012) PR faced with the number of the challenges like: frequent change of leadership at the Ministry of Health and CCM, staff turnover in the AIDS Centre, insufficient capacity to manage National HIV programme, lack of transparent procedures and systems in the national institutions. Due to the issues mentioned above, additional efforts were invested by the PR to communicate to the key stakeholders and to establish the mechanisms for the programme implementation. UNDP worked to address the identified gaps and weaknesses, included by the PR to communicate to the key stakeholders and to establish the mechanisms for the programme implementation. UNDP worked to address the identified gaps and weaknesses, included by the PR to communicate to the key stakeholders and to establish the mechanisms for the programme implementation. UNDP worked to address the identified gaps and weaknesses, included by the PR to communicate to the key stakeholders and to establish the mechanisms for the programme implementation. UNDP worked to address the identified gaps and weaknesses, included to the very state of the programme implementation. UNDP worked to address the identified gaps and weaknesses, included to the very state of the ve

By the end of 2015 PR should mention the following still existing challenges and barriers: Not high capacity of the SSES and high staff turnover.

1) Not night capacity of the SSLS and nigh staff turnover.
2) Continued stigma among doctors and in the society towards all target groups of the grant, but more specifically towards PLHIV. The stigma results in high treatment default rate and high mortality among PLHIV. Actions are aimed to overcome this barrier: SR regularly organizes meetings between NGOs and the state organizations where the existing problems are discussed. In the AIDS centers there are employed HIV positive people for conducting the consultations based on the principle "peer to peer". During the reporting period PR jointly with the SRs and other partners successfully conducted Summer school for HIV positive children, three National Forums for PLHIV, SWs and MSM Communities.
3) Changes in the regulatory environment. There is continued legal bill being discussed in Parliament which prohibits 'non-traditional' sexual relations. This is likely to affect our ability to reach MSM and even sex workers with planned services, but during the reporting period SRs were able to keep the coverage of the clients and provide the services. Activities of "Morality police" department and some public organizations complicated the SRs work among SWs, but despite on the difficulties SRs were able to keep the coverage of the clients and provide the services as well. In addition due to the join of Kyrgyzstan to the Eurasian Customs Union, and the risk of the pressure to close the OST programme in the country is still being. Some activities of MolA staff (personal to addition of the clients, is legal arrests) also continue to effect negatively on the implementation of the OST programme in the country, and Planning to take an active participation in activities aimed on the improvement the situation (meetings, working groups, trainings, etc.). 4) sub-optimal M&E systems for the HIV data collection - to address this risk the PR continues to work closely with the National AIDS Centre, TB and Narcology Services and other development partners (UNAIDS and CDC).

5) As Global Fund funding reduces, and there is increased reliance on National Funding, it may be difficult to attract financing for activities and NGOs working with key populations at the same level.

For LFA Use Only

A. LFA Overall Evaluation and Rating of Grant Performance (including a summary of how financial performance is linked to programmatic achievements) ! The evaluation should be undertaken by taking into account programmatic achievements, financial performance and program issues in various functional areas (M&F. Finance, Program and Program Manager)

guidance on the completion of this s	section.		tupello, occumento occumen	
Indicator rating	Select	Any major management issues resulting in downgrade? <u>Select</u>	Overall Grant Rating Select	
B. LFA comments on PR plan	nned changes in the program, if any	· · · .		
C. J. F.A. Community on Enthance	al Factors Beyond Control of the Principal Recipi	and the boundary in the state of the state o		
C. LFA Comments on Externa	nai ractors beyond Control of the Principal Recipi	ents that have impacted or may impact program		

PR-LFA Evaluation_5

Section 7A: PR - Enhanced Financial Reporting

Country	Kyrgyz Republic
Grant No.	KGZ-H-UNDP
PR	UNDP Kyrgyzstan
Currency	USD
Disease(Component)	HIV/AIDS

PLEASE REFER TO THE "GUIDANCE FOR COMPLETION OF THE ENHANCED FINANCIAL REPORTING TEMPLATE"
DOCUMENT TO ASSIST YOU IN COMPLETING THE TEMPLATE
TO BE COMPLETED ONLY <u>ONCE</u> A YEAR EXCEPT AT MONTH 18 FOR PURPOSES OF PHASE 2 REVIEW

	·	dd-mm-yyyy
Current Reporting	Start Date(1-Jan-2015
Period	End Date:	31-Dec-2015

The end date for the current reporting period and cumulative reporting period must be the some

		dd-mm-уууу
Cumulative	Start Date:	(-Jul-2011
Reporting Period	End Dater	31-1100-2015

The "TOTAL" rows in Table A, B and C will have a RED background if the amounts in each table do not agree. If the Totals for each Table agrees, these rows will have a VELLOW background.

	AKDOWN* BY EXPENDITURE CATEGORY	AND SEEDING THE SECOND PROPERTY.	palitica processor de la compania d	termanismisere C	urrent Reporting Period	WESTERNAMEN CONTROL		agasassassas Cun	ulative Reporting Period
0500		Budget	Expenditures	Variance	Reason for Variance	Cumulative Budget	Cumulative Expenditure	Variance	Reason for Variance
1	Category Human Resources	\$2 293 872			05% of utilization	\$10 992 298	\$10 692 838		17% of utilization The positive variance is mainly due to:
		\$324 220	\$234 857	\$89 363	The main variance is due to postponement of CT plan activities to 2016. Although SIV Agreement between PSNP and the Malfard the RR nat signed in May 2016, despite secredirectualment processes Molf was able to certain the person only by Devember 2019. The expects development of Molf tremains a printity and there activities will continue in 2016. Prospert amount under BIPD activities are due to the closed cooperation with other partners and on etuge the country needs by other development partners. PR commitments as of 31/12/2015 are at the amount \$ 32.401	8922 353	\$669 511	\$252 841	1) Propertia anomal at 103 3732 blot in due to prosponed activities for 2016 under CD plan for Moll of the KR as was explained in decidies under current period. 2) Properti anomal at 36 3754 bit at deals to HIP activities due to the closed cooperation with other partners and one curge the country needs by other developments patterns and one curge the country needs by other developments patterns. 3) AR and SRI was considered to the country needs by other developments patterns. 3) AR and SRI activities and the country needs by other developments by the country of the coun
3	Technical Assistance Training	\$226 040	\$206 641		The amount of 47 5228 out of total expenditures for 2015 belongs to expenses of 6.88s for text live 2014 that were recorded in the beginning of 2015 upon submission of their reports for 4th quarter. Thus, not statistic of 5015 is 60-025 that it is mainly due to: The training plan for 2015 was approxed by 107 at the end of April 2015 and most of 8R activities were uncelled and/or the hingest amount were reduced. Also at the end of 2014 some cummitted activities were cancelled by 5R and the funds were returned by 1R to 2015. The training of 37 378 body-feel in 2015 under 8R were mad approxed by 6R as per Training plan submitted to 1P. 21 Proposed amount at 16 59 08 that was budget under 1PRC EF due to absence of SR agreement in 2015 with UNICEP. 2) PR has commitments at 26 08 28 as 46 31/12/2015 that relate to protoposed activities for 2016.	\$1 997 212	S1 893 101	\$104.111	Total positive variance is mands due to the reasons explained in details in current period. The remaining balance is integent amount of SR commitments as of 1/1/2/2014 as some of the positioned training activates (now 2014 to 2015) were canceled and the funds were returned to PR in 2015.
3	Health Products and Health Equipment	\$667 812	\$1 232 350		The negative is action with match the last the reason that during reporting period FR less poislamount of a unitage and commitments and segrong prescrement from 2014. The commitments were for prescrement of pieces. How a tounder Cy Jonnica Pi'gin with text lasts, western blot feels. It'll texts and Dy Generalism III'll texts, exceeding, anticepted and the other prescrement and the prescrement of the mount of good R 195 as of \$1/12/2015 that include prescrement of anticeptic neighbor, despited by prescrement of anticeptic neighbor, despited, best lexible different plant and the long of the pickus, dispractic text last CP (generative IIIV texts, weeken blod, virial lood, PPCR, Bow extendeds and other texts). Effect texts, positive plant and the outplets.	\$5 728 458	S5 181 344	\$547 113	The unoport amount relates to PE P3 commitments and ongoing procurement at the amount of park StyCas of 31/12/2019 (Edu Heidele) procurement of antiroptic packons, disposals text kits IV, generation IVA texts, western bird, viral kord, PCP, flow or tomes and other texts), Elica texts, positive plasma and lab supplies. The pass ment will be made in 2016 upon slaperent of health products
		\$812 912	\$77 103		The actual cash notifies during 2015 was over for 502 3685 that stands for prepoid amount. The variance between actual cash outlines and expenditure amount reported in APR is dute to the fact that the Trutal Cash Outlines' includes a prepayment whereas the APRAND reports report expenditures for goody-crewise that trave been delicered. The tab with the section for the Trutal Cash Outlines' is completed on a cash basis whereas the APRAPER is empleted on a middle cash basis. The remaining balance is due to usuing from procurement of APRA drugs due to have price per annul and cancellation of procuremental variance of direct grounds are given as a cash of the procurement of the cold direct grounds of the procurement of the procure	\$1834361	\$1 006 993	\$827368	As at was explained in current period the actual cumulative variance is lower for prepaid amount at 502 3688 due to reporting principles. The remaining behave of variance is due to 11 3242/2010 - Savings from pressurement of ARV drugs due to lower price per unit; 23 887/2010 - 170 Communicat at a 63/1/42/2015 for methadone that will be delic cred and past in January 2016. 3187/2016 - Refund in Sonn 8 from PSICEF for the previous pressurement of ARV drugs made in 2014 49 82 94.45 - 34.5 ings due to cancelled procurement of some OI drugs (Gauckovir 500 mg. Acidovir 200 mg. Acid
5	Medicines and Pharmaceutical Products	\$360 118	\$294 124	\$65 994	The actual each cultims for going was over for 11 3075 that 3 bands for prepaid amount that relates to prescriments of Mr. The variances to due to different reporting policies in AFR and fordiget variance that is explained in details under MED category above. The reported expenditure amount includes FSM cost at 97-4485 for commitments from 2014 as goods were shaped in 2018.	\$2 339 232	\$1 730 310	\$608 922	The positive current of MAC. The remaining holisone is due for 113 yes, \$1 that stands for prepaid amount in 2015 related to precurement of MAC. The remaining holisone is due for 13 121 710 K is minused of commitments on EVMs and \$1/14/2/2015 that will be paid in the next semester upon Suprement of 45 20 12 12 710 K is minused of commitments on EVMs and \$1/14/2/2015 that will be paid in the next semester upon Suprement of 45 20 12 12 10 12 12 10 12 12 12 12 12 12 12 12 12 12 12 12 12
6	Procurement and Supply Management Costs	\$85800	\$52 140	the state of the first of a	The positive current variance is due to the fact that presentement of pharm and deep freezers that have been included in 2015 bulget in line with improvement actions of Mongae of pharmacoultack and bothly products as per international experts reports and included for selectified regulated in the products is progressed to action to the fact that the initial presentency from for this organization was amended due to the higher priorities for other types of equipment comparing to the initially planned pharma finding pressurement.	\$1 163 414	\$97 8 113	\$185.301	The cumulative positive variance is due to: 11 (i) 40 de animated of commitments on 4 \(\frac{1}{2} \) (2015, that is mainly belongs to remeation works of 17 \(\frac{1}{2} \) (as the same of commitments on works of Express test points and text points in primary 2.2.4 for the six points of the same of t
	Infrastructure and Other Equipment	\$50 826	\$48 920	\$1 906		\$357 062	\$299 12 3	\$57 939	The cumulatina positive variance is due for 114.1385 is amment of PR twomaliments as of 31/12/2025 that belongs to printing and publishm of variant indemnation and training materials methodologies, reports, and building for counterparts 21.4 (2018 variant) of SR commitments as of 31/12/2023 that will be recorded in 2016 upon submission of final angual expert. These commitments relate to WHICE-by printing PATTY forbs and economization materials. 31 the remaining believe stands for swings in printing GP UNDP monthly building and some other positing materials.
8	Communication Materials	\$113 358	\$48 651		0.65 of obligation. Mike positic cratimeter in the current period is due to 1) 20 0.05 is unspent amount due to absence of SR agreement with UNICEF 1) 20 0.05 is unspent amount due to absence of SR agreement with UNICEF 2) The amount of 26.7548 feetwalded as 3.1 1.1 is 1.3.4 is budget expensed is due to sayings on budget amount on RACS Mike is with Equation's feet administrator staff, regular visits fee MIFF check, and sate visits by electronic surveillance) but the reserved and updated Mike, visits Flan by RAC according to the real needs and providelities of commitments as of 31/12/2/115 at 2.0585 that will be possible recorded as expenditures in 2016 upon submixed on final/amount reports. 4) The cramaning balance is due to savings on FR monitoring visits during 2017.	\$424 917	\$357 075	\$67.842	The cumulative positive varance is due to the same crasion as indicated in the current period variance analysis. In addition, there were SR commitments at 1,335 so 6 11/12/2014 that have been carefiled and funds were returned to PR usinly due to the fact that FR dislat sign SR agreement with Free entire Medicine in 2017.
	Monitoring & Evaluation Living Support to Clients/Target Populations	\$235 502	\$196 940	\$38 562	IX positive variance in the current period wides to the teducing of standards for social support of the clients. FEBIX subtreed to ART and social support of the clients from other key population groups (in the social institution, etc.) in accordance to the Salsonal standards than reducing a standards. Several SRs have commitments as of 31/12/2015 at 2 5368 that will be recorded as expenditures in 2016 upon submission of final reports.	\$921 266	\$863.817	\$57 449	LS cumulative positive variance is due to the reducing of standards for social support of the clients. PLHIS adhered to ART and social support of the clients from other key population groups for the social institution, etc.) in accordance to the National standards tharm client institution from 2014. Several SICk have commitments as of 31/12/2015 at 2.5368 that will be recorded as expenditures in 2016 upon submission of final reports.
11	Planning and Administration	\$223 331	\$142 984	\$80 346	PA positive variance in the current period is due to 11.22 16.08 is unspead amount allocated for NEF outreach workers under RCN due to their strong reluctance to gather supporting decuments for embursament of transpectation crosts in compliance with established RCNS Strategy that was developed in fine with GP budgeting guideline and that requires payment of transport crosts of NEP outreach workers as per actual bases, instead of the fixed costs that were budgeted in the grant 2. The amount at 34 03/8 relates to savings on maintenance of CC for 80s due to one PRS corporate contract with curpler. 2. The remaining badance belongs toxas ings on external analit of 80s and capacity assessment.	\$864 377	\$750 895	\$113 482	The cumulative positive variance is due to the same ecasors as indicated in the current period variance analysis. In addition, there were SR comments as of 31/13/2014 that have been figurated partially and other minor cumulative variage, so office expenditures. PR and SR have commitments at 0.5578 or 55/31/13/2015 that will be past in 2016.
12	Overheads Other	\$802 212		-\$100 566 \$0	The variance is due to administration costs for the 4th quarter of 2014 (GMS 7%) at 18g 319 that have been posted in Feb 16 upon finalization of CTM for 2014.	\$3 509 452 \$0	\$3 203 509 \$0	\$305 9.13 \$0	11 79 2005 is amount of commitments us of 31/12/2015 that will be paid in the next semester, 21 The remaining halance mostly relates to unspend amount of administration costs (6335 7%) due to cancelled activities and savings as it was budgeted as per 7% from total bodgeted amount.
13	Office								

BRE	AKDOWN*BYPI	OGRAM ACTIVITY		constantes en la frança		onssitistave travelte C	urrent Reporting Period	259200000000000000000000000000000000000	One or promotions	yayeyayê(şiraye) le	Camulative Reporting Period
#	Macro-category		Service Delivery Area	Budget	Expenditures	Variance	Reason for Variance	Cumulative Budget	Comulative Expenditure	Variance	
	Care and Suprest	Strengthening of vulnerable communities systems for increase of vulnerable groups' access to HIV prevention and treatment services	Care and support: Core and support for the chronically ill	\$95,000	\$69 240	\$25,760	The profiles variance in the current period mostly is due to the reducing of standards for social support of the clients - PLEIIV adhered to ART	\$196 159	\$158 405	\$3	The cumulative positive variance is due to the same reasons a indicated in the current period variance ands is: In addition, there were I'R commitment at 11 800 \$ as of 31/12/2014 on printing the material within 51\1 but in 2015 according to the real needs the commitment was mobiled to another activity and \$37.754.
÷	Supportive	Objective L	Supportive	\$352,906	\$353 760	-\$854		51 574 748	\$1 535 969	\$3	\$38.779
3	Supportive Environment	Objective 1. Strengthening of vulnerable communities systems for increase of	Supportive environment: Stigmo reduction in all settings	\$22 512		\$9 678	The positive variance in the current period is due to SRs proposals for 2015, according to the real needs and the concrego of the effects by the Lovyer support within other donors projects	\$74 528	\$63 975	St	The cumulative positive varance is due to site proposals for each year according to the real needs and storage of the clients by the have exapped within other denors projects.
1	Supportite Environment	Objective I. Strengthering of vulnerable communities systems for increase of vulnerable groups ¹ access to HIV prevention and treatment services	Supportive environments Program management and administration	\$409 429	\$234 148	S17 <u>5</u> 281	The spottine variance in the current period is due to. 1) The amount of 103 53.5 is Teleste by padyaciment of Mol I CO plan activities to 2016. Although SR Agreement between PSDP and the Mol I of the KR was signed in May 2015, despite several recruitment processes Atol I was able to recruit the Equison of the New Mol I of the KR was signed in May 2015, despite several recruitment remains a priority and those activities will continue in 2016. 2) In accordance with the conditions in the Implementation Letter extending the Grant Agreement in 2015. Child has developed a plan transmer all incentive payments for government SRs are in complaine with the UP budge from guide lines. The plan was approved by CP on 20 phyll 2015 and become effective from 1 Apid 2013. As a result there were savings in amount 39 400 S within the IR budget lines of the state organizations. 3) The amount at 34 0938 relates to savings, on maintenance of 1°C or SRs due to one PRS corporate contract with supplier.	\$1 346 480	\$i 143 757	\$20	and the state of t
1	Supportive	Objective I.	Supportive	So	\$0	Sc		\$68,307	\$66,526		\$1.781 97% of utilization
	Supportive Environment	Strengthening of voluerable communities systems for increase of	environment: Strengthening of civil society and	\$o	So	80		\$84 724	S84 724		50
	Supportive Environment	Stringthening of vulnerable communities systems for increase of vulnerable groups' access to HIV prevention	suppliture environment: Strengthening of civil society and institutional capacity building	\$27 946	\$8 053	\$19 893	The postness variance in the current period is due to savings on budget amount on RAY-XIAGEXSHIV functively with for administrate exalt, regular visitor SIIII* deck, and site visits by elsestencie surveilbases) due to the reviewed and updated AIMEx sixts Plan by RAY according to the real needs and procedulities.	\$66 903	\$46 833	\$20	The cumulative positive variance is due to the same resonns as indicated in the current period variance analysts 20 070
	Sapportive Environment	Objective 1. Strengthening of vulnerable communities systems for increase of vulnerable groups' access to HIV prevention and treatment services	Supportive environment: Stigma reduction in all settines	\$195 573	\$94 228	\$101 345	The positive variance is mainly due to unspend annound at 98 (400 under 1100 acts tiles due to the closed cooperation with other partners and enverage the country needs by other development partners	\$788 390	\$636 517	\$15	The cumulative positive variance is due to the same reasons as indicated in the current period variance is due to the same reasons as indicated in the current period variance. In addition 13th has examinate enter and postponed activates at 39.6815 as of 31/12/2015 that will be implemented and paid in 2016.
-	Health System	Objective L	HSS: Human	\$15.796	\$15,679	\$118	pyli of utilization	\$214 300	\$205,580	SI	SS \$10 96% of utilization
i	Health System	Objective 1. Unjective 1. Strengthening of	HSS: Service delivery	\$0 \$25 000	So So	\$25 000	The Agreement with PNICEF for 2015 was not signed, RAC partially has implemented the activities on PART'T within their work on the grant	\$0 \$51486	\$0 \$26.486	525	50 The cumulative positive vortainee is due to the same reasons as indicated in the current period variance analysis.
	Prevention Supportive Environment	vulnerable communities engetive t. Strengthening of vulnerable communities systems for increase of	Prevention: PMTCT Supportive covironment: Policy development including workplace policy	\$24 000	\$87 758	-\$63.758	The expenditures of WH3 ax SE, for 4th quarter of 2014 have been figurabled in 2015 upon submission of their final report. The expenditures were budgeted in 2014 but reported in 2015 that caused negative variance.	\$162 251	\$155 684	s	The cumulative positive variance is due to the same reasons as inducted in the current period variance analysis. In addition I'R has commitments at 5-9255 as of 31/12/2015 that relates to training on rapid tender to the base been period to 2016.

B-BRE/	IKDOWN' BY PE	ROGRAM ACTIVITY	30.000	92222244		C	urrent Reporting Period	Cumulative	Cumulative	Cumulative R	eporting Period
***	Macro-category	Objectives	Service Delivery Area	Budget	Expenditures	Variance	Reason for Variance	Budget	Expenditure	Variance	Reason for Variance The variance relates to unspent cumulative amount of administration costs (DMS)
							The variance is due to administration crets for the 4th quarter of 2014 (GMS 7%) that have been posted in Feb'16 upon finalization of CDR for 2014				Fire variance relates in integent community community attention of statement rates (17318- 7%) due in cancelled activities and savings as GMS was budgeted as per 7% from Itsial budgeted amount of 30 other activities
		Objective (. Strengthening of	Supportive	\$84,687	\$101,485	-\$16,798		\$386,882	\$332,842	\$54,040	risen maskaren man eriter stro wez
		vulnerable communities systems for increase of vulnerable groups' access to	environment: Program management and		,,.0						
1	Supportive Environment	IIIV prevention and treatment services	administration				The variance is due to correction entries in the reporting period of SR expenditures incurred in 2014				The positive variance is due to the fact that at the end of 2014 some committed
											troming activities were concelled by SR and the funds were returned up PR in 2015.
		M. d St. and animal	Supportive	\$0	\$831	\$85		\$160,324	\$153,473	\$6,851	
		Objective t. Strengthening of vulnerable communities systems for	environment: Program								
11	Supportive Environment	increase of vulnerable groups' access to HIV prevention and treatment services	administration				The negative variance is mainly due to the fact that there were payments in the reporting period for	*********			101% of ublication
		Objective 1. Strengthening of					commitments from previous year that relate to printing materials. In addition, since the activities related to MME services on HIV diagnostic laboratories have been implemented.	\$67,412	\$68,401	-\$990	
	Health System	vulnerable communities systems for increase of vulnerable groups' necess to		\$11,259	\$13,901	-52,042	by PR instead of SR there were expenditures related to payments of consultants' fee which haven't been budgeted under SR	007,412	000,101		
	Strengthening (HSS)	HIV prevention and treatment services	1188: Service delivery			aga manama waren waren waren waren A	The planned training activates: actions during 2015 were conducted jointly with SRs and other development				The cumulative positive variance is due to the same reasons as indicated in the
		Objective 1. Strengthening of		\$10,250	\$3,022	\$7.99	partners, the savings were modified and are planned for printing the COM in 2016. PR has commitments at 11 7285 as of 31/12/2015 that will be paid in 2016.	\$53,407	\$46,179	\$7,228	current period variance analysis.
	Supportive	vulnerable communities systems for increase of vulnerable groups' access to	Supportive environment: Stigma	010,250	*,,,===						i
	Environment	HIV prevention and treatment services	reduction in all settings				The negative variance is due to popment in 2035 of the commitments from previous year of 6 1278 that relate to putning of informations materials		***************************************		There was ongoing procurement at 7.05,48 at the end of 2014 that has been mobified in 2015 and implemented partially. In addition, PR has commitments at 2.0508 as of
		Objective 1. Strengthening of		\$13,038	\$19,228	-\$6,190	i la linea de la compania del compania de la compania del compania de la compania del la compania de la compania dela compania del la compania de la compania del la compania del la compania del la comp	\$32,788	\$24,636	\$8,152	31/12/2015 that will be joind in 2016.
}	Health System	vulnerable communities systems for increase of vulnerable groups' access to	(188: Information system & Operational	7.3/-5-	/,						
<u> </u>	Strengthening (HSS)	IIIV prevention and treatment services	research				111-1% of utilization				PR has commitments of 31/12/2016 that will be paid in 2016.
		Objective 1. Strengthening of vulnerable communities systems for	Supportive	\$7,100	\$7,401	-\$30		\$46,518	\$42,819	\$3,699	·
1.	Supportive Environment	increase of vulnerable groups' access to HIV prevention and treatment services	environmenti Stigma								
	Landonalene	The fact of the fa					The negative variance is mainly due to payment at 289 9408 in the reporting period of the commitments from 2014 that relate to procurement of needles, syringes, outroptic alchoic mapkins				२०१% जी प्रशित्यक्त
		Objective 2: Increase of efficiency in	Prevention: Behavioral Change	\$1,127,160	\$1,429,962	-\$302,80	In addition the expenditures of WHO as SR, for 4th quarter of 2014 have been liquidated in 2015 upon submission of their final report. The expenditures were budgeted in 2014 but reported in 2015 that caused	\$6,861,602	\$6,869,208	-\$7,600	,
		HIV prevention among vulnerable population groups and in health care	Communication -				negative variance				
2	Prevention	facilities	community outreach		***************************************		The negative variance in the current period totally is due to the sugging procutement from 2014 year of the condents (different is pes) and lubricants for insuring the clients - SWs and MSM with the mannial package of				The cumulative positive variance is due to the same reasons as indicated in the current period variance analysis
		Objective 2: Increase of efficiency in HIV prevention among vulnerable		\$o	\$121,341	-\$121,34	scryices according t the standarts for 2015 and 1st Semester 2016 (as a buffer).	\$633,512	\$681,403	\$47,891	
	Prevention	population groups and in health care facilities	Prevention: Condom distribution							***************************************	
										1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		Objective 2: Increase of efficiency in HIV prevention among vulnerable	Supportive	\$o	\$0	\$ı	1	\$52,218	\$52,218	\$c	·[
	Supportive Environment	population groups and in health care facilities	environment; Stigma reduction in all settings				Instantion with the ambigue in the Jack manufacture I all a new Years and for				The cumulative positive variance is due to the same reasons as indicated in the
							In accordance with the conditions in the Implementation Letter extending the Grant Agreement in 2015 UND! has developed a plan to ensure all incentive payments for government SRs are in compliance with the UND backeting middlines.				The cumulative positive variance is due to the same reasons as indicated in the current period variance analysis. In addition, there were SR commitments at the end of 2014 that had been figuidated.
							GF budgeting guidelines The plan was approved by GF on CF April 2015 and became effective from 1 April 2015. As a result there were savings in amount 05, 455 S within the HR budget lines of the state organizations.				in authors, there were SE communicate at the end of 2014 and had been figurated partially as some of the activities were modified and/or cancelled
				600 . 00	04-4	eunn =	secte savings in amount 05, 425.5 within the IRI budge times of the state organizations. In addition, 27, 1663 is unspent amount allocated for NEI ordereach waters under RCN due to their strong reluctance to pather supporting documents for reimbursement of transportation costs in compliance with	\$4,408,514	\$4,024,856	\$383,657	<u>, </u>
1				\$884,887	\$696,793	\$188,09	established RCN's Strategy that was developed in line with OF budgeting guideline and that requires payment of transport costs of NEP outreach workers as per actual basis, instead of the fixed costs that were budgeted in	34,400,314	54,024,050	0303,037	
		Objective 2: Increase of efficiency in					the grant PR and SR have commitments at 166 n888 as of 31/12/2015 that will be paid in 2016. These commitments				
	Health System	HIV prevention among vulnerable population groups and in health care					isclude procurement of methodone, renovation works at MAST points and NEPs.				
	Strengthening (HSS)	facilities	1188: Service delivery				The variance is mainly due to administration costs for the 4th quarter of 2014 (GMS 7%) that have been posted in Feb to upon finalization of CDK for 2014				PR has commitments at 28 1758 as of 31/12/2015 that will be paid in 2016 that mainly relate to 13M costs of the committed proxurements and administration costs
		Objective 2: Increase of efficiency in	Supportive	\$200,079	\$398,153	-\$198,07	In addition, there were PSM costs paid in the reporting period for the procurements committed in 2014	\$1,821,354	\$1,744,037	\$77.317	(GAIS 7%) on all commitments and peotponed activities. The remaining balance relates to unsport cumulative amount of administration costs.
	Supportive	HIV prevention among vulnerable population groups and in health care	environments Program management and	,							(GMS 7%) due to concelled activities and savings as GMS was budgeted as per 7% from total budgeted amount of all other activities
2	Unvironment	facilities	politateinimisc				The negative amount of expenditures stands for PNICEPs refund for procurement from previous period. The				The cumulative positive variance is due to the same reasons as indicated in the current period variance analysis.
							refund was deposited in 2015 upon provision of final statement of account from FNICEF. The actual each outline during 2015 was over for 500 are \$1 list stands for prevaid amount for first and second line drugs freatment. The variance between actual each notifies and expenditure amount reported in				current period variance analy ev.
							AFR is due to the fact that the "Total Cash Gutflow" includes a prepayments whereas the AFR only reports				
				\$673,369	-5,11,3a=	\$684,76	expendingers for grows/serviers and have exert networker. Fire was win the section of the totals of tentflow "is completed on a cach have shereas the AFR AFR is completed on a modified cash basis. The remaining balance is due to say ings from procurement of ARV drugs due to lower price per unit and	\$1,322,840	\$638,074	\$684,766	
							cancellation of procurement of some Ol drugs (Garciclowir 500 mg, Acidwir 200 mg, Amoucillin 500 mg)				
		Objective 3: Assure improvement of universal necess to prophylaxis,	Treatment								
3	Treatment	diagnostics, care and support people fixing with HIV	Antiretros iral treatment (ARV) and monitoring								The cumulative positive variance is the to the same reasons as indicated in the
							The positive variance is due in maspeat amount at 12 6858 as FB dalot sign SR agreement with Preventive Medicine in 2015, and relates to FR's commitments at 95 7736 as of 31/12/2015 that will be paid in 2016. The			Leading and	the summative parameter arrange is the forme same reasons as muscued in the current period variance analysis In addition, there were SR commitments as of 93/12/2014 related to Presentive
		Objective 3: Assure improvement of universal necess to prophylaxis,	Prevention: Behavioral Change	\$179.350	\$59,769	\$119,58	committed amount is for procurement of Elect tests, positive plasma and lab supplies	\$838,066	\$587,630	\$250,436	Medicine's ativities: Due to absense of SR agreement in 2015, Preventive Medicine had returned the funds to FR in 2015
	Prevention	diagnostics, care and support people living with HIV	Communication - community outreach								There is a shifted procurement to 2016 of pharm and deep freezer in line with immovement of alors are of observanceals and health introducts as not informational.
-3-1	TIEVERROG	Objective 3: Assure improvement of								1.00	
1 1		universal access to prophylaxis, diagnostics, care and support people	Care and support: Care and support for the	\$0	\$o	\$0		\$33,781	\$33,781	\$0	
3	Care and Support		chronically ill		***************************************						
			Supportive								
		Objective 3: Assure improvement of universal access to prophylaxis,	environment: Strengthening of civil	\$o	\$o	50		\$33,533	\$33,533	\$0	
	Supportive Environment	diagnostics, care and support people living with HIV	society and institutional capacity building	ı i							
3	paviraniteit	INIAG WHILLIAM	Capacity Francisco			grand and a	The negative variance is mainly due to payment at 323,435,485 in the reporting period of the commitments from 2014 that relate to procurement of Flow cytometer Cytomics FC500 with test kits, western blot tests.			2.5	The variance stands for PCs examilments at 235 2428 as of 31712/2015 for procurement of diagnostics test lots (IV generation IIIV tests, western blot, van)
		Objective 3: Assure improvement of		\$57,023	\$368,610	-\$311,581	FUR tests and IV Generation HIV tests	\$1,010,793	\$767,751	\$243,042	lead, IVR, flow extormes and other tests). The payment will be done in 2016 upon shipment of the products
	Health System	universal access to prophylaxis, diagnostics, care and support people								Edgy, end	
-3-	Strengthening (HSS)	living with HIV	HSS: Service delivery	l							
		(thinging to Assura (management of	TB/HIV collaborative		ton at-			\$222,305	\$218,131	\$4,174	
		Objective it: Assure improvement of universal occess to prophylaxis,	activities: IIIV care and support for HIV-	\$24,275	\$23,781	\$49.		9222,JU5	ಸಪ10,1₫1	≈ 4,174	
3	TB/HIV Collaborative Activities	diagnostics, care and support people living with HIV	positive TB patients				uses of militation The expenditures of PNCEP as SR related to 2014 have been figuralated in 2015 upon submission of their			عينة والمستحدث والمستحدث والمستحدث والمستحدث والمستحدد والمستحدد والمستحدد والمستحدد والمستحدد والمستحدد والمستحدد	98% of utilization. The variance stands for SRS (USICEF) commitments at 53 3828 as of 33/12/2015.
		Objective 3: Assure improvement of universal access to prophylaxis,		\$32,450	\$60,582	-\$28,133	financial report. The expenditures were budgeled in 2014 but reported in 2015 that caused negative variance	\$621,966	\$566,634	\$55.332	that will be liquidated in 2016 upon submission of their final report
	Prevention	diagnostics, care and support people living with HIV	Prevention: PMTCT	252,450					J/54		
			Prevention: Rehavioral				The variance is due to savings on bank charges of RAC as SR has account at the state treasury.			in the second second	The cumulative persture variance is due to the same reasons as indicated in the current period variance analysis
		Objective 3: Assure improvement of universal occess to prophylaxis, diagnostics, care and support people	Change Communication -	\$1,027	\$128	\$899		\$18,413	\$17,432	\$982	
		living with HIV	community outreach				The variance relates to commitments at 110 6728 on PSM costs that will be paid in 2016 upon shipment of	 			PR has commitments at 153 1268 as of 31/12/2015 that relate to FSM and
							goods				administration costs. They will be paid in 2016 upon shipment of the goods. There are savings on PSM costs that relate to savings on procurement of ARV drugs.
		,		0.500	ban			\$1,893,216	\$1,224,642	\$668,574	due to lower pine unit and cancellation of procurement of some OI drugs, sayings on central warehouse plus cold claim WH costs during 2015, sayings on transportation
		Objective 3: Assure improvement of	Supportive	\$428,879	\$304,533	\$124,340		φι _ι ο <u>γ</u> 3,210	91,224,042	3000,574	sry), and other cumulative savings
	Supportive	universal access to prophylaxis, diagnostics, care and support people	environment: Program management and								In addition, the variance relates to unspent amount of administration certs (CMS 7%) due to cancelled activities and savings as it was budgeted as see 7% from total budgeted amount
	Environment	living with HIV	administration	I							
		Objective 3: Assure improvement of universal access to prophylaxis,	Supportive	\$o	\$o	so		\$31,418	\$31,418	\$0	
	Supportive Environment	diagnostics, care and support people living with HIV	environment: Stigma reduction in all settings	ļ							The standard as a Constant
]			The actival cash outflow during 2015 was over for 39 8208 that stands for prepaid amount for fifty diagnostics tests. The variance between actual cash outflow and expenditure amount reported in AFR is due to the fact that the				The cumulative positive variance is due to the same yeasons as indicated in the current period variance analysis. In addition, they are IV and SU commitments of 160 tests are of as far far factors.
		Objective 3: Assure improvement of		\$500,907	\$406,950	\$93.950	that the Tiotal Cosh Fullboo" includes a prepayments whereas the AFR only reports expenditures for goods/services that have been delivered In addition there are TR and SR commitments as of 4/1/2/2015 that will be paid in 2016.	\$2,084,623	\$1,727,864	\$356,759	In addition there are FR and SR commitments of 16) 1578 as of 34/12/2015, that will be paid in 2016. The FR commitments relate to procurement of ELISA, HIV stral load decare diagonalies tests.
		universal necess to prophylaxis, diagnostics, care and support people	Presention: Counseling		• •		and the second s				
3	Prevention	living with HIV	and Testing		:		The variance is due to unspent amount for printing GF UNDF mostlets bulleting and some other printing		***************************************		The cumulative positive variance is due to the same reasons as indicated in the
	Onnau-di-	Phicolica to Administration controls	Supportive environment: Stiema	\$8,498	\$2,496	\$6,000	materials.	\$15,814	\$9,245	\$6,569	current period variance analysm
4	Supportive Environment	Objective q: Administration costs and grant program management	environment: Stigma reduction in all settings								
			Supportive	\$24,696	\$24,519	\$177]	\$120,604	\$120,427	\$177	
	Supportive	Objective 4: Administration costs and	environment: Policy development including				99% of utilization				99% of athiration
1-1-1	Ensironment	grant program management	workplace policy				of the distriction (Tables to PR estimation at 33 2285 as of 31/12/2015 that will be paid in 2016. These commitments include pending final settlement to Frogramme Manager and administration costs (GMS 78)				per voluntation. The cumulative positive variance is due to the same reasons as indicated in the current period variance analysis.
			Supportive	\$758,908	\$699,832	\$59,076	communicaci menue pennog non sensement to i rogramme atmosper and animination coxec (coxes 7.5) related to commitments.	\$3,654,133	\$3,485,539	\$168,594	In addition, the remaining balance of variance relates to unspent amount of administration costs (GMS 7%) due to cancelled activities and savings as it was
	Supportive	Objective 4: Administration costs and	environment: Program management and		~073,034	2,3%-76		- 01-07170	- 61 1201007		budgeted as per 7% from total budgeted amount
<u>, 1</u>		grant program management	administration		<u> </u>			A	A		
<u> </u>			TOTAL	\$6,196,002	\$5,605,936	\$590,066		\$31,054,401	\$27,626,631	\$3,427,771	
ı											

C-DEGERINGS STATE DA 2	IMPLEMENTING ENTITY		despendent massic continues	varius en	energia establis C	urrent Reporting Period	Elitinganger (Sentesce)		Cumulative K	porting Period
		Type of Implementing					Cumulative Budget	Cumulative Expenditure	Variance	Reason for Variance
• PŘ/SR	Name	Entity	Budget	Expenditures	Variance \$480.770	Renson for Variance The actual FEX each multion during 2005 was to see for 210 3758 that stands for prepaid amount for medical and ficalth products. The variance between actual cuch outflow and expenditure amount reported in AFR is due to the fact that the "Total "ach tautifor" includes a prepay ment subcreas the AFR only reports expenditures for goods/services that have been delicated. In the result, laking min the second special amount, the variance would be negative due to payment at 1.287 585 in the reporting period of the commitments from the previous veer seen from the total commitments from the previous veer. The commitments related to previous from the previous veer. The commitments related to previous min of faces. Flow 55 founder Cylonics 1975 on with text fair, western both text, we see the commitments of the commitments of the commitments that have been objuyed in 2015 but budgeted in 2014.	\$19,152,374	\$16,226,280		The positive variance is due to below influence in mais reasons: I the variance is actually less for 712-0378 due to different reporting principles are explained in details in the current proved variance. 2 PR has consumments and other obligations of 1 or 23, 770% as of 31/12/2013; this will be paid in 2014 upon higherent of the products. These commitments unlink relate to procurement of anticeptic naplism, diagnostics test kits GV generation PR tests, nestire to bles, unab land, PRF, these of consess and other tests, nestires bles, unab land, PRF, these of consess and other tests, nestires bles, unab land, PRF, these of consess and other tests, nestires blesson and the stupples and other organing procurements and pest posed or fit as. 3. There were saying at 219-0148 from presumement of ARV, drugs due to lesser give yer until and concedition of procurement of some till drugs. 4. The remaining boliance relates tracher saying and unspent amount of commitment of the training poin was approved by GPF in April 2013; reducing of standards for sweat apposed of the wheats, savings on GPS evolutions in missed of administration cost (EMF, SYS) due to empedie lastic ities and variangs at it was fundered to avoid to be less than a standard of the control of the contro
PR	UNDP	UNDP Other Multilaterat	\$51,810	\$45.806	\$6,004	The variance is due to the fact that the Sit Agreement with PNICEF for 2015 was not signed in the reporting period. The activities of Sit were reviewed and portfolly were included into the Sit Agreement between FR and Midd for implementation.	\$565,963	\$507,074	\$58.890	The main reason is the same as indicated in the current period variance. In addition SR has commutated to 17.8795 that will be liquidated in 2016 upon within issue of the final report. The remaining ludance relates to cumulative savings.
SR	UNICEF Republican AIDS Center under		\$84,753	\$69,029	\$15,724	The variance is mainly due to the fact that activities hedgeled under RAC have been distributed between three regional ATIN (Bishkek, Jaba) and (whi) centers besides RAC. The expenditures of these regional ATIN (Bishkek, Jaba) and (whi) centers besides RAC. The expenditures of these regional ATIN scenters are effected under expenditures of other SRIs below in this table. In addition, the three were variety on budget amount on RAC's MARC with quantity works for administrative stiff, regular visits for MITI there, and the works by decerious war efficience) due to the reviewed and updated MARC visits Plan by RAC according to the real needs and possibilities.	\$319.374	\$294,362	\$25,612	The cumulative positive variance is due to the same reasons as indicated in the current period variance obals (se. In addition, there were SN commitments or of 31/12/2014 at 9.2878 on postponed activities, however, they have been modified and on cred from the 2015 budget
SR	of MoH Republican Center of Narcology		\$741,128	\$704,495	\$36,633	In accordance with the conditions in the Jimpkomentation Letter extending the Grant Agreement in 2015, 1733P has descheed a plan to excure all incentive postments for government Sits are in compliance with the Grant Dunglein postment of the Park Park Park Park Park Park Park Park	\$3,461,966	\$3,394,466	\$67,500	g8% of Willization
SR	under of MoH Scientific organization "Preventive Medicine" under of	(MoH) Ministry Health (MoH)	\$40,122	\$115	\$40,007	The unspent amount is due to the fact that PR hodul signed Six agreement with Preventive Medicine in the reporting period and most of the activities were implemented by PR and of SR budget jointly with experts from Preventive Medicine	\$454.957	\$406,280	\$48.677	The cumulative positive is attained to the some reasons as indicated in the current privale extraction cultises. In addition, there were SR commitments are 6.31/12/2015 (al. 8.098 on postpoined training and MAE activities, however, they have been sententled as per absence of S agreement in 2013 and the funds have been returned to FR.
SR	SR	NGO/CBO/Acade	\$1,564,192	\$1,407,632	\$156.560	The variance is due to: 1) Activities at 14 (e.gr fit have been implemented b) PR-out of SR budget and thus, reported under Presponditures and relate to maintenance of CC and schoole insurance. 2) Amount at 49 (e.gr fit have been implemented b) PR-out of SR budget and thus, reported under Presponditures and relate to the class of the class	\$4,631,689	\$4,330,091	\$301,598	The cumulative positive variance is due to the same reasons at indicated in the current period is trained in this first in addition there were SR commutatives of $51/(12/2015)$ that have level here required to $12R$, and other tumor cumulative savings on SR expenditures as per real needs
SR	AFEW	NGO/CBO/Acade mic	\$0		\$o		\$2,014,370	\$2,014,370	\$0	
SR	WIIO	Other Multilateral Organization	\$o	\$145,631	\$145,631	The negative variance is due to liquidation of WHO's expendatures in the reporting period upon submission of the final report. These expendatures relate to activities budgeted in 2014.	\$453,708	\$453,708	\$o	A CONTRACTOR OF THE CONTRACTOR
Please Select		Please Select	\$o	\$0	\$0		\$0	\$0	50	f

*The sum of all three breakdowns should be equal (A- Budget Line-item, B- Program Activity, C- Implementing Entity).
**For the purposes of this report, the SDA Program management and administration should be included in the Supportive Environment Macro Category.

D-ADDITIONAL INFORMATION

Please disclose any relevant information concerning the information in the above tables. Refer to the Guidelines for Completing the Template if required.

BURSEMENTS BR	EAKDOWN BY IMPLEMEN	TING ENTITY	Cumulative Reporting Period
Name	Type of Implementing Entity	Cumulative Disbursements	Connents
AFEW	NGO/CBO/Academic	\$2,014,370	In 2014 UNDF planned towerk with AFEN and build their capacity for Picking. Following feedback from the CF on the Concept Note where CF recommended one notoned Pit, UNDF looked at the planned activities in the light of the Value for money principle of its presentment processes. Since AFEN did not pass in 2013 this value for money assessment, an SN agreement with them was not signed from August 2013 and no dishuscements ware made in 2014-2015.
Republican AIDS Center under of MoH	Ministry Health (MoII)	\$300,212	The cumulative hodget for SR is \$3.09.374 SR has savings in 2015 due to. The implementation of the plan of incentive payments in accordance with the conditions in the Implementation Letter extending the OFF budgeting guidelines, implemented from 1. April 2015, reviewing and updating the MAR Plan for 2015 according to the real needs and possibilities.
Republican Center of Narcology under of Mol4	Ministry Health (MoH)	\$3,450.946	The comulative budget for SK is \$ 3,463 qb6. SR has savinge in 2015 due to following recovers In accordance with the conditions in the Implementation Letter extending the Grant Agreement in 2015 PMP for developed a plan to ensure all incentive eyes ments for government SRs are in compliance with the GP budgeting guidelines. The plan was approved by GP 2, yapil 2015 and occurrent effects from a 1-yapil 2015 and
organization "Preventive Medicine" under	Ministry Health (MoH)	\$410.436	The cumulative budget for SR is \$ 454 957. The savings in 2015 are due to the fact that FR halfit signed SR agreement with the century Medicine. Preventive Medicine.
SR	NGO/CBO/Academic	\$4,433,884	The cumulative budget for SR is \$4 (4) (68). The utilization is 10% cumulatively. The savings in 2015 are due to the same reasons indicated in details in the table C above.
UNICEF	Other Multilateral Organization	\$524,954	The cumulative budget for SR is \$505 063. The savings are due to the fact that the SR Agreement with UNICEF for 2015 was not vigased in the reporting period. The activities of SR were reviewed and partially were included into the SR Agreement between PR and Mod If implementation.
	Other Multilateral Organization	\$453,758	The cumulative budget for SR is \$453 708 that is equal with amount of disbursements made to WIPO within 2012-2014 under SR Agreement. In 2015 PR dish13 1930 SR Agreement with WIPO and there were no other disbursements
	Please Select TOTAL	\$11,588,559	

Ongoing Progress Review and Disbursement Request

Section 9A. PR 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 the Facesheet; and (iii) funds disbursed under the Grant Agreement shall be used in accordance with the Grant Agreement.

Da	ite and Place:	Bishkek, Kyrgyzstan	2 5 MAR 20
Tit	le:	Deputy Resident Representative	2
Na	me:	Aliona Niculita Doug	
	gned on behalf of the Principal Recipient: gnature of Authorized Designated Representative)	A Company of the Comp	

OKSANA KATKALOVA
HIV COORDINATOR
GFATM PRANTS JUNDP

JS 103/201