

Ref.: WA/TD/DJ/NP/RS/2014/22

28 February 2014

Mr Jose Salema
UNDP Resident Representative/Resident Coordinator
United Nations Development Programme
BP 109 Sao Tome
Sao Tome and Principe

**Subject: Program Grant Agreement: STP-011-G05-H
Principal Recipient: United Nations Development Programme
Implementation Letter: 2¹
Three-month Extension to Phase 1**

UNOFFICIAL SUMMARY:

This letter extends Phase 1 by three months, while the Phase 2 Amendment is negotiated. The updated Performance Framework and the addendum to the Summary Budget, which contain targets and a budget for this extended period, are enclosed.

Dear Mr Salema

As you know, the Global Fund has decided to commit funding for Phase 2 of your Round 10 HIV and AIDS Grant Agreement and Phase 2 negotiations are currently underway.

The Program Ending Date of the current Grant Agreement is 31 December 2013. In order to ensure that Program activities are not disrupted pending negotiation of the Phase 2 documents, the Global Fund proposes to amend the Grant Agreement by extending the Program Ending Date to 31 March 2014. Please note that this amendment is an interim measure to avoid disruption to the Program activities and does not constitute final approval of Phase 2 documentation which remains subject to negotiation. Accordingly, Phase 2 will be deemed to have begun on 1st January 2014 and the Proposal Completion Date shall remain unchanged.

You may continue to use unspent Phase 1 funds during the extension term, in accordance with the addendum to the Summary Budget attached, but no additional funding has been committed at this time.

We have attached an updated Performance Framework and an addendum to the Summary Budget, which contain targets and a budget for the extension period.

¹ This Grant Agreement was changed before by a letter dated 20 August 2013.

encl.: Revised Face Sheet of the Grant Agreement
Performance Framework Year 1&2a: Indicators, Targets and Periods Covered
Summary Budget Q9

cc: H.E. Mrs Maria Araujo Tomé, CCM Chair
Ms Heike Albrecht, Swiss Tropical and Public Health Institute, Local Fund
Agent

Signed by the Global Fund Chief Financial Officer or his/her designated official for the recognition of this agreement by the Global Fund.

Date: 23/04/2014

Signature:

**PROGRAM GRANT AGREEMENT
BETWEEN
THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA
("Global Fund")
AND THE UNITED NATIONS DEVELOPMENT PROGRAMME
("Principal Recipient")**

1. Country: Sao Tome and Principe		
2. Program Title: Strengthening the HIV/AIDS epidemic response among vulnerable groups and Most-at-risk population in Sao Tome and Principe		
3. Grant Number: STP-011-G05-H		3A. Modification Number and Date: 2 (Implementation Letter 2, dated 28 February 2014)
4. Program Starting Date: 1 January 2012	5. Program Ending Date: 31 March 2014	6. Proposal Completion Date: 31 December 2016
6A. Condition Precedent Terminal Date: 1 September 2012	6B. Condition Precedent Terminal Date: N/A	6C. Condition Precedent Terminal Date: N/A
7. Grant Funds: Up to the amount of US\$ 1,081,582 (One Million, Eighty One Thousand, Five Hundred And Eighty Two United States Dollars).		
8. Program Coverage: X HIV/AIDS ___ Tuberculosis ___ Malaria ___ HIV/AIDS/Tuberculosis		
9. Information for Principal Recipient Bank Account into Which Grant Funds Will Be Disbursed: 		
10. The fiscal year of the Principal Recipient is from 1 January to 31 December.		
11. Local Fund Agent: Swiss Tropical and Public Health Institute Socinstrasse 57, 4002 Basel Tel. +41 61 284 82 64 Fax +41 61 284 81 03 Attention: Heike Albrecht E-mail: heike.albrecht@unibas.ch		
12. Principal Recipient Additional Representative: Mr Jose Salema UNDP Resident Representative/Resident Coordinator United Nations Development Programme BP 109 Sao Tome Sao Tome and Principe Tel.: +239 22 11 22/23 Fax: +239 22 21 98 E-mail: jose.salema@one.un.org		13. Global Fund Additional Representative: Tina Draser Regional Manager, Western Africa The Global Fund to Fight AIDS, Tuberculosis and Malaria Chemin de Blandonnet 8 1214 Vernier-Geneva, Switzerland Tel.: +41 58 791 1700 Fax: +41 58 791 1701
14. This Agreement consists of the two pages of this face sheet and the following: Standard Terms and Conditions Annex A – Program Implementation Abstract		

SUMMARY BUDGET Q9

HIV_AIDS

Program Details

Country	São Tomé and Príncipe
Grant No.	STP-011-G05-H
PR	UNDP
Currency	USD
Grant Cycle phase	Phase 1

(Please indicate Periods covered by this budget in the cells below, as presented in the Performance Framework)

Period Covered: from	Q9
Period Covered: to	1-Jan-14
	31-Mar-14

A- SUMMARY BUDGET BREAKDOWN BY EXPENDITURE CATEGORY

#	Category	Q9
1	Human Resources	8,925
2	Technical and Management Assistance	32,000
3	Training	0
4	Health Products and Health Equipment	124
5	Pharmaceutical Products (Medicines)	0
6	Procurement and Supply Management Costs (PSM)	1,024
7	Infrastructure and Other Equipment	0
8	Communication Materials	0
9	Monitoring and Evaluation (M&E)	1,475
10	Living Support to Clients/Target Population	6,421
11	Planning and Administration	3,727
12	Overheads	5,096
13	Other	0
TOTAL*		58,793

B. SUMMARY BUDGET BREAKDOWN BY PROGRAM ACTIVITY

#	Macro-category	Objectives	Service Delivery Area**	Q9
1	HIV:Prevention	There are variation in the exchange rate STD (Dobras)/USD	1-Testing and Counseling	0
2	HIV:Prevention	There are variation in the exchange rate STD (Dobras)/USD	2-STI diagnosis and treatment	0
3	HIV:Prevention	There are variation in the exchange rate STD (Dobras)/USD	3-CSS: Community based activities and services - delivery, use and quality	0
4	HIV:Prevention	There are variation in the exchange rate STD (Dobras)/USD	4-BCC - Mass media	0
5	HIV:Prevention	There are variation in the exchange rate STD (Dobras)/USD	5-BCC - community outreach and Most-at-risk population	0
6	HIV:Prevention	There are variation in the exchange rate STD (Dobras)/USD	6-Condom	1,024
7	HIV:Treatment	Reduced morbidity, mortality and improve the quality of life of HIV infected patients, their partners and families, and support orphans.	7-Antiretroviral therapy and monitoring	124
8	HIV:Prevention	Reduced morbidity, mortality and improve the quality of life of HIV infected patients, their partners and families, and support orphans.	8-Prophylaxis and treatment for opportunistic infections	0
9	HIV:Prevention	Reduced morbidity, mortality and improve the quality of life of HIV infected patients, their partners and families, and support orphans.	9-TB/HIV	0
10	HIV:Treatment	Reduced morbidity, mortality and improve the quality of life of HIV infected patients, their partners and families, and support orphans.	10-Care and support for the chronically ill	0
11	HIV:Treatment	Reduced morbidity, mortality and improve the quality of life of HIV infected patients, their partners and families, and support orphans.	11-Support for orphans and vulnerable children	6,421
12	HIV:Care and Support	Eliminate mother-to-child HIV transmission	12-Prevention of mother-to-child transmission (PMTCT)	1,227
13	HIV:Care and Support	To prevent parenteral transmission of HIV infection and other blood borne infection	13-Blood safety and universal precaution	0
14	HIV:Care and Support	To increase institutional capacity of the National AIDS Program / Ministry of Health Civil Society	14-Programme management and Administration cost	12,652
15	HIV:Care and Support	To increase institutional capacity of the National AIDS Program / Ministry of Health Civil Society	15-HSS: Routine data collection, analysis and use	32,000
16	HIV:Care and Support	To increase institutional capacity of the National AIDS Program / Ministry of Health Civil Society	16-HSS: Information system	1,496
17	HIV:Care and Support	To increase institutional capacity of the National AIDS Program / Ministry of Health Civil Society	17-Contribution	3,846
TOTAL*				58,793

To add additional rows, right click the row number to the left of the row above the row for TOTAL and select copy, then over the same number, right click again and select insert Copied Cells. WARNING: Inserting Rows without copying a row as described above will cause the formula in the columns to become invalid and will mean the overall information will be inaccurate.

** For the purposes of this report, the SDA Program management and administration should be included in the Supportive Environment Macro Category.

C. SUMMARY BUDGET BREAKDOWN BY IMPLEMENTING ENTITY (if known by Grant signature time)

#	PR/SR	Name	Type of Implementing Entity	Q9
1	PR	UNDP	UNDP	45,848
2	SR	NAP	MoH	4,250
3	SR	ISVSM	MoH	1,250
3	SR	FNM	MoH	1,024
4	SR	INPG	MoH	0
5	SR	Cruz Vermelha	NGO/CBO/Academic	0
6	SR	Apoio a Vida	NGO/CBO/Academic	0
7	SR	Step Up	NGO/CBO/Academic	6,421
TOTAL*				58,793

To add additional rows, right click the row number to the left of the row above the row for TOTAL and select copy, then over the same number, right click again and select insert Copied Cells. WARNING: Inserting Rows without copying a row as described above will cause the formula in the columns to become invalid and will mean the overall information will be inaccurate.

* The sum of all three breakdowns should be equal (A- Budget Line-Item, B- Program Activity, C- Implementing Entity).

Performance Framework Year 1 & 2a: Indicators, Targets, and Periods Covered

HIV

Country:	Sao tome et Principe
Disease:	HIV/AIDS
Grant number:	STP-011-G05-H
Principal Recipient:	United Nations Development Programme (UNDP)

Period Covered: from	Period 1	Period 2	Period 3	Period 4	Period 5
	1-Jan-12	1-Jul-12	1-Jan-13	1-Jul-13	1-Jan-14
Period Covered: to	30-Jun-12	31-Dec-12	30-Jun-13	31-Dec-13	31-Mar-14
Date Progress Update due (typically 45 days after end of period)	14-Aug-12	14-Feb-13	14-Aug-13	14-Feb-14	15-May-14
Disbursement Request ? (Y,N)	Y	Y	Y	Y	Y

Audit Report Due Date:	Year 1	Year 2
	N/A	N/A

Goals:	
1	To decrease morbidity and mortality of people living with HIV/AIDS, vulnerable groups and Most-at-risk populations.
2	

Impact indicator number	Impact Indicator formulation	Baseline			Targets					Comments*		
		value	Year	Source	Year 1	Report due date	Year 2	Report due date	Year 3		Year 4	Year 5
1	Percentage of young women and men aged 15-24 who are HIV infected	1.6%	2008	DHS/DHS+ (Demographic and Health Survey)						1.6%		
2	Percentage of adults and children with HIV known to be on treatment 12 months after initiation of antiretroviral therapy	87.6%	2009	Patient records & NAP summary report	>90%	31-Mar-13	>90%	31-Mar-14	>80%	95%	95%	Targets may be adjusted after revision and approval of the National Strategy, scheduled for March 2012.
3	Estimated percentage of child infections from HIV-infected women delivering in the past 18 months - estimated mother-to-child transmission	12%	2010	Patient records & NAP summary report	10%	30-Jun-13	8%	30-Jun-14	6%	8%	5%	PR indicates that Spectrum estimates are not reliable. National Strategy targets are being revised and will align with these targets, which are consistent with WHO guidance.
4	Percentage of female sex workers who are HIV infected	Sex workers: 4.2%	2007	Sentinel site survey report-NAP	4%	15-May-13	4%	15-May-14	4%	4%	4%	
5	Percentage of MSM who are HIV infected	N/A		Sentinel site survey report-NAP			Baseline established	15-May-14	TBD	TBD	TBD	MSM baseline will be established by special survey in Year 2, after which targets will be established for Years 3-5.

Outcome indicator number	Outcome indicator formulation	Baseline			Targets					Comments*		
		value	Year	Source	Year 1	Report due date	Year 2	Report due date	Year 3		Year 4	Year 5
1	Percentage of women and men aged 15-24 who have had more than one sexual partner in the past 12 months reporting the use of a condom during their last sexual intercourse	60.7%	2009	DHS/DHS+ (Demographic and Health Survey)			83%	31-Oct-13		70%		For outcome indicators 1, 3 and 4, the BSS will be used to report in year 2, which may provide results that are not comparable with DHS due to methodological differences. Year 4 will use DHS data. Targets may be adjusted after revision and approval of the National Strategy, scheduled for March 2012.
2	Percentage of sex workers reporting the use of a condom with their most recent client	NA	NA	BSS (Behavioral Surveillance Survey), Sentinel site survey	Baseline established	15-May-12	TBD	15-May-13	TBD	TBD	TBD	The baseline data of this indicator will be updated during the first year of the project, after which targets will be established. The draft version of the national strategy includes targets of 60 and 90%, which will be adjusted in the final version of the strategy, scheduled for March 2012.
3	Percentage women aged 15 - 49 years who received an HIV test in the last 12 months and who know their results	31.40%	2009	DHS/DHS+ (Demographic and Health Survey)			35%	31-Dec-13	40%		45%	See comment outcome indicator 1
4	Percentage men aged 15 - 49 years who received an HIV test in the last 12 months and who know their results	22.80%	2009	DHS/DHS+ (Demographic and Health Survey)			28%	31-Dec-13	35%		40%	See comment outcome indicator 2
5	Percentage of most-at-risk populations who both correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission	NA	NA	BSS (Behavioral Surveillance Survey), sentinel site	Baseline established	15-May-12	TBD	15-May-13	TBD	TBD	TBD	Baseline will be established: 1-for MSM in year 2 and; 2-For sex workers in year 1, after which targets will be set for remaining years. Reporting will be disaggregated for both groups. Data source will be BSS-sentinel site.

* please specify source of measurement for indicator in case different to baseline source.

Objective Number	Objective description
1	To significantly reduce the sexual transmission of HIV infection in STP
2	Reduced morbidity, mortality and improve the quality of life of HIV infected patients, their partners and families, and support orphans.
3	Eliminate mother-to-child HIV transmission
4	To prevent parenteral transmission of HIV infection and other blood borne infection
5	To increase institutional capacity of the National AIDS Program / Ministry of Health Civil Society

Indicator Number	Objective Number	Service Delivery Area	Indicator formulation	Baseline (if applicable)			Periodical targets for year 1 & 2									Tied to	Targets cumulative Y-over program term Y-cumulative annually N-not cumulative	Baselines included in targets (Y/N)	Top 10 indicator	Comments
				Value	Year	Source	P1 (Jan-June 2012)		P2 (July-Dec 2012)		P3 (Jan-June 2013)		P4 (July-Dec 2013)		P5					
							Jan-March 2012	April-June 2012	July-Sept 2012	Oct-Dec 2012	Jan-March 2013	April-June 2013	July-Sept 2013	Oct-Dec 2013						
1	1	Testing and Counseling	Number of men who received testing and counseling services for HIV and received their test results	3316	2010	PNLS REPORT	840	1690	2520	5860	1665	3130	4695	9760	1585	National Program	Y - cumulative annually	N	Top 10	GFATM is mainly funding RDT for testing of blood donors and general population. This indicator includes cases tested at community level.
2	1	Testing and Counseling	Number of women who received testing and counseling services for HIV and received their test results	11047	2010	PNLS REPORT	2770	5540	8310	13080	3085	6170	9255	15340	3085	National Program	Y - cumulative annually	N	Top 10	This includes all women, including those tested in ANC. GF is funding RDTs.
3	1	BCC - community outreach and schools	Number of sex workers reached through community outreach with at least one HIV information, education, communication or behavior change communication	54	2007-2010	SR report (NGO AIsel)		18	36	54	18	36	54	72	18	Current grant	Y - cumulative annually	N	Top 10	Phase 2 should include targets for reaching MSM - strategy to be developed by year 2. Baseline includes the number of sex workers identified during 2007-2010 and trained to be peer educators. Current population estimate is approximately 70 sex workers, with additional outreach and identification expected. System for avoiding double counting is in place within each year.
4	2	Antiretroviral treatment (ARV) and monitoring	Number of people with advanced HIV+ infection receiving ARV treatment (second line) according to national guidelines	16	2010	PNLS REPORT		42		45		47		49	50	Current grant	N - not cumulative	Y	Top 10	This includes all patients on second-line treatment who are in the active file (e.g. excluding deaths and lost to follow-up). First-line treatment is supported through the Brazilian Cooperation. The targets are based on total need for second line treatment, calculated from patient cohorts enrolled on treatment from 2005 to 2010, as identified in a 2011 study.
5	2	TB/HIV	Number and percentage of TB patients who had an HIV test result recorded in the TB register among the total number of registered TB patients	100% (112)	2010	PNLS REPORT		100% (56)		100% (60)		100% (56)		100% (80)	100% (28)	National Program	N - not cumulative	N	Top 10	The GF contribution is estimated to be around 30%. Numerator: the total number of TB patient recorded by the NTBP tested to HIV antibody, during the period (quarterly or annually) Denominator: the total number of TB patient recorded by the NTBP (clinically or biologically), during the period (quarterly or annually)
6	2	Prophylaxis and treatment for opportunistic infections	Number of HIV+ patients receiving cotrimoxazole prophylaxis for opportunistic infections	152	2010	PNLS REPORT		18		38		18		38	9	Current grant	Y - cumulative annually	N	Not Top 10	In 2010, approximately 453 people living with HIV in country, 200 under ARVs, and others in registered in care, 8% annually are in need of cotrimoxazole prophylaxis. GF contribution is 100%.
7	2	Support for orphans and vulnerable children	Number of orphans receiving package of services	35	2010	SR Report				35				40	N/A	Current grant	Y - cumulative annually	N	Top 10	GF contribution is 100%. Package of services includes school uniform, school materials, and food support during at least 80% of periods eligible, plus contribution to school fees. WFP is now covering food support only for adults.
8	3	PMTCT	Number and percentage of infants born to HIV-infected women who received an HIV test within 12 months of birth	NA	2010	NAP report		7		13/15 (86%)		7		14/15 (93%)	3	National Program	Y - cumulative annually	N	Not Top 10	GF contribution is estimated to be around 50%. Numerator: children born to HIV infected mothers that were tested for HIV antibody between 9 and 12 months of age. Denominator: all HIV infected pregnant women giving birth in the last 12 months at health service (all PW are tested at delivery for HIV).
9	3	PMTCT	Number and percentage of infants born to HIV-infected women starting on co-trimoxazole prophylaxis within 2 months of birth	NA	NA	NAP report		6		15 (100%)		6		15 (100%)	N/A	Current grant	Y - cumulative annually	N	Not Top 10	
10	4	Blood safety and universal precaution	Number of health care workers trained on universal precautions	284	2010	Training records				20		60		100	N/A	Current grant	Y - cumulative annually	N	Not Top 10	
11	5	HSS: Information system	Number of health districts providing complete and timely reports	0	2011	NAP report		4		5		6		7	7	National Program	N - not cumulative	N	Not Top 10	Timely: to be received before the 18th of the month of the reporting period. Complete: to include at least 10 key indicator from the existing form. Total of 7 districts in the country.