

**KENYA COORDINATING MECHANISM FOR GLOBAL FUND
GRANT PERFORMANCE UPDATE AS AT FEBRUARY, 2017**

| Principal Recipient | National Treasury | National Treasury | National Treasury | KRC Society | AMREF Health Africa | AMREF Health Africa |
|---------------------------------------|---|--|--|---|---|---|
| Grant | HIV | TB | Malaria | HIV | TB | Malaria |
| Latest Rating | A2 | A2 | B1 | A2 | A2 | A2 |
| Funds Absorption As At February, 2017 | 83% Expenditure +Commitments 61% Expenditure v/s disbursement 50% Expenditure v/s Budget | 72%Expenditure +Commitments 61% Expenditure v/s disbursement 45% Expenditure v/s Budget | 84 % Expenditure +Commitments 74% Expenditure v/s disbursement 42% Expenditure v/s Budget | 89% Expenditure +Commitments v/s disbursement 87% Expenditure v/s Budget | 74% Expenditure v/s disbursement 58% Expenditure v/s Budget | 89% Expenditure v/s disbursement 81% Expenditure v/s Budget |
| Financial Status | <ul style="list-style-type: none"> • Total Funding \$ 259,463,768 • Budget \$202,918,554 • Disbursement \$ 167,605,651 • Expenditure \$101,605,311 • Commitment \$67,686,701.88 | <ul style="list-style-type: none"> • Total Funding \$ 43,109,391 • Budget \$22,210,775 • Disbursement \$16,250,447 • Expenditure \$9,933,513.27 • Commitment \$ 6,023,523 | <ul style="list-style-type: none"> • Total Funding \$94,480,496.35 • Budget \$70,078,058.00 • Disbursement \$ 39,847,372.57 • Expenditure \$29,428,857 • Commitment \$29,615,128.26 | <ul style="list-style-type: none"> • Total Funding \$38,522,849 • Budget \$ 27,857,792 • Disbursement \$ 27,857,792 • Expenditure \$ 24,224,760 | <ul style="list-style-type: none"> • Total Funding \$27,044,910 • Budget \$18,646,696 • Disbursement \$16,174,364 • Expenditure \$ 10,834,812 | <ul style="list-style-type: none"> • Total Funding \$ 12,155,880 • Budget \$ 6,808,318 • Disbursement \$5,550,265 • Expenditure \$ 5,498, 510 |
| Remarks on Grant uptake | <p>National Treasury HIV Grant Unutilized funds are mainly for payment of Contracted procurements and their distribution costs as follows; ARVs USD. 44 million, Condom USD. 5.49 million, CD4 reagents USD. 0.4 Million, HIV test kits USD. 1.3 million, Nutritional supplements USD. 3.7 million and Lab network USD. 1.8 million .Renovation of County stores –MOU to transfer the activity to AMREF drafted, awaiting finalization and signing. COMBO –Baseline assessment undertaken, developments of county response plans ongoing.</p> <p>National Treasury TB Grant</p> | | | | | |

- Unutilized funds are due to Commitments (USD 6M), Savings (USD 600K) and USD 6M for postponed outflows. **Commitments** are mainly made of:-Patient Kit-USD 1,432,277; Isoniazid-USD 822,181; RUTF-USD 793,174; Culture & DST commodities-USD 342,940; Paediatric TB drugs-USD 288,870; TB review meetings-USD 213,148 and PSM costs-USD 446,838. **Postponed** outflows are majorly composed of: - RUTF/FBF-USD 1,942,509; various trainings-USD 906,753; Culture & DST commodities-USD 451,458; Mortality survey-334,000; PSM costs-USD 302,738; Strengthening HMIS/DHIS-USD 207,765 among other activities. **Savings** are mainly for USD 405,512 represents savings majorly from HR cost, savings from trainings and cancelled activities.

National Treasury Malaria Grant.

- Unutilized funds are due to Commitments (USD 29.6M), Savings (USD 117K) and USD 10.9M for postponed outflows. **Commitments** are mainly for LLINs-USD 22, 196, 00; ALs-USD 4,248,488; RDTs-USD 818,255 and the related PSM Costs-USD 1,454,794. **Postponed outflows** relate to RDTs-USD 3,817,527 (re-advertised due to specs); conducting mass net distribution and related M&E-USD 4,176,470 and Case Management trainings-USD 1,376,490. **Savings** account for USD 117,310 which mainly arises from program administration activities.

KRCS HIV Grant

- Variance is due to implementation of Community systems strengthening module as well as cash transfer programme for Turkana county which started late in the NFM implementation – unanticipated prolonged consultations on implementation strategies. Implementation currently is ongoing and the PR is fast tracking the process to ensure full implementation before grant period ends.

AMREF.HA TB Grant

- Variance is due to community systems strengthening trainings holding 60% of this budget. The remaining training on Gender mainstreaming and human rights and training on IGA management will be done when curriculum review by CSS TWG is completed Renovation of HF laboratories-Lab: Inspection of work done is complete and payment has been done commensurate to the work done. Procurement process for LIMs already started.

AMREF.HA Malaria Grant

- Variance is due to HSS-Health Information systems M&E module – procurement of community reporting tools. LPOs for the purchase of Community reporting tools have been issued but have not been paid nor delivered.