

Tanzania National Voucher Scheme: Hati Punguzo



Quarterly Report for July – September 2007

Prepared for

The Ministry of Health and Social Welfare, Tanzania

And

United States Agency for International Development

By

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LIST OF ACRONYMS

CHMT	Council Health Management Team
DPS	Director of Preventive Services
DED	District Executive Director
DMO	District Medical Officer
DVP	District Voucher Provider
EV	Equity Voucher
GIS	Geographic Information Systems
GPS	Global Positioning System
HPFP	Hati Punguzo Focal Person
IHRDC	Ifakara Health Research and Development Center
IV	Infant Voucher
IRKs	Insecticide Re-treatment Kits
MIS	Management Information System
MEDA	Mennonite Economic Development Associates
MoHSW	Ministry of Health and Social Welfare
MEC	Monitoring and Evaluation Contractor
MU	Monitoring Unit
MVC	Most Vulnerable Children
NMCP	National Malaria Control Program
NIMR	National Institute for Malaria Research
PS	Permanent Secretary
PPV	PLAN Project Voucher
PWV	Pregnant Woman Voucher
PMI	President's Malaria Initiative
PCB	Prevention Corruption Bureau
RM	Regional Manager
RMO	Regional Medical Officer(s)
TNVS	Tanzania National Voucher Scheme
TPRI	Tanzania Pesticide Research Institute
TPC	Training and Promotion Contractor
USAID	United States Agency for International Development
VDP	Voucher Distribution Point
VEO	Village Executive Officer
VHC	Village Health Committee
WEO	Ward Executive Officer
WV	World Vision
ZM	Zonal Manager
ZMCP	Zanzibar Malaria Control Program
ZV	Zanzibar Voucher

EXECUTIVE SUMMARY

This report covers the reporting period between July and September of 2007.

Distribution network continues to grow substantially. The number of retailers involved in the program grew by 22.2% (1,014) from 5,023 to 6,037 and the number of wholesalers increased from 230 to 241. Such achievements were attained amidst private-sector anxiety over the program end date due to suspension of PWV distribution and subsequent PWV stock out.

PWV distribution resumes and hits 4 million mark. In response to the gap in Global Fund funding of the Pregnant Woman voucher, PMI agreed with NMCP and MEDA to cover the reimbursement cost of up to \$US 1 million PWV until GF monies are once again available. The distribution which was halted in April resumed in August, with a total of 716,650 PWV through September 30. The cumulative total of distributed vouchers at the end of this reporting quarter is 4,156,375.

IV distribution hits a millionth mark. The millionth infant voucher was sent out in August. During the quarter, a total of 286,650 IV were distributed bringing the cumulative total at the end of the quarter to 1,159,350.

Voucher Redemption continues to grow. 192,386 PWVs were redeemed during the quarter making a cumulative total of 2,322,039. IV redemption has also increased to give a cumulative total of 269,257, 88,239 of which were redeemed during the quarter.

Redemption rates: By the end of the quarter, 93,551 PWV stub books had been returned to MEDA from the DMOs, representing a total number of 2,338,775 vouchers. Of this voucher subset, 1,864,766 have been redeemed by MEDA, making the effective redemption rate this quarter 80%. There are 457,273 vouchers that were received but corresponding stubs are still in the field.

7,459 IV stub books corresponding to 186,475 vouchers have been returned. Of this voucher subset, 118,333 vouchers have been redeemed by MEDA making the redemption rate this quarter 63%. Like the PWV, 150,924 IVs without corresponding stubs were returned to MEDA.

Collecting GPS coordinates of clinics and retailers continues. MEDA field teams continue to collect GPS coordinates in fourteen regions. To date, 3,000 clinics and 801 retailers and wholesalers have been mapped. We are also testing a fleet management tool that uses GPS as a means of collecting data.

IRKs distribution continues to be inactive. Without registration of KO tab 123, most of the regions have exhausted supplies of traditional Insecticide Retreatment Kits (IRKs).

Misuse Investigations continue. Reports from field staff have shown that cases of voucher misuse have crept up in the regions of Mara, Arusha, Mtwara and Mwanza. The cases are varied with Mara reporting 7 IVs issued to beneficiaries that could not be accounted for in clinic records and an IV book that has disappeared altogether; Arusha reporting forged records by RCH staff of 70 voucher books; Mtwara reporting 39 PWVs being issues to beneficiaries that could not be accounted for in clinic records; and Mwanza reporting the theft of 73 voucher books. Reports have been submitted to the respective DMOs for their action but response has been very slow.

PERFORMANCE INDICATORS

Performance indicators for TNVS and MEDA appear in Table 2 appended to this document. They correspond to the Key Performance Indicators table developed and revised by the MoHSW and USAID.

1.0 STRATEGY: DESIGN AND IMPLEMENT SYSTEMS TO ENSURE EFFECTIVE AND EFFICIENT TRANSFER OF VOUCHERS TO PREGNANT WOMEN VIA THE RCH CLINICS

1.1 Vouchers Procured

Pregnant Women Vouchers (PWV):

There was no procurement activity this quarter. The previous stock was received last quarter bringing total procurement to 4,500,000 PWVs since the beginning of the program.

Infant Vouchers (IV):

MEDA received 500,000 IVs in July from the second IV order, which was placed in June (last quarter). This makes a cumulative procurement of 1,375,000 IV since the beginning of program.

Equity Voucher (EV):

There has been no procurement activity this quarter. The future of EV remains uncertain and no new orders have been placed since the initial receipt of the 40,050 in February.

Zanzibar Voucher (ZV):

MEDA ordered and received 100,000 ZVs from the printing company in South Africa in July. This stock is expected to cover the voucher requirement for the pilot year, which targets pregnant women and infants. The voucher value is TSh 6,000 and the top up is fixed at TSh 1,000.

1.2 Regional Logistics Teams Identified and Trained

PWV (21 regions); IV (15 regions); EV (6 districts); ZV (10 districts)

All 21 regions of Mainland Tanzania have a regional team of 2 people (RM and Driver); with Zanzibar having a team of 3 people (ZM, Counterpart appointed by ZMCP and a Driver).

All Regional teams are well trained and the program is operating at capacity. During the quarter, MEDA lost a team member to malaria, conducted team reshuffles and has experienced staff turn over.

- The Driver in Rukwa succumbed to a short battle with malaria, passing away September 9, 2007. The driver in Dar es Salaam has been transferred to Rukwa and a new hire has been stationed in the Dar es Salaam office.
- The RM in Mtwara left MEDA in September to pursue a Masters Degree at the Muhimbili School of Medicine; a new RM has been hired, trained and is currently working in the field.
- The RM in Tanga has left MEDA in August to pursue a Masters in Business Administration in Finland; a new RM has been hired, trained and is currently in the field. To support the mid-management layer at the Dar es Salaam office, MEDA has hired two staff:
 - 1 Team Leader - Business Development and Communications
 - 1 Analyst – Monitoring and Evaluation

1.3 Vouchers Issued to the District Medical Officers

Employing the existing voucher replenishment mechanisms, MEDA continued to dispatch a 6-month voucher stock when DMO voucher stocks depleted by 50%. In the field, the vouchers are stocked at the DMO office and moved to clinics by clinic staff, district health officials when conducting supervision visits, and by MEDA RMs during monitoring visits to the clinics.

Pregnant Woman Voucher:

Due to a gap in the Global Fund support in Pregnant Woman vouchers, MEDA did not distribute any PWVs between April and August. To encourage program continuity, MEDA entered into an agreement with NMCP and PMI (USAID) to cover the subsidy cost of the redeemed PWVs. The agreement facilitated the resumption of PWV distribution in August. By the end of September a total of 716,650 (510,800 in August and 205,850 in September) PWVs had been distributed to DMOs under the agreement. This marked a cumulative total of 4,156,375 PWV distributed nationwide since the program launch.

Figure 1 shows the number of vouchers distributed compared with target numbers since the beginning of the project.

Figure 1: PWV issued to District Medical Officers (Cumulatively)

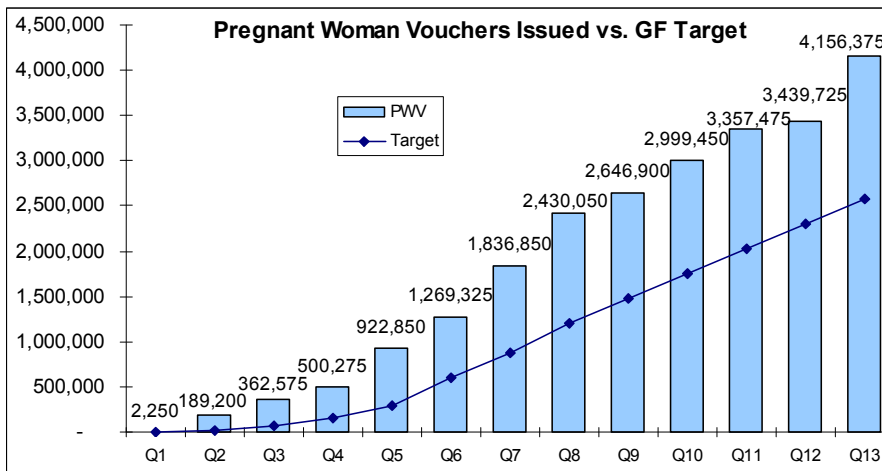
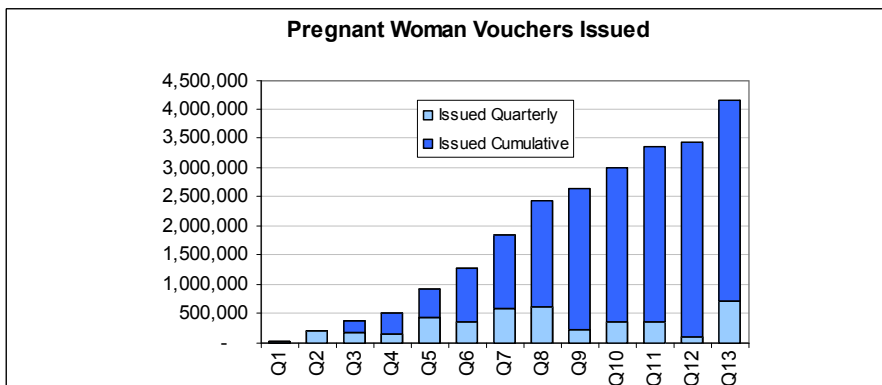


Figure 2: PWV issued to District Medical Officers (By Quarter and Cumulatively)

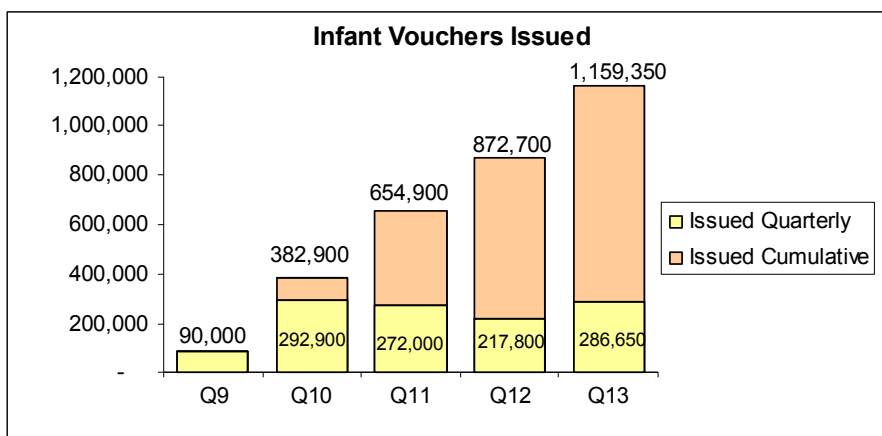


Infant Voucher:

During the quarter 286,650 IV were distributed (35,050 in July, 206,650 in August, and 44,950 in September). This marked a cumulative total of 1,159,350 IVs distributed to 15 regions by the end of the quarter.

Figure 3 illustrates the number of IVs delivered to DMOs per quarter.

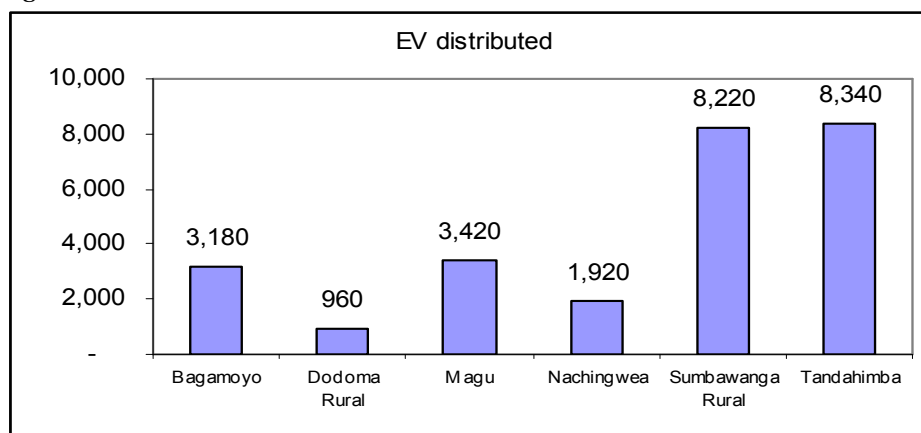
Figure 3: IVs issued to District Medical Officers



Equity Voucher:

There has been no replenishment of EVs to the six pilot districts since the initial supply of 26,040 were distributed in February and March.

Figure 4: EVs issued to the districts



2.0 STRATEGY: SET UP SYSTEMS OF FREE DISTRIBUTION OF IRKS TO MOTHERS OF INFANTS AT VACCINATION MILESTONES AT THREE AND NINE MONTHS

As reported last quarter, this strategy remains inactive. It should be noted that procurement and distribution of the long life KO Tab 1-2-3 will resume should the MoHSW accept the insecticide's TCRI registration and an addendum has been added to extend MEDA's contract.

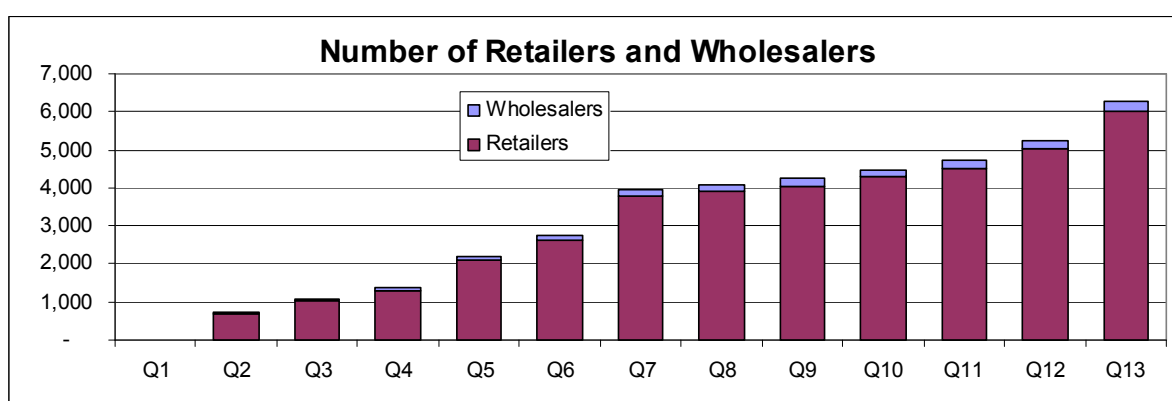
3.0 STRATEGY: IDENTIFY, TRAIN, & MONITOR SELECTED RETAIL OUTLETS ELIGIBLE TO RECEIVE VOUCHERS

3.1 Retail Outlets Identified and Trained In All Regions by Regional Teams

The number of retailers and wholesalers involved in the program grew by 20.2% and 4.8%, respectively, over the three month period. The number of retailers grew from 5,023 to 6,037 (an increase of 1,014 retailers) and the number of wholesalers increased from 230 to 241 (an increase of eleven wholesalers). It should be noted that while MEDA has recruited one private sector outlet per RCH clinic in accordance with the established project target, the regional teams are now working towards a new and more aggressive target of increasing the number of retailers to at least two per RCH clinic particularly where the potential for new recruits is high.

Figure 5 depicts the growth of the commercial sector participating in the TNVS.

Figure 5: Number of Retailers and Wholesalers



MEDA also records the number of retailers and wholesalers per region and district. Table 1 indicates the number of retailers and wholesalers registered in the program in each region at the end of the quarter.

Table 1: Total Numbers of Retailers and Wholesalers as of September 30, 2007

Quarter 12 Figures		
Region	Total Retailers	Total Wholesalers
Arusha	182	10
Dar es Salaam	256	7
Dodoma	312	10
Iringa	290	8
Kagera	312	15
Kigoma	254	13
Kilimanjaro	297	15
Lindi	219	13
Manyara	156	7
Mara	333	14
Mbeya	371	17
Morogoro	352	16
Mtwara	199	8
Mwanza	407	16
Pwani	278	10
Rukwa	212	10
Ruvuma	343	9
Shinyanga	441	16
Singida	220	6
Tabora	340	11
Tanga	263	10
Nationwide	6037	241
Grand Total private sectors = 6,278		

4.0 STRATEGY: DESIGN AND MANAGE VOUCHER REDEMPTION SCHEME

4.1 System Design and Upkeep

The voucher redemption model continues to function well, but we continue to adapt it for greater efficiency. This quarter MEDA changed its system for payment of redeemed vouchers. In the past, vouchers received from wholesalers or manufacturers were counted through a cash counting machine, like those used at bureaus de change, and payment processed from the counted figure. This system was inefficient in the sense that vouchers of different types might be regarded as of a single type if it slips the eye of the counting person, and it is less accurate than the scanning process. To improve the accuracy of our voucher counts, MEDA has decided to process payment only after vouchers have been scanned and accurately sorted by the scanning system.

4.2 Redemption Rates

PWV

By the end of the quarter, 93,551 PWV stub books had been returned to MEDA from the DMOs, representing a total number of 2,338,775 vouchers. Of this voucher sub-set, 1,864,766 have been redeemed by MEDA, making the effective redemption rate this quarter 80%. This represents a drop by 1% in the redemption rate from the previous quarter. MEDA has also received a total of 457,273 vouchers whose stubs are still in the field, representing 21,713 stub books. MEDA is making stub book returned from clinics and districts a top priority with our field staff, and we are running calculations to estimate the impact on redemption should all of these books be returned, or included in the calculations during the period awaiting their return.

IV

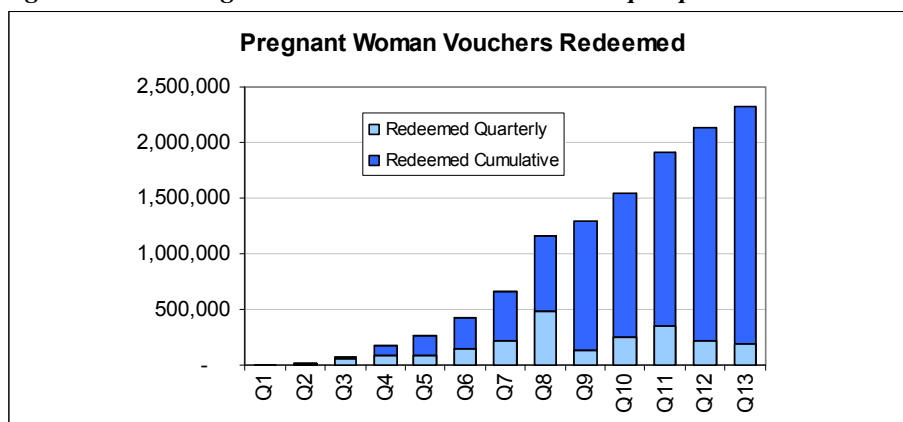
7,203 IV stub books (representing a total of 180,075 vouchers) have been received. Of these stubs, 114,641 vouchers subset were redeemed making the redemption rate 64%. Several possible explanations exist for the lower redemption rate. It is just now six months from full program launch, and it takes that long for vouchers to come back through the system. In addition, it may be that Infant Vouchers may lag in redemption because a pregnant woman already has a net from her pregnancy.

4.3 Vouchers Redeemed and Coverage Rates

PWV:

Total vouchers returned during the 13th quarter were 192,386 (66,248 in July, 54,934 in August and 71,204 in September). The average monthly return of the three reporting month in this quarter has declined to 64,128 compared to 75,893 of previous quarter. This dip is a result of the stoppage period where PWV distribution was on hold since April and most RCH clinics ran out of vouchers. The cumulative total returned since program start is 2,322,039 PWV.

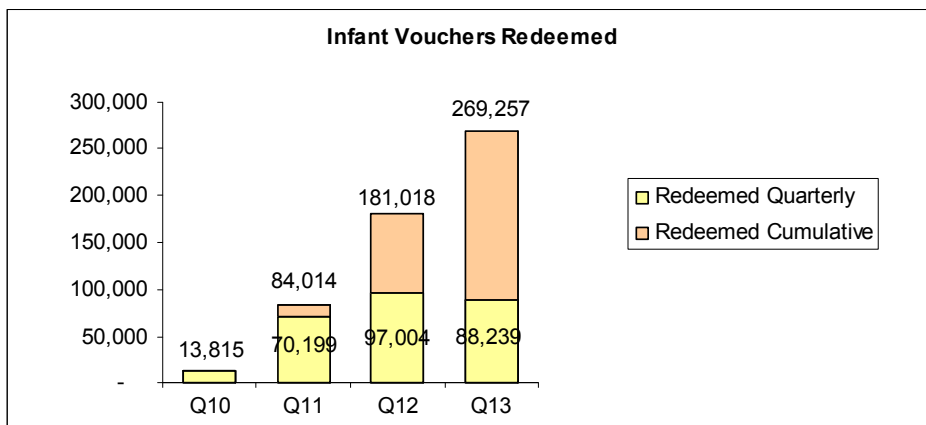
Figure 6: Total Pregnant Woman Vouchers Redeemed per quarter and cumulatively



IV:

During 13th quarter, 88,239 IV were returned: 27,757 in July, 27,021 in August and 33,461 in September. The average monthly return this quarter was 29,413 compared to 32,335 of previous quarter. The cumulative total returned since program inception is 269,257.

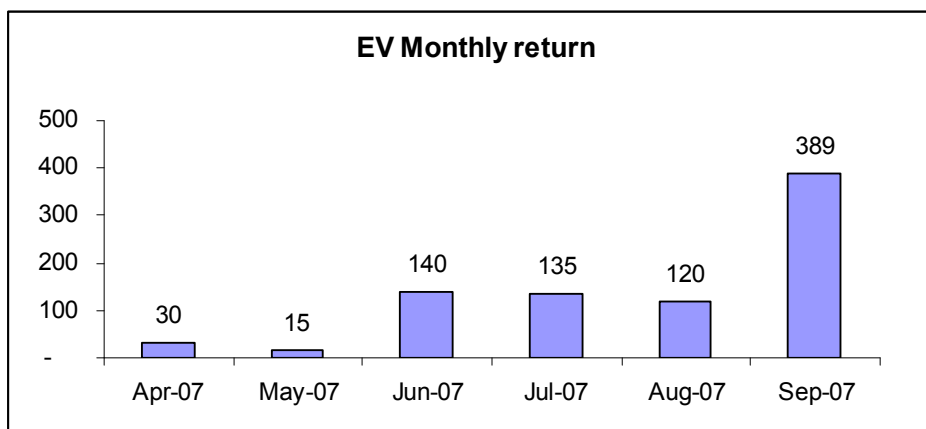
Figure 7: Total Infant Vouchers Redeemed per quarter and quarterly cumulative



Equity Voucher:

A total of 644 EVs were redeemed this quarter (135 in July, 120 in August and 389 in September). Redemption figures are expected to increase in the next quarter.

Figure 8: Equity Vouchers returned per month



5.0 STRATEGY: DESIGN & IMPLEMENT RISK MANAGEMENT SYSTEMS TO MINIMIZE MISUSE & FRAUD

This quarter MEDA has witnessed a slower response by the Districts in managing misuse cases. Either investigations have been slow or channeling of the misused funds back to MEDA has not happened at all.

- Tarime, Mara: RCH clinic staff have been pinpointed in the misuse of 32 infant vouchers, 7 of which could not be accounted for in clinic records. The remaining 25 vouchers, a full voucher book, has gone missing. Despite efforts by the MEDA RM to report the cases of misuse and although concerned staff have already been identified, the ensuing disciplinary action by the District officials has been slow.

- Arusha Urban: MEDA Arusha RM has discovered that RCH staff at Ngarenaro clinic have been forging the names of PWV beneficiaries. The concerned RCH staff has implicated at least 33 other clinic staff and misuse is suspected to the tune of as many as 73 books. The DMO has been timely notified but response has been slow. If there is continued inaction, TNVS Programme Manager at MEDA will re-issue a letter requesting that any funds received by DMOs from cases of voucher misuse should be forwarded to MEDA for vouchers to be re-issued.
- Masasi, Mtwara: MEDA Mtwara RM has identified 39 PWVs that have not been accounted for in the clinic records. The misuse case has been reported to the DMO and is currently under investigation.
- Mwanza Urban – MEDA Mwanza RM has reported the theft of 73 Infant vouchers books. This case implicates a family member of the MEDA RM and three non-TNVS wholesalers in Mwanza urban. Investigation is still under way.

The Monitoring Unit at MEDA has engaged in the following significant risk management activities from July to September:

- Liaising with Zonal Coordinators to ensure that regular updates are compiled on outstanding misuse cases
- Process mapping of the identification, reporting, addressing and follow up of misuse cases
- Maintenance of the clinic tracking database to record the findings of clinic visits.

Plans for an information session for key stakeholders to orient them on the various indicators, their definitions and formulations are still under way.

6.0 ADDITIONAL COMMENTS

6.1 Zanzibar ITN Voucher Program

MEDA has continued with its operations in the two isles. During this quarter, training has been conducted at the district and RCH levels. Retailers have been identified and recruited to the program. A total of 164 clinics, 219 retailers and 14 wholesalers are participating in the program. Vouchers were received last quarter and electronic dispatch on the MEDA database was done in May. Each RCH requirement was estimated from the attendance records. A total of 58,425 ZV were sent out for distribution to the RCH clinics being a supply stock for 6 months. The distribution exercise in Unguja was completed in mid September and program launched on the 12th September. The team has continued to complete voucher distribution in Pemba, where launch of the program is expected early next quarter.

6.2 PLAN Project Voucher (PPV)

The PLAN voucher first-year program reached an end at the extended expiry date of 17th August. Next quarter, PLAN, MEDA and A to Z will be meeting to discuss the second-year PLAN voucher program.

By the end of the extended expiry date, the program numbers were as follows: Cumulative total of 108,970 vouchers dispatched to regions, 547 vouchers returned unused, 108,423 vouchers issued to beneficiaries, and 100,550 vouchers utilized. The cumulative utilization rate is 93%, indicating an overall successful program implementation.

Feedback has shown that there have been several retailers that remained with a stock of OLYSET™ nets. A to Z initially proposed the exchange of all unsold nets with other plastic household items; however, this was not done and it will be on the agenda for the partner meeting.

6.3 GPS Mapping / Power Track (new)

RCH and Retailer Tracking

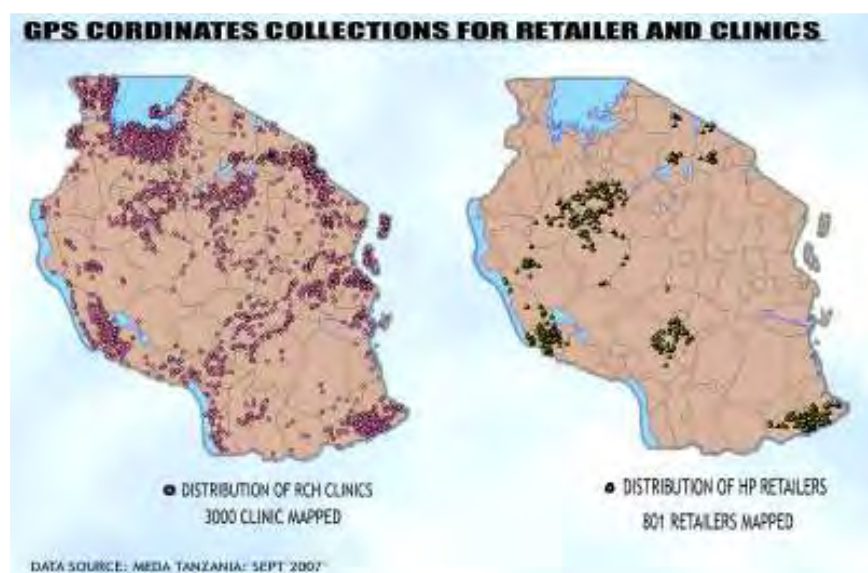
GPS Program

At the MEDA retreat in December 2006, 14 Regional Managers (RMs) were chosen for a pilot program aimed at mapping Reproductive and Child Health (RCH) clinic and Hati Punguzo (HP) retailer position coordinates throughout Tanzania. Each RM was equipped with a GPS unit and trained on how to collect position coordinates. The main objective of the program was to collect information on the location of every clinic and retailer within those regions and to integrate the information into MEDA's existing database. Until now the program has been successful, with RMs in the field having already collected coordinates for 3,000 of the 4,408 clinics in our database, and 801 retailers of the 6,037 in the database.

Getting this information to the head office has not been easy and there have been some challenges along the way. Most RMs must visit the head office in Dar before the information can be processed. There have been some attempts at physically recording the coordinates and sending them by email but this has proven inefficient as it not only takes time but has the potential for human error. Another challenge has been collecting complete and accurate information, such as the retailer name, district and corresponding clinic. Experience has already shown that incomplete and inaccurate information renders the information useless.

Late last quarter, MEDA collaborated with Andrew Ingliss Macro Inc. to swap data with other organizations that also deal with RCH clinics. From this exercise, MEDA received the missing RCH clinic coordinates for the 14 assigned regions, as well as the 7 other regions in mainland Tanzania. With these waypoints MEDA now has coordinates for 3,000 RCH clinics and 801 retailers and wholesalers. Figure 6 below shows the distribution of the 3,000 RCH clinics and 801 retailers that MEDA has collected so far.

Figure 6. Distribution of RCH clinic with their corresponding retailers



The Way Forward

A new development to the GPS tracking initiative is an African designed vehicle management system called Power Track. Power Track uses GPS technology to monitor Date, Time, Position, Heading and Speed for any commercial vehicle. MEDA currently has one vehicle installed with a Power Track unit. All information related to this vehicle is uploaded to a database at MEDA on a continuous basis and stored. Although this program is in its early stages, it may provide a better way forward for monitoring vehicles in the field as well as collecting position coordinates. In the weeks and months to come MEDA plans to explore the best uses for this program, including its potential to collect clinic and retailer position coordinates to supplement the ongoing collection using handheld GPS units.

6.4 Special Events and Visitors

This quarter MEDA received Hollywood actors Matt Damon and Ben Affleck. They visited the Makongoro Clinic in Mwanza. Their tour aimed at understanding the epidemiology of several tropical diseases with special interest on malaria treatment using Aritemether Lumefantrine (ALCT) and quinine. They also had an interest in learning about malaria projects sponsored by the USAID through PMI. During the tour, Damon and Affleck were particularly curious about the mechanism of the voucher scheme and its integration in the activities of the RCH staff. They also had an opportunity to listen to stories from the pregnant women who were receiving RCH services at the clinic.

In September, MEDA also received seven Canadian Members of Parliament and Senators at the Dar es Salaam office. The purpose of their trip was to get an understanding of the voucher scheme. The parliamentarians visited a TNVS retailer in Kinondoni and witnessed the voucher processing unit at MEDA HQ where they were shown the process for voucher replenishment and distribution from the issuing points up through the ITN supply chain to MEDA HQ.

7.0 CHALLENGES

The following issues are highlighted for special attention during the next quarter.

7.1 Infant Voucher

IV is flowing smoothly but follow up continues for the reported cases of misuse in Mtwara and Mwanza.

7.2 Plan Voucher

Insufficient OLYSET™ net supply for PPV was observed in Kisarawe and Geita districts. To a large extent this was solved through a joint effort between PLAN, MEDA and A to Z, whereby a sensitized community was able to buy OLYSET™ nets distributed by A to Z at the village level.

7.3 Equity Voucher

During this quarter, regional managers and stakeholders have been participating in EV monitoring activities. Several VDPs have been slow in issuing EVs due to lack of program awareness among VEO/WEO. RMs are re-training VEO/WEOs where there is low awareness of EV.

Table 2: Performance Indicators

Milestones and Results		3rd Quarter 2004-Q1	4th Quarter 2004-Q2	1st Quarter 2005-Q3	2nd Quarter 2005-Q4	3rd Quarter 2005-Q5	4th Quarter 2005-Q6	1st Quarter 2006-Q7	2nd Quarter 2006-Q8	3rd Quarter 2006-Q9	4th Quarter 2006-Q10	1st Quarter 2007-Q11	2nd Quarter 2007-Q12	3rd Quarter 2007-Q13
Strategy 1: Design and implement systems to ensure effective and efficient transfer of vouchers														
1.1	Vouchers Procured	PWV securely stored and available for distribution	PWV securely stored and available for distribution	PWV securely stored and available for distribution	PWV securely stored and available for distribution	PWV securely stored and available for distribution	PWV securely stored and available for distribution	PWV securely stored and available for distribution	PWV securely stored and available for distribution	PWV and IV securely stored and available for distribution	PWV, PPV and IV securely stored and available for distribution	PWV, PPV and IV securely stored and available for distribution	PWV, IV and EV securely stored and available for distribution	PWV, IV and EV securely stored and available for distribution
	Results	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed
1.2a	Regional logistics teams identified and trained to manage distribution of vouchers/IRKs	2 Regional Teams trained	2 regions operational	5 regions operational	7 regions operational	11 regions operational	17 regions operational	21 regions operational	21 regions operational	21 regions operational	21 PWV regions operational	21 PWV regions operational	21 PWV regions operational	21 PWV regions operational
	Results	Completed	5 regions operational	8 regions operational	11 regions operational	15 regions operational	20 regions operational	21 regions operational	21 regions operational	21 regions operational	21 PWV regions operational	21 PWV regions operational	21 PWV regions operational	21 PWV regions operational
1.2b	IV training and prep									All net manufacturers informed and trained in IV procedures	IV retailers and wholesalers trained and registered in 15 regions	IV retailers and wholesalers trained and registered in 15 regions	IV retailers and wholesalers trained and registered in 15 regions	IV retailers and wholesalers trained and registered in 15 regions
	Results									Completed	Partial	Completed	Completed	Completed
1.2c	EV training and prep									N/A	Partners identified and contracted in 6 EV districts	Partners identified and contracted in 6 EV districts	6 EV districts fully launched and operational	6 EV districts fully launched and operational
	Results									N/A	Partial	Completed	Completed	Completed
1.3a	Vouchers Distributed (Targets) PWV	0	22,000	77,000	160,000	300,000	607,000	880,000	1,200,000	1,475,000	N/A	350,000	700,000	1,050,000
	Results PWV	2000	232,125	428,227	528,000	947,323	1,271,618	1,788,902	2,424,987	2,646,775	2,999,325	358,025	440,275	1,156,925
1.3b	Vouchers Distributed (Targets) IV									0	336,000	672,000	1,008,000	1,344,000
	Results IV									90,000	382,900	654,900	872,700	1,159,350
1.3c	Vouchers Distributed (Targets) EV									N/A	N/A	N/A	N/A	N/A
	Results EV									N/A	N/A	26,040	26,040	26,040

Milestones and Results		3rd Quarter 2004-Q1	4th Quarter 2004-Q2	1st Quarter 2005-Q3	2nd Quarter 2005-Q4	3rd Quarter 2005-Q5	4th Quarter 2005-Q6	1st Quarter 2006-Q7	2nd Quarter 2006-Q8	3rd Quarter 2006-Q9	4th Quarter 2006-Q10	1st Quarter 2007-Q11	2nd Quarter 2007-Q12	3 rd Quarter 2007-Q12
Strategy 2: Set up systems for the free distribution of IRK to mothers/caretakers of infants														
2.1	Insecticide Re-treatment Kits procured	IRKs stored and available for distribution	IRKs stored and available for distribution	IRKs stored and available for distribution	IRKs stored and available for distribution	IRKs stored and available for distribution	IRKs stored and available for distribution	IRKs stored and available for distribution	IRKs stored and available for distribution	IRKs stored and available for distribution	IRKs stored and available for distribution	IRKs stored and available for distribution	N/A	N/A
	<i>Results</i>	<i>Tendered</i>	<i>Supplier selected and order placed</i>	<i>200,000 IRKs in storage in DSM</i>	<i>120,000 IRKs in storage in DSM</i>	<i>90,000 IRKs in storage in DSM, 1,000,000 ordered</i>	<i>350,000 ready for distribution in January</i>	<i>18,000 IRKs in stock at MSD, 800,000 on order</i>	<i>800,000 IRKs received and distributed.</i>	<i>No activity</i>	<i>No activity</i>	<i>No activity</i>	<i>No activity</i>	<i>No activity</i>
2.2	Number of RCH facilities distributing IRKs to mothers/caretakers of infants	0	0	250	500	1,200	3,826	4,160	4,394	4,160	4,270	N/A	N/A	N/A
	<i>Results</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>5 regions</i>	<i>11 regions</i>	<i>20 regions</i>	<i>21 regions</i>	<i>21 regions</i>	<i>21 regions</i>	<i>21 regions</i>	<i>21 regions</i>	<i>21 regions</i>	<i>21 regions</i>
2.3	Number of IRKs distributed (Target)	0	0	0	40,000	105,000	410,000	815,000	1,005,000	1,205,000	N/A	N/A	N/A	N/A
	<i>Results</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>80,000</i>	<i>330,400</i>	<i>450,000</i>	<i>764,000</i>	<i>1,600,000</i>	<i>1,600,000</i>	<i>1,600,000</i>			
Strategy 3: Identify, train and monitor selected retail outlets eligible to receive vouchers														
3.1a	Retailers Accepting Vouchers (Target) PWV		Outlets identified in 2 regions accepting vouchers	Outlets identified in 5 regions accepting vouchers	Outlets identified in 7 regions accepting vouchers	Outlets identified in 11 regions accepting vouchers	2,650 retailers identified in 17 regions accepting voucher	3,000 retailers identified in 21 regions accepting voucher	3,100 retailers identified in 21 regions accepting vouchers	3,210 retailers identified in 21 regions accepting vouchers	N/A	N/A	N/A	N/A
	<i>Results PWV</i>		<i>5 regions operating involving 681 retailers</i>	<i>8 regions operating involving 1022 retailers and 63 wholesalers</i>	<i>12 regions operating involving 1372 retailers and 83 wholesalers</i>	<i>15 regions operating involving 2091 retailers and 1119 wholesalers</i>	<i>20 regions operating involving 2618 retailers and 134 wholesalers</i>	<i>21 regions operating involving 3,773 retailers and 174 wholesalers</i>	<i>21 regions operating involving 3932 retailers and 197 wholesalers</i>	<i>21 regions operating involving 4058 retailers and 206 wholesalers</i>	<i>21 regions operating involving 4,263 retailers and 208 wholesalers</i>	<i>21 regions operating involving 4517 retailers and 226 wholesalers</i>	<i>21 regions operating involving 4814 retailers and 233 wholesalers</i>	<i>21 regions operating involving 6,008 retailers and 241 wholesalers</i>
3.1b	Retailers Accepting Vouchers (Target) IV										N/A	2,860	3,796	N/A
	<i>Results IV</i>									<i>N/A</i>	<i>Retailers 2170 and wholesalers 208</i>	<i>Retailers 3556 and wholesalers 171</i>	<i>Retailers 3,796 and wholesalers 178</i>	<i>15 regions: Retailers 4,557 and 185 wholesalers</i>
3.1c	Retailers Accepting Vouchers (Target) EV									N/A	N/A	230		
	<i>Results EV</i>									<i>N/A</i>	<i>N/A</i>	<i>Retailers 346 and wholesalers 13</i>	<i>Retailers 372 and wholesalers 13</i>	<i>6 Districts: Retailers 392 and wholesalers 13</i>

Milestones and Results		3rd Quarter 2004-Q1	4th Quarter 2004-Q2	1st Quarter 2005-Q3	2nd Quarter 2005-Q4	3rd Quarter 2005-Q5	4th Quarter 2005-Q6	1st Quarter 2006-Q7	2nd Quarter 2006-Q8	3rd Quarter 2006-Q9	4th Quarter 2006-Q10	1st Quarter 2007-Q11	2nd Quarter 2007-Q12	3rd Quarter 2007-Q13
Strategy 4: Design and manage voucher redemption system														
4.1	System Design	Design Redemption System	Design Redemption System	Design Redemption System	Design Redemption System	Design Redemption System	Design Redemption System	Design Redemption System	Design Redemption System	Design Redemption System	Design PWV and IV Redemption System	Design PWV and IV Redemption System	Design PWV and IV Redemption System	Design PWV and IV Redemption System
	Results	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed
4.2a	Redemption Rate (Target) PWV								85%	85%	85%	85%	85%	85%
	Results PWV								83%	83%	83%	82%	81%	83%
4.2b	Redemption Rate (Target) IV									N/A	N/A	N/A	N/A	N/A
	Results IV									N/A	N/A	N/A	65%	63%
4.2c	Redemption Rate (Target) EV									N/A	N/A	N/A	N/A	N/A
	Results EV									N/A	N/A	N/A	N/A	N/A
4.3a	Vouchers Redeemed PWV (Targets)						408,000	591,600	807,500	935,000	N/A	300,000	600,000	850,000
	Results PWV	0	33,881	92,264	182,879	279,204	414,878	662,140	1,157,566	1,300,185	1,549,494	352,412	580,091	772,477
4.3b	Vouchers Redeemed IV (Targets)									N/A	N/A	N/A	N/A	N/A
	Results IV									N/A	13,892	84,014	181,018	269,257
4.3c	Vouchers Redeemed EV (Targets)									N/A	N/A	N/A	N/A	N/A
	Results EV									N/A	N/A	N/A	188	829
Strategy 5: Design and implement risk management systems to minimize misuse and fraud														
5.1	Risk Management System Development	Record keeping system to document movement of PWVs developed/integrated	Record keeping system to document movement of PWVs developed/integrated	Record keeping system to document movement of PWVs developed/integrated	Record keeping system to document movement of PWVs developed/integrated	Record keeping system to document movement of PWVs developed/integrated	Record keeping system to document movement of PWVs developed/integrated	Record keeping system to document movement of PWVs developed/integrated	Record keeping system to document movement of PWVs developed/integrated	Record keeping system to document movement of PWVs developed/integrated	Record keeping system to document movement of PWVs and IVs developed/integrated	Record keeping system to document movement of PWVs and IVs developed/integrated	Record keeping system to document movement of PWVs and IVs developed/integrated	Record keeping system to document movement of PWVs and IVs developed/integrated
	Results	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed	Completed