

Stop TB Partnership

Work Plan & Budget 2012/2013

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Outline

Work Plan 2010/2011 Implementation Report

Work Plan 2012/2013 Summary

Work Plan Comparative 2010/2011 and 2012/2013

Work Plan Detail:

**Partnership Secretariat Planned Costs, Budgeted Costs,
Gaps and Expected Results**

**GDF Planned Costs, Budgeted Costs, Gaps and Expected
Results**

2010/2011 Work Plan Implementation based on Biennium Budgeted Costs

PARTNERSHIP (TBP Secretariat & TB REACH)	Budgeted Costs (US\$ '000)	Actual Implementation rate
Approved budgeted cost for activities	53,880	78%
Human Resources	12,699	91%

GLOBAL DRUG FACILITY	Budgeted Costs (US\$ '000)	Actual Implementation rate
Approved budgeted cost for drugs and activities	108,205	82%
Human Resources	11,162	79%

Work Plan Summary 2012-2013

In Millions
US\$

	Planned	Budget	Gap
Secretariat	22	17	5
TB REACH	47	47	0
GDF	122	114	8
Total	191	178	13

- Planned costs are based on resources to be mobilized
- Budgeted costs are in line with forecasted income and have been prioritized in an iterative peer review process within the Secretariat
- **Approval** is sought for the budgeted costs for implementation
- **Approval** is sought for the planned costs to guide resource mobilization efforts

Work Plan Comparative 2010/2011 and 2012/2013 - Planned Costs

In Millions US\$

Unit	TBP ¹		GDF		TBR		Total	
	2010/11	2012/13	2010/11	2012/13	2010/11	2012/13	2010/11	2012/13
Activity	13.8	10.9	7.3	9.4	45.3	44.9	66.4	65.2
Commodities	N/A	N/A	113.5	100.5	N/A	N/A	113.5	100.5
HR	11.0	11.3	11.2	12.0	1.7	2.0	23.9	25.3
Total	24.8	22.2	132	121.9	47.0	46.9	203.8	191

- The planned costs for the new biennium are of the same order of magnitude of the previous biennium

¹ Includes Working Groups, TBTEAM and Reserves

Work Plan Comparative Activity/Staff Ratios 2010/2011 & 2012/2013

Ratio	TBP		GDF		TBR		Total	
	2010/11	2012/13	2010/11	2012/13	2010/11	2012/13	2010/11	2012/13
Activity	56%	49%	92%	90%	96%	96%	88%	87%
Staff	44%	51%	8%	10%	4%	4%	12%	13%

- The overall trend of staff to activity costs is stable
- This healthy ratio is due to the basic infrastructure the Partnership has built over the years and could sustain activity levels of at least twice the current planned level

Partnership Secretariat – Main Areas of Work

1. **Raise and maintain the profile and awareness of TB among decision makers and influencers to mobilize resources and increase political commitment**
 - *Affected Communities and Civil Society*
 - Creation and empowerment of regional and sub regional networks of communities and civil society groups - jointly with Global Fund Secretariat, communities delegation and UNAIDS
 - *National Governments*
 - Roll out of the Save A Million Lives TB/HIV in 10 countries together with UNAIDS
 - Childhood TB - towards Zero TB Deaths in Children
 - TB and Mining in South African Region
 - Advocacy for R&D in BRICS and selected countries
 - Take up and implementation of new tools
 - UN SE President Sampaio and TB National Champions

Partnership Secretariat – Main Areas of Work 2

1. Raise and maintain the profile and awareness of TB among decision makers and influencers to mobilize resources and increase political commitment
 - *Global*
 - Global Plan to Stop TB 2011-2015
 - Develop a 3-year Operational Strategic Plan for the Stop TB Partnership (including Secretariat)
 - Risk management and Performance Management (KPI)
 - Work towards development of the new "beyond 2015" targets
 - Global Fund
 - Development of the TB Investing Framework
 - Engagement and advocacy in the GF replenishment conference including Impact on TB due to round 11 Cancellation
 - Support for the Transitional Funding Mechanism, Phase 2 Renewals
 - Childhood TB
 - Create funding opportunities for partners for childhood TB related projects in rolling out the Research Movement

Partnership Secretariat – Main Areas of Work 3

1. Raise and maintain the profile and awareness of TB among decision makers and influencers to mobilize resources and increase political commitment
 - *Global (cont'd)*
 - GDF
 - Shaped/improved of market dynamics and ensure quality assured drugs and diagnostics
 - Evidence on outcome of the use of quality assured vs non quality assured drugs
 - Early Warning System and Forecasting
 - Rotating/emergency supply of drugs/diagnostics
 - *Resource Mobilization for Global Plan and Secretariat*
 - Expand and extend existing donors commitments
 - Broaden the donor base with non traditional donors
 - Broaden the private sector and foundation base
 - For GDF, TB REACH, CFCS

Partnership Secretariat – Main Areas of Work 4

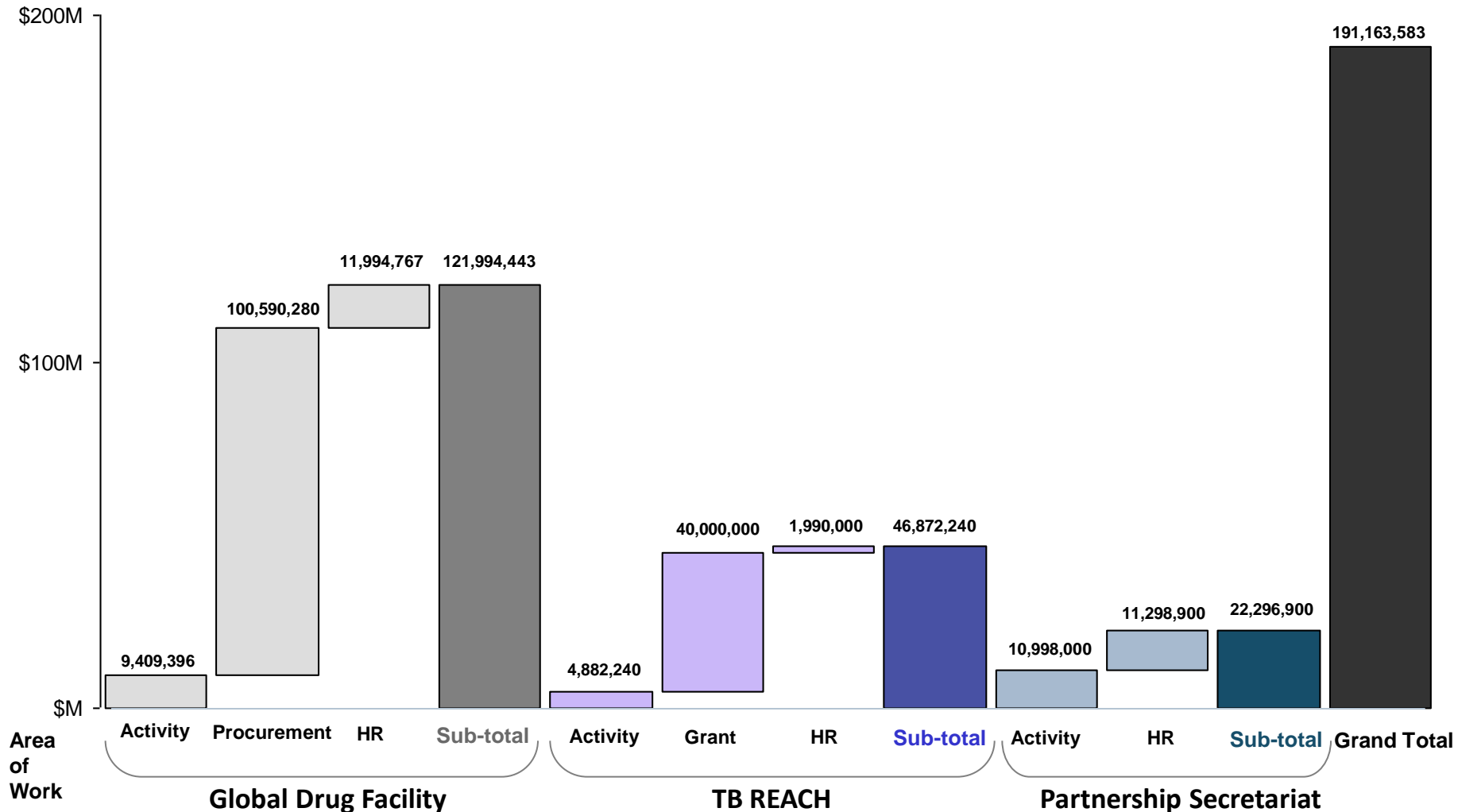
2. **Increase access to high quality TB Care, including innovations, especially for poor, marginalized and vulnerable populations**
 - Supply of first, second line anti TB drugs and diagnostics
 - Rollout of GeneXpert implementation
 - Launch of round 3 of TB REACH grants
 - Evaluation of the impact of TB REACH grants Rounds 1 and 2

3. **Strengthen engagement and accountability of existing and new Partners in affected countries to drive improved access to quality TB Care, including innovations**
 - Strengthen, expand and empower the role of the existing 32 National Stop TB Partnerships and support new partnering initiatives at the national and regional levels
 - Engage in new partnerships at the global level

4. **Strengthen the Stop TB Partnership**
 - Board - Governance Reform
 - Working Groups
 - Secretariat – re-structure/re-profile

Stop TB Partnership Planned Costs

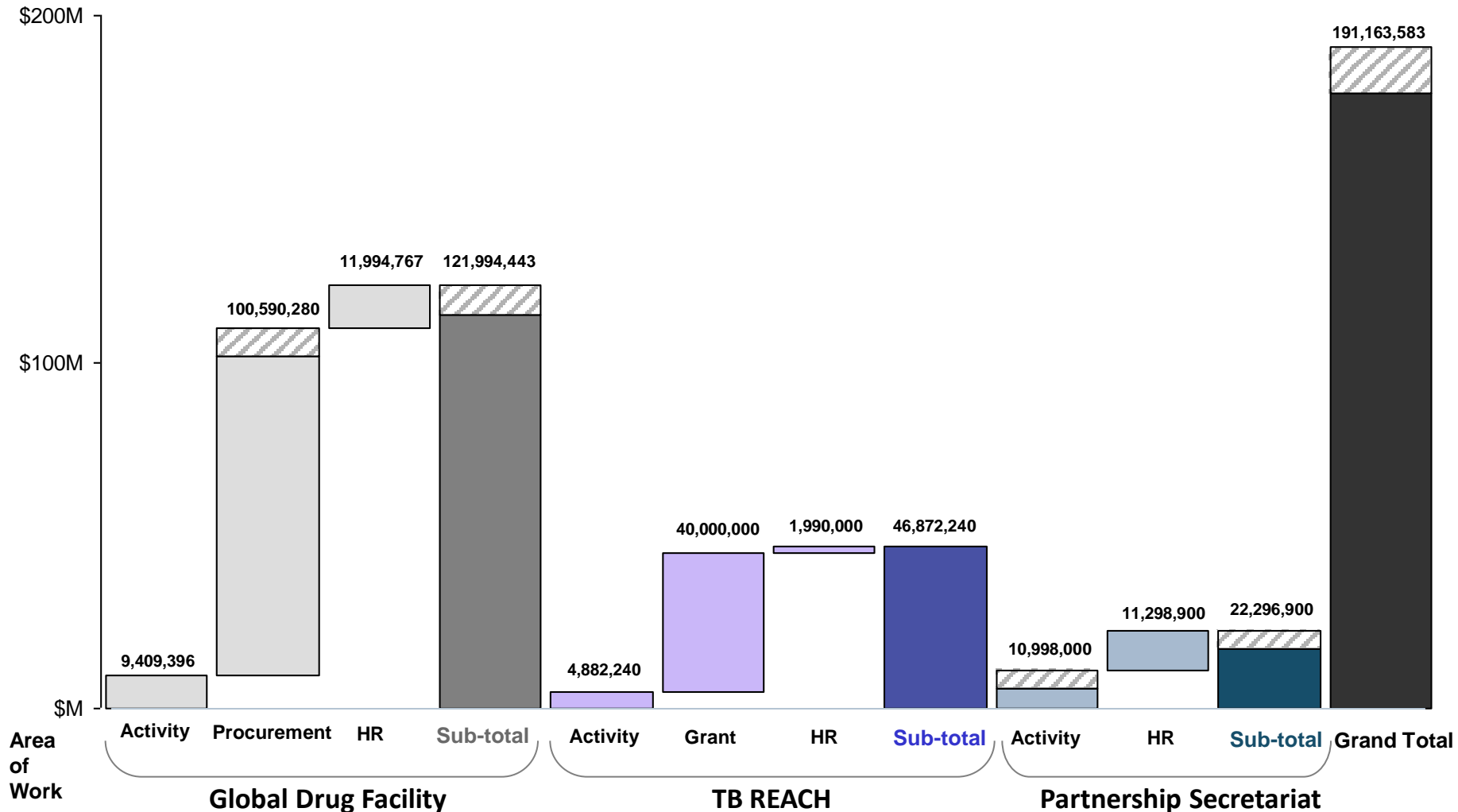
2012/13
Budget
USD Millions



Stop TB Partnership Planned Costs & Gaps

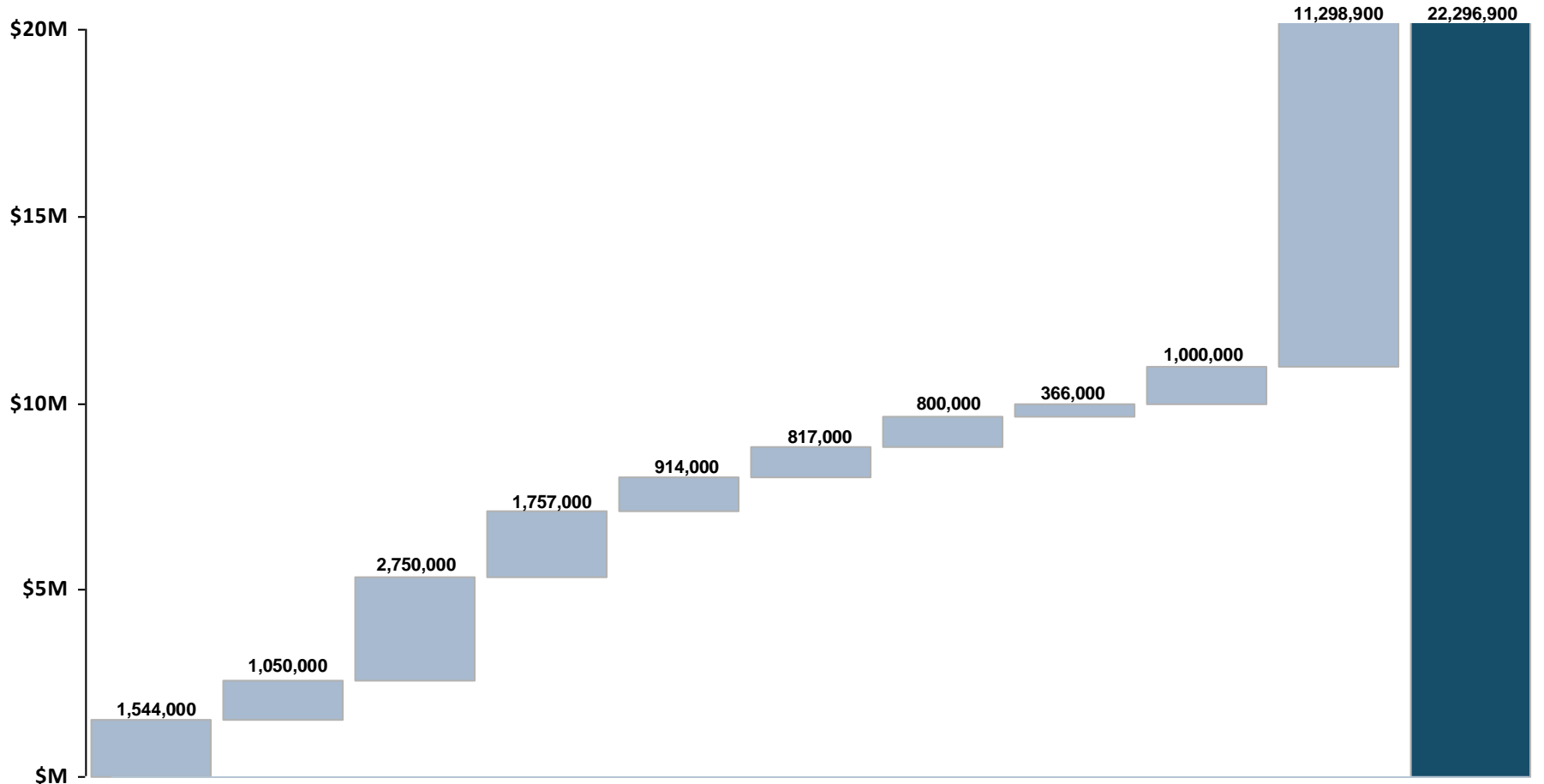
2012/13
Budget
USD Millions

 Gap



Partnership Secretariat Planned Costs

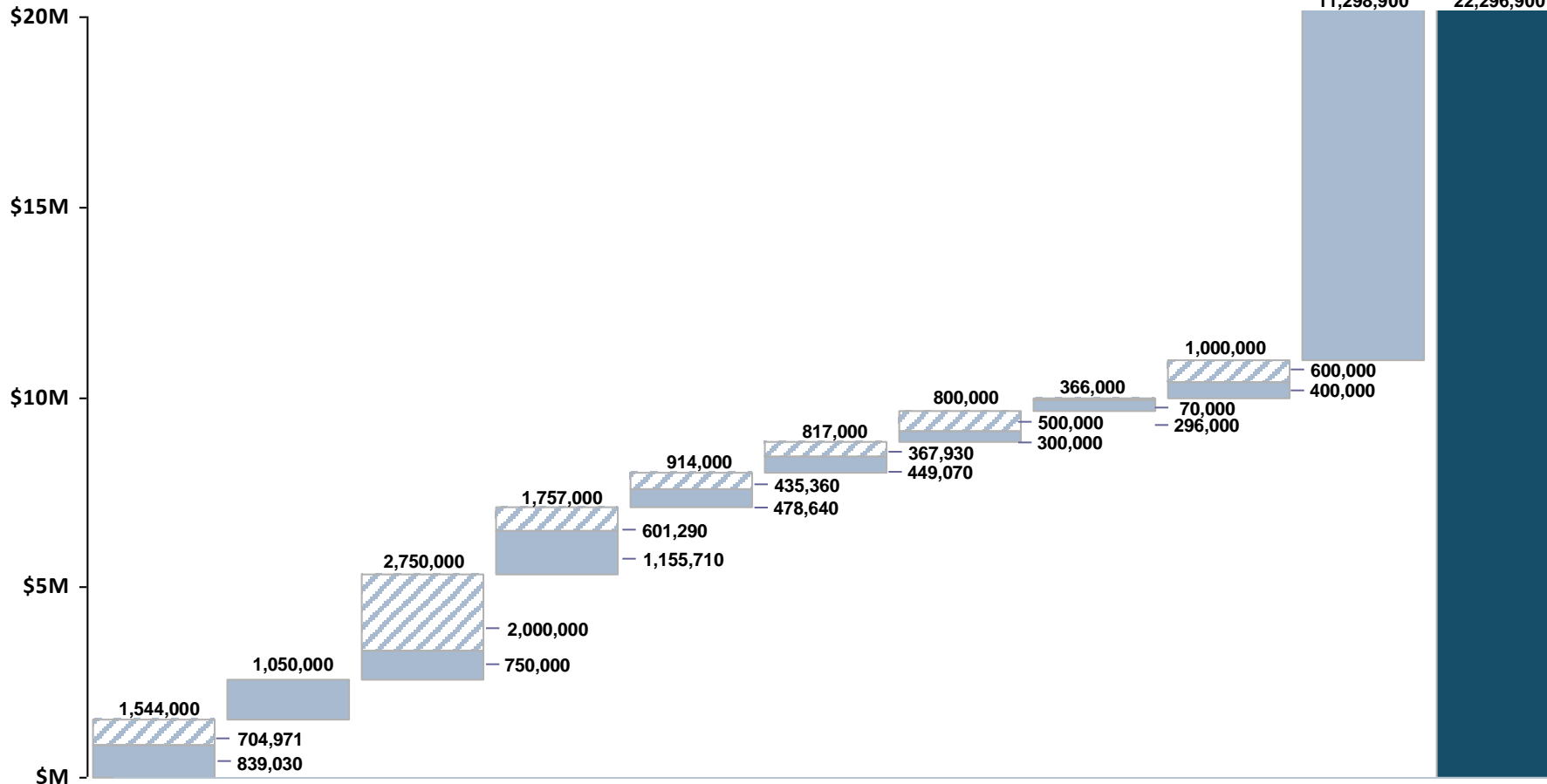
2012/13
Budget
USD Millions



Partnership Secretariat Planned Costs & Gaps

2012/13
Budget
USD Millions

 Gap

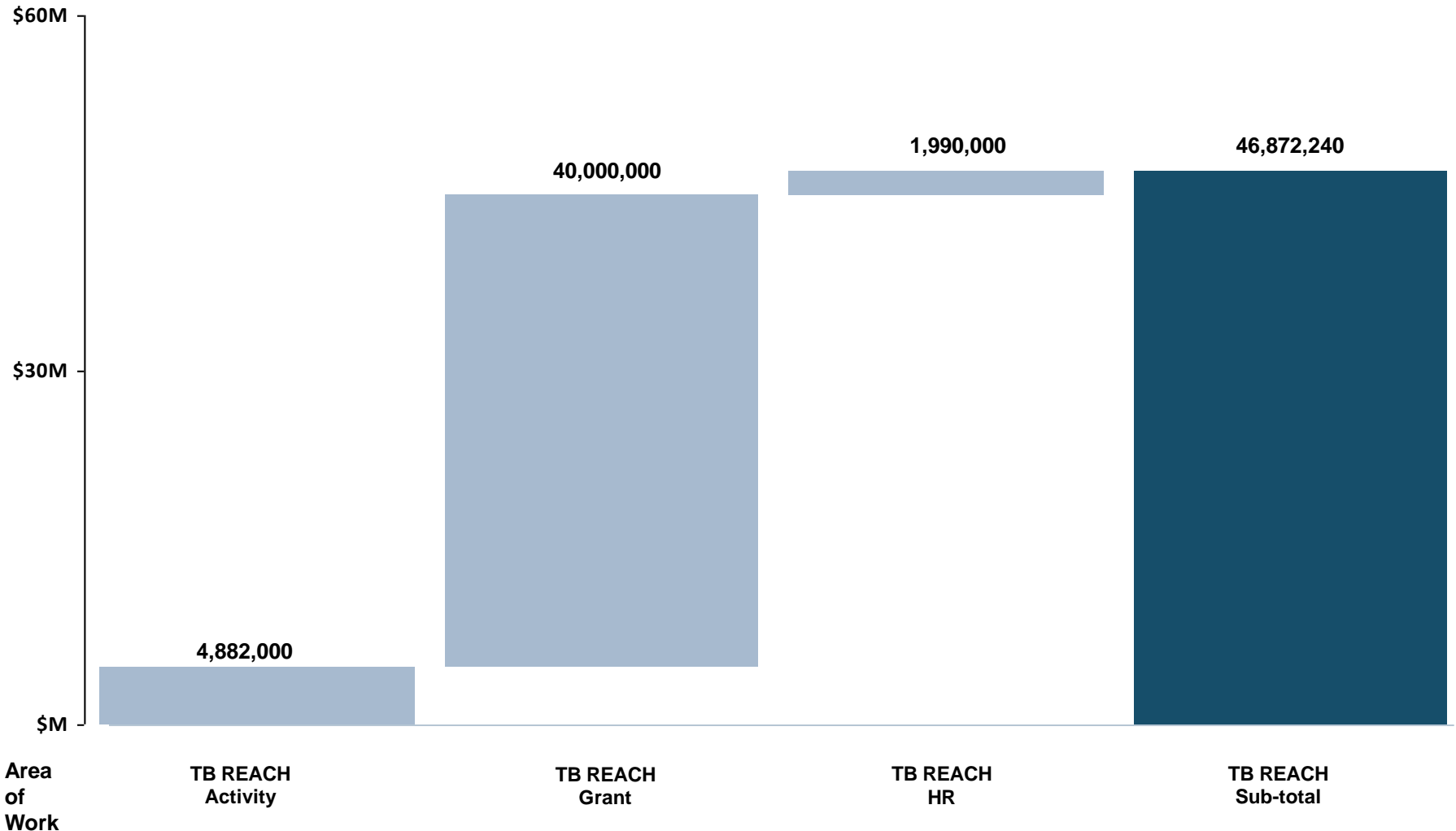


Area of Work: Executive Secretary Office (incl. Research Movement, SE, Champions, Global Fund Engagement), Special Projects 1, Special Projects 2, Advocacy, Governance, Civil Society, National, Regional, Global Partnerships, Communications, CFCS, Planning, Budgeting, Management and Donor Relations, Working Groups, HR, SECRETARIAT TOTAL



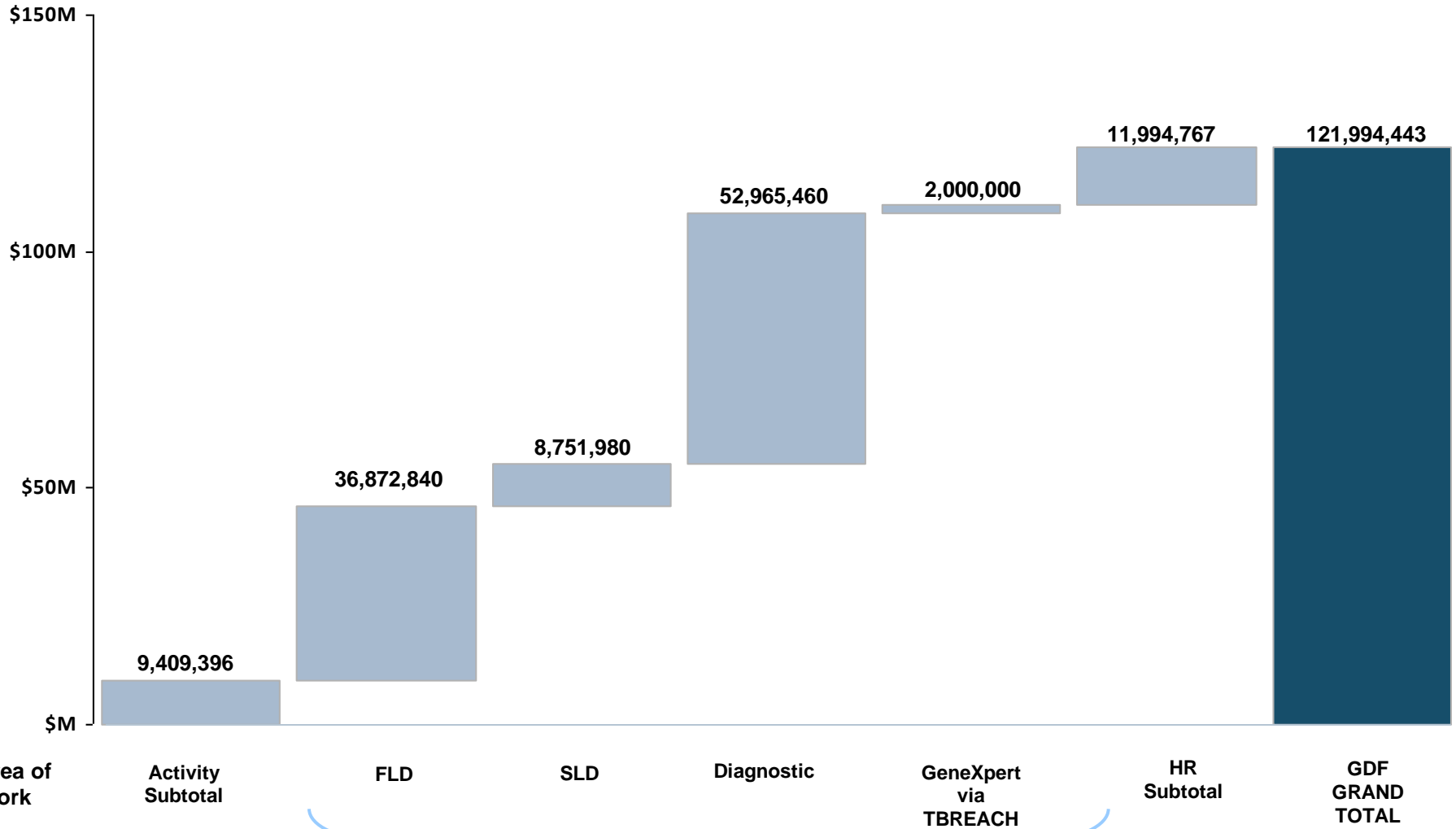
TB REACH Planned and Budgeted Costs

2012/13
Budget
USD Millions



Global Drug Facility Planned Costs

2012/13
Budget
USD Millions



Procurement = US\$ 100 million



Global Drug Facility Planned Costs and Gap

 Gap

2012/13
Budget
USD Millions

