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Report No: RES37709

INTERNATIONAL BANK FOR RECONSTRUCTION AND DEVELOPMENT

RESTRUCTURING PAPER

ON A

PROPOSED PROGRAM RESTRUCTURING

OF

PROGRAM TOWARDS ELIMINATION OF TUBERCULOSIS

APPROVED ON MARCH 29, 2019

TO THE

REPUBLIC OF INDIA

Health, Nutrition & Population Global Practice South Asia Region

Regional Vice President: Hartwig Schafer

Country Director: Junaid Kamal Ahmad



The World Bank

Program Towards Elimination of Tuberculosis (P167523)

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ABBREVIATIONS AND ACRONYMS

DEA	Department of Economic Affairs
IBRD	International Bank for Reconstruction and Development
GFATM	Global Fund to Fight AIDS, Tuberculosis and Malaria



DATA SHEET (Program Towards Elimination of Tuberculosis
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Project ID	Financing Instrument		IPF Component
P167523 Program-for-Results Fi		inancing	No
Approval Date		Current Closing Date	
29-Mar-2019		30-Jun-2024	

Organizations

Republic of India	Ministry of Health and Family Welfare
Borrower	Responsible Agency

Program Development Objective(s)

To improve the coverage and quality of TB control interventions in the private and public sector in targeted states of India

Summary Status of Financing

Ln/Cr/TF	Approval Date	Signing Date	Effectiveness Date	Closing Date	Net Commitment	Disbursed	Undisbursed
IBRD-89260	29-Mar- 2019			30-Jun-2024	400.00	0	400.00

Policy Waiver(s)

Does the Program require any waivers of Bank policies applicable to Program-for-Results operations? No

I. PROGRAM STATUS AND RATIONALE FOR RESTRUCTURING

1. The World Bank Board approved the Program Towards Elimination of Tuberculosis on March 29, 2019. Subsequently, the Board for the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) approved a US\$41.6 million grant to buydown the principal of the International Bank for Reconstruction and Development (IBRD) Loan and to pay for the Loan prepayment premium. Further, the World Bank and the GFATM entered into an Administration Agreement on May 13, 2019, setting up a Trust Fund which outlines the terms and conditions for the use of the grant towards buying down the principal for the Loan. As per the terms of the Administration Agreement, the GFATM has committed an amount of US\$40 million to partially buydown the principal for the Loan and an amount of US\$600,000 to pay any prepayment premium that may be charged by the Bank as part of the buydown on behalf of India. In addition, the GFATM set aside an amount up to US\$1million to compensate the Bank for incurring administrative costs related to the management of the Trust Fund.

II. DESCRIPTION OF PROPOSED CHANGES

- 2. In light of the above changes, the proposed restructuring will amend the Loan Agreement between IBRD and the Republic of India to reflect the buydown arrangements and provisions in alignment with the next steps agreed during the meeting held between the Department for Economic Affairs (DEA), GFATM and the World Bank on February 22, 2019, as well as during the negotiations of the Loan held on January 21, 2019.
- 3. The DEA provided its no objection to proceed with the restructuring on June 11, 2019. The Minutes of the Meeting of June 11, 2019 and the amended Loan Agreement are attached to this package.

DETAILED CHANGES

- 4. Changes in the Loan Agreement are to allow the Bank, in its capacity as the trustee, to withdraw funds from the trust fund as prepayment for the principal amount of the Loan and to cover the prepayment premium, if any. The buydown is contingent upon the achievement of Disbursement Linked Results (DLRs), as and when the Borrower submits withdrawal applications. The amount of principal prepaid shall be in proportion to the total amount available for the buydown for each withdrawal application. Notably, the buydown will not cover prior results and advances.
- 5. The amounts accrued from time to time for the exercise of the buydown ("Accrued Amounts") shall be determined by reference to the ratio of the Withdrawn Loan Balance from the IBRD Loan to the total IBRD Loan amount (i.e. US\$400,000,000), in accordance with the following formula:

 $Accrued\ Amount = [USD\ 40,000,000\ x\ \frac{Eligible\ Withdrawn\ Loan\ Balance}{Eligible\ Loan\ Amount}] -\ Previous\ buydown\ Amounts$



Where:

- (a) "Eligible Loan Amount" means the Bank Loan amount of four hundred million (US\$400 million) netted of any amounts disbursed for the financing of Prior Results (as defined in sub-paragraph (d) below);
- (b) "Eligible Withdrawn Loan Balance" means the amounts of the Bank Loan withdrawn by India from the Bank's Loan account and outstanding at the time of India's filing of each withdrawal application, plus any amounts eligible for withdrawal under the respective withdrawal application on account of the achieved disbursement-linked results described in Schedule 3 to the Loan Agreement, but netted of: (i) any amounts disbursed for Prior Results (as defined in sub-paragraph (d) below); and (ii) any amounts disbursed as advances for the prospective achievement of disbursement-linked results as per Section IV.B.2 of Schedule 2 to the Loan Agreement;
- (c) "Previous buydown Amounts" means the buydowns (i.e. partial pre-payments of the withdrawn Bank Loan balance), if any, executed pursuant to Sections 4.03 and 4.04 of Article IV of the Loan Agreement prior to India's filing of each withdrawal application; and
- (d) "Prior Results" means disbursement-linked results achieved prior to the date of the Loan Agreement but on or after September 18, 2018.
- 6. The Bank shall be responsible for monitoring and certifying India's achievement of the pre-agreed DLRs either through direct supervision mechanisms or by relying on third party audits by an independent verification agent, in accordance with the verification protocols agreed between India and the Bank.
- 7. Furthermore, for the purposes of carrying out each buydown referred to in paragraph 2 above, the portion of the Contribution (i.e. US\$ 600,000) may be used by the Bank (acting as administrator of the Trust Fund) to pay to the Bank, on behalf, and for the benefit of, India, the prepayment premium reasonably determined by the Bank pursuant to Section 3.04(a) and (b) of the General Conditions. In determining the applicable prepayment premium, the Bank will consider certain factors, including, without limitation, its financial costs in redeployment of the prepaid amounts of the Loan. For Loans with variable spread and no conversions, the prepayment premium is based on the difference between: (i) the variable spread, net of waivers, on the prepaid Loan; and (ii) the variable spread, net of waivers, in effect for the relevant Loan currency with an average repayment maturity equivalent to the remaining average repayment maturity of the prepaid cash flows of the Loan at the date of prepayment. The prepayment premium is equal to the present value of the prepaid cash flows multiplied by the difference in the spread computed in the previous sentence, with an assumed floor value of zero. The pre-payment premium calculation is further explained in Annex IV to the Bank's "Financial Terms and Conditions of Bank Financing Directive", as amended from time to time, retrievable at: https://policies.worldbank.org/sites/ppf3/Pages/Manuals/Operational%20Manual.aspx

I. SUMMARY OF CHANGES

	Changed	Not Changed
Other Change(s)	✓	
Change in Implementing Agency		✓
Change in Program's Development Objectives		✓
Change in Program Scope		✓
Change in Results Framework		✓
Change in Loan Closing Date(s)		✓
Change in Cancellations Proposed		✓
Reallocation between and/or Change in DLI		✓
Change in Disbursements Arrangements		✓
Change in Disbursement Estimates		✓
Change in Systematic Operations Risk-Rating Tool (SORT)		✓
Change in Safeguard Policies Triggered		✓
Change in Legal Covenants		✓
Change in Institutional Arrangements		✓
Change in Technical Method		✓
Change in Fiduciary		✓
Change in Environmental and Social Aspects		✓
Change in Implementation Schedule		✓

II. DETAILED CHANGE(S)

ANNEX 1: RESULTS FRAMEWORK

Results framework

Program Development Objectives(s)

To improve the coverage and quality of TB control interventions in the private and public sector in targeted states of India

Program Development Objective Indicators by Objectives/ Outcomes

Indicator Name	DLI	Baseline		Intermediate Targets			
			1	2	3	4	
To imp the coverage & quality	of TB	control intrv in the pvt & p	public sec in targt states o	of India			
PDO Indicator 1- DLI 1.1: Number of private notifications, net of any decrease in public notifications in targeted states (Annual) (Number)	DLI 2	263,549.00	400,000.00	480,000.00	576,000.00	691,200.00	800,000.00
PDO Indicator 2- DLI 2.2: Proportion of TB patients receiving financial support via Nikshay Poshan Yojana in targeted states (Annual, by category of DBT scheme) (Percentage)		0.00					0.00

Indicator Name	DLI	Baseline		In	termediate Targets		End Target
			1	2	3	4	
PDO Indicator 2.1- DLI 2.2.1: Proportion of TB patients notified by public providers receiving 1st Nikshay Poshan Yojana payment in targeted states (Annual) (Percentage)	DLI 7	11.00	30.00	40.00	50.00	60.00	70.00
PDO Indicator 2.2- DLI 2.2.2: Proportion of TB patients notified by private providers receiving 1st Nikshay Poshan Yojana payment in targeted states (Annual) (Percentage)		0.00	10.00	20.00	30.00	50.00	60.00
PDO Indicator 3- DLI 3.1: Proportion of notified TB patients tested for Rifampicin susceptibility in targeted states (Annual) (Percentage)		30.00	35.00	45.00	50.00	55.00	60.00
PDO Indicator 4-DLI 1.2: Treatment success rate of TB patients notified by private providers in targeted states (Annual, patients notified in prior calendar year) (Percentage)	DLI 3	9.00	20.00	35.00	50.00	60.00	70.00

Intermediate Results Indicators by Result Areas Indicator Name DLI Baseline **Intermediate Targets End Target** 2 3 1 4 Intermediate Results Area 1: Scaling up Private Provider Engagement Intermediate Results Indicator 1: Proportion of privately notified Pulmonary TB patients 0.00 10.00 20.00 30.00 45.00 40.00 that have microbiological confirmation in targeted states (Percentage) Intermediate Results Indicator 2-DLI 1.3: Establishment of TSUs in CTD and targeted Mechanism to contract 10 TSUs established at states to support activities TSUs developed and DLI 4 No TSUs CTD and state levels by N/A N/A N/A related to private sector, DBT, approved by the MOH&FW PFMS, and multi sectoral MOH&FW engagement as per agreed TOR (Text) Intermediate Results Indicator 3: Proportion of Blocks with molecular diagnostic services 15.00 18.00 21.00 24.00 27.00 30.00 operational in targeted states (Percentage) Intermediate Results Indicator 4: GOI annual expenditure on strategic purchasing under 197.00 208.00 286.00 420.00 548.00 760.00 NGO/Private Provider budget head in targeted states (million INR per year) (Number)

Indicator Name	DLI	OLI Baseline		In	termediate Targets		End Target
			1	2	3	4	
Intermediate Results Area 2: Ro	olling-	out TB Patient Mana	gement and Support	Interventions			
Intermediate Results Indicator 5: Percentage of beneficiaries out of total notified TB Patients seeded in Nikshay within 3 months of notification. (a) Aadhaar (Percentage)		68.00	70.00	72.00	75.00	80.00	85.00
Intermediate Results Indicator 5: Percentage of beneficiaries out of total notified TB Patients seeded in Nikshay within 3 months of notification. (b) Verified bank account (Percentage)		33.00	40.00	45.00	50.00	60.00	70.00
Intermediate Results Indicator 6: Gender responsive framework for RNTCP developed by CTD & approved by MOH&FW (Text)		N/A					Framework developed approved
IRI 7: Proportion of TB patients notified by private providers for whom at least one DBT incentive payment was made to their private providers. (Reported data for TB patients disaggregated by gender) (Percentage)		0.00	15.00	25.00	35.00	50.00	60.00

Indicator Name	DLI	DLI Baseline		Intermediate Targets			
			1	2	3	4	
Intermediate Results Indicator 8: Proportion of beneficiaries receiving financial support (2nd payments of Nikshay Poshan Yojana) through DBT in targeted states (Percentage)		0.00	24.00	32.00	40.00	48.00	56.00
Intermediate Result Indicator 9: Treatment success rate of female TB patients notified in targeted states in the private sector (Percentage)		0.00	15.00	30.00	40.00	50.00	60.00
Intermediate Results Area 3: St	rengt	hening Detection, Treatmo	ent and Monitoring of Dr	ug-Resistant TB			
Intermediate Results Indicator 10: Proportion of DRTB centers in the targeted states with the action plan for AIC (Percentage)		34.00	40.00	45.00	50.00	60.00	70.00
Intermediate Results Indicator 11: Proportion of notified rifampicin-resistant TB cases with second-line drug- susceptibility testing results documented within 3 months of DR-TB treatment initiation (Percentage)		32.00	40.00	50.00	55.00	60.00	65.00
Intermediate Results Indicator 12: Treatment success rate		46.00	48.00	52.00	55.00	60.00	65.00

Indicator Name	DLI	Baseline		Intermediate Targets				
			1	2	3	4		
among MDR/RR-TB patients (treatment cohort) (Percentage)								
Intermediate Results Area 4: St	rengtl	hening RNTCP Institution	nal Capacity and Informati	on Systems				
13: Annual surveillance system analysis published; including data quality by district, annual state/CTD surveillance system evaluation, and estimates for potential under-notification and duplication (Text)		N/A	Annual analysis published	Annual analysis published	Annual analysis published	Annual analysis published	Annual analysis published	
Intermediate Results Indicator 14: Number of targeted states replacing paper TB registers with e-TB Nikshay adopted real-time monitoring of notification and quality of care in at least 50% ofdistricts (Number)		0.00	3.00	5.00	8.00	8.00	8.00	
Intermediate Results Indicator 15-DLI 4.2: Development and implementation of a performance-based management mechanism between the center and the targeted states (Text)		N/A	Mechanism developed	Implementation in 5 States	Implementation in 8 States	Implementation in 8 States	Implementation in 8 States	



Indicator Name	DLI	I Baseline		Intermediate Targets			
			1	2	3	4	
Intermediate Results Indicator 16: Number of targeted states adopted and transitioned from paper-based to electronic SOE generated from PFMS (Number)		0.00	2.00	6.00	8.00	9.00	9.00
17: No. of Annual TB Forum at state & national level conducted to: (i) promote citizen engagement; (ii)foster learning within & between states; (iii)to provide a multisectoral platform for TB control (Number)		0.00	3.00	5.00	8.00	8.00	8.00

Disbursement Linked Indicators Matrix					
DLI 1	1.0 Revision and approval of National Guidelines for partnerships under RNTCP (Prior Result)				
Type of DLI	Scalability Unit of Measure Total Allocated Amount (USD) As % of Total Financing Amount				
Output	No Text		16,000,000.00	0.00	
Period	Value		Allocated Amount (USD)	Formula	
Baseline	National Guideline for Partnership 2014 in existence.				



Prior Results	CTD has revised and adopted I for partnerships under RNTCP		16,000,000.00	
Year 1			0.00	
Year 2			0.00	
Year 3			0.00	
Year 4			0.00	
Year 5			0.00	
DLI 2	1.1 Number of private notific	ram States (Annual)		
Type of DLI	Scalability	Unit of Measure	Total Allocated Amount (USD)	As % of Total Financing Amount
Output	Yes	Number	70,000,000.00	0.00
Period	Value		Allocated Amount (USD)	Formula
Baseline	263,549.00			
Prior Results			0.00	
Year 1	400,000.00		17,805,111.00	USD 130 per additional patient notified by private sector ne
Year 2	480,000.00		10,438,978.00	USD 130 per additional patient notified by private sector ne
Year 3	576,000.00		12,526,773.00	USD 130 per additional patient notified by private sector ne
Year 4	691,200.00		15,032,128.00	USD 130 per additional patient notified by private sector ne



Year 5	800,000.00		14,197,010.00	USD 130 per additional patient notified by private sector ne	
DLI 3	1.2: Treatment success rate of TB patients notified by private providers in targeted states (annual, patients notified in prior calendar year)				
Type of DLI	Scalability	Unit of Measure	Total Allocated Amount (USD)	As % of Total Financing Amount	
Output	Yes	Percentage	70,000,000.00	0.00	
Period	Value		Allocated Amount (USD)	Formula	
Baseline	9.00				
Prior Results			0.00		
Year 1	20.00		12,622,950.00	USD 114,754 per every 0.1 percentage point increase from the	
Year 2	35.00		17,213,115.00	USD 114,754 per every 0.1 percentage point increase from the	
Year 3	50.00		17,213,115.00	USD 114,754 per every 0.1 percentage point increase from the	
Year 4	60.00		11,475,410.00	USD 114,754 per every 0.1 percentage point increase from the	
Year 5	70.00		11,475,410.00	USD 114,754 per every 0.1 percentage point increase from the	



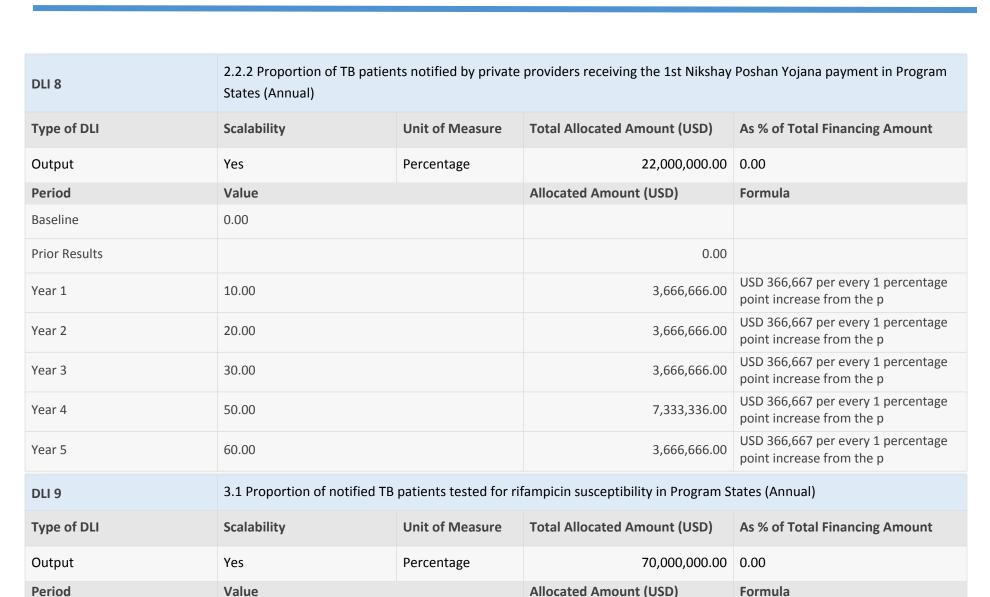
DLI 4	1.3 Establishment of a TSU in CTD & STSUs in Program States to support activities related to pvt. sector, DBT, public financial management system, and multi-sectorial engagement as per agreed TOR				
Type of DLI	Scalability	Unit of Measure	Total Allocated Amount (USD)	As % of Total Financing Amount	
Intermediate Outcome	No	Text	20,000,000.00	0.00	
Period	Value		Allocated Amount (USD)	Formula	
Baseline	No TSU/STSU in place				
Prior Results			0.00		
Year 1	MOHFW has developed and apmechanism to contract TSU ar	•	5,000,000.00		
Year 2	1 TSU established at CTD and 9 STSUs at state level by MOHFW		15,000,000.00	USD 1,500,000 for each TSU/STSU established	
Year 3			0.00		
Year 4			0.00		
Year 5			0.00		
DLI 5	2.0 Development of Nikshay modules for all four direct benefit transfer schemes (Nikshay Poshan Yojana, Tribal TB Patients Scheme, Pvt. Providers Scheme and Treatment Supporters Scheme)(Prior Results)				
Type of DLI	Scalability	Unit of Measure	Total Allocated Amount (USD)	As % of Total Financing Amount	
Process	No	Text	10,000,000.00	0.00	
Period	Value		Allocated Amount (USD)	Formula	



Baseline	Only Nikshay Poshan Yojana e (Sept 2018)	xisting in Nikshay			
Prior Results	Modules for all four schemes (Yojana, Tribal TB Patients Sche Scheme and Treatment Suppo functional in Nikshay. Module processing and confirmation of	eme, Private Providers orters Scheme) s include payment	10,000,000.00	USD 2,500,000 for each module	
Year 1			0.00		
Year 2			0.00		
Year 3			0.00		
Year 4			0.00		
Year 5			0.00		
DLI 6	2.1 Proportion of districts implementing digital signature certificate-based approval process for direct benefit transfer payment in Program States				
Type of DLI	Scalability	Unit of Measure	Total Allocated Amount (USD)	As % of Total Financing Amount	
Process	Yes	Percentage	5,000,000.00	0.00	
Period	Value		Allocated Amount (USD)	Formula	
Baseline	0.00				
Prior Results			0.00		
Year 1	20.00		1,250,000.00	USD 62,500 per every 1 percentage point increase from the pr	



Year 2	40.00		1,250,000.00	USD 62,500 per every 1 percentage point increase from the pr	
Year 3	60.00		1,250,000.00	USD 62,500 per every 1 percentage point increase from the pr	
Year 4	80.00		1,250,000.00	USD 62,500 per every 1 percentage point increase from the pr	
Year 5			0.00		
DLI 7	2.2.1 Proportion of TB patients notified by public providers receiving the 1st Nikshay Poshan Yojana payment in Prog States (Annual)				
Type of DLI	Scalability	Unit of Measure	Total Allocated Amount (USD)	As % of Total Financing Amount	
Output	Yes	Percentage	23,000,000.00	0.00	
Period	Value		Allocated Amount (USD)	Formula	
Baseline	11.00				
Prior Results			0.00		
Year 1	30.00		7,406,780.00	USD 389,831 per every 1 percentage point increase from the p	
Year 2	40.00		3,898,305.00	USD 389,831 per every 1 percentage point increase from the p	
Year 3	50.00		3,898,305.00	USD 389,831 per every 1 percentage point increase from the p	
Year 4	60.00		3,898,305.00	USD 389,831 per every 1 percentage point increase from the p	
Year 5	70.00		3,898,305.00	USD 389,831 per every 1 percentage point increase from the p	



Baseline	30.00				
Prior Results			0.00		
Year 1	35.00		11,666,667.00	USD 233,333 per every 0.1 percentage point increase from the	
Year 2	45.00		23,333,332.00	USD 233,333 per every 0.1 percentage point increase from the	
Year 3	50.00		11,666,667.00	USD 233,333 per every 0.1 percentage point increase from the	
Year 4	55.00		11,666,667.00	USD 233,333 per every 0.1 percentage point increase from the	
Year 5	60.00		11,666,667.00	USD 233,333 per every 0.1 percentage point increase from the	
DLI 10	4.0Nikshay mechanisms devp for (i)deduplication (of patients&providers) & recol of diff provider types;(ii)reconcl of DBT payments through NIKSHAY vs pub financial mgt portal for NPY (Prior Result)				
Type of DLI	Scalability	Unit of Measure	Total Allocated Amount (USD)	As % of Total Financing Amount	
Process	No	Text	14,000,000.00	0.00	
Period	Value		Allocated Amount (USD)	Formula	
Baseline	Only manual mechanism for deduplication of patients and providers in existence				
Prior Results			14,000,000.00		
Year 1			0.00		
Year 2			0.00		

Year 4

Year 5

Year 3			0.00	
Year 4			0.00	
Year 5			0.00	
DLI 11	4.1.1 Development and approval of a multi-year RNTCP Human Resource Plan at CTD and state levels covering the Program States			
Type of DLI	Scalability	Unit of Measure	Total Allocated Amount (USD)	As % of Total Financing Amount
Process	No	Text	10,000,000.00	0.00
Process Period	No Value	Text	10,000,000.00 Allocated Amount (USD)	0.00 Formula
Period	Value			
Period Baseline	Value		Allocated Amount (USD)	
Period Baseline Prior Results	Value		Allocated Amount (USD) 0.00	

0.00

0.00



DLI 12	4.1.2 Reduction of the staffing gap identified by the RNTCP Human Resource Plan for CTD and the Program States					
Type of DLI	Scalability	Unit of Measure	Total Allocated Amount (USD)	As % of Total Financing Amount		
Process	Yes	Percentage	40,000,000.00	0.00		
Period	Value		Allocated Amount (USD)	Formula		
Baseline	0.00					
Prior Results			0.00			
Year 1			0.00			
Year 2	25.00		14,285,714.00	USD 571,429 per every 1 percentage point reduction from the		
Year 3	50.00		14,285,714.00	USD 571,429 per every 1 percentage point reduction from the		
Year 4	60.00		5,714,286.00	USD 571,429 per every 1 percentage point increase from the p		
Year 5	70.00		5,714,286.00	USD 571,429 per every 1 percentage point increase from the p		
DLI 13	4.2 Development and implementation of a performance-based management mechanism between the CTD and the Program States					
Type of DLI	Scalability	Unit of Measure	Total Allocated Amount (USD)	As % of Total Financing Amount		
Process	Yes	Text	29,000,000.00	0.00		
Period	Value		Allocated Amount (USD)	Formula		
Baseline	No performance-based mecha	inism in existence				

Prior Results	0.00	
Year 1	9,000,000.00	
Year 2	3,448,277.00	USD 689,655 for each Program State in which the mechanism is
Year 3	5,517,241.00	USD 689,655 for each Program State in which the mechanism is
Year 4	5,517,241.00	USD 689,655 for each Program State in which the mechanism is
Year 5	5,517,241.00	USD 689,655 for each Program State in which the mechanism is



ANNEX 2: PROGRAM ACTION PLAN

Action Description	Source	DLI#	Responsibility	Timi	ng	Completion Measurement
Annual surveillance system analysis published; including data quality by district, annual state/CTD surveillance system evaluation, and estimates for potential undernotification and duplication	Technical	DLI Yes	CTD	Recurrent	Yearly	Annual Surveillance System Analysis Report Approved by the Bank
GOI and World Bank agree to a multi-year capacity building plan Capacity Building Plan executed annually	Technical		СТД	Recurrent	Yearly	Capacity Building Plan Approved by MOH&FW AS. Due Date: Sept 30, 2019 (initial plan); Yearly Execution
Central, State and District TB Forum strengthened to improve learning and accountability. Central, State and District TB forum strengthened per the TOR agreed to with the World Bank.	Technical		States and CTD	Recurrent	Yearly	Government approval of the revised TORs for State and National TB For a. Due Date: Dec 31, 2019 (CTD shares final TORs with the Bank for review and clearance); Annual Fora in Program States and at CTD by the following: June 30, 2020; 21; 22; 23; 24
CTD Strengthens Data Collection and Monitoring of Tribal Population Transport Reimbursement Annual CTD report which capture coverage	Technical		СТД	Recurrent	Continuous	Data Collection and Monitoring Plan for Tribal Populations Annual TB Report with data on DBT for Tribal Populations



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and trends in DBT					
for tribal populations					
Development and adoption of framework for TB and gender in a manner and substance satisfactory to the Bank.	Other	CTD	Due Date	30-Jun-2019	Framework for TB Among Women Adopted by CTD for Program Management Purposes. Gender specific data for TB monitoring reported by CTD in annual reports.
The CTD formulates and adopts health and safety guidelines for staff/workers involved in the transport of sputum	Technical	CTD	Due Date	30-Jun-2019	Health and Safety Guidelines for Sputum Transportation Published on RNTCP website and disseminated to State TB Offices for implementation
Servicing Standard Operating Procedures of key lab equipment (BSC, AHU, centrifuge, autoclaves) [only where there is health and safety implications for workers]	Technical	CTD	Due Date	30-Jun-2019	Standard operating procedures for lab equipment published on RNCTP websites and disseminated to states
Process evaluation of the implementation and effect of DBT on adherence to TB treatment and success rate.	Technical	CTD	Due Date	30-Jun-2021	Process Evaluation Report. Due Dates: June 30, 2021; June 30, 2023
Operating Procedures for Grievance Redressal developed and adopted by CTD in a manner and substance satisfactory to the Bank	Technical	СТД	Due Date	31-Dec-2019	Approved Grievance Redressal Policy



Strengthen the capacity of Central Medical Services Society (CMSS) to manage the procurement and supply chain management for drugs and equipment in line with increased workload emanating from the Program.	Fiduciary Systems	CMSS	Due Date	30-Sep-2019	a) Filling the 5 vacant staff positions & maintain full staff strength thereafter; (b) Expanding number of laboratories to conduct post destination quality assurance (presently 5 labs); & (c) enhancing CMSS/Supplier interface & overall proc. effic
Decentralize data entry on TB drug stock in the Nikshay Aushadhi software at TU level.	Fiduciary Systems	СТД	Due Date	30-Sep-2019	Nikshay Aushadi data entry decentralized to TU levels in targeted states.
Ensure proper testing by empaneled independent Quality Assurance Lab and monitor the time taken by the labs	Technical	CMSS and CTD	Recurrent	Yearly	Drug quality testing report
Implementation of PFMS to monitor and track real time fund utilization, including preparation of expenditure reports from PFMS, in a manner and substance satisfactory to the Bank.	Fiduciary Systems	CTD and states	Recurrent	Yearly	Expenditure reports produced from PFMS. Initial report due date: September 30, 2019; Yearly execution
Regular FM review by CTD of the state and district TB cells, pursuant to scope, protocols and standards agreed with the Bank.	Fiduciary Systems	CTD and States	Recurrent	Semi-Annually	FM review completed. Initial Review: September 30, 2019. Execution every 6 months
Scale-up RNTCP call center from 50	Technical	CTD	Due Date	30-Jun-2019	Contract effective and staff in place for 100 seat call centers.

The World Bank

Program Towards Elimination of Tuberculosis (P167523)

to 100 seats					
Updated supervision and monitoring guidelines to include integration of routine assessment and improvement of data completeness and quality in a manner and substance satisfactory to the Bank.	Technical	CTD	Due Date	30-Dec-2019	Updated supervision and monitoring guidelines to include integration of routine assessment and improvement of data completeness and quality
Beneficiary Satisfaction Survey as the TOR agreed with the World Bank.	Other	CTD	Recurrent	Semi-Annually	Beneficiary Satisfaction Survey Report. First survey due dt. September 30, 2019
Strengthen RNTCP Guidelines to include protocols/standar d operating procedures for standardization in servicing and replacing/decomm issioning key lab safety equipment	Technical	CTD	Due Date	31-Dec-2019	Standard operating procedures for lab equipment published on RNTCP website and disseminated to states.
Update the Tribal Action Plan in a manner and substance satisfactory to the Bank	Other	CTD	Due Date	31-Dec-2019	Updated Tribal Action Plan approved at CTD and disseminated to states.