



United States Department of State

Washington, D.C. 20520

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April 30, 2020

MEMO FOR RICHARD K. BELL; U.S. AMBASSADOR TO CÔTE D'IVOIRE

SUBJECT: PEPFAR Côte d'Ivoire Operational Plan 2020 Approval

This memo represents the successful completion of the PEPFAR Côte d'Ivoire Country Operational Plan (COP) 2020 planning, development, and submission. PEPFAR Côte d'Ivoire together with the partner government, civil society, and multilateral partners, has planned and submitted a COP 2020 in alignment with the directives from the COP 2020 planning letter, data-driven decisions made during the in-country retreat, and agreements made during the planning meeting.

This memo serves as the approval memo for the PEPFAR Côte d'Ivoire Country Operational Plan (COP) 2020 with a total approved budget of \$121,436,979, including all initiatives and applied pipeline, to achieve the targets and outcomes as listed in this memo and all appendices. Total budget is reflective of the following programming:

CDI	New Funding (all accounts)	Pipeline	Total Budget FY 2021 Implementation
Total Budget	105,172,855	16,264,124	121,436,979
Bilateral	105,172,855	14,547,145	119,720,000
Central	-	1,716,979	1,716,979

Approve a total FY 2021 outlay for COP/ROP 2020 implementation that does not exceed the total approved COP/ROP 2020 budget of \$121,436,979. Any prior year funds that are not included within this COP/ROP 2020 budget and documented within this memo, its appendices and official PEPFAR data systems are not to be made available for execution and outlay during FY 2021 without additional written approval. The new FY 2020 funding and prior year funds approved within this memo as a part of the total COP/ROP 2020 budget are allocated to achieve specific results, outcomes, and impacts as approved. All requested Operational Plan Updates and shifting of funds – either between mechanisms and partners, or to add additional funding to mechanisms and partners for execution in FY 2021– must be submitted to and approved by S/GAC.

Approved funding will be made available to agencies for allocation to country platform to implement COP 2020 programming and priorities as outlined below and in the appendix.

Background

This approval is based upon: the discussions that occurred between the country team, agency headquarters, S/GAC, indigenous and international stakeholders, and implementing partners

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during the February 17 – 21, 2020 in-person planning meetings and participants in the virtual approval meeting; the final COP/ROP 2020 submission, including all data submitted via official PEPFAR systems or within supplemental documents. Between March 21 – April 28, additional discussions with stakeholders took place that contributed to the final COP/ROP 2020 submission.

Program Summary

Working together with the people and Government of Côte d'Ivoire (GoCI), the funding and targets for PEPFAR Côte d'Ivoire's COP 2020 will support the program's vision to accelerate the path toward epidemic control during FY2021. Côte d'Ivoire's strategy focuses on improving the quality of clinical services and implementing patient-centered approaches to ensure that people living with HIV (PLHIV) are diagnosed early, immediately linked to treatment, and retained in care. Building upon the foundation of previous years, the COP 2020 program takes on a renewed emphasis on quality improvement through data-driven decision making at national, district, community, and site level; policy alignment and implementation of patient-centered approaches to overcome barriers to case finding, retention, and viral suppression across all ages, genders, subgroups, and geographies to reach patients where they are. With an estimated 425,779 PLHIV in Côte d'Ivoire, the COP 2020 strategy includes a target of 357,845 Ivorians on treatment in 60 of 86 districts in which PEPFAR currently operates. This approach will be fostered by a country led public health response through the implementation of a joint collaborative framework with the active participation of the Ministry of Health and Public Hygiene (MSHP), clinical and community implementing partners, and civil society organizations. PEPFAR Côte d'Ivoire's program for COP20 will continue to operate in 60 districts throughout the country, adding an additional 71,019 patients on treatment toward achieving the UNAIDS 95-95-95 FAST Track treatment goals.

The PEPFAR Côte d'Ivoire strategy for COP 2020 includes several key components focused on patient-centered care at facilities and in the community to ensure retention, viral suppression, and improved case finding and prevention for priority populations, who are difficult to reach or underserved. These efforts will include (1) completing the transition and scale up of TLD as the first line antiretroviral therapy (ART) regimen for all, (2) scale up of differentiated service delivery models, multi-month dispensing, and community ART delivery, (3) a revised national testing strategy through scale-up of index testing with fidelity to ensure partners and children of PLHIV are identified and linked to treatment; implementation of screening tools at all clinical, military sites; and ongoing testing in antenatal care clinics, tuberculosis (TB), sexually transmitted infection (STI) clinics, inpatient wards, and other high yield case finding strategies, (4) increased collaboration between community-facility sites and partners to ensure efficient case finding, linkage, retention, and VLS, (5) development of an advanced disease care package to address high mortality among PLHIV, (6) improve TB screening, testing, and scale up of TB preventive therapy (TPT), and (7) engagement of faith, community-based organizations, and other stakeholders to improve case finding, HIV literacy, and reduce stigma. Prevention activities for COP20 will include scale up of pre-exposure prophylaxis (PrEP) directed at key populations, highly vulnerable adolescent girls and young women, and sero-discordant couples. In order to achieve these goals, in COP20, a core package of services will be provided at all PEPFAR-supported sites and additional human resources for health (HRH) investments will be made at facilities where greater than 90% of PLHIV are in care.

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Since historic treatment outcomes of key populations (KP) in Côte d'Ivoire have been weak, in COP20 we will offer a new model of service delivery, tailored to the needs of KPs across the clinical cascade at 15 clinical sites in order to improve KP treatment outcomes. Cross-cutting services will allow accessibility to both KP and the general population. In order to facilitate a seamless transition and ensure that the level of ambition of targets matches the investment, for clinical sites that will be transitioned from CDC to USAID as well as at other facilities not transitioned, both agency (clinical and community) implementing partners will provide the following documentation as part of the COP 2020 workplan collection process: a detailed budget narrative that includes budgets by activity-with clear delineation between technical assistance activity budgets and each service delivery activity's budget. Implementing partners must also submit a work plan narrative document that describes all site level and above site activities in detail, an SGAC-provided, PRA-approved PEPFAR work plan budget template categorized by intervention and cost category, and an SGAC-provided, PRA-approved HRH template that describes the nature and budget for all staff working for this partner. Agencies will monitor all available data to ensure successful implementation of COP 20 activities and include a report of their review of all available PEPFAR data sources for quarterly review by the interagency. The PEPFAR Côte d'Ivoire Interagency team will work together to outline how clinical and community implementing partner (IP) investments in COP20 will align to ensure that they are complementary, avoid redundancies, and ensure effective and efficient community-facility collaboration to support efficient case finding, effective treatment initiation and early retention, overall retention, and viral load suppression among PLHIV. Workplans will be harmonized accordingly and Memorandums of Understanding (MOUs) between clinical and community IPs will be in place before the start of FY20Q4.

PEPFAR-supported Orphans and Vulnerable Children (OVC) programs in Côte d'Ivoire will strengthen bidirectional referrals between facility, community, and OVC partners to ensure that children with HIV are retained in care and achieve viral suppression. The Determined, Resilient, Empowered, AIDS-free, Mentored and Safe (DREAMS) program, will expand to reach more adolescent girls and young women, including the expansion to 20-24 year-old adolescent girls and young women (AGYW) in the four districts in which it is currently operating. Additional prevention activities among key populations, AGYW, and OVC include prevention, behavior change programs, small group interventions, and specifically for OVC, family-based economic strengthening and enhanced case management activities. DREAMS will also provide enhanced economic strengthening activities in entrepreneurship or employment as a secondary service.

Conducted in close collaboration with the GoCI and Civil Society, a significant change from COP19 to COP20 is PEPFAR Côte d'Ivoire's increase in community-led monitoring activities such as the review of site-level index testing of key populations. Consistent engagement of community groups as well as regional and national government involving documented and measurable results will help to ensure that policies are implemented with fidelity and that all interventions are aligned with government policies, global guidelines, and best practices. This includes (1) support for monitoring and reporting violence against key populations, (2) designing and implementing a program to reduce stigma and improve HIV and treatment literacy through the local network of faith and community leaders, following the Faith in Communities Initiatives (FCI) model, and (3) support to government institutions and local organizations in order to strengthen supply chain functions that support all activities.

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Additional, notable changes from COP19 to COP20 include (1) addressing the lack of robust, data-driven quality management practices in both prevention and treatment at the service delivery level by utilizing HRSA's continuous quality improvement program to provide rigorous monitoring and oversight of implementing partner performance and financial monitoring, (2) the addition of three treatment sites to the previous COP19 list of sites that provide antiretroviral therapy in order to focus care and treatment in 922 sites with the highest projected burden of HIV in FY2021, and (3) strengthened Facility-Community collaboration with weekly meetings and analysis of results to build upon the COP19 foundation by putting in place standard operating procedures (SOPs) to trace clients who need to be tested, placed on treatment, and kept on treatment so that they are virally suppressed.

Ambition funds will be used to address challenges in case finding, retention, and viral load suppression and will be directed towards efforts to close gaps in the HIV clinical cascade for men, children, young people, and women outside of ANC through support for FCI or additional HRH investments at the facility level to support retention efforts. As with all PEPFAR programming, oversight of activities will occur at multiple levels, including at the region/district by the MHSP, CSOs, PEPFAR Côte d'Ivoire, and the implementing partners themselves. Detailed plans including comprehensive strategies, geographic priorities, targets, and associated budgets will be developed before Q4 of COP19 and submitted for approval. The improvement of initiatives undertaken in previous COP cycles combined with innovative strategies for COP20 will ensure that PEPFAR Côte d'Ivoire addresses the full range of programmatic gaps in order to return to the path toward achieving the UNAIDS 2020 and 2030 treatment goals.

Funding Summary

All COP/ROP 2020 funding summarized in the chart below is approved at the agency and account levels as indicated. Funds are to be utilized to achieve the targets and outcomes and to fund implementing partners and Management and Operations costs (U.S. Government Costs of Doing Business) as documented in all PEPFAR systems and summarized in the appendix.

Bilateral COP20 Table (by Agency)

CDI	Bilateral						Central	Total Central Applied Pipeline	Total Bilateral Applied Pipeline	Total Bilateral - New Funding	Total COP 20 Budget
	New Funding			Applied Pipeline			Applied Pipeline				
	FY20			FY 19	Unspecified	Unspecified					
	Total	GHP-State	GAP	Total	Total	Total					
DOD TOTAL	3,264,787	3,264,787	-	-	-	-	-	-	3,264,787	3,264,787	
HHS TOTAL	49,773,082	47,998,082	1,775,000	-	9,017,616	-	-	9,017,616	49,773,082	58,790,698	
HHS/CDC	48,973,082	47,198,082	1,775,000	-	9,017,616	-	-	9,017,616	48,973,082	57,990,698	
HHS/HRSA	800,000	800,000	-	-	-	-	-	-	800,000	800,000	
HHS/SAMHSA	-	-	-	-	-	-	-	-	-	-	
PEACE CORPS TOTAL	-	-	-	-	-	-	-	-	-	-	
STATE TOTAL	5,820,572	5,820,572	-	-	-	-	-	-	5,820,572	5,820,572	
State (State, S/EUR, S/EAP, and S/WHA)	586,357	586,357	-	-	-	-	-	-	586,357	586,357	
State/AF	-	-	-	-	-	-	-	-	-	-	
State/PRM	250,000	250,000	-	-	-	-	-	-	250,000	250,000	
State/SGAC	4,984,215	4,984,215	-	-	-	-	-	-	4,984,215	4,984,215	
USAID TOTAL	46,314,414	46,314,414	-	-	5,529,529	1,716,979	1,716,979	5,529,529	46,314,414	53,560,922	
USAID, non-WCF	34,697,933	34,697,933	-	-	1,775,059	1,716,979	1,716,979	1,775,059	34,697,933	38,189,971	
USAID, WCF	11,616,481	11,616,481	-	-	3,754,470	-	-	3,754,470	11,616,481	15,370,951	
TOTAL	105,172,855	103,397,855	1,775,000	-	14,547,145	1,716,979	1,716,979	14,547,145	105,172,855	121,436,979	

* Pipeline refers to funding allocated in prior years, approved for implementation in FY2021

GHP-State Funds: Upon the clearance of a FY 2020 PEPFAR GHP-State Congressional Notification (CN), funds will be made available for transfer to agency HQs as indicated in the above chart. Funds are made available for outlay in FY 2021 at approved COP/ROP 2020

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partner budget levels to achieve FY 2021 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Upon receipt from S/GAC, agency headquarters will move the funds to the country platform via each agency's internal process.

CDC GAP Funds: With the receipt of this signed memo, CDC is approved to use CDC GAP funds, as indicated in the above funding chart. Funds are to be made available for outlay in FY 2021 at approved COP/ROP 2020 partner budget levels to achieve FY 2021 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. With this approval, CDC GAP funding may be made available to country teams per CDC internal processes and following agency requirements.

Applied Pipeline Funds: With the receipt of this signed memo, respective agencies are approved to use applied pipeline funds as indicated in the above funding chart. Funds are to be made available for outlay in FY 2021 at approved COP/ROP 2020 partner budget levels to achieve FY 2021 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Additional or remaining pipeline from previous year's activities that are not currently captured in the COP/ROP 2020 total budget level and documented within COP/ROP 2020 partner budgets are not to be executed or outlayed without written approval from S/GAC.

Earmarks: Côte d'Ivoire has planned for programming for FY2020, FY2019 or/or FY2017 funding that it considered to meet a number of earmarks, as indicated in the table below. The amounts programmed during COP may exceed the original controls assigned to the OU. Upon approval of this memo, the amounts below will become the new earmark controls for the OU/Agency. Any changes to the amount of funding programmed for earmark-eligible activities must be approved via an OPU.

Earmark Funding Table

Earmarks	COP20 Funding Level			Total
	FY20	FY19	FY17	
Care & Treatment	67,103,432	-	-	67,103,432
Orphans and Vulnerable Children	20,700,673	-	-	20,700,673
Preventing and Responding to Gender-based Violence	1,355,075	-	-	1,355,075
Water	248,000	-	-	248,000

Initiatives By Agency

Bilateral COP20 Table (by Agency and Initiative)

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	Total Central Applied Pipeline	Total Bilateral Applied Pipeline	Total Bilateral - New Funding	Total COP 20 Budget
CDI				
TOTAL	1,716,979	14,547,145	105,172,855	121,436,979
<i>of which, Core Program</i>	-	13,959,702	77,176,083	91,135,785
<i>of which, DREAMS</i>	-	587,443	15,412,557	16,000,000
<i>of which, HKID Requirement</i>	-	-	7,600,000	7,600,000
<i>of which, KPIF</i>	1,716,979	-	-	1,716,979
<i>of which, One-time Conditional Funding</i>	-	-	4,984,215	4,984,215
DOD TOTAL	-	-	3,264,787	3,264,787
<i>of which, Core Program</i>	-	-	3,264,787	3,264,787
HHS TOTAL	-	9,017,616	49,773,082	58,790,698
HHS/CDC	-	9,017,616	48,973,082	57,990,698
<i>of which, Core Program</i>	-	9,017,616	44,401,456	53,419,072
<i>of which, DREAMS</i>	-	-	2,726,934	2,726,934
<i>of which, HKID Requirement</i>	-	-	1,844,692	1,844,692
HHS/HRSA	-	-	800,000	800,000
<i>of which, Core Program</i>	-	-	800,000	800,000
HHS/SAMHSA	-	-	-	-
PEACE CORPS TOTAL	-	-	-	-
STATE TOTAL	-	-	5,820,572	5,820,572
State (State, S/EUR, S/EAP, and S/WHA)	-	-	586,357	586,357
<i>of which, Core Program</i>	-	-	586,357	586,357
State/AF	-	-	-	-
State/PRM	-	-	250,000	250,000
<i>of which, Core Program</i>	-	-	250,000	250,000
State/SGAC	-	-	4,984,215	4,984,215
<i>of which, One-time Conditional Funding</i>	-	-	4,984,215	4,984,215
USAID TOTAL	1,716,979	5,529,529	46,314,414	53,560,922
USAID, non-WCF	1,716,979	1,775,059	34,697,933	38,189,971
<i>of which, Core Program</i>	-	1,187,616	16,357,002	17,544,618
<i>of which, DREAMS</i>	-	587,443	12,585,623	13,173,066
<i>of which, HKID Requirement</i>	-	-	5,755,308	5,755,308
<i>of which, KPIF</i>	1,716,979	-	-	1,716,979
USAID, WCF	-	3,754,470	11,616,481	15,370,951
<i>of which, Core Program</i>	-	3,754,470	11,516,481	15,270,951
<i>of which, DREAMS</i>	-	-	100,000	100,000
TOTAL	1,716,979	14,547,145	105,172,855	121,436,979

* Pipeline refers to funding allocated in prior years, approved for implementation in FY2021

FY 2021 Target Summary

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FY 2020 funds are released and COP/ROP 2020 applied pipeline is approved to achieve the following results in FY 2021.

Cote d'Ivoire		SNU Prioritizations					Total *
		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	
HTS_INDEX	<15		89,562				90,132
	15+		118,848				121,204
	Total	-	208,410	-	-	-	211,336
HTS_TST	<15		183,512				184,271
	15+		1,331,838				1,345,838
	Total	-	1,515,350	-	-	-	1,530,109
HTS_TST_POS	<15		5,680				5,703
	15+		67,103				68,262
	Total	-	72,783	-	-	-	73,965
TX_NEW	<15		6,203				6,226
	15+		63,690				64,793
	Total	-	69,893	-	-	-	71,019
TX_CURR	<15		25,175				25,267
	15+		326,875				332,578
	Total	-	352,050	-	-	-	357,845
TX_PVLS	<15		22,639				22,721
	15+		298,721				303,934
	Total	-	321,360	-	-	-	326,655
CXCA_SCRN	Total (15+)						-
OVC_SERV	<18		190,334				190,334
	18+		41,999				41,999
	Total	-	232,333	-	-	-	232,333
OVC_HIVSTAT	Total (<18)		190,334				190,334
PMTCT_STAT	<15		1,637				1,637
	15+		553,094				554,194
	Total	-	554,731	-	-	-	555,831
PMTCT_STAT_POS	<15		8				8
	15+		10,655				11,032
	Total	-	10,663	-	-	-	11,040
PMTCT_ART	<15		8				8
	15+		10,449				10,826
	Total	-	10,457	-	-	-	10,834
PMTCT_EID	Total		11,002				11,360
PP_PREV	<15		3,629				3,629
	15+		140,173				145,581
	Total	-	143,802	-	-	-	149,210
KP_PREV	Total		33,321				34,321
KP_MAT	Total						-
VMMC_CIRC	Total						-
HTS_SELF	<15		21				21
	15+		8,580				8,580
	Total	-	8,601	-	-	-	8,601
PrEP_NEW	Total		7,148				7,264
PrEP_CURR	Total		9,510				9,744
TB_STAT (N)	<15		864				892
	15+		19,510				19,930
	Total	-	20,374	-	-	-	20,822
TB_ART (N)	<15		198				217
	15+		4,341				4,385
	Total	-	4,539	-	-	-	4,602
TB_PREV (N)	<15		2,785				2,814
	15+		68,119				69,457
	Total	-	70,904	-	-	-	72,271
TX_TB (D)	<15		25,684				25,779
	15+		333,533				339,352
	Total	-	359,217	-	-	-	365,131
GEND_GBV	Total		1,025				1,040

* Totals may be greater than the sum of categories due to activities outside of the SNU prioritization areas outlined above

COP 2019 Performance Funds:

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All partners must be managed throughout the implementation year as indicated in the COP guidance. Overall performance including activities tied to COP19 performance will be reviewed at Q3FY20 to determine if the programs are on track to access all funds at the start of COP20. This communication will come through the S/GAC Chair and POART process.

Partner Management and Stakeholder Engagement:

Agreements made during COP/ROP discussions, including those regarding geographic focus, targets, budgets, SIMS, use of pipeline, partner implementation, and partner management will be monitored and evaluated on a regular basis via both ad hoc check-ins and discussions as well as the joint HQ and country team POART discussions. It is expected that teams closely monitor partner performance and engage with each implementing partner on a regular basis to ensure achievement of targets, outcomes, and impact in a manner consistent with this memo, approved SDS, and budgets and targets as finalized in PEPFAR systems. Any partner with EITHER (1) <15% of target achievement at 3 months or (2) less than 40% of target achievement at 6 months must have a complete review of performance data (including trends in performance) and expenditures to date by program area, implement remediation, and conduct intensive follow-up. In the HIV treatment program, most clients are continuing on treatment year after year and current on treatment (TX_CURR) performance should be between 98% and 100% of the target. This can be adjusted in country context where HIV treatment services are still scaling up and the treatment new target is greater than 10% of treatment current. OVC programs are also similar in that there are clients continuing services from the previous year; if the IP is less than 80% of their target at Q2 performance review should be triggered. These elements (i.e. review, remediation, and follow-up) should be incorporated into the existing IP work plans. A second quarter of consistently poor performance by the IP should also result in implementation of a documented Performance Improvement Plan (PIP) or Correction Action Plan (CAP), in accordance with implementing agency policy. PIP indicators should reflect the core issue. If the issue is linkage of test positive to treatment, the indicator measured should be test positive to new on treatment of greater than 85%. If the issue is retention, it should be net new on treatment equal to 90% of new on treatment. After two quarters of intensive oversight and remediation for underperformance, partners should be close to full achievement of targets expected at Q3. With a third quarter of consistently poor performance by the IP, implementing agencies should notify S/GAC about the options that the agency is implementing in order to address partner non-performance including options for a shift to new partners. The country team should notify the S/GAC Chair and PPM immediately of the improvement plan.

Continued engagement with all stakeholders, including civil society and community members, multilateral partners and bilateral partners, is to continue throughout COP/ROP implementation. Core to this critical engagement is the sharing of and discussion surrounding quarterly results and achievement and findings from community-led monitoring. This continued engagement will ensure all parties' understanding of Côte d'Ivoire's progress and help identify any strategic changes to be made in order to more efficiently and effectively reach epidemic control.