

## Results Framework and Tracker (Short Form)

Use this form to capture and report on investment outputs. The Results Framework & Results Tracker will be developed collaboratively by you and your foundation program officer to finalize an agreed upon outputs schedule.

General Information			
Investment Title	Improving AFP surveillance through active research in Hadjer Lamis Region, Chad		
Program Officer		Opportunity/Contract ID	[Gates Foundation Staff to Complete]
Prospective Grantee/Vendor Information			
Organization Legal Name	Centre de Support en Sante Internationale		
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Submission Information			
Date Submitted	26/02/2015	Submitted by same as above	No
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### 1. Gates Foundation Strategic Goals

***This section (Gates Foundation Strategic Goals) is to be completed by the foundation. Do not edit.***

The following includes the 3-5 year strategic results of an initiative, sub-initiative or portfolio towards which the investment contributes most directly (identified in the foundation's strategic scorecard)

This investment will contribute to the goal of eradicating polio by 2018.

**Charitable Purpose: this investment will contribute to the strategic goal as follows:**

To enhance surveillance across Africa as evidenced by improved core AFP surveillance indicators in high-risk areas of highest risk countries.

### 2. Primary Investment Outcomes

Define the ultimate or overall change(s) in technologies, systems, populations or behaviors the investment seeks to achieve in the context of the project timeframe; tell us what success is for this investment. (If section is pre-populated, edit as needed.)

Note: Primary investment outcomes may not be applicable for all investments. In these cases, please leave the space below blank.

#### Specific objectives:

- Achieve and maintain for each district a non-polio AFP rate  $\geq 2/100000$  by the end of March 2016.

**New formulation:** Maintain a non-polio AFP rate of  $\geq 3/100\ 000$  by the end of 2016 in the Hadjer Lamis Region.

- Improve quality of samples arriving at laboratory (especially the percentage of stool adequates  $\geq 80\%$  and the transport time from the peripheral level  $\leq 3$  days).

#### Expected results:

-The Number of AFP cases detected has increased in each district of Hadjer Lamis.

-The Percentage of adequate samples in each of the districts of Hadjer Lamis has increased.

Expected results	Results Achieved
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1. The number of AFP cases detected has increased in every district of Hadjer Lamis Region.	<p>Expected result is largely achieved in Hadjer Lamis region during the project compared to the national non-polio AFP rate. 31 AFP cases were notified during project period.</p> <table border="1" data-bbox="732 216 1414 453"> <thead> <tr> <th rowspan="2">Districts</th> <th colspan="3">Number AFP notified</th> </tr> <tr> <th>Semester 1</th> <th>Semester 2</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Massakory</td> <td>2</td> <td>3</td> <td>5</td> </tr> <tr> <td>Bokoro</td> <td>8</td> <td>4</td> <td>12</td> </tr> <tr> <td>Massaguet</td> <td>3</td> <td>6</td> <td>9</td> </tr> <tr> <td>Mani</td> <td>0</td> <td>5</td> <td>5</td> </tr> <tr> <td>Total Region</td> <td>13</td> <td>18</td> <td>31</td> </tr> <tr> <td>Non polio rate</td> <td>6.3/100,000</td> <td>8.84/100,000</td> <td></td> </tr> </tbody> </table> <p>In comparison, the national rate is 3/100000.</p>	Districts	Number AFP notified			Semester 1	Semester 2	Total	Massakory	2	3	5	Bokoro	8	4	12	Massaguet	3	6	9	Mani	0	5	5	Total Region	13	18	31	Non polio rate	6.3/100,000	8.84/100,000	
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2. The percentage of adequate samples in each district of Hadjer Lamis Region has increased.	<p>Percentage of adequate samples is increased (<math>\geq 80\%</math>) in Hadjer Lamis region. Percentage of adequate samples is 100% and all AFP stool is collected in less than 14 days following the onset of paralysis.</p> <p>All samples collected during the project period obey reliability in quality and quantity as well as routing within the peripheral level to the central level.</p>																															

### 3. Investment Outputs

Provide a list of outputs (the goods, services, deliverables, or events produced during an investment) that will be tracked. This is not meant to be an exhaustive list of activities, but rather outputs that inform whether the project is on track. The foundation and grantee/vendor will determine together which outputs will be tied to payments. (If section is pre-populated, edit as needed.)

Output Number	Output Description	Target Completion Date	Actual Completion Date	Payment Contingency
[1, 2, 3, etc.]		[DD Month YYYY]	[DD Month YYYY]	[Enter "X"]
	% DS having a monitoring site visit plan	100%	100%	
	% high priority sites visited at least 4 times per month	100%	95,2%	
	% of medium priority sites visited every month	80%	94,59%	
	% of low priority sites visited every month	60%	89,11%	
	# AFP cases reported by health facilities	-	Semester 1=13 Semester 2=18	
	# AFP cases reported by community volunteers	-	3	
	% AFP investigated within 72 hours	100%	100%	
	% Adequate samples % Samples sent on time	100%	100%	
	# community volunteers trained disaggregated into sedentary and nomadic	48	48 (sedentary=38; nomadic=10)	
	# nomadic community and difficult to access areas relays with phones with credits	30	30	
	# traditional healers trained	20	20	
	followed traditional healers # followed community volunteers	100%	100%	
	% Community relays visiting at least 40 households per month	100%	100%	
	% Nomadic relay which carry out Community VAD among their populations	100%	100%	
	# monthly supervisions of Project Coordinator	6	6	
	# biannual supervision by Directorate	2	2	

#### 4. Grantee/Vendor Comments

Use this section to provide comments about the outputs/deliverables above including variances on completion dates, additional context, etc. Be sure to include the date and specific deliverable referred to in the comment.

On the whole, we can say with satisfaction that the objectives and project outcomes are achieved. The rate of non-polio AFP and AFP cases detected increased in the region of Hadjer Lamis, as the percentage of adequate stool is 100%. AFP feces are collected according to WHO standards in less than 14 days following the onset of paralysis. They are appropriately stored at the indicated temperatures and sent from peripheral to central level (WHO / EPI) in less than 48 hours; which guarantees the quality of the samples.

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