

Code	Program Description	Measure	Partners	Timeframe	Costs (FJD)	Dependencies/Notes	M&E Cross Reference
1.2.4.1	Setting up of Post Miscarriage Services	Working Committee on PAS established.	MOH	Jan - Feb	\$2,000.00		
1.2.4.2	Developing a National Training package for SDH Doctors to provide Post Miscarriage Services	National Training Package for Doctors on PAS developed.	MOH	Jan - Feb	\$10,000.00		Output 1.2.2
1.2.4.3	Purchasing of Manual Vacuum Aspirators for each of the 5 SDH	Five Manual Vacuum Aspirators purchased.	MOH, FPS	Jan - April	\$20,000	MOH, FPS, Purchasing Company.	Output 1.2.3
1.2.4.4	Supporting the delivery of the training package.	PAS Training Package printed and distributed.	MOH	Feb - April	\$20,000		Output 1.2.2
Output 1.3 : Higher proportion of deliveries being carried out in SDH or higher level institutions.							
Activities:							
1.3.1	Carry out recommendations of Gap Survey (i.e. survey of gaps in specific areas of MCH and obstetric services as SDH's completed in 2011)	MOH		Jan - Dec	\$100,000		Output 1.2.3
1.3.2	Support development, printing and distribution of Obs. CPG:	MOH, CSN Obs.		Jan - April	\$50,000		Output 1.2.5
1.3.3	Awareness and training on CPG Obstetric Emergencies at subdivisional level.	MOH		March - Oct	\$20,000	CSN Obs	Output 1.2.5
Output 1.4: Increased Contraceptive Prevalence							
Activities:							
1.4.1	Develop a training package for Family planning for nurses at sub divisional levels (which includes Jadelle implant training)	FP Training Package for Nurses developed.	MOH	3 months	\$50,000		Output 1.2.1
1.4.2	Support distribution, awareness and training of FP Training Package for Nurses	proportion of SDH Nurses training on FP Training Package	MOH	July - November	\$20,000	training package at 1.4.1 being developed.	Output 1.2.1
1.4.3	Media campaign to educate teenagers about safe sex, contraception, prevention HIV/AIDS.	Four divisional media campaign conducted.	MOH, Peer Educators	Jan - Dec	\$40,000		
Output: 1.5 Capacity building and training of health care professionals to ensure the whole spectrum of continuum of care.							
Activities:							
1.5.1	Support training for Assessors for Baby Friendly Hospital Initiative (BFHI) to be conducted by the National Nutrition Centre (for 2 staff per subdivision x 20 sub divisions + 5 staff from each divisional hospital)	3 Divisional Training conducted Fifty-five Assessors completed training.	MOH NFNC	Jan - Sept	\$60,000	MOH NFNC	Output 1.2.1
1.5.2	Monitoring component for the above	Monitoring tool developed.	MOH NFNC UNICEF	May - July	\$2,000		Output 1.2.2

Code	Program Description	Measure	Partners	Timeframe	Costs (FJD)	Dependencies/Notes	M&E Cross Reference
1.5.3	Support for re-printing training Manuals for BFHI	BFHI Training Manuals Printed.	MOH, NFNC	Jan - Feb	\$15,000	MOH NFNC	Output 1.2.2
1.5.4	Support existing MOH nurses to undertake Midwifery training using a MOH/FHSP cost sharing model (FNU 35 places, Sangam 10 places)	20 Nurses admitted to Midwifery Course.	MOH, FNU, SANGAM	April - Dec	\$45,000	MOH, FNU, SANGAM	Output 1.2.2
1.5.5	Work with Obstetric CSN to draft MOU for FNU/MOH partnership for Nursing and Midwifery training.	MOU developed and endorsed.	MOH, FNU, SANGAM	April - July	\$2,000	MOH, FNU, SANGAM	Output 1.2.2
1.5.6	Obstetric support program that includes attachments from Sub Divisional hospitals and Nursing Posts to Divisional Hospitals, inter divisional hospital exchanges and midwifery outreach activities (including CME, partogram & Auditing activities.) Specifically with the purpose of maintaining skills among midwives and doctors	Five staff per division completed clinical up skilling attachment. Two midwives outreach per division conducted.	MOH	Feb - Dec	\$60,000	MOH	Output 1.2.2
1.5.7	Support for monitoring the above activities	Monitoring tool designed.		Feb - Dec	\$2,000	MoH	Output 1.2.2
1.5.8	Support the nationalizing of ‘ visual inspection with acetic acid’ (VIA) – to be further discussed as currently there is a pilot project (finishes in March 2012) in place This is a complimentary service to the Pap Smear program.		MOH, CSN Obs	April - Dec	\$50,000	MOH, FNA,	
TOTAL FOR OBJECTIVE ONE					\$895,700		

	OBJECTIVE TWO: Healthy Child Program					
	Operational Costs					
	Travel		Jan - Dec	\$10,000	\$830 / month	
	Workshops and Meetings		Jan - Dec	\$10,000	\$830 / month	
	Materials		Jan - Dec	\$10,000	\$830 / month	
	Objective Specific Operating Costs		Jan - Dec	\$6,000	\$500 / month	
	Local Personnel Costs					
	Infant and Child Health TSO - WHS		Jan - Dec	\$30,000		
	Infant and Child Health TSO - CEHS		Jan - Dec	\$30,000		
	Infant and Child Health TSO - NHS		Jan - Dec	\$28,500		
	Objective: To institutionalise a 'healthy child' program throughout Fiji					
2	To support the Fiji MOH to institutionalise a 'healthy child' program throughout Fiji					
	Output 2.1: EPI Program strengthening - Systems in place to maintain Expanded Program of Immunisation (EPI) rates greater than 90%					
	Activities:					
2.1.1	Determine the steps to consolidate and ensure sustainability of the Expanded Program of Immunisation (EPI) program					

Code	Program Description	Measure	Partners	Timeframe	Costs (FJD)	Dependencies/Notes	M&E Cross Reference	
2.1.1.1	New vaccine introduction	New vaccines are introduced	WHO, UNICEF, JICA, PIPS, MoH	Jun	\$40,000	Identification of an acceptable sustainable financing solution	Outcome 2.1.1	
2.1.1.2	Child Health Week	Vaccination of 1000 vaccine defaulters	WHO, UNICEF, JICA, PIPS, MoH, NZAID	Jun	\$90,000		Outcome 2.1.1	
2.1.1.3	Support to Basic 3 day EPI training	Training of all nurses new to EPI completed in all 3 divisions	MoH	Jun	\$40,000		Outcome 2.1.1	
2.1.1.4	Support to Demographic Health Survey (EPI coverage survey)	Coverage data available	WHO, UNICEF, JICA, PIPS, MoH	Sep	\$150,000	Planned to be integrated with DHS, however methodology needs to be comparable to previous coverage survey	Outcome 2.1.1	To be covered out of Unallocated Fund
2.1.1.5	Micro planning workshops	3 workshop conducted	MoH	Jun	\$15,000		Outcome 2.1.1	
2.1.1.6	PIPS workshop	Workshop attended and linkages with partners maintained	WHO, UNICEF, JICA, PIPS, MoH	Sep	\$10,000	Workshop is held in 2012	Outcome 2.1.1	
2.1.1.7	Public Health Association of Australia Immunisation Conference & linkages with PHAA established with PHA Fiji established	Conference attended Linkages with PHAA established and sub PHA of Fiji developed	PHAA	Jun	\$25,000		Outcome 2.1.1	
2.1.1.8	VPD Surveillance Officer to establish system [MoH to take over funding in 2013]	VPD surveillance system established	Mataika House, WHO, MoH	Dec	\$25,000	Mataika House must take the lead and MoH to take over funding on 2013		To be covered out of Unallocated Fund
	Output 2.2: IMCI Training leads to more secondary paediatric care at Sub-Divisional level - Comprehensive training in IMCI leading to more secondary level paediatric care being safely carried out at SDH level or below							
	Activities:							
2.2.1	Expand and/or reinforce the Integrated Management of Childhood Illnesses (IMCI) training program							
2.2.1.1	Development of standardised IMCI policies and procedures for nurses [include in nurses scope of practice]	IMCI protocol included in SOP	MoH	Dec	\$10,000	SOP completed in 2012	Outcome 2.1.1	

Code	Program Description	Measure	Partners	Timeframe	Costs (FJD)	Dependencies/Notes	M&E Cross Reference
2.2.1.2	Train IMCI supervisors [SDHS/SDMO/DHS] to provide essential supervision, assessment and provision of appropriate equipment	IMCI supervisors trained	MoH, UNICEF, WHO	Sep	\$20,000	Paediatric department being able to develop a modified IMCI course for supervisors	Outcome 2.2.3
2.2.1.3	Identify divisional IMCI champions to take over the training	IMCI training is coordinated by divisional public health	MoH	Dec	\$0	Divisions recognise need to lead the IMCI training	Outcome 2.2.3
2.2.1.4	IMCI facilitators training	Additional 20 IMCI facilitators trained, IMCI successfully being carried out without dependency on CWMH	MoH, UNICEF, WHO	Dec	\$25,000		Outcome 2.2.3
2.2.1.5	IMCI training	Training conducted, IMCI trained staff in each sub division	MoH, UNICEF, WHO	Dec	\$40,000		Outcome 2.2.3
2.2.1.6	IMCI attachments	Attachments conducted in each division	MoH, UNICEF, WHO	Dec	\$25,000	MoH identifies staff who require attachment and can release them from their station for the attachment	Outcome 2.2.3
Output 2.3: Capacity building and training of health care professionals to ensure whole of spectrum of continuum of care							
Activities:							
2.3.1	CSN Paediatrics to meetings	CSN meets	MoH	Sep	\$15,000		
2.3.2	Nutrition	IYCF TOT conducted in each division	MoH, UNICEF, WHO	Oct	\$80,000	Nutrition department able to deliver the training	Outcome 2.2.3
2.3.3	Oral Health	capacity building workshop conducted	MoH	Apr	\$20,000	Oral health team able to deliver the training	Outcome 2.2.3
2.3.4	Child Health Specialist Nurses	10 Nurses certified at child health specialists	MoH	Dec	\$18,000	Specialty to be recognised as a specialist discipline	Outcome 2.2.3
2.3.5	PLS & APLS training	Training completed	MoH	Dec	\$60,000	APLS will require an instructor from Aust	Outcome 2.2.3
2.3.6	Pocket Book training	Pocket book training conducted and reaches every sub division	MoH	Dec	\$30,000	Paediatric department availability	Outcome 2.2.3
2.3.7	Malnutrition	Reduction in hospitalised malnutrition cases	MoH, UNICEF, WHO	Dec	\$20,000	Study results available	

Code	Program Description	Measure	Partners	Timeframe	Costs (FJD)	Dependencies/Notes	M&E Cross Reference
Output 2.4: Reduce peri-natal mortality - Child health to be more focused on reducing peri-natal mortality.							
Activities:							
2.4.1	Review guidelines and protocols, working with the paediatric team at CWMH to identify and document all existing policies & CPG	Neonatal Guidelines and protocols reviewed and best guidelines identified	MoH, Paed Department	Dec	\$5,000		Outcome 2.2.2
2.4.2	Equipment procurement [based on requirements found from 2011 audit]. Funding to be rolled over from 2011.	Decentralised levels are better equipped to treat paediatric clients	MoH, Paed Department	Dec	\$315,000	Equipment priorities identified by Paed CSN	Outcome 2.2.1
2.4.3	Neonatal attachments	Attachments conducted in each division	MoH, Paed Department	Dec	\$15,000	Divisions identify those that require attachments	Outcome 2.2.3
TOTAL FOR OBJECTIVE TWO					\$1,042,500		

OBJECTIVE 3: Diabetes							
Facilitator Costs							
	Travel			Jan - Dec	\$25,000	\$20,80 / month	
	Workshops & Meetings			Jan - Dec	\$6,000	\$500 / month	
	Materials			Jan - Dec	\$5,040	\$420 / month	
	Objective Specific Operating Costs			Jan - Dec	\$6,000	\$500 / month	
Local Personnel Costs							
	TSO - NCD Tool Kit, SOPD & TNA - North			Jan - Dec	\$21,600		
	TSO - NCD Tool Kit, SOPD & TNA - West			Jan - Dec	\$21,600		
	TSO - NCD Tool Kit, SOPD & TNA - Central / Eastern			Jan - Dec	\$21,600		
	TSO travel & other expenses			Jan - Dec	\$5,000		
Objective: To strengthen Diabetes and Hypertension prevention and management at decentralized levels							
Output 3.1: Population Screening - Improving the detection of undiagnosed DM & HT cases through population screening. Implementing SNAP preventive activities							
Activities:							
3.1.1	Auditing of NCD Tool Kits, SOPDs & training needs in eight (8) other SDH and Health Centres	Number of facilities audited	MOH Staff at SDH & HCs	Jan - Dec	\$65,000		Outcome 3.1.2
3.1.2	Support the development and implementation of the proposals for upgrade	Number of facilities fully upgraded	MOH Staff at SDH & HCs	Jan - Dec	\$120,000	Timely development & submission of proposals by SD & HC	Outcome 3.1.2
3.1.3	Purchasing & replacing equipment in the NCD Tool Kits in all audited facilities	No of facilities with fully operational NCD T/Ks	MOH Staff at SDH & HCs	Jan - Dec	\$100,000	Timely acquisition of equipment (most imported from overseas)	Outcome 3.1.2

Code	Program Description	Measure	Partners	Timeframe	Costs (FJD)	Dependencies/Notes	M&E Cross Reference
3.1.4	Screening of 'at risk' population commenced in identified sites & developing registers to record SNAP Interventions	No of facilities implementing screening & SNAP registers	MOH Staff at HCs & NS	Jan - Dec	\$20,000	Timely development & submission of proposals by SD & HC. Availability of HCW for screening	Outcome 3.1.2
3.1.5	Reviewing the Green Prescription	Reviewed by August 2012	MOH Staff at SDH, HCs & NSs	August	\$5,000	Availability of participants/ facilitators	Outcome 3.1.2
3.1.6	Focused population screening during World Health Day (April) & World Diabetes Day (Nov)	No of sites conducting screening	MOH Staff at SDH, HCs & NSs	April & Nov	\$30,000	Availability of HCW	Outcome 3.1.2
3.1.7	Healthy Eating & Physical Activity programs	No of sites conducting this program	MOH Staff at NCHP & Div Level	Jan - Dec	\$20,000	Availability of HCW	Outcome 3.1.2
3.1.8	Support training in & distribution of NCD Tool Kits & related Educational Materials in identified sites	No of sites fully operational	MOH Staff at SDH & HCs	Jan - Dec	\$20,000	Availability of participants/ facilitators	Outcome 3.1.2
3.1.9	Collaborating with major stakeholders to support NCD prevention activities (e.g. HPS)	Meetings attended & support provided	WHO, SPC, community groups	Jan - Dec	\$5,000	Details of collaboration not clear at present	Outcome 3.1.2
3.1.10	Supporting NCD Screening activities & SNAP intervention at workplaces	Meetings attended & support provided	MOH , NCHP, WP OHS Com	Jan - Dec	\$15,000	Number of requests received & type of support needed	Outcome 3.1.2
3.1.11	NCD Awareness Programs (Print and media)	Number of programs conducted	MOH, NCHP, NCD	Apr, Nov	\$75,000	Number of requests received & type of support needed	Outcome 3.1.2
Output 3.2: Personal Diabetes Record Book - Introducing a personal Diabetes care record booklet to ensure continuum of care for patients who have a variety of service providers.							
Activities:							
3.2.1	Distribution of PDRB to all identified sites. Records kept of distribution to all identified sites and re-prints.	Distribution lists showing progress quarterly	MOH Staff at SDH & HCs	Quarterly	\$15,000	Adequate HCW conducting clinics. Adequate handing over when HCW change.	Outcome 3.1.3
3.2.2	Monitoring & Audit Tool in place.	Tool developed	MOH Staff at SDH & HCs	Quarterly	\$1,000		Outcome 3.1.3
Output 3.3: Establish Quality Diabetes centres at Sub-divisional Level & major health centres - Strengthening management of Diabetes & its complications at Diabetes (NCD) HUBs, SDH & HC levels. Improving facilities for more advanced diabetic care including outreach diabetic retinopathy & debridement.							
Activities:							
3.3.1	More facilities, in all divisions, identified for auditing and upgrade	List agreed to in the first Div Plus meeting	DMOs & SDMOs	Mar	\$500	Agreement by MOH Executive staff	Outcome 3.1.4

Code	Program Description	Measure	Partners	Timeframe	Costs (FJD)	Dependencies/Notes	M&E Cross Reference
3.3.2	Minimum standards for providing quality diabetes management services established.	Draft standard in place	Diabetes CSN	Jun	\$5,000	Agreement by Diabetes CSN & MOH Executive staff	Outcome 3.1.4
3.3.2.1	Ensuring updated registers of people with DM & HT at SDH & HC SOPDs	No of sites with registers	MOH Staff at SDH & HCs	Jan - Dec	\$500		Outcome 3.1.4
3.3.3	Appropriate training conducted with appropriate tools for documentation and reporting.	3 per quarter	Diabetes CSN	Jan - Dec	\$20,000	Availability of facilitators/ trainers mainly specialist clinicians	Outcome 3.1.4
3.3.4	Needs assessment for other resource materials conducted	Assessment tool / template developed	SD & HC Staff of MOH	June	\$5,000		Outcome 3.1.4
3.3.5	Purchase SNAKE screening equipment & consumables	Proof of agreed list & purchase	Diabetes CSN	Jun	\$50,000	Need Diabetes CSN to agree to a minimum standard for equipment	Outcome 3.1.4
3.3.6	Support an Audit of NCD Care services at Divisional Hospital SOPDs	Audit tool developed	Diabetes CSN	Aug	\$5,000	Need Medical CSN to partner with maybe FNU	Outcome 3.2.1
3.3.7	Support quarterly meetings of the Diabetes CSN	Schedule of Meetings agreed to	Diabetes CSN	Mar, Jun, Sep, Dec	\$20,000	Availability of the clinicians	Outcome 3.2.2
Output 3.4: Strengthen the role of the National Diabetes Centre & the NCD HUBs - Strengthening the role of the NDC to function as a focal point for policy & Training, and the support NCD HUBs as specialist referral centres for the divisions.							
Activities:							
3.4.1	Support the Implementation of the roles, responsibilities and functions of the NDC & The NCD HUBs as endorsed by NHEC	Draft proposal developed	Medical CSN	Mar	\$50,000	Availability of the HR component from MOH before the other components can be implemented	
3.4.2	Support appropriate capacity building	Draft Capacity Building proposal developed	Diabetes CSN	Apr	\$20,000		
3.4.3	Purchase appropriate equipment & consumables.	Draft list developed	Diabetes CSN	May	\$50,000		
3.4.4	Strengthen Outreach services through planning and possible transport options.	Draft Plan for outreach developed	Diabetes CSN	Jun	\$50,000		
3.4.5	Audit and develop appropriate resource materials	Audit tool developed	Medical CSN	Jun	\$10,000		
Output: 3.5: Capacity Building and Training -Training & Capacity building of the health care workers to prevent, screen and manage NCDs (especially DM & HT) effectively & provide continuum of care.							
Activities:							
3.5.1	Develop & Implement a training plan for all cadre of HCW at identified health facilities	Draft training plan developed	Medical CSN, SDMOs	Mar	\$50,000	Timely input from MOH staff	

Code	Program Description	Measure	Partners	Timeframe	Costs (FJD)	Dependencies/Notes	M&E Cross Reference
3.5.2	Support other identified training such as Podiatry, Clin attachments	Draft plan	Diabetes CSN	Jun, Dec	\$40,000	Timely submission from appropriate MOH Staff, TSOs at divisional level will be very helpful.	
3.5.3	Purchasing other identified training & educational tools e.g. Food Models, Charts	Proposed List available	DMOs & SDMOs	Mar	\$20,000	Timely submission from appropriate MOH Staff	
3.5.4	Curriculum Development / Dip in Diabetes Management		FSMed / MoH	Jun	5000	Consultation with FNU, SPC, WHO	
3.5.5	Purchase accredited training from training institutes such as WHO, SPC, FNU,	Proposed List available	DMOs & SDMOs	Mar	\$20,000	Timely submission from appropriate MOH Staff. Development of curriculum.	
TOTAL FOR OBJECTIVE THREE					\$1,023,840		

OBJECTIVE 4: COMMUNITY HEALTH WORKER NETWORK							
Objective: To revitalise an effective and sustainable network of village/community health workers (VHW/CHW) as the first point of contact with the health system for people at community level							
Output 4.1: Revitalisation of V/CHW Training - An effective system of trained and resourced VHW/CHW who are able to promote public health practices and health seeking behaviours, provide basic first aid, and effectively refer patients to the next level of health services							
Facilitator Costs							
Travel				Jan - Dec	\$24,000	2,000 / month	
Workshops & Meetings				Jan - Dec	\$6,000	\$500 / month	
Materials				Jan - Dec	\$4,200	\$350 / month	
Objective Specific Operating Costs (stationary, cars phones (?) etc)				Jan - Dec	\$6,000	\$500 / month	
Local Personnel Costs							
TSO - Training Package				Jan - March	\$50,000		
Activities:							
4.1.1	Support MOH in further strengthening of the CHW training package including tool kits and M&E framework. (A local contractor will be recruited to undertake the translation and current TSO will conduct TOT after endorsement of the manual)	Training package translated, printed and distributed to the training of trainers	MOH, JICA (NBT)	Jan - Mar	\$50,000	Timing of endorsement of training manual.	Outcome 4.1.1
4.1.2	Facilitate the procurement of tool kits	Tool kits procured and available for use	MOH	Nov	\$300,000	Non inclusion of clinical set for CWM.	Outcome 4.2.1

[illegible]

[illegible]

Code	Program Description	Measure	Partners	Timeframe	Costs (FJD)	Dependencies/Notes	M&E Cross Reference
5.3	Implementation of clinical services plan activities including role delineation, clinical services networks and short term clinical attachment and support Risk management ,Quality improvement in capacity building						
	ACTIVITIES						
5.3.1	Support Health worker exchange for attachment between hospitals to up skill them	No of exchanges by type of health worker	MoH	Jan – Dec	\$15,000	CSn plans and release of officers by MOH	
5.3.2	Support CSN Workshop	Number CSN workshop conducted	MoH	Apr - Nov	\$15,000	10 CSN	
5.3.3	Health Symposium	Health Symposium held	FNU (CMNHS), MOH	Jun	\$60,000	FNU & MOH (Core share)	
5.3.4	Support capacity building for Health System Standard in Infection Control, Risk Management & CQI						
5.3.4.1	Attachment to John Hunter Hospital	1 officers completed attachment & completion report received	MOH –DSHS & PHSS. John Hunter & MoH	Jan – Dec	\$15,000	Availability of place at John Hunter	
5.3.4.2	Review of UOR Database	Reports received & actioned	MOH –DSHS & PHSS	Jan – Dec	\$5,000	PA HSS to coordinate	
5.3.4.3	RCA Infection Control Workshop/Training of risk management and quality improvement	Workshop conducted	MOH –DSHS & PHSS	Jan – Dec	\$15,000	Divisional risk managers	
5.3.4.4	National QI/CSP Meeting	Meeting conducted	MOH –DSHS &	Mar - Sep	\$8,000		
5.4	Output 5.4: Support for MOH Planning Process						
	Activities						
5.4.1	Development of Oral Health strategic plan (taking into account current survey)	Plan endorsed by NHEC	MOH – DSPH, NAOH	Jan – Jun	\$10,000	Based on survey results of 2011.	Outcome 5.1.3
5.4.2	Capacity building for senior staff in policy development, government writing.	a) Long term development plan developed and endorsed b) Number of senior staff attending training / secondment by type	MOH, FNU & PSC	Jan – Dec	\$10,000	LTA Planning and Monitoring to take lead role	Outcome 5.1.2
5.4.3	Annual Corporate Planning development support	ACP 2013 Endorsed	MOH – PPDA	Sep	\$20,000	MOH & PSC	
5.5	OUTPUT 5.5: SECTORAL CO-ORDINATION						
	Activities						
5.5.1	Donor Co-ordination Meeting	2 meetings conducted	MOH (PPDA)		\$5,000	MOH & Donor	Outcome 5.1.3
5.5.2	Divisional Meetings	4 meetings per division	MOH (PPDA) & Divisional Office (DSPH & DSHS)	Jan - Dec	\$40,000	MOH & Divisional Office	Outcome 5.1.3
5.5.3	Sub-Divisional Meeting	Documented reports from Sub-Divisional heads	Divisional Office & Sub –Divisional Office	Jan - Dec	\$10,000	MOH (DSPH & DSHS)	Outcome 5.1.3

Code	Program Description	Measure	Partners	Timeframe	Costs (FJD)	Dependencies/Notes	M&E Cross Reference
5.5.4	Annual Program Planning	Development of the Program's Plan for 2013	FHSSP	Oct	\$15,000	MOH & AusAID	Outcome 5.1.3
TOTAL FOR OBJECTIVEFIVE					\$814,700		
Total Program					\$4,816,940		
Unallocated Fund					\$1,724,138		
Total Program including Unallocated Fun					\$6,541,078		

**Note - the activities being funded from the Unallocated fund are highlighted in pink under their relevant Objective, however the allocation is actually taken into account under the UF line, NOT the total for the Objective.*

