



United States Department of State

Washington, D.C. 20520

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APRIL 22, 2020

MEMO FOR THOMAS HUSHEK; U.S. AMBASSADOR TO SOUTH SUDAN

SUBJECT: PEPFAR South Sudan Country Operational Plan 2020 Approval

This memo represents the successful completion of the PEPFAR South Sudan Country Operational Plan (COP) 2020 planning, development and submission. PEPFAR South Sudan, 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 South Sudan Country Operational Plan (COP) 2020 with a total approved budget of \$39,586,000 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:

South Sudan	New Funding (all accounts)	Pipeline	Total Budget FY 2021 Implementation
Total Budget	38,704,966	881,034	39,586,000
Bilateral	38,704,966	430,173	39,135,139
Central	-	450,861	450,861

Approve a total FY 2021 outlay for COP 2020 implementation that does not exceed the total approved COP 2020 budget of \$39,586,000. Any prior year funds that are not included within this COP 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 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 during the March 2 - 6, 2020 in-person planning meetings; the final COP 2020 submission, including all data submitted via official PEPFAR systems or within supplemental documents.

Program Summary

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Funding and targets for PEPFAR South Sudan's Country Operational Plan 2020 will support South Sudan's vision to increase national Antiretroviral (ART) coverage through improving the quality of HIV care and treatment services and retaining clients on life-long ART along with viral load suppression. This is particularly important as the revitalized peace agreement was realized and the country witnessed formation of the Unity government in February 2020. Given the national ART coverage at the end of FY19 remains one of the lowest in Sub Saharan Africa at 17%, PEPFAR will assist the Republic of South Sudan to move towards HIV epidemic control during this critical time, with the goal of 27,004 new HIV patients on ART and 60,808 total patients on ART by the end of FY 21 in PEPFAR-supported counties. The program will also ensure viral suppression of 43,563 people living with HIV (PLHIV).

As such, PEPFAR South Sudan COP 2020 funds will focus on: (1) aggressively scaling-up targeted HIV testing approaches to achieve high volume and high yield HIV testing, such as safe and confidential index testing services; (2) reaching all populations with key HIV services, including full coverage of TB preventative therapy and scaling work with key populations; (3) tracking and retaining patients on ART, especially the rapid and immediate scale-up of six-month multi-month ARV dispensation and community drug dispensation; (4) completing the transition of ART clients to optimized ARV regimens, including tenofovir disoproxil fumarate, lamivudine and dolutegravir (TLD); (5) continued scale-up of viral load testing and improvement in viral load suppression rates across all populations; (6) identification of children and adolescents living with HIV for linkage to the Orphans and Vulnerable Children (OVC) program to support ART adherence, retention in services and viral load suppression; (7) strengthened community engagement to improve patient literacy, retention, viral load suppression and community-led monitoring; (8) strengthened coordination and collaboration with stakeholders like the Global Fund (GF) who provides all HIV-related commodities at the national level and (9) accurate and complete reporting of data from sites where services are provided.

To help achieve the above, notable changes from COP 2019 to COP 2020 include: increased resources for HIV case finding and clinical services, addition of DREAMS (Determined, Resilient, Empowered, AIDS-free, Mentored, Safe) programming, community-led monitoring, treatment literacy, increased resources for Human Resources for Health (HRH), scale-up of voluntary medical male circumcision in the military program, and supply chain modernization through support of last mile delivery of commodities.

During COP 2020, PEPFAR South Sudan will maximize efficiencies and results. PEPFAR South Sudan will continue to align investment in highest disease burden areas with the highest number of PLHIV and high unmet need for ART. To ensure programming decisions remain data-driven, PEPFAR South Sudan will continue support of Antenatal Care (ANC) sentinel surveillance and national reporting through DHIS-2, with the expectation of completion of both activities in COP 2020. Given the large number of displaced persons, limited infrastructure and challenges accessing health facilities, evidence-based interventions like six-month drug dispensation and differentiated service delivery models like community-based ART dispensation will be critical interventions to rapidly take to scale. As peace returns, there exists the prospect of people returning to their homeland from neighboring countries. PEPFAR South Sudan will work with local civil society organizations and other multilateral stakeholders to provide essential HIV services to returnees as they resettle in

South Sudan. To ensure continuity of HIV-related services, the Central Public Health Laboratory in Uganda will serve as a 'back-up' for any HIV-related lab services that cannot occur in South Sudan.

The OVC program will target enrollment of HIV positive children, children in families with HIV positive caregivers, and children of Female Sex Workers (FSW) through provision of wraparound services with clinical and Key Population (KP) implementing partners. The program will implement a defined package of services, tailored to South Sudan needs – specifically, mitigation of gender-based violence (GBV), HIV- and VL- testing referrals, adherence counseling, assessment of HIV-exposed infants for OVC program eligibility, and identifying and assessing adolescent girls for DREAMS services and accurate monitoring of service utilization. In coordination with the GoSS, GF, and the GF principal recipient, PEPFAR South Sudan and all parties will work collaboratively to improve the quantification, distribution, and availability of HIV-related commodities at all levels of the supply chain. PEPFAR South Sudan will specifically fund a third-party logistics provider for last mile delivery of key commodities. If Global Fund can procure pre-exposure prophylaxis (PrEP) commodities for South Sudan in their next grant cycle, PrEP service delivery at the site level will be supported within the PEPFAR South Sudan KP program.

In COP 2020, PEPFAR South Sudan will begin to implement the DREAMS program within Juba county. The HIV prevention program will provide services to 2,005 adolescent girls and young women ages 15-24. The South Sudan DREAMS program will focus on economic strengthening activities and will strengthen post-GBV services and referrals. In COP 2020, PEPFAR South Sudan will support an independent and objective community-led activity to monitor the quality of service provision, and thus provide critical insights on the barriers and enablers of accessing HIV testing and treatment services. Community groups will also play a crucial role in improving treatment literacy, particularly through leveraging faith and community leaders. Given the high proportion of displaced persons, socioeconomic, and political conditions, prevention-, treatment-, and viral load- literacy remains low. PEPFAR South Sudan will focus on treatment and viral load literacy activities, supported by faith and community leaders, using updated HIV messaging to reduce stigma and encourage HIV treatment and prevention. In COP 2020, PEPFAR South Sudan will increase HRH cadres at the facility and community levels to support scale up of HIV services and thus improve case finding and retention of patients on lifelong ART. Decisions about site-specific HRH cadres will be based on the outcomes of a comprehensive, need-based HRH analysis to be carried out prior to the start of COP 2020 implementation, in consultation with S/GAC. Within the COP 2020 budget, up to \$6 million has been made available to implementing agencies to fund HRH in accordance with results of the above-mentioned analysis.

In collaboration with the South Sudan Ministry of Health and Global Fund, PEPFAR South Sudan will conduct a joint Data Quality and Service Quality Assessment (DQA/SQA) in select sites, in consultation with S/GAC, prior to start of COP 2020 implementation. The DQA/SQA will provide critical site-level information to better understand where services are being provided, the quality of service provision, and what is the commensurate data from those sites. This essential DQA/SQA will result in a final PEPFAR-supported site list that will be used for COP 2020 implementation. This final list of all PEPFAR-supported sites will be reviewed during the FY20 implementation period.

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In COP 2020, PEPFAR South Sudan budgeted for an additional three PEPFAR positions. The final determination of all three positions will be made by the Embassy Front Office in Juba.

Funding Summary

All COP 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						Central		Total Central Applied Pipeline	Total Bilateral Applied Pipeline	Total Bilateral - New Funding	Total COP 20 Budget
	New Funding			Applied Pipeline			Applied Pipeline	Unspecified				
	FY20			FY19			Unspecified	Total				
South Sudan	Total	GHP-State	GAP	Total	GHP-State	Total	Total					
ODD TOTAL	1,162,734	1,162,734	-	1,776,827	1,776,827	117,000	-	-	117,000	2,941,561	3,058,561	
HHS TOTAL	14,597,587	14,397,587	200,000	9,470,403	9,470,403	313,173	-	-	313,173	24,067,990	24,381,163	
HHS/CDC	14,597,587	14,397,587	200,000	9,470,403	9,470,403	313,173	-	-	313,173	24,067,990	24,381,163	
HHS/NRSA	-	-	-	-	-	-	-	-	-	-	-	
HHS/SAMHSA	-	-	-	-	-	-	-	-	-	-	-	
PEACE CORPS TOTAL	-	-	-	-	-	-	-	-	-	-	-	
STATE TOTAL	350,000	350,000	-	-	-	-	-	-	-	350,000	350,000	
State (State, S/EUR, S/EAP, and S/WHA)	350,000	350,000	-	-	-	-	-	-	-	350,000	350,000	
State/AF	-	-	-	-	-	-	-	-	-	-	-	
State/PRM	-	-	-	-	-	-	-	-	-	-	-	
State/SGAC	-	-	-	-	-	-	-	-	-	-	-	
USAID TOTAL	7,594,645	7,594,645	-	3,750,770	3,750,770	-	450,861	450,861	-	11,345,415	11,796,276	
USAID_non-WCF	7,594,645	7,594,645	-	3,750,770	3,750,770	-	450,861	450,861	-	11,345,415	11,796,276	
USAID_WCF	-	-	-	-	-	-	-	-	-	-	-	
TOTAL	23,704,966	23,504,966	200,000	15,000,000	15,000,000	430,173	450,861	450,861	430,173	38,704,966	39,586,000	

* Pipeline refers to funding allocated in prior years, approved for implementation in FY 2021

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 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. 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 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 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 2020 total budget level and documented within COP 2020 partner budgets are not to be executed or outlayed without written approval from S/GAC.

Earmarks: South Sudan has planned for programming for FY2020 and FY2019 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

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the OU/Agency. Any changes to the amount of funding programmed for earmark-eligible activities must be approved via an OPU.

Earmarks	COP20 Funding Level		
	FY20	FY19	Total
Care & Treatment	15,204,021	9,559,780	24,763,800
Orphans and Vulnerable Children	1,722,160	-	1,722,160
Preventing and Responding to Gender-based Violence	140,032	180,000	320,032
Water	-	-	-

Initiatives by Agency

	Total Central Applied Pipeline	Total Bilateral Applied Pipeline	Total Bilateral - New Funding	Total COP 20 Budget
South Sudan				
TOTAL	450,861	430,173	38,704,966	39,586,000
<i>of which, COP19 Performance</i>	-	-	5,000,000	5,000,000
<i>of which, Core Program</i>	450,861	348,173	30,914,806	31,713,840
<i>of which, DREAMS</i>	-	-	1,000,000	1,000,000
<i>of which, HKID Requirement</i>	-	-	872,160	872,160
<i>of which, VMMC</i>	-	82,000	918,000	1,000,000

DOD TOTAL	-	117,000	2,941,561	3,058,561
<i>of which, COP19 Performance</i>	-	-	146,734	146,734
<i>of which, Core Program</i>	-	35,000	1,876,827	1,911,827
<i>of which, VMMC</i>	-	82,000	918,000	1,000,000
HHS TOTAL	-	313,173	24,067,990	24,381,163
HHS/CDC	-	313,173	24,067,990	24,381,163
<i>of which, COP19 Performance</i>	-	-	3,871,930	3,871,930
<i>of which, Core Program</i>	-	313,173	20,196,060	20,509,233
HHS/HRSA	-	-	-	-
HHS/SAMHSA	-	-	-	-
PEACE CORPS TOTAL	-	-	-	-
STATE TOTAL	-	-	350,000	350,000
State (State, S/EUR, S/EAP, and S/WHA)	-	-	350,000	350,000
<i>of which, Core Program</i>	-	-	350,000	350,000
State/AF	-	-	-	-
State/PRM	-	-	-	-
State/SGAC	-	-	-	-
USAID TOTAL	450,861	-	11,345,415	11,796,276
USAID, non-WCF	450,861	-	11,345,415	11,796,276
<i>of which, COP19 Performance</i>	-	-	981,336	981,336
<i>of which, Core Program</i>	450,861	-	8,491,919	8,942,780
<i>of which, DREAMS</i>	-	-	1,000,000	1,000,000
<i>of which, HKID Requirement</i>	-	-	872,160	872,160
USAID, WCF	-	-	-	-
TOTAL	450,861	430,173	38,704,966	39,586,000

* Pipeline refers to funding allocated in prior years, approved for implementation in FY 2021

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FY 2021 Target Summary

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

South Sudan		SNU Prioritizations					Total *
		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	
HTS_INDEX	<15			11,344	329		11,729
	15+			37,233	3,622		43,094
	Total	-	-	48,577	3,951	-	54,823
HTS_TST	<15			34,415	2,114		36,715
	15+			350,651	32,240		402,694
	Total	-	-	385,066	34,354	-	439,409
HTS_TST_POS	<15			1,163	67		1,244
	15+			23,199	2,242		27,181
	Total	-	-	24,362	2,309	-	28,425
TX_NEW	<15			1,146	65		1,225
	15+			22,014	2,127		25,779
	Total	-	-	23,160	2,192	-	27,004
TX_CURR	<15			3,006	145		3,181
	15+			48,773	5,322		57,627
	Total	-	-	51,779	5,467	-	60,808
TX_PVLS	<15			2,203	106		2,330
	15+			34,849	3,868		41,233
	Total	-	-	37,052	3,974	-	43,563
CXCA_SCRN	Total (15+)						-
OVC_SERV	<18			3,109			3,109
	18+			739			739
	Total	-	-	3,848	-	-	3,848
OVC_HIVSTAT	Total (<18)			2,178			2,178
PMTCT_STAT	<15			107	35		143
	15+			53,723	4,584		60,944
	Total	-	-	53,830	4,619	-	61,087
PMTCT_STAT_POS	<15			11	3		15
	15+			2,527	238		2,913
	Total	-	-	2,538	241	-	2,928
PMTCT_ART	<15			9	3		13
	15+			2,441	236		2,825
	Total	-	-	2,450	239	-	2,838
PMTCT_EID	Total			2,612	230		2,984
PP_PREV	<15						-
	15+			7,373			7,373
	Total	-	-	7,373	-	-	7,373
KP_PREV	Total			9,092			9,416
KP_MAT	Total						-
VMMC_CIRC	Total						5,303
HTS_SELF	<15						-
	15+						-
	Total	-	-	-	-	-	-
PrEP_NEW	Total						-
PrEP_CURR	Total						-
TB_STAT (N)	<15			542	60		608
	15+			5,755	584		6,466
	Total	-	-	6,297	644	-	7,074
TB_ART (N)	<15			152	60		219
	15+			2,231	364		2,699
	Total	-	-	2,383	424	-	2,918
TB_PREV (N)	<15			1,009	49		1,069
	15+			15,513	1,763		18,388
	Total	-	-	16,522	1,812	-	19,457
TX_TB (D)	<15			3,059	146		3,235
	15+			49,765	5,429		58,798
	Total	-	-	52,824	5,575	-	62,033
GEND_GBV	Total			1,865			1,892

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

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COP 2019 Performance Funds:

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 in 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 quarter three. With a third quarter of consistently poor performance by the IP, implementing agencies should notify S/GAC the options the agency is implementing 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 South Sudan's progress and help identify any strategic changes to be made in order to more efficiently and effectively reach epidemic control.