Stop Epidemics\(^1\) There and Here (SETH) Fund

*Operations Manual*

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\(^1\) Given the changing landscape and the relevance of this initiative to regional health security, it was recommended that the narrow focus of Ebola be changed to include all epidemics.
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1. **FUND BACKGROUND & PURPOSE**

The SETH Fund is intended to function as a regional mechanism for financial support to all CARPHA Member States (herein referred to as CMS) and institutions. The Fund is meant to provide assistance to CMS in managing public health emergencies with health and humanitarian consequences across the risk management cycle (preparedness, response and early recovery) as they push forward strategies and provide public information about the prevention of epidemics and public health threats to the region. The Fund is also intended to activate financial support to any CMS which finds itself in the unfortunate position of discovering that a major epidemic/outbreak is occurring within its borders.

The Fund was established originally with the intention of responding to the threat of the Ebola epidemic. However, given the changing global epidemiological landscape, it has expanded its purpose to strengthen emergency response capacities to communicable and vector-borne epidemics.

The Fund will provide financial and technical support to CMS, for both emergencies with health consequences and disease outbreaks activities. It is intended to:

1. Facilitate the containment and prevention of the spread of an outbreak, epidemic or a pandemic-prone disease utilizing effective response strategies to the public health emergency;
2. Contribute to saving lives as a result of health interventions;
3. Develop a unified strategy among CARPHA countries aimed at working together to preserve the wellbeing and health of their nationals through support for preparedness activities;
4. Create and continuously fund a Regional Rapid Response Team (conceptualized as Carib-REACT) able to reach any CMS in 72 hours to provide technical assistance and funding for the national response team to contain/stop an outbreak early on, gaining experience for regional benefit; and
5. Support public education of citizens, visitors and those outside to ensure citizens of each Caribbean country are fully informed on the facts of prevention, infection, and the spread of a current regional and global epidemics/public health threats.
2. **ACTIVITIES**

Following the purpose outlined above, the fund will undertake the following activities in support of fulfilling its mandate, which include:

- Deployment of rapid response personnel during outbreaks, public health emergencies, severe natural disasters, chemical and other events with health consequences;
- Field activities directly related to an outbreak, epidemic or public health emergency response, including disease surveillance, information systems and related communications;
- Immediate response interventions against vaccine-preventable diseases;
- Procurement and immediate disbursement of epidemic and public health emergency response supplies during disease outbreaks, other public health emergencies and humanitarian crises;
- Participating, where required, as part of global response teams for outbreaks and public health emergencies outside of the Caribbean to both provide technical assistance to contain the spread of the epidemic at source and to build capacity to manage/respond to outbreaks and public health emergencies;
- Undertaking simulation executions;
- Training personnel to establish/enhance national and region surge capacity for health response and deployment to affected countries in health emergencies. As part of this preparation to respond to critical requests, the Fund will support the emergency response team with all relevant protection, treatment and response equipment.
- Developing and disseminating educational and awareness messages to alert the public and relevant parties of epidemiological emergencies.

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2 This Operations Manual has utilised a number of procedural frameworks of the African Public Health Emergency Fund (APHEP) given the similarities of intent with the SETH Fund.
3. GOVERNANCE OF THE FUND

The Fund will be administered by an Advisory Board. CARPHA’s\(^3\) existing control mechanisms including the Executive Board, Technical Advisory Committee and the Finance & Audit Committee will provide the necessary oversight. However, given the importance of resource mobilisation, a Resource Mobilisation Sub-Committee will also be established for the Fund. The Financial Guidelines applied to this Fund will be drawn from those of CARPHA. The Fund will also be positioned within the suite of donation windows under the CARPHA Foundation.

3.1 Advisory Board Membership

The Advisory Board will ensure full compliance with the goals and objectives of the Fund. The Advisory Board for the Fund will be drawn from the membership of the Regional Coordinating Mechanism of Health Security (RCMHS)\(^4\). The eight-person board will include the following officials:

- Director, Surveillance Disease Control and Prevention (CARPHA)
- Head, Health Information, Communicable Disease and Emergency Response (CARPHA)
- Two representative(s) from the Regional Coordinating Mechanism on Health Security from CMS
- The OECS Representative to the RCMHS
- An International Development Partner (1)
- Two Financial Representatives (an internal representative from CARPHA’s Finance Team\(^5\) and an external representative from a development bank or local financial institution)

The CMS and International Development Partner representatives will be selected by the members of the RCMHS. The financial representative from CARPHA on the Advisory Board will be nominated by the Executive Director. The External Finance Representative shall be appointed based on nominations of the RCMHS. The Director, Surveillance Disease Control and Prevention will serve as the Chair of the Advisory Board.

The Advisory Board will be responsible for:

- Providing oversight on the operations of the Fund.
- Promptly reviewing requests from CMS for funds following a reported emergency.

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\(^3\) Utilisation of CARPHA’s existing control mechanisms will minimise start-up and continued operating costs of the SETH Fund.

\(^4\) The name of the Regional Coordinating Mechanism on Ebola (RCME) was changed to the Regional Coordinating Mechanism on Health Security (RCMHS) in June 2015.

\(^5\) This representative will not have voting rights.
• Communicating outcomes of requests reviewed to reported emergencies within 24 - 72 hours of receiving a request. This communication should be in writing through the Fund’s Secretariat.
• Reviewing technical and financial reports received from funded proposals.
• Evaluating the impact of grants awarded with SETH resources.
• Monitoring the distribution and use of funds from SETH to CMS.
• Overseeing the release of funds from SETH to CMS once requests have been approved.
• Coordinating with individuals and/or organisations that are responsible for infrastructural or sustainable development projects in CMS to ensure long term solutions are being fostered within states.
• Periodically reviewing the operations of the Fund and making recommendations for the strategic development of the Fund.
• Forming, inclusive of the nomination, of members to the Resource Mobilisation Committee.

Length of Term:

While CARPHA and the OECS Representatives hold permanent positions on the Advisory Board, the term of other members will be for a period of two (2) years. After this period, a rotation of general Board members will be conducted. General members of the Board are permitted to serve a maximum of two consecutive terms (four years) on the Advisory Board.

Meetings:
The Advisory Board is required to meet a minimum of twice per year to discuss the progress being made by the Fund. However, dire issues, such as a request for aid from a CMS will require the Advisory Board to meet within 24 - 48 hours of receiving the request. Meetings will be headed by its Chair. The Deputy Chair of the Advisory Board will be elected at the first meeting of the Advisory Board.

Minutes will be taken at all meetings held by the Advisory Board and will be distributed to members of the Advisory Board within one (1) month of the meeting being held.

Decisions:
Decisions made by the Advisory Board will be governed by the rule of majority. Each Board member will be granted one (1) vote in the decision-making process. The CARPHA Financial Representative on the Advisory Board shall have no voting rights. The quorum for the Advisory Committee is 5 Members.
3.2 Resource Mobilisation Committee Membership
The Resource Mobilisation Committee will pursue issues related to the sustainability of the Fund. The Resource Mobilisation (RM) Committee will be responsible for:

- Liaising with partners and donors, which could include individuals, representatives from CMS, Non-Governmental Organisations, and private sector partners to ensure strong and reliable relationships are forged;
- Creating and suggesting potential funding sources and strategies to the Advisory Board;
- Reviewing the funds available and instructing the actions taken by the Advisory Board once an emergency request is approved;
- Communicating with CMS representatives to ensure relationships are maintained and donations encouraged;
- Liaising with the Fund Secretariat to determine the funds available for emergency response.

Meetings:
The Resource Mobilisation Committee is required to meet a minimum of twice per year to discuss the progress being made by the Fund. Meetings will be headed by the Chair of the Advisory Board. The Deputy Chair of the Resource Mobilisation Committee will be elected.

Minutes:
Minutes will be taken at all meetings held by the Resource Mobilisation Committee and will be distributed to all members of the Committee within one (1) month of the meeting being held.

Decisions:
Decisions made by the Resource Mobilisation Committee will be governed by the rule of majority. Each Committee member will be granted one (1) vote in the decision-making process.

3.3 Finance and Audit Committee
The existing CARPHA Finance and Audit Committee will provide financial oversight for the Secretariat and comprises:

1. At least one CARICOM Secretariat representative
2. The Finance Directors representative from four CMS
3. CARPHA’s Financial Controller
3.4 Fund Secretariat

The Secretariat will oversee the operations and administrations of the Fund in line with its objectives, function and mission. CARPHA will provide administrative services for the SETH Fund and will therefore serve at its Secretariat.

The Fund Secretariat will be responsible for:

- Calling and organising meetings of the Advisory Board, Resource Mobilisation Committee and Finance & Audit Committee.
- Ensuring meeting agendas and minutes are fully circulated to pre-approved stakeholder groups.
- Documenting and following up with the Advisory Board decisions and requests for feedback.
- Preparing all requests to be reviewed by the Advisory Board.
- Maintaining the finances records of the Fund.
- Tracking both the in-flow and out-flow of resources from the Fund, and relaying information to both the Resource Mobilisation Committee and Advisory Board, as well as where necessary, the general public.
- Ensuring that CMS that receive aid from the Fund, submit a follow-up report, no later than three (3) months following the receipt of funds, outlining how the funds were used and how the funds contributed to response efforts.
- Creating all systems that will facilitate direct contact and communication with stakeholders and CMS governments.
4. DISBURSEMENT ARRANGEMENTS OF THE FUND

Funding decisions will be guided by the core objectives of the SETH Fund and will be recorded by the Advisory Board and made transparently available online. The maximum value of any application to the Fund will be US$ 50,000.

4.1 Disbursement Criteria

Disbursement of funds will be based on an official request for assistance from CMS. The SETH Fund will support response activities subject to the fulfilment of at least one of the following conditions:

1. A formal declaration of an outbreak or a public health emergency by the responsible authorities of the CMS in collaboration with CARPHA.
2. The existence of a humanitarian crisis in a CMS.

The Fund shall support CMS to implement response activities that will:

- Enable prompt and direct actions to treat, contain and prevent the spread of an epidemic-prone disease;
- Preserve lives;
- Minimise disruption and panic in communities; and
- Effectively respond to public health emergencies.

4.2 Disbursement Mechanisms

The Fund will support activities as outlined in Section 2. The Fund disbursement can be made through 2 mechanisms:

1. A ‘quick disbursement’ component available to the Fund Secretariat to enable action within 72 hours or less with minimal bureaucratic procedures. Such requests can be made by phone, email or other means by a CMS Government representative, or their designee. This will enable CARPHA to deploy experts and begin operation immediately should the situation warrant such a response.
2. Substantial disbursement would require formal processing based on submitted technical proposal, costing and budget plans.

It is not expected that the SETH Fund will finance ongoing/routine CARPHA emergency programme costs (expertise, equipment and supplies).
To facilitate the above, CARPHA should:

- maintain and make available an updated registry of personnel with the range of relevant skills who can be called upon to respond depending on the nature of the epidemic/emergency;
- maintain and make available an updated registry (network) of laboratory and diagnostic capabilities to respond as above;
- develop MOUs with air and other transport authorities/systems as well as local Customs and Immigration authorities as needed for rapid movement of services and supplies; and
- coordinate with other international/national public health agencies in rapid preparation and transmission of ‘knowledge products’ (manuals, training etc) to manage-mitigate the epidemic/emergency.

4.3 Disbursement Templates

Requests for substantial disbursement (mechanism 2) must come from CMS Government representatives, or their designees in writing (*including email requests) utilising the proposal template (See Annex 1). Such requests must fulfil information requirements, including:

1. The nature of the request – whether it is support for public information, preparedness, or response;
2. A clear outline of the proposed activities and the intended impact of interventions;
3. An indication of how the funds will be administered – whether by Cabinet appointed Committee, State Agency or other; and
4. The total funding being requested and the anticipated breakdown of costs.

4.4 Review Process

Following a request for aid from a CMS, the SETH Fund will conduct a review process. This process will include a verification of the validity of the request, and a financial analysis to determine the fiscal capabilities of both the CMS and the Fund in relation to the stated emergency. Co-operation from CMS is mandatory to be considered for funding from the SETH Fund, and the review process will take 24 - 48 hours to complete.

4.5 Classifications of Approval

Approvals will generally fall into three categories, depending on the nature of the request and the ability of the Fund to respond. These categories are:

1. Full approval
2. Conditional approval
   - Request for minor clarification and information – immediate requests for further information must be forwarded within an agreed timeframe.
• Deferred (*delayed*) pending further verification – which may require site visits or the provision of such information by the relevant Government within an agreed timeframe.

3. Not-approved
• Based on the assessment of the Advisory Board that funding is not critically required, after discussion with the relevant Government on the reasons for the request.

4.6 Post-Receipt Reporting
Once a request for funds from a CMS is approved by the SETH Fund, funds will be disbursed and subsequently tracked by the Fund’s Secretariat. CMS are required to submit a follow-up to the SETH Fund no later than three (3) months following the receipt of the funds, outlining how the funds were used and how they contributed to domestic response efforts. The Fund’s Secretariat is responsible for liaising with CMS to ensure that the distribution and use of funds received are reported back to the SETH Fund. The CMS is expected to utilise the reporting templates in Annex 2.
5. INVESTMENT APPROACH AND FINANCING ARRANGEMENTS

5.1 Components of the Fund
Finances provided to the Fund will be invested preliminarily to fulfil its purpose. The SETH Fund shall provide funding for early and rapid response to epidemics and other public health emergencies in CMS. The Fund can be envisaged as having two (2) components:

- **Operational Fund (90%)** – which will be immediately available to respond to public health emergencies and disease outbreaks based upon the required approval. These funds will also be invested in short-term instruments in a generalized fund which is available upon request or demand.

- **Reserve Fund i.e. Medium and long term investment component (10%)** – which will be used for investment in liquid and safe interest-yielding instruments. The objectives are to:
  - bolster and supplement contributions,
  - provide a ‘hedge’ to cater to ‘temporary shortfalls’ if normal contribution flows are disrupted or delayed and to ‘surge demand’ if there is an urgent need for additional resources beyond the existing capacity of the Operations Fund; and
  - ensure a level of stability and sustainability to the Fund.

The manager of these resources will be required to inform and seek advice from the Advisory Board and the CARPHA Finance and Audit Committee on the proposed medium and long-term investments.

5.2 Programme Support Cost
To facilitate the effective administration of the SETH Fund a programme support cost will be applied to all funds disbursed from the operational fund at a rate of 7%. No other cost will be charged for administration of the Fund except those costs directly related to the funding of approve requests.
6. PARTNERSHIPS & RESOURCE MOBILISATION

While the SETH Fund is primarily focused on collaboration with the Governments of CMS, efforts will be made for interaction with other partners and donors, especially those well established in the region working on initiatives relevant to the Fund’s purpose. Potential partners include (but are not limited to) individuals, Non-Governmental Organisations, or companies, belonging to the public or private sector. While it is not foreseen that funding will be provided to these organisations directly, they may be included in requests for support as partners or providers of support in kind which may bolster the strength of the request.

CMS

CMS will be requested to contribute seed funding towards the establishment of the SETH Fund. The Advisory Board in consultation with CARPHA’s Finance & Audit Committee and representatives of CMS shall determine a methodology for the determination of seed contributions by each CMS. The contribution of members can be paid in lump sum or in maximum of four instalments.

Other funding Sources

In addition to the seed funding requested, funding shall be received from other sources such as bilateral, multilateral and other agencies and partners including the private sector in line with the approved procedures established by the CARPHA operational policies. Funding mechanisms such as flash appeals to address specific communicable diseases and donation sites via the CARPHA Foundation website for SETH Fund contributions will be undertaken. CMS will continue mobilising additional resources and bolstering domestic contributions to ensure more sustainable funding and achieve shared responsibility of this funding source.

The Chair of the Advisory Board will lead the resource mobilisation efforts, but will seek the support of the CARPHA Executive Director in resource mobilization activities as he/she will act as a key liaison with CMS to lobby for agreed contributions. Critically, the fund will explore innovative and modern resource mobilisation techniques, including multilateral and bilateral assistance and private sector led initiatives. It is expected that International cooperation and assistance will form an integral part of the operation of the Fund.

In order to get the support of these institutions, the development of advocacy, awareness raising and communication strategies to promote the SETH Fund’s image is required. The Board of the Fund should develop a programme of activities that will create awareness about the Fund to CMS and development partners. This will require the Advisory Board to ensure that the goals and objectives of the Fund are effectively and correctly reflected through its branding and advocacy campaigns. The Advisory Board must also ensure that these strategies enable stakeholders to gain an insight into the response activities undertaken by the Fund and the impact these activities have in CMS.
7. TRANSPARENCY

Critical to achieving transparency, is the monitoring and evaluation system which enables: (1) the key stakeholders to report in a manner that highlights successes, identifies lessons learnt and shows how funds were utilised; and, (2) to give development partners and potential funders sufficient information to consider the Fund worthwhile to contribute towards.

All requirements by law for regular public information on Fund operations, levels, and reporting will be made within the time outlined by laws and regulations in each territory.

The Advisory Board shall submit half yearly reports on the Fund to CARPHA’s Finance and Audit Committee as well as the RCMHS. These reports should outline the following:

- Financial status of the Fund
- Proposal submissions
- Proposals funded
- Proposals rejected
- Key outcomes of funded initiatives
- Implementation challenges

Monitoring activities will cover review and reporting on fund processes, inputs, outputs and outcomes. These activities will include financial aspects and the programming aspects of the SETH Fund.

Financial monitoring will cover issues such as timeliness of disbursement of funding mechanisms at regional and country office levels, utilization of funding for intended purposes, and timeliness and accuracy of financial reports.

Programmatic monitoring will include reviewing achievement of set targets in line with measurable indicators included in the proposal submitted.

The SETH Fund will be evaluated periodically (minimum bi-annually). These evaluations will focus on the impact of activities of the Fund in relation to set objectives. These evaluations will be conducted both internally and externally.

The modes for communicating this information are foreseen as:

- Formal reports
- Website portal
- Social Media
- Email contact
- Public advertising
ANNEX 1 – Proposal Template
The Appendixes form should be completed and transmitted to the CMS preferably by email. Please type in the responses using the template provided. The instructions attached to the form provide guidance to filling out the template.

Please ensure that this proposal meets the criteria for funding before submission and is as accurate and concise as possible to enable efficient and timely appraisal. Guidance on the criteria may be sought from the SETH Fund Secretariat.

The final proposal document resulting from the appraisal process should be attached to this request for funding.

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<td>Revised</td>
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To be completed by the SETH FUND Secretariat.
1. Requesting Member State:  

2. Title of proposal:  

3. Purpose of request:  

4. Event Type:  

5. Geographic areas of implementation targeted with SETH funding:  

6. Total number of individuals targeted with SETH funding (provide a breakdown by sex and age).  
   a. Female  
   b. Male  
   c. Total individuals:  

7. Please provide a summary needs assessment and justification for funding request from the SETH Fund. (A full report may be provided as an attachment to this proposal form)  

8. Detailed description of implementation of rapid response activities.  

   Objectives  
   Activities  
   Outputs  

   Expected Outcomes and Indicators (Please use SMART Specific, Measurable, Attainable, Relevant, Time-bound) Indicators  

9. Total amount of SETH funding requested:  
   Note: Request should not exceed US$ 50,000  

10. Breakdown of Budget  

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<th>Item</th>
<th>Quantity</th>
<th>Unit Cost</th>
<th>Total Cost</th>
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<td>Other Supplies</td>
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<td>Contractual services</td>
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<td>Equipment</td>
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<td>Staff and Personnel Costs</td>
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<td>General Operating Expenses</td>
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6 Guidance for preparation of the budget  
- Staff and Other personnel costs - These are all the expenses related to the total remuneration, payable by an employer to an employee in return for work done by the latter during a specified period.  
- Contractual Services - These are costs related to consultancy charges for undertaking assignments which may require expert opinion or may require to be outsourced to another firm.  
- Medical Supplies - These are costs relating to the procurement of consumable drugs, medical kits, etc  
- Other Supplies - These are costs relating to procurement of other provisions and materials that may be necessary in undertaking rapid response activities. These may be tents, blankets, etc  
- Travel - These are all related costs to travel i.e. air travel, road, boat, per diems and other travel allowances.  
- General Operating Expenses - These expenses pertain to administrative expenses for carrying out activities relating to the operations of the Fund.  
- Equipment, vehicles and furniture - The Fund will not typically fund the purchase of capital expenditure such as furniture, vehicles.
Name and Signature of approving authority:

Designation:

Date:
ANNEX 2 – Reporting Templates
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<th>ORGANISATION REQUESTING (IF APPLICABLE)</th>
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**TECHNICAL**

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**NARRATIVE:**

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<th>HAVE YOU REACHED ALL YOUR PLANNED TARGET GROUPS?</th>
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**SUMMARY BRIEF OF SUCCESSED, CHALLENGES AND LESSONS LEARNT**

**RECOMMENDATIONS AND NEXT STEPS**
## FINANCIAL REPORT

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