

PROJECT INFORMATION SHEET

PIP No :

221

(To be allocated by MOP)

PART A : BASIC PROJECT INFORMATION

(Must be completed in all cases)

1. PROJECT NAME: **National Tuberculosis Control Programme**

2. PROJECT DATES:

PROJECT START: **1/1/2026**

ESTIMATED COMPLETION: **12/31/2028**

3. TOTAL PROJECT COST: **\$107,700,000**

4. RESPONSIBLE MINISTRY: **Ministry of Health**

RESPONSIBLE UNIT: **Dr. HUOT CHANYUDA**

អង្គភាពទទួលខុសត្រូវ: **វេជ្ជ. ហ្វុត ចាន់យុដា**

5. PROJECT STATUS: **On Going**

DETAILED PROJECT INFORMATION

6. TYPE OF PROJECT: **Investment project**

7. SOURCE OF PROJECT FUNDING: **Mix of RGC, Grant and Loan**

8. THE POLICY AREA OF THE PENTAGON STRATEGY PHASE I THAT THIS PROJECT FALLS UNDER:V

Side 3. Improvements of People's Health and Well-being

9. THE CONTRIBUTION OF THE PROJECT TO ACHIEVE THE ABOVE POLICY:

Cambodia will be eradicate from Tuberculosis (End TB)

10. SUPPORT TO CAMBODIA INDUSTRIAL DEVELOPEMENT POLICY:

Does this Project support to the implementation of the Cambodia Industrial Development Policy?

No

11. SECTOR:

Health

Health

Health

Health

12. PROJECT LOCATION: (Describe the location of the project and its components.)

Phnom Penh, All Provinces,

13. PROJECT OBJECTIVE: (Describe the major purpose of the project.)

1-TB Screening, TB diagnosis, Treatment, care and prevention

2-Policies and TB supportive system

3-Intensified research and innovation including Monitoring and Evaluation of TB Programme.

14. PROJECT DESCRIPTION: (Provide a description of the project and all its components.)

At the central level, is the National Centre for Tuberculosis (CENAT) in Phnom Penh, which assumes overall responsibility for the National Tuberculosis Control Programme (NTP) to be implemented countrywide through the existing health-care delivery system in Cambodia.

The CENAT is headed by a Director, assisted by deputy directors and a Technical Bureau, along with administrative and finance bureau. It also supports the National TB Hospital by providing administrative and para-clinical services. The TB Reference Laboratory at the CENAT is responsible for the supervision and training of the laboratory technicians in the Microscopy Centers and Gene Xpert and for enforcing quality control.

At the intermediate level (provincial), there are Provincial TB Supervisors who are responsible for the planning and the management of the TB programme including supervision and training.

At the Operational District (OD) level, the OD Supervisors have a similar role. The Referral Hospitals provide clinical and paraclinical services in the Operational Districts. Generally, there are a number of health centers in each Operational District implementing TB activities.

Main components of TB activities:

1. Improving diagnosis of tuberculosis
2. Patient support
3. TB drug procurement and management
4. Monitoring and evaluation
5. Programme management and supervision
- 5.1. Human resource development: Staff
- 5.2. Human resource development: International technical assistance
- 5.3. Human resource development: Training
6. Collaborative TB/HIV activities
7. MDR-TB
8. High risk groups
9. Infection control
10. Childhood TB
11. Practical approach to lung health (PAL)
12. Public private mix DOTS (PPM-DOTS) and international standard for TB care (ISTC)
13. Advocacy communication and social mobilization (ACSM)
14. Community involvement
15. Operational research
16. General use of health services (hospitalization and outpatient visits)

15. PROJECT JUSTIFICATION: (Give reasons why this particular project is considered worthwhile.)

This project contribute reduce TB Prevalence, TB Incidence and TB Mortality rates.

16. BENIFITS: (Who will benefit, directly and indirectly, from the project?)

General population and TB patients.

17. FEASIBILITY STUDY

Is a Feasibility Study for the project required? **No**

If YES, has it been carried out? **Not yet**

18. SOCIAL & ENVIRONMENT IMPACT: (Briefly describe the effects of the project, if any, on the people and the surrounding enviroment. Will the project assist in alleviating poverty?)

Reduce poverty and Cambodian People are healthy.

19. CLIMATE CHANGE

a. Is any activity or output of the project related to Climate Change? **No**

b. How is the project relevant to Climate Change?

Please select a Climate Change related sector of the project and fill up the contribution of the climate change related expenditure compared to the total project cost.

Climate Change-Related Sector	Percentage	Climate Change Relevance
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20. DISASTER RISK REDUCTION

Is any activity or output of the project related to Disaster Risk Reduction? **No**

21. GENDER ANALYSIS: (How does the project affect the roles of the men and women in the project area? Will women be actively involved in the implementation of the project?)

Both sex: man and women will be actively involved in project in the implementation.

22. CAPACITY TO IMPLEMENT: (Does the Ministry have the skills and experience required to implement the project?)

CENAT has full capacity to manage to the project.

23. STATUS OF PROJECT IMPLEMENTATION: (Provide a brief update on the progress of the project to date. Discuss any major problems causing delays in project implementation.)

Budget not enough can affect the National Tuberculosis Programme (NTP) target and objective.

24. PROJECT PRIORITY: (Please indicates the priority ranking of the project decided by the ministry/agency.)

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25. DONOR INVOLVEMENT: (Provide any information on current or potential donor involvement in the project.)

Gov., GF, USAID, WHO and some other partners

PART B : PROJECT COSTS AND FUNDING SOURCES
(In US\$'000)

INVESTMENT COST	2024		2025 Budget	2026 Estimate	2027 Estimate	2028 Estimate	3yr Total 2026-2028	Recurrent Cost Est.
	Budget	Actual						
Operational Expenditure	26,500.0	13,000.0	26,500.0	26,500.0	26,500.0	26,500.0	79,500.0	0.0
Salaries	16,000.0	7,000.0	16,000.0	16,000.0	16,000.0	16,000.0	48,000.0	0.0
Materials + Admin	1,500.0	0.0	1,500.0	1,500.0	1,500.0	1,500.0	4,500.0	0.0
Other	9,000.0	6,000.0	9,000.0	9,000.0	9,000.0	9,000.0	27,000.0	0.0
Capital Expenditure	9,400.0	5,800.0	9,400.0	9,400.0	9,400.0	9,400.0	28,200.0	0.0
Construction	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Consultancy (i.e. TA) + Admin	1,000.0	300.0	1,000.0	1,000.0	1,000.0	1,000.0	3,000.0	0.0
Equipment+ Furniture	2,000.0	1,200.0	2,000.0	2,000.0	2,000.0	2,000.0	6,000.0	0.0
Training	2,400.0	300.0	2,400.0	2,400.0	2,400.0	2,400.0	7,200.0	0.0
Other	4,000.0	4,000.0	4,000.0	4,000.0	4,000.0	4,000.0	12,000.0	0.0
TOTAL COST	35,900.0	18,800.0	35,900.0	35,900.0	35,900.0	35,900.0	107,700.0	0.0
FUNDING SOURCES	2024		2025 Budget	2026 Estimate	2027 Estimate	2028 Estimate	3yr Total 2026-2028	
	Budget	Actual						
Project Revenue	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Government Funding	11,100.0	9,800.0	10,200.0	10,200.0	10,200.0	10,200.0	30,600.0	
Cash Input	8,000.0	7,000.0	7,400.0	7,400.0	7,400.0	7,400.0	22,200.0	
Other Resources	3,100.0	2,800.0	2,800.0	2,800.0	2,800.0	2,800.0	8,400.0	
Donor Funding	9,350.0	9,000.0	9,350.0	9,350.0	9,350.0	9,350.0	28,050.0	
Global Fund	6,000.0	6,000.0	6,000.0	6,000.0	6,000.0	6,000.0	18,000.0	
United States Agency for International Development	3,000.0	3,000.0	3,000.0	3,000.0	3,000.0	3,000.0	9,000.0	
Other	350.0	0.0	350.0	350.0	350.0	350.0	1,050.0	
TOTAL COMMITTED FUNDING	20,450.0	18,800.0	19,550.0	19,550.0	19,550.0	19,550.0	58,650.0	
FUNDING REQUIRED	15,450.0	0.0	16,350.0	16,350.0	16,350.0	16,350.0	49,050.0	
(Total Cost - Funding Available)								

**Seen and Approved by
Minister**

(Signature)

Date :

