

Minutes of the CCM meeting 12th March 2013 at PR Meeting Room

Reference to invitation of CCM sec on 11th March 2013.
The CCM meeting was held at PR office meeting room.

Meeting proceedings:

The meeting was chaired by H.E Lee TOU BOUAPAO Minister of Education and co-chaired by Dr. Thomas D'Agnes and Mr. Bounsamark Director of Planning and investment department, Ministry planning and investment.
22/31 CCM members attended, more than half of total members (as the registered sheet attached).

CCM Executive: Dr Nao Boutta, Director of cabinet.

CCM Sec: Dr. Sony, Ms. Viphaphanh, as reporter of the meeting. Excused Dr Marlon Garcia (on leave)

H. E Lee TOU BOUAPAO opened the meeting and highlighted overall main issues that needed to be discussed during that meeting.

Main topics:

1. Review and updated CCM's reform by Dr. Soulany TA of GMS team.
2. Discussed and endorsed CCM request for Renewal funding (2nd commitment for TB SSF). This topic Presented by Dr. Phannasinh Sylavanh, Director of National Tuberculosis Center. At the same time requesting for reprogramming document was also presented by NTC team.
3. AOB

Summary of the CCM meeting 12 th March 2013			
No	ISSUES	Presentation/discussion	Actions to be taken
<p>The meeting was chaired by H.E Lee TOU BOUAPAO Minister of Education and co-chaired by Dr. Thomas D'Agnes and Mr. Bounsamark Director of Planning and investment department, Ministry planning and investment. 22/31 CCM members attended, more than half of total members (as the registered sheet attached). CCM Executive : Dr Nao Boutta, Director of cabinet. CCM Sec: Dr. Sony, Ms. Viphaphanh, as reporters of the meeting. Excused: Dr Marlon CCM sec/OC</p> <p>H. E Lee TOU BOUAPAO opened the meeting and highlighted the main issues that needed to be discussed during that meeting.</p> <ol style="list-style-type: none"> 1. Opening and endorsement of CCM previous minutes and agenda. <ul style="list-style-type: none"> ✓ Quorum is reached 18/30 ✓ Agenda is approved. 			
2.	CCM Reform	<p>Review and updated CCM's reform by Dr. Soulany team leader of the Reform Task Force (RTF), she summarized: At the CCM December 2012 meeting: presentation on internal review of CCM's TOR with the support of French 5% TA, followed by an external review conducted by GMS and to be presented this morning. In December 2012 the Ad hoc Ex Com decided to extend the mandate of the RTF to be leading the reform. Currently: The RTF's, ToR are drafted and will be endorsed by the Ex com shortly RTF will be in charge under LRC (Dr Soulany) leadership to work on the CCM reform reporting to the CCM on the progress at each meeting Activities of RTF:</p> <p>Since December 2012 the RTF met 3 times RTF engaged with GMS on the reform process to assess what level of support could be brought, RTF has reported to the Ex com after each meeting Dr Soulany informed that GMS will present the reform's needs and a draft of roadmap for the CCM to be ready to access to new GF funding in 2014. She finished affirming that RTF will make every effort to work on making the CCM eligible and functional and invited GMS team to present their activities to the CCM.</p>	<ul style="list-style-type: none"> - proceed with the reform – addressing membership, structure and documentation - Follow the Timeline. - Exe-Com to provide leadership to the reform process - RTF to expedite the reform

	<p>Second part: GMS presentation:</p> <p>Mrs. Helen R from GMS: introduced the member of the team as well as the original TORs as were developed by the Ex-Com which can be summarized as follows: CCM request: “support from GMS for comprehensive reform of the CCM in Lao PDR” with specific tasks as follow:</p> <ul style="list-style-type: none"> - External review and proposed revision of CCM ToR - Develop specific ToRs for 5 constituencies - Capacity building for constituencies <p>For GMS the common objective of the reform is to contribute <u>to make the CCM Lao PDR eligible to access the GF funds and to improve the CCM functioning</u>. She informed that during their second visit the GMS was requested to design and present options for :</p> <ul style="list-style-type: none"> - CCM’s vision, purpose, role & principles - CCM structure - Main constituencies to be integrated into CCM - First draft of ToRs for each constituency (except CSO) - Mechanisms to implement selection process of CCM’s representatives - main findings of the first visit <p>She has reported that following the TOR, the GMS team has conducted until now:</p> <ul style="list-style-type: none"> - CCM diagnostic; analysis of eligibility and presentation to Exec Com and RTF - Proposed draft road map for CCM reform - Background paper on preparation of ToR - Draft outline of generic constituency ToR - Constituency workshops: ToR development and capacity building <p>She continuous showing of the main findings of the CCM assessment , in which the main CCM’s weakness are summarized as follows: PR’s selection procedures need to be more comprehensive, CCM need to change TORs regarding selection procedures for non-government members and CCM need to establish a communication policy or strategy which is for the moment absent. Moreover democratic functioning through elections of Officers and implementation of tenure for members is to be improved as according to GMS evaluation this doesn’t seems to respect the current TORs. Despite progress have been done other procedures related to six requirements as are framework documents (Conflict of Interest policy, Oversight Plan) or working documents (TORs, governance manual) need to be reviewed, finalized or implemented (see more details in ppt.)</p> <p>In the last part of the GMS intervention; M. Mary Lenyhas summarized the main objectives and the sectors/issues needing reforms as well as the tools to be used and the main decisions that are to be taken by the CCM in the coming days to go further in the process; those have been grouped by GMS as: membership, structure and documentation. M. Leny has requested to CCM plenary to agree in the following points:</p> <ul style="list-style-type: none"> - agrees to proceed with the reform – addressing membership, structure and documentation - Agreed with the Timeline. - to delegate to the Exe-Com to provide leadership to the reform process - Mandating the RTF to expedite the reform process. <p>Summary of Discussion: in general the CCM members has expressed agreement with the need to have an improvement; however some have raised questions concerning the way forward and how to proceed: Bilateral (Japan rep?): What can guarantee that this reform will really change or solve the situation?</p>	<p>process.</p>
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<p>3. To endorse TBSSF periodic Review and Request for Renewal</p>	<p>3.1 CCM request for renewal of funding for LAO-T-GFMOH.</p> <p><i>Presentation:</i></p> <p>Dr Phannasinh Sylavanh, NTC Director, Chair of the TB task force presented the main activities proposed for CCM the request for renewals of funding of LAO-T-GFMOH for second commitment period in line with the recommendations of the external TB review (28 Jan-8 Feb 2013)</p> <p>TB Task Force had a meeting on 22 February 2013 and discussed the findings of the program's review and interventions to be prioritized in the proposal. The writing team has incorporated the recommended interventions and priorities of the TB task Force in the request for renewal of funding.</p> <p>Dr Phannasinh emphasized that TB program started in 1995 and has implemented the DOTS strategy covering 5 central hospitals and all provincial and district hospitals since 2005, and 852 health centre (98%) in 2012. The TB program treats 4000 TB patients each year including 3000 smear positive pulmonary TB. TB programmer has high treatment success rate (91% in 2012). But case detection has stagnated since 2006.</p> <p>Dr Phannasing underlined that the first external TB review was conducted in Laos 28 Jan-8 Feb. The TB review found that, although the TB program has a network of services in place, either patient are not able to access or they receive poor quality services – This means missed opportunities for diagnosis. Dr Phannasinh presented the proposed strategies for increasing case finding. 1) Active case finding requires enormous human and financial resources and logistics and very long time frame for very low number of cases in return and is not recommended in the general population. 2) Stepwise screening of TB suspects with CXR and GeneXpert is possible and requires transport of persons to chest X-Ray facilities, and delivery of specimens, and improved access to CXR in all provinces. 3) Passive case finding is recommended by WHO Stop TB Strategy & endorsed by Government of Lao. Patients need to be aware of TB symptoms and TB services, to be able to easily access quality TB services, to receive adequate follow-up and treatment.</p> <p>The renewal request is in line with the recommendations of the external TB review 2013: Increasing funding for delivery of specimens to labs, and for home visits to screen family members of TB patients; strengthening quality assured laboratory services at all levels; referring more patients to chest X ray and GeneXpert; Involving all health providers (private clinics) in TB control; supporting all levels through training and supervision; Improving procurement and conducting operational research. Detection of TB cases will increase from a baseline of approximately 4000 TB cases in 2012 to 6000 in 2016.</p> <p><i>Discussion:</i> The Chair thanked the presenter and opened the floor for discussion. Dr Soth, NTC Project coordinator emphasized that the TB request was based on the findings of the national prevalence survey, the findings and recommendations of the external TB review, the remarks of the GFPM during her last visit and emphasized the requirements of the project cycle timing. Following the recent external TB program review, the National TB Strategic Plan 2011-2015 and the costing will be updated shortly.</p>	
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	<p>3.2: Reprogramming of LAO-T-GFMOH in 2013</p> <p><i>Presentation:</i> Dr Soth Boumala, NTC- GF Project Coordinator presented the request for reprogramming of 2012 GF funds for activities to be conducted in 2013. Dr. Soth highlighted the amount of savings during the previous PUDR and described priority interventions requiring additional budget. Fourteen activities need to be conducted in 2013 before the end of the phase 1. All activities are in line with the recommendation of the joint external TB review 2013 calling for increase case detection. Increased support of health centre for delivery of specimens to laboratories; Drug resistance surveillance; home visits for contact tracing; replacement of microscopes; provide GeneXpert machines and cartridges, maintenance, other reagents and consumable to major sites (Vientiane, Savannakhet and LuangPrabang); additional laboratory reagents; additional PSM costs for VPP orders, scaling up of practical approach on Lung Health (PAL); infection control improvement in Mahosot and Setthathirath TB wards; additional computers for 50 remaining districts and CHAI for procurement and logistic improvement.</p> <p><i>Discussion:</i> Co Chair Dr Thomas D'Agnes recommended using GF guidelines for selection of companies through international bidding regarding procurement of TA for procurement and logistic improvement. Mr Deepak Koirala, LFA representative expressed the same opinion.</p> <p>Dr Philaysak, OC Chairman asked for clarifications on respective TORs of FEI and CHAI in assisting in procurement and logistics. DrSoth explained that FEI came for an assessment, whereas CHAI would assist on long-term basis with funding contribution from the 3 components (HIV, malaria and TB).</p> <p>Decisions : CCM Approval CCM Chair asked CCM members for voting on the principle of approving the TB request for renewal for second commitment (2014-2016) as well the request for reprogramming of 2012 savings in 2013. CCM members voted and approved in principle the both requests CCM Chair requested OC to meet on the next day for reviewing technical details and practicalities on the two requests before sending to the Global Fund 15 March 2013</p>	<p>To further discuss the technical details and JMM recommendations at OC meeting before to submit to GF</p>
AOB	<p>Due to lack of time the AOB were postponed for other meetings or to revise at OC level.</p>	<p>Too follow in next meetings.</p>

Chair

Note takers:

CCM Secretariat

