CCM Meeting Minutes

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Country		Lao People's Democratic Republic	Date (dd.mm.yyyy)	31st May 2013
Meeting type		Regular CCM meeting	Did meeting occur as planned?	Yes
Meeting facilitated by?		Vice-Chair	Venue location	Don Chan Palace Hotel
Name of person who	First name	Mr. Thomas	Duration of the meeting (in hours)	4 Hours
facilitated the meeting	Family name	D'Agnes	Global Fund Secretariat attendance	FPM/PO
	Sector	ML/BL - Multilateral and bilateral development partners in country	Local Fund Agent attendance	Yes
Total number of participants	(insert number)			

AGENDA

Planned Agenda	Write the agenda item in the spaces provided below	Select a suitable category	If select 'Other' then specify
Agenda Item #1	Qorum verification & Minutes endorsement	k. Communication	
Agenda Item #2	CCM Reform Updates presented by Dr. Soulany, Teamleader of RTF	l. Constituency engagement	
Agenda Item #3	Summary of Dashboard findings	g. PR Assessment	
Agenda Item #4	Debriefing on Fund Portfolio Manager (FPM) visit to Laos, OIG updates & priorities. Report on New Funding Mechanism & Regional Initiative for Malaria.	k. Communication	
Agenda Item #5	R updates: - Progress update for the period of Jul-Dec 2012 with disbursement, notification/grant rating update CPs and SCs for TB SSF and HIV SSF TFM grant signing	m. Grant Negociations/Agreement	
Agenda Item #6	AOB: - The regional malaria proposal Development	b. Proposal development	
Agenda Item #7			
Agenda Item #8			

N	Other Supporting documents
Yes	Voting procedures
Yes	
ng minutes. Select 'Yes' or 'No'	Annexes attached to the meeting minutes. Select 'Yes' or 'No from the drop-down menu

MINUTES OF EACH AGENDA ITEM

		Contributions from Constituencies/Sectors:none	Mr Tomas proposed the meeting t	Summary of presentation and issues to be discussed	na	Conflict of interest. List below th	Agenda Item #1
	Type of contribution	es/Sectors:none	o adopt the minutes of the last CCM	ues to be discussed		Conflict of interest. List below the names of those who must abstain from decisions.	Quorum verification and Meet
	Write content of contributions below		neeting, held on 12th March 2013. The meeting agreed and endorse			rom decisions.	Quorum verification and Meeting's Minutes endorsement by CCM's vicechair
			Mr Tomas proposed the meeting to adopt the minutes of the last CCM meeting, held on 12th March 2013. The meeting agreed and endorsed the minutes of Last CCM meeting held on 12 March 2013 with 16 votes.		Yes	Quorum attained. Select from 'Yes' or 'No'	

Agenda Item # 2	CCM Reform Updates		
Conflict of interest. List below t	Conflict of interest. List below the names of those who must abstain from decisions.	from decisions.	Quorum attained. Select from Yes' or 'No'
			Yes
Summary of presentation and issues to be discussed	sues to be discussed		
Dr Soulany, RTF team leader, updated CCM reform as follows: CCM Reform Overview	dated CCM reform as follows:		
Membership: reduce number of voinolding 50% of total of voting seats.	voting seats to 20 (each voting seat h	as 2 pers= 1 rep+1 alternate), CCM's will be organized in 3 main secto	Membership : reduce number of voting seats to 20 (each voting seat has 2 pers= 1 rep+1 alternate), CCM's will be organized in 3 main sectors : Governemental holding 30% of seats, Bilateral/Multilateral holding 20% and Non Governemental holding 50% of total of voting seats.
Structure & Functions: Executive Technical Working Groups but no TOR's: for Civil Society are compl	Commitee become a permanent bod it only CCM members, ExCom proposited, but for other sectors/subsectrated.	Structure & Functions: Executive Commitee become a permanent body with 2 more members from other constituencies, a new permanent comn Technical Working Groups but not only CCM members , ExCom proposes to add 1 Technical Working Group for Procurement & Supply. In the past TOR's: for Civil Society are completed, but for other sectors/subsectrs these are on development, will be finished in July 2013.	Structure & Functions: Executive Commitee become a permanent body with 2 more members from other constituencies, a new permanent commitee for Advocacy & Fund Raising is also proposed and Task Forces becomes also permanent Technical Working Groups but not only CCM members , ExCom proposes to add 1 Technical Working Group for Procurement & Supply. In the past a HSS task force was organized if necesary this has not been included in new structure. TOR's: for Civil Society are completed, but for other sectors/subsectrs these are on development, will be finished in July 2013.
Election - Selection Process: expected to end in August 2013	ected to end in August 2013	s trese are on development, with be initiated in July 2013.	
Conclusion & next step: Dr Soula	ny requested to CCM to endorse the p	Conclusion & next step: Dr Soulany requested to CCM to endorse the proposed CCM's membership and structures	
Contributions from Constituencies/Sectors:none	ies/Sectors:none		
	Type of contribution	Write content of contributions below	

Recommendations	OTH - Other (CCM Vice Chair)	
Demand for clarifications	ML/BL - Multilateral and bilateral development partners in country	
Recommendations	ML/BL - Multilateral and bilateral development partners in country	
Clarifications	OTH - Other (RTF team leader responded)	
Demand for clarifications & recommendations	GOV - Government	
Clarifications	OTH - Other (RTF team leader responded)	
Clarifications	OTH - Other (RTF team leader responded)	
Recommendations and request for clarifications	ML/BL - Multilateral and bilateral development partners in country	
Clarifications	OTH - Other (RTF team leader responded)	
Demand for clarifications	ML/BL - Multilateral and bilateral development partners in country	
	Demand for clarifications Clarifications and clarifications Clarifications Clarifications Clarifications Clarifications Clarifications Clarifications Demand for clarifications Clarifications Clarifications	V V

• Dr. Rattanaxai asked for advices from CCM and GF whether the fund left t over of around seven hundred thousand US\$ collected from the people living with M Demand for clarifications past implementation of the grant can be used or not to respond to the emergency of current outbreaks?.	Type of contribution Write content of contributions below	- He highlighted that HIV/Aids patients were advised to get tested and treated at various treatment centers TB was also well implemented, exceeding the benchmarks of Global Fund Stock Management was well performed at the provincial and central levels Stock Management was well performed at the provincial and central levels Reporting system: At present, no figures is provided on what medicines were used, what kind of the test was done, how much medicine remained in the stock and how much of them were expired Malaria Center used to have prominent achievement in the past 10 years. But due to the recent rapid development in society, epidemic of Malaria has been largely increased and the current budget was unable to cover the response of the current epidemics The Malaria center proposed the use of Artermissin assistance, as Vietnam, Cambodia and Thailand have already used. Lao is situated in the middle, thus, there's been migration of Labors from neighboring countries.	Summary of presentation and issues to be discussed	na	Conflict of interest. List below the names of those who must abstain from decisions. Quorum attained. Select from 'Yes' or 'No'	Agenda Item # 2 Dash Board Presentation on executive Summary of Malaria, HIV & TB by Dr. Rattanaxay PR	Voting Show of hands 14 2	Decision making
OTH - Other (GF, Ms. Annelise) Clarifications GOV - Government Demand for clarifications OTH - Other (GF, Ms. Annelise) Clarifications Demand for clarifications OTH - Other (GF, Ms. Annelise) OTH - Other (GF, Ms. Annelise) Clarifications - Ms. Annelise Hirschman - The round for the grant has been actually ended. The money left in the grant cannot be used right now until information updates requested is provided by PR an none Decision (s) (What? When? Who?) Decision making	L - Multilateral and Recommendations Recommendations Recommendations Recommendations Clarifications Other (GF, Ms. Annelise) Other (GF, Ms. Annelise) Clarifications Other (GF, Ms. Annelise) Clarifications Other (GF, Ms. Annelise) Other (GF, Ms. Annelise) Clarifications	Type of contribution Recommendations Demand for clarifications Clarifications Demand for clarifications - I	The highlighted this. HVI/Alds patherts were advised to get reaced and treated at various treatment, centers. 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Agenda Item # 3	Debriefing from GF by Ms. Annelise Hirschman	nnelise Hirschman	
Conflict of interest. List below t	Conflict of interest. List below the names of those who must abstain from decisions.) from decisions.	Quorum attained. Select from Yes' or 'No'
na			Yes
Summary of presentation and issues to be discussed	sues to be discussed		
 Ms. Annelise told the meeting t support we can get from working Specially, she had met with TB She advised TB programme had be done by the end of June. 	 Ms. Annelise told the meeting that the basic objective for coming to Laos was to provide an upd support we can get from working with partner in the country to support and improve the process. Specially, she had met with TB programme and had a site visit to one of the main hospital, whice. She advised TB programme had to work closely with documentations based on our recommendationed by the end of June. 	Ms. Annelise told the meeting that the basic objective for coming to Laos was to provide an update on how the programmes are going on with the management process and what need upport we can get from working with partner in the country to support and improve the process. Specially, she had met with TB programme and had a site visit to one of the main hospital, which was very interesting to see what had been done on the ground from both TB and HIV. She advised TB programme had to work closely with documentations based on our recommendations and discussion so as to be able to re-summit to GF by June 2013. Hopefully, the new done by the end of June.	• Ms. Annelise told the meeting that the basic objective for coming to Laos was to provide an update on how the programmes are going on with the management process and what need to be shared with Dashboad to discuss on what kind of support we can get from working with partner in the country to support and improve the process. - Specially, she had met with TB programme and had a site visit to one of the main hospital, which was very interesting to see what had been done on the ground from both TB and HIV. - She advised TB programme had to work closely with documentations based on our recommendations and discussion so as to be able to re-summit to GF by June 2013. Hopefully, the necogiation could be be started so that the grant signing could be done by the end of June.
Contributions from Constituencies/Sectors	ies/Sectors		
Constituency/Sector	Type of contribution	Write content of contributions below	
PLWD - People living with and/or affected by the three diseases	Demand for clarifications	 Mr. Kinoy Phongdeth: Questioned when the problem on the delayed disbursement of the funds will be solved. For example: the 6 month activities of second half of the year was unable to meet the 	Mr. Kinoy Phongdeth: Questioned when the problem on the delayed disbursement of the funds will be solved. For example: the 6 month activities of second half of the year was unable to meet the indicator due to the delay caused in the first 6 months of the year.
GOV - Government	Recommendations	• Dr. Chanmy: - We had discussed with the implementers from the CHAS, TB and Malaria that the fund left over can be used after being ap some SRs have performed well and on time submission of their report, but some could not do well affecting the whole grant - Requested CCM to assist in solving these problems. More details on the problems and recommendations could be seen in the	 Dr. Chanmy: We had discussed with the implementers from the CHAS, TB and Malaria that the fund left over can be used after being approved by the Global Fund. The problems is that some SRs have performed well and on time submission of their report, but some could not do well affecting the whole grant Requested CCM to assist in solving these problems. More details on the problems and recommendations could be seen in the Dashboard.
ML/BL - Multilateral and bilateral development partners in country	Recommendations	 Mr. Thomas: OC should be aware of this problem and should work with PR to find the solution. Next CCM meeting should focus on what problems can be solved by CCM and what 	 Mr. Thomas: OC should be aware of this problem and should work with PR to find the solution. Next CCM meeting should focus on what problems can be solved by CCM and what problem CCM need to request advice and solution from the GF.
ML/BL - Multilateral and bilateral development partners in country	Demand for clarifications	Mr. Thomas raised two questions: - If we have annual disbursement decision do we have PUDR process to follow or are we able to disburse for the next round? - For the new funding model how long does GF decide the amount that will be available for the next three years?	ncess to follow or are we able to disburse for the next round?
OTH - Other (GF: FPM)	Clarifications	 Ms. Annelise responded: At current period, PR has to submit the cash balance as well as pr PUDR is still needed. There's big change for Laos, indedd the country will receive the r each sector and decide when to apply. 	Ms. Annelise responded: At current period, PR has to submit the cash balance as well as programmatic achievement to date, but based on initial information GF may decide on the cash transfer, but UDR is still needed. There's big change for Laos. indedd the country will receive the money for three years, but CCM together with all relevant sectors have to define and allocate the fund for each sector and decide when to apply.
GOV - Government	Clarifications	 Dr. Bounpheng Philavong: Based on the issues related to the delays occurred in disbursement, this is a chronic situation as funds from GF. He said he and his team worked hard even during the Lao New Year celebration in order to meet 	
GOV - Government	Clarifications	 He said he and his team worked hard even during the Lao New Yea He urged to all SRs to work harder and finish the proposal on time He proposed that, to solve these problems, we should revise and one 	 - He said he and his team worked hard even during the Lao New Year celebration in order to meet the deadline as requested by the PR & GF. - He urged to all SRs to work harder and finish the proposal on time so that PR could submit to GF on time too. - He proposed that, to solve these problems, we should revise and create internal mechanism to have more strict screening of the documents to be submitted to GF.
Decision(s) (What? When? Who?)			
none			
Decision making			A company of the comp
Type of decision making		Voting method Enter number 'for'	Enter number 'against' Enter number of 'abstentions'

Summary of presentation and issues to be discussed	none	Conflict of interest. List below	Agenda Item #5	na	Type of decision making	Decision making	none	Decision(s) (What? When? Who?)	Contributions from Constituencies/Sectors - none	- For the period of July-Decemi HIV/AIDS received annual dist TB programme also received a Malaria Programme will also b - GF has already made disburser	- She reported that the implemental PR had contracted with GF that For the period of implementate HIV/AIDS Programmes: reported TB Programmes: 66 days Malaria: 77 days.	Summary of presentation and issues to be discussed	na	Conflict of interest. List below	Agenda Item # 4	Proposition/Consensus
issues to be discussed		Conflict of interest. List below the names of those who must abstain from decisions.	AOB: Presentation on Region	If 'Voting' indicate results				?)	cies/Sectors - none	- For the period of July-December 2012 GF sent feedback to PR and also made some disbursements to PR as follows: HIV/AIDS received annual disbursement for 2013 with a buffer Q1 until 2014. TB programme also received annual disbursement for 2013, but buffer Q1 for 2014 had not received yet because grant phase 1 will be completed at the end of 2013. Malaria Programme will also be completed in June and will continue to GFM. Therefore, no feedback received from GF. GF has already made disbursements of fund to AIDS program Q1 for 2014, which is the 5th disbursement, covering the implementation from December 2013 - March	- She reported that the implementation of the three projects was summarized from July to December 2012. PR had received feedbacks from GF only on AIDS and TB PR had contracted with GF that PR has to submit the report to GF in every 6 months and the deadline was 45 days For the period of implementation from July to December, PR was able to submit the reports to GF as follows: - HIV/AIDS Programmes: report submitted in 48 days (3 days delayed) TB Programmes: 66 days - Malaria: 77 days.	issues to be discussed		Conflict of interest. List below the names of those who must abstain from decisions	PR Updates, Report on the i	If "Voting' indicate results
		n from decisions.	AOB: Presentation on Regional Malaria Proposal Development by Dr. Deyer, WHO expert to	na	Voting method					also made some disbursements to P intil 2014. Iffer Q1 for 2014 had not received y le to GFM. Therefore, no feedback 2014, which is the 5th disburseme	mmarized from July to December 2 n every 6 months and the deadline ble to submit the reports to GF as id).			n from decisions.	PR Updates, Report on the implementation of three projects, HIV/AIDS, TB and Malaria by	
			ent by Dr. Deyer, WHO expert		Enter number 'for'					R as follows: et because grant phase 1 will be creceived from GF. nt, covering the implementation f	2012. PR had received feedbacks fr was 45 days. follows:				cts, HIV/AIDS, TB and Malaria	
		Quorum attained. Select from 'Yes' or 'No'	to CMPE		Enter number 'against'					ompleted at the end of 2013. rom December 2013 - March 2014	om GF only on AIDS and TB.		Y	Quorum attained. Select from 'Yes' or 'No'	by PR , Dr. Chanmy	
	Yes	Yes' or 'No'			Enter number of 'abstentions'					leted at the end of 2013. December 2013 - March 2014 with the amount of more than 7 Million Dollars			Yes	'Yes' or 'No'		
	Reconstruction									lion Dollars						

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10 gap analysis e indicative cei look at Artem fill only 1 in 4-5 distribution of 1	40 gap analysis\$ 500 million needed for the country in GMS to address the issue on Artemisinin resistance, but GF has only 100 million USD. e indicative ceiling of 3-5 Million USD. Top Ceiling is 5 Million USD. / look at Artemisinin resistance contamination and try to limit the spread of it if artemisinin is found. fill only 1 in 4-5 US\$ of the gap, and should not be seen as entitlements. distribution of funds will be changed on the basis of performance and new evidence of artemisinin outbreaks and interventions.	in GMS to address the issue on Art 5 Million USD. Ty to limit the spread of it if arten 2 mer as entitlements. Derformance and new evidence of	emisinin resistance, but GF has or nisinin is found. 'artemisinin outbreaks and interv	aly 100 million USD. entions.		
m Constituencies/Sectors:	ies/Sectors:					
ral and nent partners	Clarifications	 Mr. Thomas, concer ing the Regional Artemisinine Initiative The important thing we will receive money from 3-5 Million USD for the period of three years. As explained by Ms. Annelise about the fund management, we will have PR and CCM at regiona 	ional Artemisinine Initiative eive money from 3-5 Million USD f out the fund management, we wil	or the period of three years. I have PR and CCM at regional revel	Mr. Thomas, concer ing the Regional Artemisinine Initiative The important thing we will receive money from 3-5 Million USD for the period of three years. As explained by Ms. Annelise about the fund management, we will have PR and CCM at regional revel. For more details this is to be clarified by GF (Ms. Annelise)	ied by GF (Ms. Annelise)
FPM)	Clarifications	 Ms. Annelise: There's development of regional organization or regional aregional CCM. In principle, the way that works is that all reg the country. The idea is that once regional advisory board defines the piwill come. One critical thing is that local CCM has to do is to follow wisher that a void dupliations overlaps and other miss allocations. 	Ms. Annelise: There's development of regional organization or regional advisory board or regional CCM. There's development of regional organization or regional advisory board or regional CCM. In principle, the way that works is that all regional grants have to go through he country. The idea is that once regional advisory board defines the process, local CCM will have the vill come. One critical thing is that local CCM has to do is to follow what are the linkages between gone critical thing is that local CCM has to do is to follow what are the linkages between gone avoid dupliations overlaps and other miss allocations	ory board or regional CCM. In this c l grants have to go through the prov ss, local CCM will have the linkages are the linkages between grants nat	• Ms. Annelise: There's development of regional organization or regional advisory board or regional CCM. In this case, nature of grants was recommended as regional advisory board or regional CCM. In principle, the way that works is that all regional grants have to go through the process of the review by local CCM and approve how the fund will come to the country. The idea is that once regional advisory board defines the process, local CCM will have the linkages with what's happening with approval of certain process of the money will come. One critical thing is that local CCM has to do is to follow what are the linkages between grants national and regional as well as in the funds coming to Malaria and to oth SRs to avoid dupliations overlaps and other miss allocations	• Ms. Annelise: There's development of regional organization or regional advisory board or regional CCM. In this case, nature of grants was recommended as regional advisory board or regional CCM. In principle, the way that works is that all regional grants have to go through the process of the review by local CCM and approve how the fund will come to the country. The idea is that once regional advisory board defines the process, local CCM will have the linkages with what's happening with approval of certain process of the money will come. One critical thing is that local CCM has to do is to follow what are the linkages between grants national and regional as well as in the funds coming to Malaria and to other SRs to avoid dupliations overlaps and other miss allocations
ral and nent partners	Recommendations	Vice chair: Regional Malaria Ini	tiative , we have the documents o	or outlines that require review from	Vice chair: Regional Malaria Initiative , we have the documents or outlines that require review from OC within one week thereafter send to GF with approval of CCM Chair	to GF with approval of CCM Chair
making		Voting method	Enter number 'for'	Enter number 'against'	Enter number of 'abstentions'	
UQ.	t	Show of hands	-1 4	42	13	
						от применения по применения п
	AOB: HIV Regional Grant APN	AOB: HIV Regional Grant APN+, by Dr Soulany Lao Red Cross	S			
st. List below	st. List below the names of those who must abstain from decisions	from decisions.		Quorum attained. Select from 'Yes' or 'No'	'Yes' or 'No'	
				4	Yes	
entation and is	entation and issues to be discussed				***************************************	
WD project has that require CC	ND project has received the fund from Regional Mal that require CCM to review and consider.	aria Program that has been implen	nented in 7 countries. First phase	of the project will be phased out i	n September 2013. To continue in the	ND project has received the fund from Regional Malaria Program that has been implemented in 7 countries. First phase of the project will be phased out in September 2013. To continue in the phase two, the project has received that require CCM to review and consider.
m Constituencies/Sectors:	ies/Sectors:					
ral and ment partners	Recommendations	Vice chair: we don't have enough	n time in this meeting therefore t	he OC need to work on this issue ar	Vice chair: we don't have enough time in this meeting therefore the OC need to work on this issue and submit to CCM chair for signature before to send to GF	before to send to GF

Summary of all the decisions and action points	
Decision/Action point #1	The CCM plenary decided to postpone the endorsement of the new CCM Membership Composition and Structure until have TORs of main bodies and sectors. This will be endorsed in special/extraordinary meeting expected to be organized shortly. CCM Sec will be requested to coordinate and prepare for this meeting.
Decision/Action point #2	Dashboard has highlighted achievements but also several compelling situations or challenges, especially those related to the delays in reporting and procurements. It's requested to OC and PR to discuss and seek the solutions before next CCM meeting.
Decision/Action point #3	As informed by the Global Fund, we will have an Annual Disbursement Plan. So, there's no need to wait for the report from all sectors. It's recommended that SRs have to submit the reports to PR on time.
Decision/Action point #4	Debriefing from Ms. Annelise explained the new funding model. CCM should allocate the funds to three diseases control programs following the national health needs and priorities as well as to PR or SR according to their capacities and performances.' The country need to start to prepare the the gap analysis of each disease control program, which is needed prior to the submission of request and receipt of fund.
Decision/Action point #5	RAI outlines: The OC need to review the proposal, make recoemdations and send to CCM chair for signature before to submit to GF.
Decision/Action point #6	APN+ second phase: Because lack of time, the CCM request to OC to review and endorse the report and request for phase two and send to CCM's chair for signature before to submit to GF.

CCM Chair

Reporter