## Minutes of the OC 23<sup>rd</sup> February 2012, 1<sup>st</sup> floor of CCM Sec meeting room

Meeting: 13:30 pm

Chair Person: Dr Philaysack

Present: Dr. Soulany, Mr. Kynoy (LNP+) Mr Tomas D'Agnes, Mr. Shumon, ), Dr. Dominique,

Excused: Mr. Pascal, Mr. Yangbao, Dr. Bounfeng.

**PR and SRs:** Dr Chanmy, Mr Fabrice, Mrs Nancy, Dr. Nou, Dr. Bousy.

WHO: Dr. Asmus, Dr. Deyer (ex-officious)

JICA: Mrs Fujiwara (JICA),

CCM Sec: Dr Nao, Ms Vansaly, Ms. Sony Dr Marlon (CCM advisor),

Before meeting started, all members endorsed that in the absence of a new OC chair, Dr. Dominique would function as today's OC chair.

### Agenda:

Introduction - endorsement of the agenda

- 1. Endorsement of previous Minutes
- 2. PR selection: results from PR selection committee and next step
- 3. TFM application for HIV: answer to request of CCM members.
- 4. CMPE, update of application for TFM + 20%
- 5. Program Review HIVSSF and CP: update from PR
- 6. Update CCM requirements: answers from Proposals and FPM

## AOB:

- Organization and selection of site visit for Q2
- Define next CCM meeting agenda
- Define next OC meeting + Agenda
- Information of Dr. Nao attending a meeting in France
- Information of Dashboard

Agenda	Was	reviewed	and	adonted	

Agei	nda was reviewed and ado					
	Summary of the OC meeting 23 <sup>rd</sup> February 2012					
No ISSUES		Actions	Actions to be taken			
	The Chair propose to dismeeting	scus topic agenda item 4, 5, and 6 first as these are the main po	oints for today			
	1. CMPE, update of application for TFM + 20%	Dr Deyer WHO ex-officio malaria, presented the update in proposal development and data collected from provincial and district levels, 9 PHOs has provided until now, (see PPT) he gave some highlights:  • Central allocation doesn't specify disease program, PHO allocation is not clear and is based on priority.	<ul> <li>CMPE to         work on the         proposal         development         for TFM</li> <li>CCM Sec to         facilitate and</li> </ul>			
		• The current contribution from Government including 17 provinces between year 2010 to 2011 is about 552, 639 USD (salary other allowances, administrative +over head, specially contribution, vehicle, machinery, equipment, furniture and information technology)	coordinate the data is provided to CMPE before $2^{nd}$ of March			

- CMPE need to send letters to all 17 provinces however is not guarantee that information will be on time.
- According to guidelines data could be also obtained from WHO data sources

#### Discussion:

- Bilateral rep: commented that according to FPM, if GOL can't complete the information now, the GF can assist later providing funds for TA.
- WHO, ex-officio HSS, clarified that some data is already at DPF/MOH level and this has been compiled in a WHO document (he will transmit to OC)
- CCM sec (TA): according to TFM application form CMPE should enter some data concerning the average percentage spent for malaria and health sector in last three days.
- Bilateral and other think that the information collected by CMPE is very useful and clear; therefore, this data can be used as reference for the best projections.
- CCM executive secretary informed that PR has requested a meeting with minister of health to discuss this point of the 20%. The information should be presented to the minister and later the minister can request to the NA for the contribution or the commitment.
- PR rep: Commented that some funds have been allocated to health sector by the Nam Theun project and request if this could be included in the estimation.
- According to guidelines any loan allocated to health sector from partners can be included but not the grants.
- It was proposed that CCM sec follow up that needed information from WHO and other agencies is centralized at CMPE level for next Friday 2<sup>nd</sup> of March
- TFM Budget need to be reviewed for two years and PR budget need also to be included.
- **2.** TFM application for HIV: answer to request of CCM members.

In follow up of the CCM resolutions on 27<sup>th</sup> January, CHAS has provide some comments:

- HIV program review should be based on the National Action plan 2011 to 2015 and should has comprehensive packages to response to the national program
- WHO Rep advised to reconsider applying to the TFM for HIV.
- However the deadline for TFM submission is on 31<sup>st</sup> March which is only five weeks from now and on 30<sup>th</sup> April is the deadline for proposal 2<sup>nd</sup> commitment year 2013 to 2015(program review), up to today its unknown how much budget remains.
- Two questions are to be answered: how will affect the

- The TFM
   Malaria final
   proposal need
   to be sent to
   CCM for
   endorsement
   by mid of
   March
- At the end of the discussion is concluded to use the information collected by CMPE from provinces and make extrapolations to estimate the final contribution and perform this after with the GF assistance.
- Any decision is to be updated in next OC meeting after feedback from meeting with minister of health.
- OC considers
   a little bit
   difficult to
   apply for TFM
   without a
   complete
   program
   review and
   without a
   proper
   technical
   support to
   develop the
   TFM proposal.

- financial ceiling the current rating of B1 and according to the guidelines TFM need to be consolidated with SSF, so how to do on time?
- Indeed it is necessary to apply for TFM because no funds available for ARV treatment from 2013 but according to guidelines this is as complex as so short are the deadlines.
- FPM has informed that the two deadlines cannot be changed, therefore if we apply for TFM this means we should do without program review and this is not so wise in a consolidated proposal.

#### Discussion:

- Bilateral commented: As deadlines will not change we don't have choice and if we want to apply for TFM we need to do without program review. However he pointed out that according to priority criteria (high disease burden & no funds available) we decided not to apply. He would like to know if Laos is automatically disqualified or not??
- CCM sec (TA): according to answer from proposals we aren't disqualified but we don't have high probability to get and it will be in function of funds available at GF.
- WHO: The problem is this TFM is a consolidated proposal and for now without program review we don't know how much budget will be available in second commitment SSF then we don't know what we should include and how much should be to request in TFM.
- Everyone agree that even with a low score we are qualified to apply for TFM but without program review it's so difficult to estimate what resources will be available for second commitment and which ones should be requested for TFM
- Bilateral asked if: TFM proposal can be ready before 15<sup>th</sup> March (only 3 weeks)?
- CHAS: Yes it's possible but deadlines are so tight and budget information not available and we need a consultant to draft this proposal. The question is do we can have a consultant?
- WHO requested if UNs or INGOs could support the budget for a consultant?
- After checking various possibilities the OC concludes that seems very difficult to have a technical support in this very short deadline. Furthermore the information is not available and only 3 weeks remaining. Consequently the OC considers that it is not possible to apply for TFM in this situation. Advise to focus in the reprogramming.

- OC suggested that CHAS (Task Force) focus on reprogrammin g for HIV phase two according to the current situation (lacks in funds for ARV).
- CCM sec will inform the CCM about this conclusion in next meeting.

	HIVSSF and CP: update from PR	GF as (see PPT for details):  Request for TA recruitment for HIV SSF program review is under review by LFA.  Program review could start in mid-March 2012  IEC national policy, Training program etc Procurement issues Internal auditor (re start the recruitment) Manual for SR management.  WHO announced a HSS consultant arriving end of April for program review, but these WHO consultants will not work in the TFM proposal.	members the technical assistance requested or to request to French Government and to GMS.
4.	TFM application for HIV: answer from proposals to request of CCM members	CCM sec (advisor) has presented the different answers provided by the proposals team to the CCM questions (see PPT)	No further actions proposed
5.	PR selection: results from PR selection committee and next step	<ul> <li>CCM sec (advisor) has informed about:</li> <li>The organization of PR nomination committee and the assessment conducted in previous week, the PR nomination committee included Mr. Thongbai from Ministry of Information, Culture, and Tourism, Mr. Henry Braun from Care Laos, and Ms Sengdavone Bangonesengdet from Lao National Chamber of Commerce and industry.</li> <li>One proposed member was not included in this committee as working in the same institution of one of the applicants (application of potential conflict of interest management policy)</li> <li>The report on methodology and results of the assessment of PR applicants has been share with the OC members (see official letter attached),</li> <li>OC members advised to follow the resolution of the last CCM meeting on 27<sup>th</sup> January, the OC agree to send by mail the results for endorsement by the CCM.</li> </ul>	CCM Sec to send out the official report to CCM members to request endorsement by non-objection basis within two to three days

## **6.** AOB:

## Organization and selection of site visit for Q2

- The CCM Sec request endorsement from OC members to chose the target province for second site visit in Year 2. There are 4 provinces proposed to visit: 1. Oudomxay province, this is proposed by CCM Sec because the site visit has never been conducted in this province and this is to see what have been done and define if there is any problem in this province. 2. Luangprabang, to follow up the last site visit in 2010. 3. Attapeu province, to follow the outbreak of Malaria, and 4. Pakse province, this is to follow up the comments of new FPM from her last visit in January.
- The OC members comment that from their field trips to Attapeu, the outbreak of malaria is not really a priority for site visit serious since many partners have done some follow up there. Therefore, the OC advice to go to Oudomxay first, Luangprabang in the next site visit and follow by Pakse and Attapeu

## Define next CCM meeting agenda

As not enough time this point was not discussed:

- The agenda of next CCM meeting will be defined during next week
- For next OC meeting will be in the afternoon of 2<sup>nd</sup> March, CCM sec to send out the invitation by next week

# <u>Information of Dr. Nao attending a meeting in France</u>

- Dr. Nao informed the OC members about the invitation from the French government to attend a workshop in Paris. This activity is included in the framework of the 5% French contribution to Global Fund as was proposed in the CCM meeting in July 2011.
- To remind 2 proposal have been submitted to French gov.
- Now they request CCM Sec to join the meeting in France in order to provide more clarification on the request proposal and discuss admin procedures
- The meeting will be conducted from 27 to 28, and the accommodation cost will be covered by French government.

- CCM Sec to start the process of preparing site visit to Oudomxay
- The date of the visit should be after the submission of TFM proposal

		<ul> <li>Information of Dashboard</li> <li>The CCM sec has received the answer from GMS to provide them the timeline for their first visit to Laos (5-9<sup>th</sup> March).</li> <li>The OC advice that CCM Sec can go ahead to work with GMS and provided the time as requested</li> <li>Any update will be provided to OC and CCM</li> </ul>	•	CCM sec is to coordinate the GMS mission GMS invited to attend the OC meeting to further discuss their support.
5	7. Endorsement of previous Minutes	The previous OC minute on 12 <sup>th</sup> January 2012 has been shared with OC members for feedback and comment. There is no feedback has been made and the OC members endorse this minute	•	To translate and store in Drop-Box.

Chair

Note takers:

CCM Secretariat