

Minutes of the OC
13. June 2012, 3rd floor MOH meeting room

Meeting: 13:30-17:00pm

Chair Person: Dr. Philaysack

Present: Dr. Dominique, Mr. Pascal Stenier, Dr. Soulany, Mr. Yangbao

Excused: Mr Tomas D'Agnes, Mr. Shumon, Dr Nao, Mr. Kinoy

PR and SRs: Dr Chanmy, Mr Fabrice, Mrs Nancy,

Other: Ms Somsamguak (on behalf of Mr Tomas), GMS team, Dr Simone CMPE, Dr Chandavone HCD

CCM Sec: Ms Vansaly, M Sony, Dr Marlon CCM adviser

Agenda:

1. Endorsement of previous Minutes, Agenda & quorum verification: OC chair
2. Upcoming oversight activities (as plan) : CCM adviser
 - a. Reprogramming M7/Y5
 - b. Reprogramming TBSSF
 - c. Reprogramming savings HIVSSF/Y2
 - d. Audit HIVSSF
 - e. PR's OIG implementation report
 - f. Site visit Q3-Q4.
3. Update TA plan: CCM Adviser
 - a. UNAIDS/TSF: Manual for SR management
 - b. PR/ 5% French for audit Procurement Supply Management system (to validate)
4. Conflict of Interest policy: CCM adviser
 - a. Self-declaration to be signed by CCM members.
 - b. Management during meetings: chair is to request to CCM members
5. Presentation and discussion of DASHBOARDS : by PR/GMS
 - a. HIVSSF
 - b. Malaria
 - c. TBSSF
 - d. Discussion, focal persons, next steps etc....
6. AOB
 - a. Revision of distribution list of goods (HCD) : by HCD
 - b. CCM meeting Agenda for 22nd June 2012: by CCM adviser
 - c. FPM visit agenda: by CCM adviser
 - d. CCM PUDR and new budget plan: by CCM adviser
 - e. CCM CP
 - i. SOP financial management
 - ii. Accounting SW
7. Closing

Summary of the OC meeting 22th May 2012

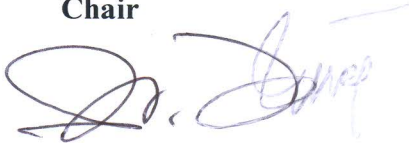
No	ISSUES	Actions	Actions to be taken
1.	<p>The previous OC meeting minutes sent by email were endorsed</p> <ul style="list-style-type: none"> ✓ Agenda was reviewed and adopted with minor changes: PR request to make all their presentations at the same time. Its decided to include revision of HCD distribution list with presentation of Dashboards. ✓ Quorum is reached 		
2.	<p>Upcoming oversight activities</p>	<ul style="list-style-type: none"> • CCM adviser presented the oversight activities announcing the nearby: <ul style="list-style-type: none"> - Reprogramming is Malaria7/Y5 must be submitted in June 2012 - Reprogramming TBSSF is to start before December 12 as it will need external review as for HIVSSF. - Reprogramming of saving of HIVSSFY2 is due for December 2012 - Audit HIVSSF is due on June 12 • Site visit coming will be in end of July 12 Luang Prabang (as decided in previous OC meeting); TOR is related to ARV sites • CMPE representative apologizes for not making the reprogramming presentation today and request to have a special OC meeting in this month. • OIG recommendations report of implementation is to be presented to CCM by PR. • HIVSSF: external review recommendations are to be implemented, the OC members request to include this point in next CCM meeting and summary of Recommendations to be translated in Lao language. <p>Conclusion: After discussions of proposed dates for meetings and considering the FPM visit in July 12, OC members agreed to postpone the CCM meeting of 22nd June for 10th July 12 and to include the reprogramming endorsement, OIG updates & HIV external review recommendations at this time.</p>	<ul style="list-style-type: none"> • To have an OC meeting in last week of June 12 for review of reprogramming M7Y5 and submit to next CCM meeting for endorsement. • PR/CMPE is to prepare the necessary reprogramming information and share before meeting. • PR is to prepare the OIG/CP/ML implementation update for next CCM meeting. • PR is to share the HIVSSF audit report as soon as is available. • To include the endorsement of HIV external review and submit request to HIV Task Force for an implementation plan in next CCM meeting. • Site visit is to organize end of July focusing in medical care medical products availability and reporting of stock out. • WHO + CCM sec is to work in the summary of the HIV external review. Later these are to be translated in to Lao and distributed among CCM members
3.	<p>Update TA plan</p>	<ul style="list-style-type: none"> • CCM adviser: Updated the global TA plan focusing discussion in: <ul style="list-style-type: none"> - TA requested by PR to support the development of SR's management manual. This TA is already contracted, funded by USAID, managed by UNAIDS and under contract with TSF, working with PR. - GMS is carrying out the implementation of Dashboards expected for end of June 12. - Following recommendations of bilateral constituency during last OC meeting: it was 	<ul style="list-style-type: none"> • Concerning TA for PSM it's advised to have a complementary strategy: <ul style="list-style-type: none"> - First submit to French 5% (short term solution) - PR is to work in the options to reprogram funds of HIVSSF to recruit a TA full time for PSM (long term solution).

	<p>demanding to work in the request for support from French 5% for an assessment of PSM. The TDR have been shared with OC and CCM chair and are to be submitted today to CCM chair & French government if OC agrees.</p> <ul style="list-style-type: none"> - Contract of internal auditor for PR is pending, PR report that it's difficult to find adequate candidates for the salary proposed. - The GF has requested 2 CP for approval of CCM funding, this is being developed by CCM sec staff however specific expertise is still needed. <ul style="list-style-type: none"> • OC members: requested what is the status of the long term TA for PSM under HIVSSF? it seems that TA is supporting only 1 day/week?? • PR: informed that after the GMS assessment of PSM the recommendation was to harmonize with MPSC. However PR thinks that their unit need this kind of expertise thinking to recruit a TA to support PR, however it will be necessary to reprogram funds as this has not been included in PR's TA plan. • OC recommend finding a solution as soon as possible as recommendations from LFA and GF have been clear regarding the PSM and could affect the next request for second commitment. 	<ul style="list-style-type: none"> • Concerning PR's internal auditor. PR is to review the TOR 's with FPM • Concerning CPs for CCM budget: OC it's to discuss with FPM and try to find another solution instead to buy and install a SW for a small budget. • OC advised to keep updated the TA plan as is useful to identify TA needs and formulate on time requests.
4. Conflict of Interest policy:	<ul style="list-style-type: none"> • CCM adviser: <ul style="list-style-type: none"> - Informed about the Self-declaration to be signed by all CCM members and ask to CCM executive (chair, vice chair) to request in next CCM meeting. - Also request to CCM chair to manage the exclusion from vote of the CCM members when a conflict of interest is present. 	<ul style="list-style-type: none"> • CCM sec is to provide the template (Lao/English) • CCM sec is to inform the CCM chair before the CCM meeting which members must abstain of vote. • CCM chair/vice chair are to manage these situations.
5. TA from 5% French for audit Procurement Supply Management system (to endorse)	<ul style="list-style-type: none"> • PR informed: <ul style="list-style-type: none"> - about the details of TDR (2 TA 6 weeks for assessment, as soon as possible) - PR has two experts to propose to FEI (France Expertise International) for recruitment. • OC members: Recommend to validate and submit the TDR for this request. 	<ul style="list-style-type: none"> • CCM sec is to get the necessary signatures and submit as per the F5% guidelines.
6. Dashboard presentation	<ul style="list-style-type: none"> • Dr Ratanaxay from PR: Presented the DB for HIV, Malaria and TB introducing the generalities of DB as well as the information included in this tool: the indicators, conditions precedents, financial, programmatic data etc. He clarified that the recommendations aren't included as this need to be done by the OC after the presentation. DB will be produced in a quarterly basis (see DB file) • OC members: <ul style="list-style-type: none"> - Requested if will be possible to have three bars for indicator of key management positions? - To include the missing information regarding the 	<ul style="list-style-type: none"> • The OC recognizes the hard work done. • Nevertheless the Dashboards aren't finished yet therefore modifications are to be done by PR because some tables and figures are overlapped.

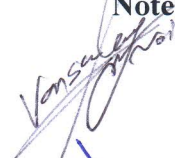
	<p>SR's assessment</p> <ul style="list-style-type: none"> - Report from SR (PR need to produce more data collection tools as SR have different reports). - Remarkd that according to DB reports from SR aren't delayed but fund disbursements are. All DB showed delays in disbursements - OC chair: Request if DB can include information to be used for the reprogramming of savings and program income? - It's noted that some tables shows that expenditures are higher that funds received! - OC feel that financial information is general and don't give the details of expenditures or the exact status of the expenditures. - Bar Graphics of procurement are mainly flat as this conducted mainly one per year (HIV). - Why some programmatic indicators are overachieved? - SR in TBSSF is not assessed but only one SR! there's no procurement in TB. Targets for programmatic indicators in TBSSF are very low. Private clinic do not report the cases treated. - It's requested to PR to write in comments why the indicators are red, yellow or overachieved. <ul style="list-style-type: none"> • GMS: Concerning the indicator "key management positions": it's possible to get only two bars, the options are: <ul style="list-style-type: none"> - To have one bar for PMU key positions and one for all TA (STC+LT) - To have two bars for TA 1 for STC, 1 for LT. • PR: agrees with the remarks and will update the information. The representative explained: <ul style="list-style-type: none"> - Even if SRs reports are on time PR is to revise before to submit and LFA also verifies this last step is often delaying disbursements. - Some information regarding disbursement and expenditures are included and can be used for analysis of reprogramming but need more discussion and specific tables per SR. - Concerning overachieved indicators he informed that GF recommended having a better analysis of indicators. - Reports from CMPE (SR in malaria grant) are delayed as provinces are always delayed, report of stock outs in malaria is a big challenge as often delayed or not produced. • Discussion: PR was requested to leave the room, OC members' opinion is that some figures can't be evaluated properly and requested the PR to check the data with national programs. The main recommendation is to check if the figures are accurate. 	<ul style="list-style-type: none"> • As some indicators are overachieved (> 100%) the OC has requested to verify the information and present again the DB. • GMS is to work with PR and national programs to update and check the information. • GMS is to conduct training for CCM sec in verification of data. • GMS is to conduct the capacity building in DB utilization for CCM constituencies • GMS is to provide the user's manual and other documents as planned. • DB Task Force is to be debriefed by GMS at the end of the GMS consultancy (in 22nd)
--	---	---

<p>7. Revision of distribution list of goods (HCD) : by HCD</p>	<ul style="list-style-type: none"> • PR has requested to discuss the revision of the distribution list of HCD/HIVSSF. • Dr Chandavon has presented the request explaining that following external evaluations the number of district hospitals to be renovated and motorbikes to be distributed were reduced however some hospitals need renovation and motorbikes, she explains that this revision doesn't affects the budget nor the indicators. She requested to OC to endorse this revision (see ppt). • PR explained that target are in the performance framework and this reduction will affect the performance rate (as 47 targets were approved not less) • OC members: explained that OC can't endorse just submit to the next CCM. OC consider that even if external recommendation has requested to reduce the number of targets it's necessary to review this recommendation in function of the HIV context and the HIV priorities for HSS. Nevertheless OC request to have more information regarding the hospitals to be renovated. 	<ul style="list-style-type: none"> • HCD + WHO is requested to prepare the information and present to the next OC. • OC is to revise the request in next OC meeting.
<p>AOB:</p>	<ul style="list-style-type: none"> • CCM meeting Agenda for 22nd June 2012: <ul style="list-style-type: none"> - OC members: Recommend s to postpone the CCM meeting to the 10th July during the FPM visit. • The agenda for FPM visit was reviewed, <ul style="list-style-type: none"> - WHO proposed to conduct the HIV reprogramming review in Friday and Saturday's morning and to invite, PR, LFA, CHAS, some OC some HIV task force members. - UNAIDS propose to include a meeting with NGOs and civil society and PLD at the beginning of the visit (in first day) - Its proposed to move the OC meeting - Bilateral: request to move the meeting with bilateral for the second week as 4th July is holiday. - CCM meeting for Tuesday 10th • Proposed agenda for CCM meeting was presented by CCM adviser (see ppt) but it was recommended to discuss again during the next OC meeting in 27th June. 	<ul style="list-style-type: none"> • CCM sec is to prepare the DRAFT (s) of FPM's visit agenda and to share with OC, PR and FPM to confirm the changes. • Final agenda is to be fixed next week. • CCM sec to request the HIV Task Force to lead the HIV discussion with FPM. • Appointments and availability of CCM executive are to be confirmed by CCM sec.

Chair



Note takers:



CCM Secretariat

