

**Minutes of the OC**  
**11<sup>th</sup> Sep 2012 at CCM secretariat Meeting Room**

**Meeting: 13:30-17:00pm**

**Chair Person:** Mr. Pascal (UNAIDS)

**Present:** Mr. Thomas (US embassy), Dr. Soulany (LRC), Dr. Nao (CCM Sec), Mr. Yangpao (LYU), Dr. Soulany (LRC)  
Dr. Dominique (WHO) Mr. Pascal (UNAIDS)

**Excused:** Mr. Kinoy (PLWD) Dr. Philaysack

**PR and SRs:** Dr. Chanmy, Mr. Pascal, Ms. Nancy, Dr. Chansouk, Dr. Viengsavanh, Dr. Bousy, Dr. Deyer (WHO)

**CCM Sec:** Ms. Sony, Ms. Saly, Dr. Marlon

**Other:** Ms. Yoshiko Fujiwara (SWG)

**Agenda:**

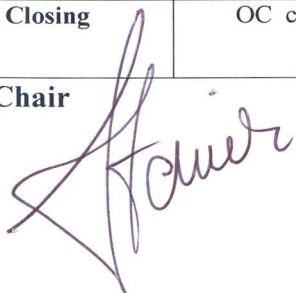
1. Review agenda, quorum, meeting minutes.
2. Presentation of Participants and TA from French 5% Initiative
  - a. Support to civil society
  - b. Support to CCM
3. HIVSSF: CCM core function / reprogramming guidance savings Y2
4. TFM clarifications (1s round)
5. PHPM country profile
6. FPM visit agenda
7. Closing

Summary of the OC meeting 11 <sup>th</sup> September 2012			
No	ISSUES	Presentation/discussion	Actions to be taken
1.	The previous OC meeting minutes sent by email were neither reviewed nor endorsed	<ul style="list-style-type: none"> <li>✓ Agenda was reviewed and adopted with minor changes: Chair added TB situation, PSM challenges, WHO request if CCM secretariat will have a meeting with FPM?</li> <li>✓ Quorum is reached</li> </ul>	
2.	TA plan	<ol style="list-style-type: none"> <li>a) Introduce Mrs Cristina De Nicolas short term consultant to conduct assessment of civil society constituency was introduced to the OC members. She has explained the main goals, length and activities to be conducted during her first visit to country.</li> <li>b) Informed of the start of the mission of Dr Marlon Garcia to support the CCM sec/OC.</li> </ol>	<ul style="list-style-type: none"> <li>• F5% consultant to be briefed by CCM sec in the global process of CCM's reform. Appointments with each member could be arranged if necessary</li> <li>• Regular feedback is to be provided to OC members.</li> </ul>
3.	HIVSSF: reprogramming savings Y2	<p>Mr Pascal, from UNAIDS presented a proposition of framework which aims to guide the HIV reprogramming or reallocation of savings. He explained that this framework looks to reinforce the CCM in one of its core functions. This framework or model namely "the investment framework" is the result of the work done last year by several high level experts from UNAIDS,WHO,PEPFAR,GF, World Bank etc. According to Mr Pascal for the first time this analysis looks not only to what is working well but also in what is not. The main idea is to recognize effectiveness in actions and promote principles related to human rights, access and quality of services delivery etc.. He explained that the GF has requested to conduct a comprehensive programmatic review. Reminding that OIG also recommended conducting an external review of the HIV national program. This review has provided the basis for the second commitment request and has informed the HIV Task Force when selecting the priorities to be included in the reprogramming. He proceeded to explain -area by area- the whole proposed reprogramming as well as the necessary next steps before to submit to CCM and GF (see ppt).</p> <p><b>Discussion:</b> The reprogramming need to be submitted as soon as possible. PR is not sure if we can reprogram these savings as we are in negotiation for the</p>	<ul style="list-style-type: none"> <li>• The OC agree that this is the way in how the CCM should work, providing clear recommendations.</li> <li>• The OC is to strongly support this model.</li> <li>• The CCM sec will draft a letter to be signed by chair requesting the HIVTF to work in this reprogramming following the model here presented.</li> <li>• The HIVTF supported by WHO/UNAIDS is requested to work in the specific proposition to be submitted to CCM for endorsement in next meeting.</li> </ul>

	<p>second commitment. WHO confirms that this is possible as it was discussed with FPM. UNAIDS clarified that what we need is the OC agreed with the model and propose to CCM. WHO proposes to request the HIVTF to start to work in the proposal, CCM/TA advises to formulate official letter to entrust the HIV TF.</p>	
<p>4. TFM clarifications (1s round)</p>	<p>Dr Deyer, <b>WHO ex-officio</b>; informed about the TRPs decision to class TFM Laos in category 3 as well as the deadline (4 weeks) to submit the first clarifications and justifications. According to TRP the incentives and salaries requested aren't justified in the TFM context and country must provide actions to sustain after GF. The use of repellents as a cost-effective strategy need to be evidenced and its necessary to remove the technical and management assistance costs both at PR and SR levels (upfront removal).He informed about the decisions taken during previous meetings with PR/Sr and decision to reduce more staff at CMPE but to maintain TAs at CMPE, however concerning TAs at PR still need to provide justifications (see ppt and annexes)..Several articles evidencing the efficacy of repellents were included in the annexes.</p> <p><b>Discussion:</b>  First of all OC members considers that the Global Fund has decided to remove TAs unilaterally without consultation with the CCM, considering this decision as unreasonable and technically and programmatically risky for the good oversight of all grants. Therefore the OC/CCM strongly objects and refutes this decision. Beyond this the fact is that the TFM guidelines didn't instruct to not include TAs in the proposal and any upper ceiling was been defined. Concerning TAs at CMPE clear justifications has been provided by ministry of health and the short term (entomologist, HIS by SMS) are also necessary as new epidemiology context (vector, risk factors, susceptible populations) is emerging in south of Laos. The same analysis is done for the use of repellents for forest goers (migrant workers). Globally the OC agrees with the justifications and clarifications as presented today.</p> <p><b>Bilateral:</b> Despite understanding the TRP recommendations, the CCM need more time and transition funds to find other sources of funding for TAs, he proposes to request the CCM and bilateral constituency to address an official communication to the GF supporting to maintain the TAs until find another options.</p> <p>UNAIDS, agree that TA are still necessary however the GF is requesting more results as considerable amounts of funds have been invested but still many areas of the programs are not working well. He advises to include as part of the response that CCM will work to improve the management of TAs in order to ensure that products and deliverables are fulfilled in the times that are requested.</p> <p>PR requested to include in the justification letter all TAs and not only the WHO long term.</p> <p>Concerning the TRP comment about the sustainability of incentives and salaries of public servants working for GF; the OC acknowledge the necessity to find a solution and proposes that CCM establish a policy aligned with government ones before to submit to GF. As such government policy doesn't exist, the CCM will need more time in order to work with PR &amp; concerned ministries and have this policy duly approved by the government in 2013. PR clarified that salary scales currently used and approved by MOH were included in the HR manual submitted to GF mid of this year, however GF didn't approve as rates were based in UN rates. However the CCM has not discussed this manual or scales and this document is not an official policy.</p> <p>Despite the TRP is not requesting to revise the estimation of the government contribution the TRP has requested to GF secretariat to confirm the data, then WHO malaria considers necessary to have a better survey of this as soon as possible.</p> <p><b>Conclusion:</b></p>	<ul style="list-style-type: none"> <li>• Necessary letters will be drafted by CCM sec and submitted to CCM members.</li> <li>• PR will fill the chapters of the template that corresponds to the PR and CMPE+ CCM sec will do for the CCM responses.</li> <li>• PR is to develop a road map to develop the incentives and salary policy and present to CCM in next meeting</li> <li>• After endorsement by the plenary, CCM sec will compile all documents and submit to GF in the defined deadlines.</li> </ul>

	<p>It's concluded to submit to the CCM the clarifications and justifications as discussed today. The CCM is to submit a global letter to GF requesting to maintain the TAs proposing at same time to have a better management of these human resources by CCM. The CCM is to propose to develop the salary policy based in HR manual and other governmental ones.</p> <p>It's also proposed to include the TAs for estimation of government contribution for the three diseases in the HIVSSF second commitment proposal.</p>	
5. PHPM country profile	<p><b>PR:</b> Mr Pascal Verhoeven , TA, presented the background, main definitions and methodology used to develop the PHPM country profile. He pointed one per one the main issues that need improvement as well as action plan and necessary budgets. He finished informing the deadlines for submission of this document to GF (see ppt)</p> <p><b>Discussion:</b> The document is very technical and complex; however need the endorsement of the CCM.</p> <p>UNAID: the country profile is showing that after 10 years receiving GF support the procurement and supply system is not working and this is very critical to continuous to access to funds.</p> <p>CCM TA: This is a critical point in the management of grants in Laos as well as OIG recommended improving the general management. Therefore we must have more time to discuss however it's necessary to present to CCM a summary of the main issues and potential solutions.</p> <p>PR: some problems are technical issues but most of are related to inadequate organization of the system at different levels.</p> <p><b>Conclusion:</b> The country profile is to be submitted to CCM in next meeting and submitted to GF after endorsement.</p>	<ul style="list-style-type: none"> <li>• PR is to provide the final document to CCM sec to distribute amongst CCM members.</li> <li>• PR is to present the final document next meeting.</li> </ul>
6. AOB:	<p>a)FPM visit agenda <b>CCM TA</b>; presented the proposed objectives, agenda for next FPM visit and informed about the different working groups that have been organized (M&amp;E, legal, PSM, financial etc..). Main issue is to work in the HIVSSF second commitment however other as TFM, TB programmatic review and OIG updates have been included. DR Chaney from PR informed that PR has organized the meetings rooms at PR and NEDICO for all working groups.</p> <p><b>Discussion</b> WHO has requested a meeting and lunch with the FPM. FPM will also meet the French Representative. PR will invite the participants from SR CCM sec will organize for OC and those concerning UNAIDS and bilateral.</p> <p>b)WHO reminded that some information (point 8 and 9) concerning the responses for HIVSSF second commitment. PR informed that this information is being collected and will be submitted to GF.</p> <p>c)Dashboards: OC chair considers that this point need to be discussed at CCM level and OC need an special meeting CCMTA: informed that DB are currently being developed by PR and it will be checked by the CCM sec before to submit to OC for review.</p> <p>d)CCM meeting is planned for 24 September 2012</p>	<ul style="list-style-type: none"> <li>• PR is to invite the concerned SRs</li> <li>• CCM sec for OC and external if necessary</li> <li>• CCM sec will confirm with FPM and changes will be informed</li> <li>• PR is to submit the point 8 and 9 of HIVSSF responses before the arrival of FPM</li> <li>• The Dashboards will be submitted by PR to CCM sec and after to OC for recommendations.</li> <li>• CCM sec is to call for next CCM meeting.</li> </ul>
Closing	OC closed the meeting doing a summary of the discussed points	•

Chair



Note takers:



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