

## MEETING MINUTES OF OVERSIGHT COMMITTEE MEETING

### 1. INPUT FIELDS INDICATED BY YELLOW BOXES

MEETING DETAILS				(Place "x" in the Relevant Box)	
LOCATION/VENUE	1 <sup>ST</sup> Floor CCM Secretariat Meeting Room, MoH				
MEETING NUMBER	1st	TOTAL NUMBER OF PARTICIPANTS/ (INCLUDING ALTERNATIVES & CCM SECRETARIAT STAFF)	OC MEMBERS	7	
DATE (dd.mm.yy)	26/02/2015		ALTERNATIVE OF OC		
MEETING SCHEDULE START	9:00		CCM SECRETARIAT STAFFS	4	
MEETING ACTUAL STARTED	9:15		OTHERS	8	
MEETING ACTUAL ENDED	12:14		TOTAL	19	
DETAILS OF PERSON				MEETING TYPE	
HIS / HER NAME & ORGANIZATION	First Name	Dr. Philaysak			
	Family Name	Naphayvong		Regular Meeting	x
	Position/Title	Deputy Director		Extra-ordinary Meeting	
	Organization	Francophone Institute of Tropical Medicine		Other Meeting	
HIS / HER ROLE ON THE MEETING	Chair	x	GLOBAL FUND SECRETARIAT / LFA ATTENDANCE AT THE MEETING	LFA	
	Vice-Chair			FPM / PO	
	CCM Member			OTHERS	
	Alternate			NONE	

### 2. AGENDA OF THE MEETING

AGENDA SUMMARY		
AGENDA ITEM NO.	WRITE THE AGENDA TITLE OF EACH AGENDA ITEM/TOPIC	Responsible Person
Agenda #1	• Opening the meeting	OC Chair
Agenda #2	• Update on Oversight Plan	CCM Secretariat
Agenda #3	• Next CCM Site Visit	CCM Secretariat
Agenda #4	• Update on program Dashboard	PR Office
Agenda #5	• Update on PUDR and program management	PR Office
Agenda #6	• Review a reprogramming of TB component	NTC
Agenda #7	• Review a reprogramming of RAI project	RAI

### 3. MINUTES OF EACH AGENDA ITEM

Agenda Item #1	Opening the meeting
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED	
The OC Chair officially opened the meeting, presented the agenda of the meeting and all participants have accepted. (No objection).	

## DICISIONS MADE

### Decision:

The meeting agreed with the proposed agenda.

Agenda Item #2	Update on Oversight Plan
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### SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED

The CCM Secretariat TA has made a brief presentation on the oversight plan for 2015 which focus on some key points as below:

- The Country Coordinating Mechanism (CCM) has a responsibility to coordinate the overall management of Global Fund grants within the country.
- The Resource Mobilization Committee (RMC) and Oversight Committee (OC) are permanent CCM committees whose purpose is to oversee the development and implementation of approved GFATM grants in the Lao PDR.
- To coordinate the funding request in an open, transparent and inclusive manner, the Lao PDR CCM delegates this function to a standing committee, the Resource Mobilization Committee (RMC) that will serve in this role and be accountable to the whole CCM.
- The OC is a permanent CCM committee whose purpose is to oversee the implementation of approved Global Fund grants in the country. Its goal is to ensure the implementation of activities and the use of resources in accordance with the grant agreement.
- Since oversight focuses on the macro level, the following overarching questions should be considered
  - Finance: Where is the money? Is it arriving on time? Is it being distributed properly, and promptly? Who is benefiting?
  - Procurement: Are the drugs, bed nets, laboratory supplies, etc. going where they need to go? Are implementers getting them on time? Is the distribution system safe and secure? Are patients receiving them?
  - Implementation: Are activities on schedule? Are the right people getting the services they need?
  - Results: Are targets being met?
  - Reporting: Are reports being submitted accurately, completely and on time? Where are the grant implementation bottlenecks (e.g. procurement, human resources, etc.)?
  - Technical Assistance: What technical assistance is needed to build capacity and resolve problems? What is the outcome of technical assistance?
- The main tools for implementing the oversight function are:
  - Regular OC meetings
  - Grant Dashboards summarizing managerial, financial and programmatic information based on available data and documents.
  - Field visits to the implementation sites of the Global Fund grants.
- The oversight work plan and calendar were also presented and discussed.

Summary discussion points:

- It was agreed that the meeting should be organized monthly as planned and focuses on the important issues. However, some monthly meeting may be skipped if no burning issue arisen.

<b>DICISIONS MADE</b>
<p><b>Decision:</b> The meeting agreed to have the regular OC meeting as planned and should focus on key issues.</p>

Agenda Item #3	Next CCM Site Visit
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED	
<ul style="list-style-type: none"> <li>As the objectives of site visit is not only to supervise and monitor the grant implementation but it is also to advocate for better engagement of all key stakeholders in the programs, the OC chair has proposed to invite the high ranking official (e.g. Vice Minister of Health) and non-CCM members to join the site visit with CCM and OC members. The expenditures for those participants may be requested from the programs and PR office.</li> <li>Several points regarding to the field visit were discussed and clarified, including annual schedule for field visit, roles of the visit team, and check list for the field visit and reporting template. The CCM Secretariat will circulate electronic files of all related documents to the members after the meeting for further review and comment.</li> <li>Many sites were proposed and discussed. Finally, the meeting agreed to visit at this time Attapeu province and 2 districts namely Phouvong and Saysettha were selected for field visit. The visit will take place between 24 and 27 March 2015 and a preparation meeting among the visit team should be held before the due date.</li> </ul>	

<b>DICISIONS MADE</b>
<p><b>Decision:</b></p> <ul style="list-style-type: none"> <li>The meeting agreed to visit Attapeu province between 24 and 27 March 2015 and a preparation meeting among the visit team should be held before the due date.</li> </ul>

Agenda Item #4	Update on program Dashboard
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED	
<ul style="list-style-type: none"> <li>GMS has developed Dashboard in 5 countries. In Lao PDR, the Dashboard has begun with HIV program as a pilot project and will be extended to other programs after evaluation.</li> <li>The results presented in this meeting are not up to date. Due to missing data from many partners, no data analysis has been performed during the period of July and December 2014.</li> <li>The reasons behind the incomplete data and late submission of data include: inadequate number of staff who work in logistic and procurement system and reporting, quick turnover of staff who were trained on this subject, and many SR involving in data collection and submission which some of them cannot send their report on time.</li> </ul>	
<b>DICISIONS MADE</b>	
<p><b>Decision:</b> The meeting agreed that each center and partners should prepare their report and submit to PR on time, based on reporting schedules.</p>	

Agenda Item #5	Update on PUDR and program management
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**SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED**

The PR Office Manager has presented the grant performance report of HIV, TB and Malaria during the period of January to June 2014. The key results are summarized as below:

**HIV grant performance:**

- Grant Amount: USD 23,360,161
- % disbursed by TGF (to date): 96%
- Expenditures Rate (as of end date of the latest PU): 93%
- The Program demonstrated an A1 performance with an average for Top Ten Indicators of 105% and 100% for all indicators. However, there remain many outstanding management issues which have not demonstrated much improvement. Therefore, this overall grant performance for this reporting period will be downgraded to an A2

**TB grant performance:**

- Grant Amount: USD 10,952,141
- % disbursed by TGF (to date): 99%
- Expenditures Rate (as of end date of the latest PU): 97%
- Overall rating is B1 because an average performance of Top Ten indicators was 72% of achievement, all indicators 62% of achievement, and there remain many outstanding management issues which have not demonstrated much improvement

**Malaria grant performance:**

- Grant Amount: USD 24,708,521
- % disbursed by TGF (to date): 99%
- Expenditures Rate (as of end date of the latest PU): 107%
- Overall rating is B1 because an average performance of Top Ten indicators was 105% of achievement, all (11) indicators 85% of achievement, and there remain many outstanding management issues which have not demonstrated much improvement.

The meeting concurred with the presentation and no substantial decision made.

**DECISIONS MADE**

**Decision:**  
The meeting agreed with the presentation.

Agenda Item #6	Review a reprogramming of TB component
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**SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED**

**TB Budget Reprogramming Jan-Jun 2015**  
Background

- GF requesting to provide a consolidated budget and work plan for the year 2015 (including

previous TB grant Jan-June 2015 and NFM Jul-Dec 2015)

- Purpose of reprogramming is to identify savings for matching activities with cash available Jan-Jun 2015

#### SUMMARY BUDGET BREAKDOWN BY IMPLEMENTING ENTITY (Jan-Jun 2015)

No		Total Budget reprogrammed for Q1&Q2/2015	Total budget approved for Q1&Q2/2015 as per IL# 6	Variance	Justifications
1	PR	207,297	207,296.85	-	
2	NTC (MOH)	759,504	970,551.52	(211,047.31)	Some cancelation and reduction of activities which are less priority, not directly linked to indicators in order to save money for NFM grant
3	CICML (MOH)	8,100	34,120.34	(26,020.34)	Same explanations
4	LYU	27,657	43,188.74	(15,532.14)	Same explanations
5	LaoPHA	41,725	72,060.56	(30,335.88)	Same explanations
6	MAAP	19,179	34,151.25	(14,972.65)	Same explanations
7	PEDA	33,285	56,908.85	(23,624.13)	Same explanations
8	PSI	76,164	53,267.37	22,896.47	PSI has some saving from previous year and proposes to increase budget for some specific lines which can help PSI to find more cases during this six months. The budget lines where increased are related to HR, training and M&E activities. Please see in detailed budget Year Y4 for PSI.
<b>TOTAL*</b>		<b>1,172,909</b>	<b>1,471,545.48</b>	<b>(298,635.98)</b>	

The adjust budget of TB program was presented and reviewed by the partners of NTC

The capacity assessment has being carried out to select the partners who will be SR or SSR of the national TB program for New Funding Model.

#### **DICISIONS MADE**

##### **Decision:**

The meeting agreed with the presentation.

Agenda Item #7	Review a reprogramming of RAI project
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**SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED**

The RAI Country Focal Point presented the overview of RAI project and reprogramming for Lao PDR, as below:

- Goal:
  - To contribute to the elimination of Falciparum Malaria in the GMSR and to prevent the emergence or spread of Artemisinin resistance to new areas.
- Objectives:
  - To ensure high level of usage and coverage of insecticide treated bed nets
  - To provide universal access to quality diagnosis and treatment
  - To halt marketing and sale of oral Artemisinin monotherapies
  - To closely monitor trends in malaria cases, to identify and take action to control outbreaks, and to undertake TES in sentinel sites
- Reprogramming Priorities
  - Artemisinin resistance reported in Champasak province – Tier 1 now
    - ✓ Need to expand RAI activities to all provinces bordering CPS
    - ✓ Now four provinces and 27 districts
    - ✓ Need to use saving from 2014 to expand activities geographically
- Need to improve stock manage
  - mSupply now included in RAI budget (\$318,654)
- Summary Budget for Reprogramming 2015 to 2016
  - Total budget for 2015 = 1,761,692.28
  - Total budget for 2016 = 1,561,186.72
  - Grand total = 3,322,879.00

Summary key discussion points:

- RAI budget negotiation for year 2 will be taken place in Bangkok on 4 March 2015
- Unclear guideline from the Global Fund whether the RAI reprogramming should be submitted to the CCM for approval or be sent directly to the Global Fund. However, as proposed by the RSC, the Ex-Com agreed during its last meeting held on 20 February 2015 to issue the letter of support for the RAI reprogramming after the OC has reviewed and recommended.
- The meeting proposed that the expenditure of reprogramming should be described more detail and transparency.

**DICISIONS MADE**

- Decision:**
- The meeting agreed to recommend the proposed RAI reprogramming to the Ex-Com for approving and issuing the letter of support to be sent to the regional PR and the RSC.

**4. SUMMARY OF DICISIONS AND ACTION POINTS**



AGENDA ITEM NO.	WRITE IN DETAIL THE DICISIONS	KEY PERSON RESPONSIBLE	DUE DATE
Agenda Item #1	The meeting agreed with the proposed agenda.		
Agenda	The meeting agreed to have the regular OC meeting as planned	CCM Sec	

Item #2	and should focus on key issues.		
Agenda Item #3	The meeting agreed to visit Attapeu province between 24 and 27 March 2015 and a preparation meeting among the visit team should be held before the due date.	CCM Sec	24-27 Mar 15
Agenda Item #4	The meeting agreed that each center and partners should prepare their report and submit to PR on time, based on reporting schedules.	PR	
Agenda Item #5	The meeting agreed with the presentation.		
Agenda Item #6	The meeting agreed with the presentation.		
Agenda Item #7	The meeting agreed to recommend the proposed RAI reprogramming to the Ex-Com for approving and issuing the letter of support to be sent to the regional PR and the RSC.	CCM Sec and RAI Focal Point	by 4 Mar 15

#### 5. NEXT MEETING

LOCATION/VENUE	
DATE:	
TIME	

#### 6. OC MEETING MINUTES PREPARED BY:

TYPE/PRINT NAME	Budhsalee Rattana/ Phouvichit Xongmixay	DATE:	 29/4/2015
FUNTION/ POSITION	Coordinator Assistant (CA)/ Technical Assistant	SIGNATURE	

#### 7. OC MEETING MINUTES APPROVED BY:

TYPE/PRINT NAME	<i>Dr. Philaysak Naphayvong</i>	DATE:	29/4/2015
FUNTION/ POSITION		SIGNATURE	