

CCM Meeting Minutes

INPUT FIELDS INDICATED BY YELLOW BOXES

MEETING DETAILS

COUNTRY (CCM)		Lao PDR		TOTAL NUMBER OF <u>VOTING</u> MEMBERS PRESENT (INCLUDING ALTERNATES)		17	
MEETING NUMBER (if applicable)		N.A		TOTAL NUMBER OF MEMBERS and ALTERNATES PRESENT		18	
DATE (dd.mm.yyyy)		17/03/2017		TOTAL NUMBER OF <u>NON-CCM</u> MEMBERS / OBSERVERS PRESENT (INCLUDING CCM SECRETARIAT STAFF)		26	
DETAILS OF PERSON WHO CHAIRED THE MEETING							
HIS / HER NAME & ORGANISATION	First name	Assoc. Prof. Dr. Phouthone		QUORUM FOR MEETING WAS ACHIEVED (yes or no)		Yes	
	Family name	Muongpak		DURATION OF THE MEETING (in hours)		4	
	Organization	Ministry of Health		VENUE / LOCATION	Ministry of Health		
HIS / HER ROLE ON CCM (Place 'X' in the relevant box)	Chair			MEETING TYPE (Place 'X' in the relevant box)	Regular CCM meeting	X	
	Vice-Chair				Extraordinary meeting		
	CCM member				Committee meeting		
	Alternate						
HIS / HER SECTOR* (Place 'X' in the relevant box)				GLOBAL FUND SECRETARIAT / LFA ATTENDANCE AT THE MEETING (Place 'X' in the relevant box)		LFA	
GOV	MLBL	NGO	EDU	PLWD	KAP	FBO	PS
X							
				FPM / PO		X	
				OTHER		X	
				NONE			

LEGEND FOR SECTOR*

GOV	Government	PLWD	People Living with and/or Affected by the Three Diseases
MLBL	Multilateral and Bilateral Development Partners in Country	KAP	People Representing 'Key Affected Populations'
NGO	Non-Governmental & Community-Based Organizations	FBO	Religious / Faith-based Organizations
EDU	Academic / Educational Sector	PS	Private Sector / Professional Associations / Business Coalitions

SELECT A SUITABLE CATEGORY FOR EACH AGENDA ITEM (Place 'X' in the relevant box)																
GOVERNANCE OF THE CCM, PROPOSALS & GRANT MANAGEMENT RELATED TOPICS																
AGENDA ITEM No.	WRITE THE TITLE OF EACH AGENDA ITEM / TOPIC BELOW	Review progress, decision points of last meeting – Summary Decisions	Review CCM annual work plans / budget	Conflict of Interest / Mitigation	CCM member renewals/appointments	Constituencies engagement	CCM Communications / consultations with in-country stakeholders	Gender issues	Proposal development	PR / SR selection / assessment / issues	Grant Consolidation	Grant Negotiations / Agreement	Oversight (PUDRs, management actions, LFA debrief, audits)	Request for continued funding / periodic review / phase II / grant consolidation / closures	TA solicitation / progress	Other
Opening Program	<ul style="list-style-type: none"> Introduction and endorsement of agenda and the last meeting minutes Quorum verification and conflict of interest identification 															
AGENDA ITEM #1	1. Review the final draft of TB application for the GF new funding cycle 2018-2020															

AGENDA SUMMARY

AGENDA ITEM No.	WRITE THE TITLE OF EACH AGENDA ITEM / TOPIC BELOW
Opening Program	<ul style="list-style-type: none"> Introduction and endorsement of agenda and the last meeting minutes Quorum verification and conflict of interest identification
AGENDA ITEM #1	1. Review the final draft of TB application for the GF new funding cycle 2018-2020

AGENDA ITEM #2	2. Review the final draft of HIV application for the GF new funding cycle 2018-2020																		
AGENDA ITEM #3	3. Review Performance Updates and Disbursement Request (PUDR)																		
AGENDA ITEM #4	4. AOB and close the meeting																		

MINUTES OF EACH AGENDA ITEM

Opening Program	<ul style="list-style-type: none"> The meeting chaired by CCM Chair, Assoc. Prof. Dr. Phouthone Muongpak Quorum was verified with 17 voting members out off total 24 CCM members Conflict of interest was notified and identified.
------------------------	---

AGENDA ITEM #1	Review the final draft of TB application for the GF new funding cycle 2018-2020
----------------	--

CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)

COI identified in this item as CCM Chair is PR representative. Thus, there were 16 voting members for this item.

WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>	Yes
--	-----

SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED

GF Senior Fund Portfolio Manager (SFPM) noted the purpose of her visit in Lao PDR was primarily to participate in the Planning Workshop for Transition of implementation arrangements. She recognized the challenges for the country to develop two funding requests within a short time deadline (20 March 2017) while the (reduced) allocation was only set in 15 December 2016.

SFPM made the following observations:

- HIV funding request: Given that HIV proposal has just been drafted, there had not been opportunity for review by stakeholders or CT, or for strategic discussions to take place on HIV priorities and needed increases in national funding. She recommended that the next application deadline 23 May (in 6 weeks) would allow the country to discuss strategic vision for the National HIV Response and to have meaningful discussion on investment decisions and co-financing.
- TRP review: would be likely to raise many issues requiring CCM response, potentially delaying the grant approval process. It would be better to spend more time 'up front' to develop a robust funding request that could more readily pass TRP review. The next request in May would need to be very well considered, detailed and costed in order to enable grant signature before December 2017.
- TB funding request: TB program has provided more opportunity for consultation (dating from NSP consultations in November 2016) and had circulated drafts along the way. A suggestion would be for the CCM to consider endorsement conditional to further clarification/refinement of presentation of some issues.

TB Funding Request presentation

Based on the Global Fund Allocation Letter for Lao PDR on 15th December 2016, TB has been allocated US\$7,393,149 for three years (2018-2020). The Final Draft of the TB funding application including RSSH component was presented to the CCM members by NTC coordinator. Based on RMC meeting conducted on 17th February, it was agreed that the 6% allocation from HIV will be allocated to the TB grant for ease of management, final budget for TB is US\$ 7,835,594.76.

Following the presentation, members complimented the TB Program for achieving a timely development of TB Concept Note and opened the floor for discussion. The following concerns were raised by the participants:

- GF Program Split: SFPM noted that although it was previously decided at the CCM meeting that for ease of management the 6% RSSH allocation from HIV will be allocated to TB grant, unless the proposed Program Split was modified to reflect this decision, the grant ceilings (established by the program split) would not allow for this. In this regard, program split description should subtract the earmarked RSSH component (US\$442,445.76) from HIV allocation and add this to the TB allocation.

The CCM noted that the malaria grant under RAI was also contributing 6% of the malaria allocation to the overall RSSH approach – however it was being retained under the malaria allocation.

2. *GF proposed Program Split should be described as follows:*

HIV/AIDS: US\$ 7,374,096 – US\$ 442,445.76 = **US\$ 6,931,650.24**

Allocate 6% of HIV allocation (US\$ 442,445.76) to TB grant for RSSH activities in order to simplify a single management

TB: US\$ 7,393,149 + US\$ 442,445.76 = **US\$ 7,835,594.76**

Allocate 6% of TB allocation (US\$ 443,588.94) for RSSH activities

After changes made to GF proposed Program Split. Quorum was verified, CCM members endorsed the changes in the description of GF proposed Program Split US\$442,445.76 from HIV allocation to TB funding and increase TB allocation.

Following the voting on Program Split, other comments were raised:

3. RMC chair noted that OC and RMC recommendations made on RMC & OC meeting on 14th March for TB allocation have been addressed. Such as:
 - a) Clarification of the role of CHAI in the TB application
 - b) Questions in relation to the willingness to pay and co-financing requirement of the GF
4. CHAS director acknowledged the two programs have worked together to strengthen collaboration between the two diseases programs. Eg. TB-HIV co-infection, guidelines and capacity building of staff, joined assessment of HIV-TB for prisoners and detention centers, etc.
5. SFPM: GF will have questions and will be flagged to the writing team before GF sends request to the TRP. Eg. How was the quality of the country dialogue, issues raised in the CD and how this has been addressed? How the country finds efficiency? How were the national inconsistencies addressed? What is the basis of allocation and above allocation? Synergies between TB and HIV, peer outreach for TB and HIV? How the RSSH supports sustainability, etc.?

Quorum was verified, CCM members endorsed TB funding request, including RSSH component.

SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM

DECISION(S)

- The quorum was verified with 16 voting members 16/17 (CCM Chair has recused from voting). CCM members endorsed to add in GF proposed Program Split US\$ 442,445.76 from HIV allocation to TB funding and increase TB allocation by 16 votes.
- The quorum was verified with 16 voting members 16/17 (CCM Chair has recused from voting). CCM members endorsed TB funding request, including RSSH component by 16 votes.

ACTION(S)	KEY PERSON RESPONSIBLE	DUE DATE

MINUTES OF EACH AGENDA ITEM

AGENDA ITEM #2	Review the final draft of HIV application for the GF new funding cycle 2018-2020
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)	
COI identified in this item as CCM Chair is PR representative. Thus, there were 16 voting members for this item.	
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no) >	
Yes	
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED	
Based on the Global Fund Allocation Letter on 15 December 2016 for Lao PDR, HIV has been allocated US\$7,374,096 for three years (2018-2020). The HIV Program design to be incorporated in the funding application was presented by CHAS. It was highlighted the challenging process conducted by the team to slash	

key activities (e.g. activities for MSM, reduction on items related to program management and contract staff, removal of incentives, removal of TA, etc.) and cost items to respond to the reduction of funds allocated for the HIV Program and in order to accommodate the RSSH allocation and co-financing schemes. Concerns were highlighted by the program on the negative impact of the fund reduction in relation to transition readiness of the country, and the exclusion of MSM in this proposal.

Final allocation for HIV US\$ 6,931,650.24 excluding 6% RSSH component.

After the presentation, the vice-chair requested comments from the participants:

1. RMC chair noted that the comments and concerns raised at RMC & OC meeting held on 14th March were mostly addressed. The concerns were mainly related to:
 - a. Use of not all but part of the cascade approach in other provinces for prevention purposes;
 - b. Use government funding for the capacity building of government staff
 - c. Use more integrated approach related to Health activities and processes and disseminate information to INGO/Development partners on where is the gap and what are the priority needs for other funding opportunities and for where NGOs/CSOs can focus (e.g. SRH, MCH, HIV, etc.)
2. KAP representative emphasized to focus in treatment for patients living close to the borders given their limited budget to access treatment and the lack of transportation in those areas.
3. CHAS noted that Transition Task Team (TTT) is supporting transition plan to move forward to new mechanism. The allocation of US\$7,374,096 that GF informed in the middle of December, made difficult for CHAS to plan interventions. This fact should pressure the Government to increment their support and accomplish GF transition.
4. France representative informed there is update information of key affected and at risk populations for HIV to inform the population size estimation. She acknowledge with the support of the 5% Initiative, CHAS conducted a review of their data. She also suggested a change of strategy to check Laos low burden.
5. SFPM noted that given the allocation decrease to Lao PDR, it is very complex to address all HIV needs in such a short space of time. It is essential for the program plan strategically, together with relevant areas of the MoH involved with planning and budget eg DPIC and DoF and other key stakeholders including KPs. This should set out a vision for the National HIV response and then different funding sources (eg GF, USG, FEI) could be used according to national priorities. It was recommended that the funding request identify how questions related to data (including inconsistencies in denominators and cascade, population size and PWID) will be addressed; interventions need to be prioritized according to greatest impact on the disease burden for the country, and how MoH can gradually increase its contribution.
6. CCM chair noted, HIV application is aligned with Country Strategy and suggested that given the limited budget, CHAS should consider other donors.

Following the above comments, the participants suggested to prepare a better HIV proposal and to submit HIV funding request in May. However it was noted all key persons needed to be available to work together with CHAS and other TAs, otherwise there was further risk of delay. Partners were looking for additional funding sources to extend provision of TA.

CCM members endorsed to submit HIV funding request in May.

The Chair closed and thanked the CCM and National Programs for doing their best in funding request process.

SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM

DECISION(S)

- CCM members endorsed to submit HIV funding request in May.

KEY PERSON
RESPONSIBLE

DUE DATE

--	--	--	--

MINUTES OF EACH AGENDA ITEM			
AGENDA ITEM #3	Review Performance Updates and Disbursement Request (PUDR)		
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)			
No COI identified in this item.			
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no) >			Yes
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED			
Due to time constrains this item was not develop.			
SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM			
DECISION(S)			
• No decision.			
ACTION(S)	KEY PERSON RESPONSIBLE	DUE DATE	

MINUTES OF EACH AGENDA ITEM			
AGENDA ITEM # 4	AOB and close the meeting		
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)			
No COI identified in this item.			
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>			Yes
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED			
No AOB			
SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM			
DECISION(S)			
No decision.			
ACTION(S)	KEY PERSON RESPONSIBLE	DUE DATE	

SUMMARY OF DECISIONS & ACTION POINTS			
AGENDA ITEM NUMBER	WRITE IN DETAIL THE DECISIONS & ACTION POINTS BELOW	KEY PERSON RESPONSIBLE	DUE DATE
AGENDA ITEM #1	<ul style="list-style-type: none"> CCM members endorsed to add in GF proposed Program Split US\$ 442,445.76 from HIV allocation to TB funding and 		

	<ul style="list-style-type: none"> increase TB allocation by 16 votes. CCM members endorsed TB funding request, including RSSH component by 16 votes. 		
AGENDA ITEM #2	<ul style="list-style-type: none"> CCM members endorsed to submit HIV funding request in May. 		
AGENDA ITEM #3	<ul style="list-style-type: none"> No decision. 		
AGENDA ITEM #4	<ul style="list-style-type: none"> No decision. 		


SUPPORTING DOCUMENTATION	Place an 'X' in the appropriate box	
	Yes	No
ANNEXES ATTACHED TO THE MEETING MINUTES	X	
AGENDA CIRCULATED ON TIME BEFORE MEETING DATE	X	
ATTENDANCE SHEET COMPLETED	X	
DISTRIBUTION OF MINUTES WITHIN ONE WEEK OF MEETING	X	
FEEDBACK INCORPORATED INTO MINUTES, REVISED MINUTES ENDORSED BY CCM MEMBERS*	X	
MINUTES DISTRIBUTED TO CCM MEMBERS, ALTERNATES AND NON-MEMBERS	X	

CHECKLIST (Place 'X' in the relevant box)

	YES	NO	
AGENDA CIRCULATED ON TIME BEFORE MEETING DATE	X		The agenda of the meeting was circulated to all CCM members, Alternates and Non-CCM members <u>2 weeks</u> before the meeting took place.
ATTENDANCE SHEET COMPLETED	X		An attendance sheet was completed by all CCM members, Alternates, and Non-CCM members present at the meeting.
DISTRIBUTION OF MINUTES WITHIN ONE WEEK OF MEETING	X		Meeting minutes should be circulated to all CCM members, Alternates and non-members within <u>1 week</u> of the meeting for their comments, feedback.
FEEDBACK INCORPORATED INTO MINUTES, REVISED MINUTES ENDORSED BY CCM MEMBERS*	X		Feedback incorporated into revised CCM minutes, minutes electronically endorsed by CCM members, Alternates and non-members who attended the meeting.
MINUTES DISTRIBUTED TO CCM MEMBERS, ALTERNATES AND NON-MEMBERS	X		Final version of the CCM minutes distributed to CCM members, Alternates and Non-members and posted on the CCM's website where applicable within <u>15 days</u> of endorsement.

CCM MINUTES PREPARED BY:

CCM MINUTES PREPARED BY:

PREPARED BY	Ms. Silvia Elena Illescas Matus	DATE	20/03/2017
FUNTION/ POSITION	UNV WHO Health advocacy and coordination	SIGNATURE	

CCM MINUTES APPROVAL:

APPROVED BY	Assoc. Prof. Dr. Phouthone Muongpak	DATE	23 MAR 2017
FUNTION/ POSITION	CCM Chair	SIGNATURE	