

CCM Meeting Minutes

INPUT FIELDS INDICATED BY YELLOW BOXES

MEETING DETAILS									
COUNTRY (CCM)		Lao PDR			TOTAL NUMBER OF CCM MEMBERS PRESENT (INCLUDING ALTERNATE)			20	
MEETING NUMBER (if applicable)		03			TOTAL NUMBER OF VOTING MEMBERS PRESENT (INCLUDING ALTERNATES)			18	
DATE (dd.mm.yy)		27 May 2020			TOTAL NUMBER OF NON-CCM MEMBERS / OBSERVERS PRESENT (INCLUDING CCM SECRETARIAT STAFF)			24	
DETAILS OF PERSON WHO CHAIRED THE MEETING									
HIS / HER NAME & ORGANISATION		First name	Dr. Soulany			QUORUM FOR MEETING WAS ACHIEVED (yes or no)			Yes
		Family name	Chansy			DURATION OF THE MEETING (in hours)			3
		Organization	Lao Red Cross			VENUE / LOCATION		6 th floor meeting room, MOH	
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	X					Extraordinary meeting	
		CCM member						Committee meeting	
		Alternate				GLOBAL FUND SECRETARIAT / LFA ATTENDANCE AT THE MEETING (Place 'X' in the relevant box)		LFA	X
HIS / HER SECTOR* (Place 'X' in the relevant box)									
GOV	MLBL	NGO	EDU	PLWD	KAP	FBO	PS	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 Quorum verification and conflict of interest identification Update follow up action from the last meeting 	X														
AGENDA ITEM #1	Review and consider for endorsement the draft Funding								X							

*Consensus is general or widespread agreement by all members of a group.

ENTER THE NUMBER OF MEMBERS AGAINST THE DECISION >

ENTER THE NUMBER OF VOTING CCM MEMBERS WHO ABSTAINED >

MINUTES OF EACH AGENDA ITEM

AGENDA ITEM #1	Review and consider for endorsement the draft Funding Request for the Global Fund COVID-19 Response Mechanism (C19 RM)	
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)		
No COI identified in this item due to the absentee of the CCM member who is MOH representative.		
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no) >		NA
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED		
<p>The representative of the national programs, on behalf of the writing team, has presented the Funding Request for the Global Fund COVID-19 Response Mechanism (C19 RM) to the meeting as follow:</p> <p>Background C19RM Funding: submission split into Priority 1 and 2 activities, with a cost ceiling of \$1,697,421, to be spent by 30th June 2021, with the following eligibility and requirements</p> <p><u>Priority 1: \$901,820</u> <u>Priority 2: \$795,601</u></p> <p>Eligible Activities:</p> <ul style="list-style-type: none"> • Mitigate impact of COVID-19 on HIV, TB, and malaria programs • Reinforce the COVID-19 response • Make urgent improvements in health and community systems; engagement with vulnerable communities <p>Requirements:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Based on priorities and gaps identified in national COVID-19 response plan <input checked="" type="checkbox"/> Must be in line with WHO recommendations <input checked="" type="checkbox"/> Coordinated and submitted by the CCM <input checked="" type="checkbox"/> CSOs to be engaged in funding request development <p>COVID Response The C19RM submission will align with the priority areas of the Ministry of Health's draft National Action Plan, and <u>closely coordinate</u> on joint PPE and training efforts</p> <p>Priority Areas:</p> <ol style="list-style-type: none"> 1. Command, coordination and planning 2. Infection prevention and control 3. Case management 4. Surveillance and laboratory 5. Non-pharmaceutical public health measures 6. Essential services – ensure all health facilities can operate to manage non-COVID patients, establish triage systems and algorithms to properly refer non-COVID patients for treatment; ensure sufficient health commodities and PPE in a timely manner to all facilities. 7. Risk Communication and Community Engagement <p>COVID Impact on HIV, Malaria and TB Service Delivery</p> <p>Impact of COVID-19 on HIV Service Delivery: decline in testing and pause of community outreach will delay diagnosis, leading to immunocompromised patients. Concerns on treatment adherence and support for AHD</p> <p>Patient Risks</p> <ol style="list-style-type: none"> 1. Diagnosed patients may miss appointments - drop in treatment adherence, increase in drug resistance. 2. Identify and support high risk immune-compromised patients – those with advanced HIV disease 		

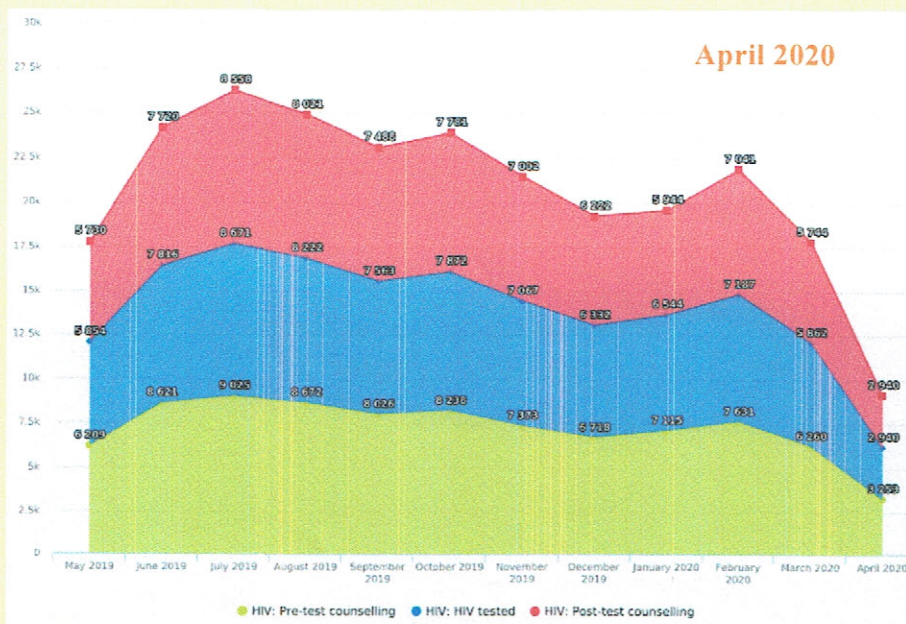
(AHD) to access proper screenings and prophylaxis

3. **Returnees** may be taking ARVs and need to continue treatment in Laos – gather data to make stock plan

Case Finding and Community Outreach

1. At-risk key populations not seeking HCT; VCT testing numbers down; increased stigma – **reduction in case finding, late diagnosis** and higher chance of AHD
2. **No community outreach** activities for screening and testing referral for key populations – missed diagnosis

HIV Testing by Month, Lao PDR



Impact of COVID-19 on Malaria Service Delivery: delayed care seeking and reduced immunity in returnees may lead to more cases; disruption in supply chain and programmatic activities will reduce access and quality of services

Patient Risks

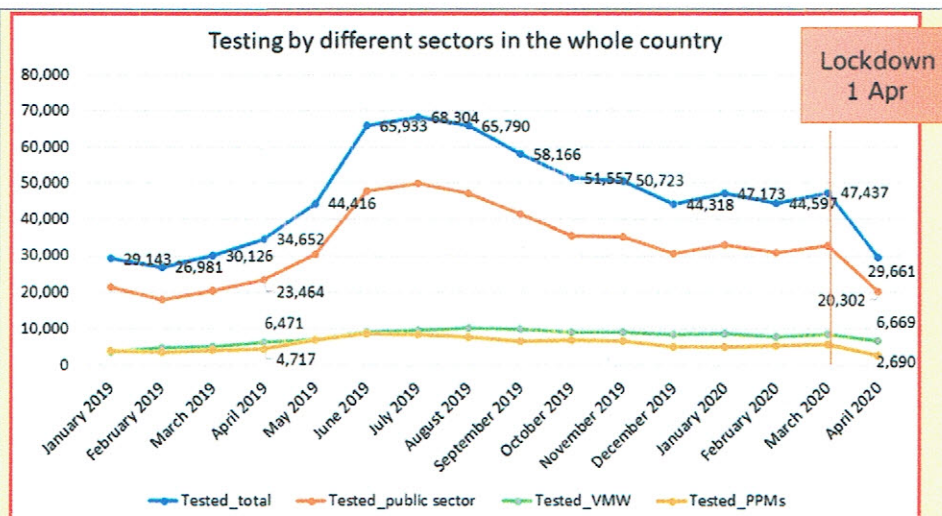
1. **Returnees** from neighboring countries – reduced immunity, increased risk of transmission; not enough LLINs

Case Finding and Community Outreach

1. Disruption to health services and **care seeking** – delayed diagnosis; increase in severe cases

Program Risks

1. Disruption to **supply chain** of malaria commodities – possible stock outs due to global effects of COVID-19, delivery delays
2. Disruption to **programmatic activities** (trainings, surveillance, case investigation) – reduction in quality of services



Impact of COVID-19 on TB Service Delivery: Decrease in care seeking and reduction in sample transport delays diagnosis and treatment

Patient Risks

1. Need **clear IPC protocol** to triage and refer presumptive COVID and presumptive TB cases; coordinate response to screen those with respiratory symptoms for TB
2. Patients may delay or miss appointments; **pause of DOTS** may lead to worse treatment success rates

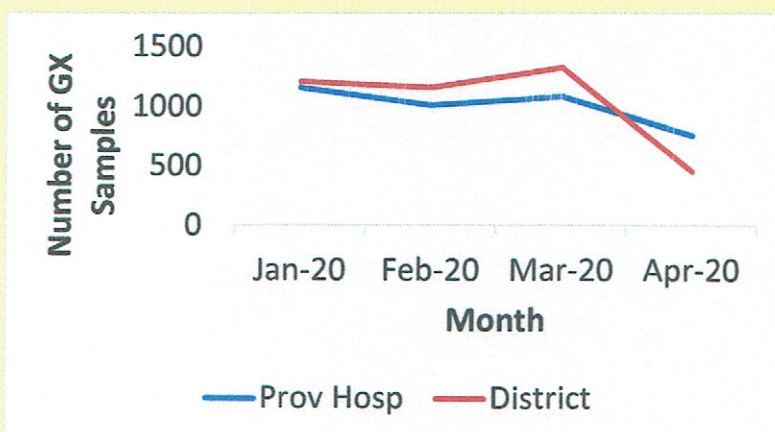
Case Finding and Community Outreach

1. Reduction in buses and border checkpoints limit **sample transport** from community to district – reduces GX testing
2. TB presumptive may not seek care; reduction of home visits for contact tracing
3. **Returnees** may be in high risk group for TB, support screening and continue treatment for diagnosed patients

Program Risks

1. Lack of real-time case data via **TB Tracker** on DHIS

Number of GX Samples by Month, Lao PDR



Summary of COVID impact on routine health services Health System

- How to continue vital testing services
- Linkage to routine services
- Missing or incomplete HMIS data
- Coordination between subnational units

Healthcare Workers

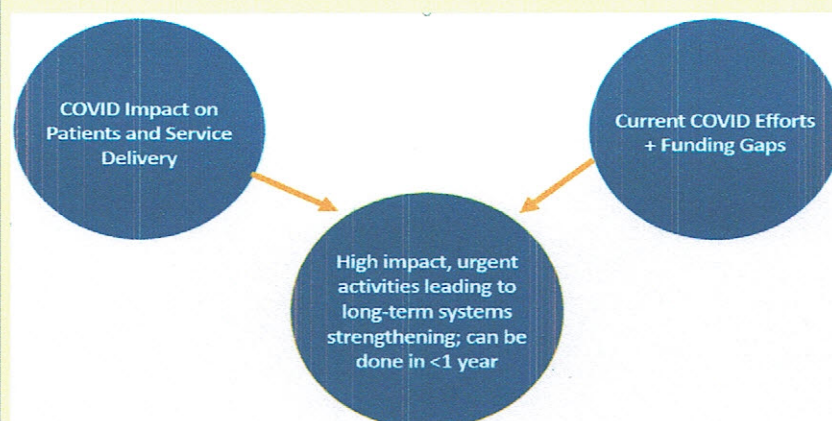
- PPE
- IPC
- Trainings

Patients, Community

- Low care seeking
- No community outreaches
- Missed cases
- Missed appointments
- Returnee support

Priority Activities

Priority activities will be responsive to COVID impact on essential services; complement the national COVID response; and be impactful, sustainable, and feasible



Joint Priority Activities

Activity Category: Mitigate COVID-19 Impact on HIV, TB and Malaria Programs

Key Investments: Equip primary healthcare levels to maintain essential, routine health services, to ensure patient coverage and access

Activity	Coordination with National COVID Action Plan	Priority 1 (USD)	Priority 2 (USD)
One day cascade training on infection prevention and control (IPC) and events-based surveillance (EBS) at the health center and village levels	Work closely with DHR and NCLE on training agenda, presentation and materials	\$230,337	
Provide PPE: surgical masks to health centers (during training) to cover health center and VHV needs; hand sanitizer to 2000 priority VMWs	Work closely with EOC, COVID procurement task force on PPE gaps	\$84,000	\$84,000
Provide phone credit for routine EBS reporting from health centers/villages to the DHO and P. DCDC for 6 months period	Coordinate closely with NCLE's EBS plans	\$80,365	

Activity Category: Mitigate COVID-19 Impact on HIV, TB and Malaria Programs

Additional Investments: Ensure routine M&E surveillance, enable telehealth services, ensure supply security of malaria testing

Activity	Priority 1 (USD)	Priority 2 (USD)
----------	------------------	------------------

Clinical training on HIV patient management during pandemic	\$8,806	
HIV DHIS2 data management monitoring and supervision at ART and POC sites	\$33,373	\$13,376
Workshop on routine use of TB Tracker to allow real-time data monitoring of TB cases		\$52,243
Airtime to health staff to provide telehealth services to patients to reduce infection; decongest health facilities		\$104,400
Procurement of ~200,000 malaria RDTs		\$100,000

Activity Category: Building capacities at sub national level and ensuring access to health services for vulnerable and key populations

Lab Investments: Strengthen essential lab services, improving patient access by bringing service closer to point of care

Activity	Priority 1 (USD)	Priority 2 (USD)
Launching HIV viral load testing using GeneXpert devices, including 8000 GX VL cartridges	\$160,000	
Bio-safety cabinets for 11 GeneXpert laboratories not yet equipped	\$36,000 (3)	\$96,000 (8)
Providing support to 44 GX lab technicians to kick start integrated GX testing for TB, HIV and COVID	\$57,000	\$38,000
Providing 1040 small fridges for district hospitals and priority health centers for TB sample storage	\$15,752 (88)	\$170,408 (952)
Additional 5 GeneXpert machines for high burden GX testing sites	\$57,000 (3)	\$38,000 (2)
Additional 6 CD4 testing machines	\$22,000 (2)	\$44,000 (4)

Activity Category: Urgent improvements in health and community systems

Community Investments: Community-based support to extend screening, testing, and referral services to vulnerable groups

Activity	Priority 1 (USD)	Priority 2 (USD)
Surgical masks for 445 PPM staff and 300 CBO health workers, including 50 MSM/TG peer mobilizers, 30 HIV peers, 30 FSW peers, 40 community outreach workers to maintain routine outreach services	\$58,100	
IEC material development of radio messages and printed pamphlets for the general public to build confidence to seek care at health facilities	\$25,000 (Province)	\$75,000 (125 districts)
Community based drugs delivery for 30% of HIV patients and tracing HIV patients who have missed appointments	\$23,500	
Household visits to 30% of new TB patients for drugs delivery, household contact screening, health education, and tracing late TB patients for treatment adherence	\$15,730	\$12,584

Budget summary: majority of budget proposed for cross-cutting activities and procurement that benefit all programs, and align with COVID National Action Plan

85% of overall budget to be directly managed by MOH PR, and to be allocated to specific implementers:

- This includes cross-cutting activities such as trainings and providing some PPE for all health centers and village workers; IEC radio messages to general public
- This also covers COVID-specific and program-specific procurement needs, such as biosafety cabinets,

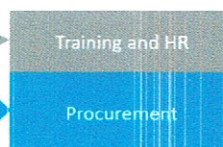
GeneXpert machines, CD4 machines, and malaria RDTs, that can be procured by the MOH PR/PMU. The remaining 15% of budget is for program specific and CBO activities, with:

- 6% of budget to CBOs for CBO/PPM PPE, community-based dispensing, and home visits
- 5% of budget to NTC for GX lab technician support and a TB Tracker workshop
- 4% of budget to CHAS for clinical management and DHIS2 trainings

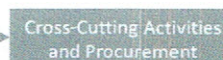
(Note: CMPE specific needs such as RDT procurement is included under the 85% MOH PR budget)

Detailed budget summary by cost type and by recipient

By Cost Type	Priority 1	Priority 2	Total	%
Human Resources	29,663	0	29,663	2%
Travel related costs	311,748	78,201	389,950	23%
Health Products - Non-Pharmaceuticals	164,322	184,000	348,322	21%
Health Products - Equipment	275,000	178,000	453,000	27%
Non-health equipment	15,752	170,408	186,160	11%
Communication Material and Publications	105,365	179,400	284,765	17%
Total	901,851	790,009	1,691,860	100%



By Recipients	Priority 1	Priority 2	Total	%
Principal Recipient	732,677	711,808	1,444,485	85%
Ministry of Health of the Lao People's Democratic Republic	732,677	711,808	1,444,485	85%
Sub-Recipients	169,174	78,201	247,376	15%
NTC	29,663	52,240	81,903	5%
CHAS	42,181	13,377	55,558	4%
CBOs	97,330	12,584	109,915	6%
CMPE (RDT and PPM PPE procurement included under PR)	0	0	0	0%
Total	901,851	790,009	1,691,860	100%



Summary Key Points from the meeting

- The application has to be linked and aligned with the national COVID19 preparedness and response plan;
- Well coordination is very important to avoid duplication and to ensure the effectiveness of the program as there are many sources of funds supported to the government in implementing the national COVID 19 preparedness and response plan;
- Specific activities with timeframe and implementing agencies are determined in the detail interventions table;
- The intervention may start from early July 2020 to the end of June 2021;
- Department of Communicable Disease Control (CDC) and all provincial CDC division will be the key focal points for coordinating and implementing the interventions with the national programs and concerned partners;
- The main parts of budget are allocated for the essential health services at the community level, building capacities at sub-national level and ensuring access to health services for vulnerable and key population, and community-based support to referral and testing and support to patients for treatment. Some budget is allocated for health and non-health equipment. There is no budget for the vehicle;
- Regarding the funding flow mechanism, according to the Prime-Minister's Decree, No. 504 dated 23 April 2020, all new external funding sources supporting the implementation of the national COVID 19 preparedness and response plan are required to channel through the Ministry of Foreign Affairs. Given the fact that the Global Fund is making available immediate funding to help countries that directly receive Global Fund financing to fight COVID-19 and mitigate the impacts on lifesaving HIV, TB and malaria programs, the applicants are encouraged to submit their funding request as quickly as possible. The Global fund team will review the application upon receiving the application and will proceed the funding disbursement shortly through the current funding flow mechanism after completion of the reviewing process.

Decision Point

- Before voting, the quorum was verified with total 18 voting members. CCM members have unanimously endorsed the funding request for the Global Fund COVID-19 Response Mechanism

DECISION(S)

CCM members have endorsed unanimously the funding request for the Global Fund COVID-19 Response Mechanism

ACTION(S)	KEY PERSON RESPONSIBLE	DUE DATE
Submit C19 RM application to the Global Fund	National Programs, PR and CCM	31 May 2020

DECISION MAKING

MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS		
	VOTING	VOTING METHOD (Place 'X' in the relevant box)	SHOW OF HANDS	
			SECRET BALLOT	
		ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF</u> THE DECISION		>
		ENTER THE NUMBER OF MEMBERS <u>AGAINST</u> THE DECISION		>
*Consensus is general or widespread agreement by all members of a group.		ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u>		>

MINUTES OF EACH AGENDA ITEM

AGENDA ITEM #2	Review and consider for endorsement the results of sub-recipients (SR) selection for the RAI grant implementation of the Global Fund allocation utilization period 2021-2023 in Lao PDR
----------------	---

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

The CCM member who is a representative from HPA has been identified as COI in this item and rescued from voting.

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

SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED

The representative of CMPE, on behalf of the selection committee, presented the results of sub-recipients (SR) selection for the RAI grant implementation of the Global Fund allocation utilization period 2021-2023 in Lao PDR to the meeting as below.

Background

- For RAI3E Grant (2021-2023), GF recommended each country to perform the assessment of current SRs and continue the good-performing SRs for the RAI3E Grant
- CCM has referred the RAI3 SRs selection process to CMPE.
- On 5th May 2020, CMPE convened a technical working group meeting with CCM secretariat, WHO, PMU-DPC and UNOPS to agree on the timeline and working process
- The selection committee was formed with 9 members from various key stakeholder: 1 DCDC as Chair, 2 CCM, 2 CMPE, 1 WHO, 1 PMU-DPC, 1 UNOPS, 1 RSC

Meeting logistic details

- Meeting date: 18th May 2020
- Meeting time: 1 PM to 5 PM
- Meeting venue: Lao National Front Training Center, Meeting room 2

Selection timeline

Task No	Task Description	Responsible person	Status	Date
1.	Internal preparation meeting (CMPE Director, Technical staff and RAI2E Project)	CMPE Team	Completed	04/05/2020
2.	Meeting with UNOPS and WHO and CCM to	CMPE and Team	Completed	04/05/2020

	develop practical guidance			
3.	Decision of committee composition	Kenesay, Dr. Phounalong	Completed	04/05/2020
4.	Email to each member to confirm their participation	Kenesay, Dr. Phounalong	Completed	07/05/2020
5.	Inform to potential SRs	Kenesay, Dr. Phounalong	Completed	08/05/2020
6.	Prepare the assessment tool and standard of presentation	Dr. Yu Nanda	Completed	08/05/2020
7.	SRs selection meeting with potential SRs	Selection secretariat	Completed	18/05/2020
8.	Writing the meeting report	UNOPS	Completed	19/05/2020
9.	Reviewed meeting report by committee	Committee	Completed	21/05/2020
10.	Sharing the final meeting minute to CCM secretariat	UNOPS	Completed	22/05/2020
11.	CCM SEC distribute the result to CCM	CCM	Completed	23/05/2020
12.	CCM endorsement on the SR selection result	CCM	progressing	27/05/2020

Selection committee members

No	Name	Position, Organization
1.	Dr. Rattanaxay Phetsouvanh	Director General, DDCD as Chair of the meeting
2.	Dr. Soulang Chansy	Deputy Director, Health Department, Lao Red Cross/ CCM Vice-Chair
3.	Dr. Khamlay Manivong	Technical Advisor, CCM Secretariat
4.	Dr. Viengxay Vanisaveth	Acting Director, CMPE
5.	Dr. Viengphone Sengsavath	Deputy Director, CMPE
6.	Dr. Chanmy Sramany	Manager, PMU-DPC
7.	Dr. Yu Nandar Aung	Programme and M&E Specialist, UNOPS
8.	Dr. Matt Shortus	Technical Advisor, WHO

Participants from SRs

SR	Name	Position
CHIAs*	Mr. Viengakhone	Director
CHIAs*	Ms. Phaylin	Project coordinator
CHIAs*	Ms. Alounlouk	Finance manager
CHIAs*	Mr. Amphone	M&E
PEDA	Mr. Santi	Director
PEDA	Ms. Thipphavanh	Project coordinator
HPA	Mr. Michael Pitt	Country director
HPA	Dr. Thet Lynn	Country program coordinator
HPA	Ms. Kenkham	Finance manager
HPA	Mr. Praphad	Program manager

The assessment approaches

- The working group developed the SR selection scoring matrix and presentation template for SRs
- The scoring matrix included 8 components: (1) legal status (2) management structures and planning (3) internal control system (4) financial management system (5) supply chain system (6) data collection and reporting system (7) RAI2E programmatic performance 2018 – 2019 (8) RAI2E financial performance 2018 – 2019
- During the selection meeting, each CSO was asked to make a 25 minutes presentation, followed by 20 minutes Q&A.
- The presentation from SRs followed the outline of presentation which was drafted by SRs selection

technical working group

- The total score was 59 and the passed score was 35

The result and conclusion

Result of the selection	CHIAs	HPA	PEDA
Committee member 1	53	50	49
Committee member 2	52	47	44
Committee member 3	52	46	51
Committee member 4	55	50	54
Committee member 5	56	52	54
Committee member 6	50	51	45
Committee member 7	54	50	50
Committee member 8	56	50	51
Average score	53.5	49.5	49.75



Conclusion

All SRs received an average score of higher than 35 and none received less than 35 from any of the selection committee member.

All the current RAI2E SRs (CHIAs, HPA, PEDA) have been reselected for RAI3 implementation.

Decision Point

- The meeting has no additional comment. Before voting, the quorum was verified with total 18 voting members. CCM members have unanimously endorsed the results of sub-recipients (SR) selection for the RAI grant implementation of the Global Fund allocation utilization period 2021-2023 in Lao PDR.

DECISION(S)

CCM members have unanimously endorsed the sub-recipients (SR) selection for the RAI grant implementation of the Global Fund allocation utilization period 2021-2023 in Lao PDR.

ACTION(S)

KEY PERSON RESPONSIBLE

DUE DATE

DECISION MAKING

MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS		
	VOTING	VOTING METHOD (Place 'X' in the relevant box)	SHOW OF HANDS	
			SECRET BALLOT	
		ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF THE DECISION</u>		>
		ENTER THE NUMBER OF MEMBERS <u>AGAINST THE DECISION</u>		>
		ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u>		>

*Consensus is general or widespread agreement by all members of a group.

MINUTES OF EACH AGENDA ITEM

AGENDA ITEM #4	AOB Technical Review Panel (TRP) review and recommendation on the joint TB/HIV Funding Request for Lao PDR to proceed to grant-making. 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) >

NA

SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED

The representative of PR-PMU presented the results of the Technical Review Panel (TRP) review and recommendation on the joint TB/HIV Funding Request for Lao PDR to proceed to grant-making as follow:

Required documents and timelines:

Implementation Arrangement Map	<p>The PR is required to include in the implementation arrangement map attached:</p> <ul style="list-style-type: none"> Names of the CSOs that will be working with the program WHO as a TA provider 	Deadline: 19 June 2020
Performance Framework	No further action required.	N/A
Budget	<ul style="list-style-type: none"> Please find attached the budget template. The PR is required to include a detailed breakdown of the proposed TA of USD 800k to WHO in the budget attached. <p>In addition to the detailed budget, the Global Fund would need to review the detailed budget breakdown of component 3 under HANSA. We understand that the budget is currently under discussion and we suggest the PR, DPC, to contact the World Bank Country Team to further discuss this and also ensure the partners are involved. Please share the detailed budget breakdown at the same time as the detailed GF budget attached.</p>	Deadline: 19 June 2020
Co-financing commitment	<p>The co-financing policy requires countries to invest during the next implementation period an amount equivalent to the co-financing incentive portion of the allocation, in addition to the amounts that the country had invested in the previous implementation period. The purpose is to incentivize countries to progressively increase their contribution to health and specifically to the financing of the disease programs.</p> <p>In the case of Lao PDR, the requirement is of an additional investment of 3.1 million USD over the next period as compared to the previous period. Since the investment during the 2018-2020 period was 3.05 million USD (according to the documentation submitted), <u>this means that for the period 2021-2023, the requirement is for the domestic investment to be 6.15 million USD.</u></p> <p>As Lao PDR is Lower Middle-Income country, the co-financing policy only requires a minimum of 50% of that additional investment to be specifically on disease programs, and the rest can be in RSSH. In this context, <u>the GF co-financing policy will consider the whole loan portion of HANSA funds as domestic resources contributing to RSSH.</u></p> <p>This means that the co-financing commitment from Lao PDR for the next implementation period is actually <u>23 million USD on RSSH investments and 3.1 million USD on disease program investments, which meets and goes above the requirements of the GF co-financing policy of 6.15m USD.</u></p> <p>Therefore, the PR is required to present a letter from the MoH, or any other form of proof of commitment, explaining how the Government is complying with GF's co-financing requirements, and pointing out that the government will be investing 23 million of domestic resources in RSSH (through HANSA) and 3.1 million in disease programs.</p>	Deadline: 19 June 2020
Grant Entity Data (Partner Portal)	<p>Please review your organization information through the <u>Global Fund Partner Portal</u></p> <p>We understand there will be changes in the funding flow from MoH to</p>	Deadline: 19 June 2

	<p>MoF, if the PR envisions to have a different person assigned as a signatory authority for disbursements from the MOF, the PR will need to create a new contact in the Partner Portal:</p> <ul style="list-style-type: none"> • Signatory information for disbursement requests. Template available here <p>Similarly, if there is any update on the banking information, the PR will need to submit a letter with the new banking details:</p> <ul style="list-style-type: none"> • Banking information: Principal Recipient Bank Information Template 	
--	---	--

Summary of the key points of the meeting:

There was no additional comment on this item.

Before closing the meeting, the Chair of the meeting had summarized the key points and recommendations as below:

1. The CCM members have unanimously endorsed the funding request for the Global Fund COVID-19 Response Mechanism and it shall be submitted to the Global Fund by 31 May 2020.
2. CCM members have unanimously endorsed the sub-recipients (SR) selection for the RAI grant implementation of the Global Fund allocation utilization period 2021-2023 in Lao PDR.
3. The representative of PR-PMU has updated the required documents and timeline of Technical Review Panel (TRP) review and recommendation on the joint TB/HIV Funding Request for Lao PDR to proceed to grant-making. PR-PMU is required to follow up and respond to the TRP recommendations.

DECISION(S)

No Decision

ACTION(S)	KEY PERSON RESPONSIBLE	DUE DATE

DECISION MAKING

MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS		
	VOTING	VOTING METHOD (Place 'X' in the relevant box)	SHOW OF HANDS	
			SECRET BALLOT	
		ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF</u> THE DECISION	>	
		ENTER THE NUMBER OF MEMBERS <u>AGAINST</u> THE DECISION	>	
		ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u>	>	

*Consensus is general or widespread agreement by all members of a group.

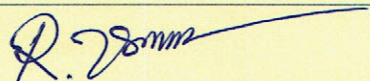
SUMMARY OF DECISIONS & ACTION POINTS

AGENDA ITEM NUMBER	WRITE IN DETAIL THE DECISIONS & ACTION POINTS BELOW	KEY PERSON RESPONSIBLE	DUE DATE
AGENDA ITEM #1	The CCM members have unanimously endorsed the funding request for the Global Fund COVID-19 Response Mechanism and it shall be submitted to the Global Fund	National Programs, PR and CCM	31 May 2020
AGENDA ITEM #2	CCM members have unanimously endorsed the sub-recipients (SR) selection for the RAI grant implementation of the Global Fund allocation utilization period 2021-2023 in Lao PDR.		

SUPPORTING DOCUMENTATION	Place an 'X' in the appropriate box	
ANNEXES ATTACHED TO THE MEETING MINUTES	Yes	No
ATTENDANCE LIST	X	
AGENDA	X	
OTHER SUPPORTING DOCUMENTS	X	
IF 'OTHER', PLEASE LIST BELOW:		

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:

TYPE / PRINT NAME	>	Mr. Budhsalee Rattana	DATE	>	
FUNCTION	>	Coordinator and Finance Officer	SIGNATURE	>	

CCM MINUTES APPROVAL:

APPROVED BY (NAME)	>	Dr. Soulang Chansy	DATE	>	
FUNCTION	>	CCM Vice-Chair Lao Red Cross	SIGNATURE	>	