CCM Meeting Minutes

INPUT FIELDS INDICATED BY YELLOW BOXES

MEETI	NG DET	AILS	S											
COUNTR	RY (CCM)				Lao Pl	DR				TOTAL NUMBER OF CCM (INCLUDING ALTERNAT		RS PRESE	NT	17
MEETIN	G NUMBEI	R (if a	pplicab	ole)	01					TOTAL NUMBER OF VOT (INCLUDING ALTERNAT		IBERS PR	ESENT	17
DATE (dd.mm.yy)					09 Feb	oruary 2	021			TOTAL NUMBER OF NON-CCM MEMBERS / OBSERVERS				
DETAILS OF PERSON WHO CHAIRED THE MEETING				TING				PRESENT (INCLUDING C						
HIS / HER NAME First name			name	Assoc	. Prof. I	Dr. Phou	ıthoı	ne	QUORUM FOR MEETING	WAS ACI	HIEVED (y	res or no)	Ye	
& ORGANISATION Family n			y name	Muongpak					DURATION OF THE MEETING (in hours)					
			Organ	nization	Ministry of Health					VENUE / LOCATION	1 st fl	eting room, N	ИОН	
HIS / HE	R ROLE O	N	Chair						X	MEETING TYPE		Regular CCM meeting		X
(Place 'X			Vice-0	Chair						(Place 'X' in the relevant bo	(X)	Extraordinary meeting		
			ССМ	member								Committee meeting		
			Altern	nate						GLOBAL FUND SECRETA	LFA	Х		
HIS / HE	R SECTOR	* (Pla	ace 'X'	in the rel	evant box)					(Place 'X' in the relevant bo			FPM / PO	Х
GOV	MLBL	NG	O	EDU	PLWD	KAP	FBO	P	S				OTHER	Х
X										-			NONE	

LEGENI	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)														
			ERNA ATED			не с	CCM, PR	OPO	SAL	S & G	GRA	NT N	IANAG	EMENT		
AGENDA SU AGENDA ITEM No.	JMMARY WRITE THE TITLE OF EACH AGENDA ITEM / TOPIC BELOW	Review progress, decision points of last neeting – 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	 Introduction and endorsement of agenda Quorum verification and conflict of interest identification 	X														
AGENDA ITEM #1	CCM Annual Workplan Performance Report for the fiscal year 2019 - 2020															X

AGENDA ITEM #2	Lao CCM Evolution Process and Results, including Prioritized Interventions Identification for continuing the Evolution Process in the Lao PDR-Through video call with the CCM Hub and TA						
AGENDA ITEM #3	Progress Updates on the implementation of the Global Fund Current Grants and Arrangement for the New Grants						
AGENDA ITEM #4	AOB Close the meeting						

MINUTES OF EACH AGENDA ITEM

OPENING PROGRAM

- Introduction and endorsement of agenda
- Quorum verification and conflict of interest identification

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

CCM Chair warmly welcomed and thanked all participants that attended the first meeting of CCM of the year 2021.

The meeting agenda was presented for comments and agreed to move the third item to the second item of the agenda due to the Chair will be leaving for Luang Prabang at 15:00 hr. for another urgent commitment. The CCM Secretariat confirmed the meeting quorum is sufficient.

Following up actions from the last CCM meeting have been discussed during the last OC meeting held on 21st January and these will be included in the PMU's presentation on item of progress updates on the implementation of the Global Fund Current Grants.

DECISION(S) No Decision ACTION(S) DUE DATE KEY PERSON RESPONSIBLE DECISION MAKING CONSENSUS* IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS MODE OF DECISION MAKING (Place 'X' in the relevant box) VOTING VOTING METHOD SHOW OF HANDS (Place 'X' in the relevant box) SECRET BALLOT ENTER THE NUMBER OF MEMBERS IN FAVOUR OF THE DECISION > ENTER THE NUMBER OF MEMBERS AGAINST THE DECISION *Consensus is general or widespread agreement by all ENTER THE NUMBER OF VOTING CCM MEMBERS WHO ABSTAINED members of a group.

MINUTES OF EACH AGENDA ITEM

AGENDA ITEM #1

CCM Annual Workplan Performance Report for the fiscal year 2019 - 2020

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

CCM Secretariat informed the meeting that the annual expenditure report of the CCM and the annual performance framework evaluation of the CCM have been submitted through email to CCM and the Global Fund CCM Hub before the end of January as recommended by the Global Fund. The expenditure report and the performance framework were reviewed and approved by the Global Fund. In this meeting, the secretariat presented the annual performance report of the CCM work plan for fiscal year 2019-2020. Key points of the presentation were as follows:

- The CCM workplan and budget for fiscal year 2019-2020 were approved by the CCM and were implemented accordingly;
- Two oversight field visits were conducted as planned: The findings were presented and discussed during the OC and CCM meetings. The final reports were circulated widely to CCM and all key stakeholders, including CCM Website, GF CT and CCM Hub;
- The grant performance reports based on submission period of the PR to GF were discussed during the meeting of OC and CCM;
- The latest EPA was conducted and endorsed by the CCM during its plenary meeting held on 6 February 2020. Based on the assessment of each eligibility requirement (ER) and minimum standards (MS) performance of CCM Lao PDR during the past years, all indicators of both ER and MS requirements from 3-5 have been achieved as fully compliant. For requirement 6, the CCM has also achieved almost all indicators, except 4 new added indicators which regard to Code of Ethical Conduct are non-compliant. As the results, the interventions for improvement plan were identified and endorsed by the CCM which focused on the interventions to achieve the performance of 4 new indicators;
- The overall CCM Secretariat Performance Assessment was conducted during the CCM plenary meeting held on 6 February 2020. CCM members qualified CCM Secretariat Performance as Exceptional: 42.86%, Performing well: 51.79%, A few minor issues: 3.57%), and Serious Issues: 1.79% (Reason behind may relate to almost all documents are in English and some members do not understand English). The assessment results were included in the CCM meeting minutes and circulated to the CCM Hub;
- The membership lists of CCM and its committees have been updated accordingly to the changes in membership. A process for preparation of new membership election was pending as the CCM agreed during the plenary CCM meeting on 25 June 2019 to temporally suspend until finalizing governance structure of HANSA project;
- The orientation sessions have provided individually to the new members when required. The CCM TOR and related documents were circulated to the new members;
- No review on the CCM COI policy needed for this year. The COI policy and measures were applied and identified in all CCM meetings and voting procedures. No update on the current COI mitigation measure matrix needed for this year. Almost all new CCM members have signed the COI declaration form. The forms were uploaded to the GF Partner Portal;
- A process of reviewing and updating the current organogram and TOR for new CCM's terms of service
 was pending as the CCM agreed during the plenary CCM meeting on 25 June 2019 to temporally suspend
 until finalizing governance structure of HANSA project;
- Five CCM Meetings were organized for this fiscal year (including one extraordinary meeting);
- Seven OC meetings were organized for this fiscal year (including joint meetings with RMC and ExCom) according to the agenda and requirements;
- Five RMC meetings were organized for this fiscal year (including joint meetings with OC and ExCom) according to the agenda and requirements;
- Three ExCom meetings were organized for this fiscal year (including joint meetings with OC and RMC) according to the agenda and requirements;
- Key documents and reports were translated and circulated to CCM and all partners;

- CCM website and CCM contact lists on the GF Partner Portal have been managed and updated regularly when required;
- All key communication and documents were shared through email within/between CCM and Global Fund and all key stakeholders;
- Regarding the CCM budget for strengthening CSO participation in the CCM functions, the CSO received additional budget from the other sources to cover their activities. The CCM budget has not been used for the whole package of the meetings. One meeting of the CSO Coordinating Committee was convened and supported by CCM budget this year.

The Secretariat noted that the CCM budget absorption rate this year is 96% due to:

- Additional funding was provided by the other sources to cover the activities of CSO, only one meeting of the CSO Coordinating Committee was supported by CCM budget;
- Several meeting of the OC, RMC and ExCom were jointly organized with sharing costs. Therefore, there were some saving budgets.

Summary key comments from the meeting

- There was no additional comment on the CCM annual performance report;
- A representative of the CSO Coordinating Committee updated to the meeting that they have elected the new membership of CSO CC representing to the CCM and have developed its new organization structure. The orientation sessions will be providing to the new members in the near future. The list of new members was circulated to the CCM Secretariat for further processing.
- The CCM Vice-Chair suggested CSO Coordinating Committee to improve its functions, working qualification, funding absorption and timely reporting which should be aligning with the national programs.

DECISION(S)											
No decisi	on										
ACTION(S)				KEY PERSON RESPONSIBLE	DUE DATE						
DECISION MAKING	G										
MODE OF DECISION	CONSENSUS*		IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS								
MAKING (Place 'X' in the relevant box)	VOTING		VOTING METHOD (Place 'X' in the relevant box)	SHOW OF HANDS							
				SECRET BALLOT							
			ENTER THE NUMBER OF MEMBERS	IN FAVOUR OF THE DECISION	>						
			ENTER THE NUMBER OF MEMBERS	AGAINST THE DECISION	>						
*Consensus is general members of a group.	al or widespread agreement by all		ENTER THE NUMBER OF VOTING CO	CM MEMBERS WHO ABSTAINED	>						

	Lao CCM Evolution Process and Results, including Prioritized Interventions Identification for continuing the Evolution Process in the Lao PDR-Through video call with the CCM Hub and TA
CONFLICT OF INTE	REST. (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

The GF consultant presented the CCM Evolution background and process, Timeline, Threshold Results, Feedbacks from the Global Fund teams and the last task force meeting as below:

Introduction to CCM Evolution

Context

The Global Fund model invests in strategies to end HIV, TB and malaria, while strengthening resilient and sustainable systems for health (RSSH). CCMs are a core part of the model, serving as Global Fund's country and regional level governance to shape and ensure impact.

Opportunity

Building from a Pilot phase*, CCM Evolution (Strategic Initiative, \$15M, 2020-2023) will work with approximately 90 CCMs and RCMs, with prioritized interventions to enhance core responsibilities

Success

- **Equipped mechanisms**, aligned with national structures
- Streamlined processes, focusing on investment results
- Strengthened governance for existing and emerging health challenges

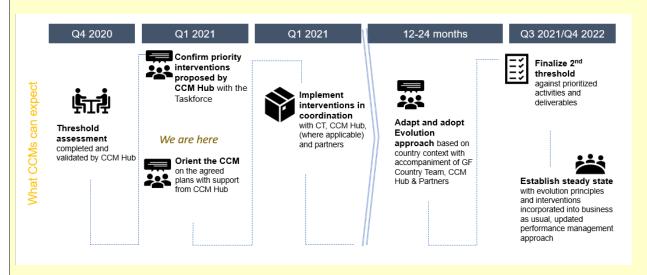
Evolution interventions focus on 4 core responsibilities:

- Active **oversight** of investments to ensure impact
- Meaningful constituency engagement and information sharing, particularly with civil society and communities, to shape and oversee investments
- Effective **positioning** within national structures and existing/emerging platforms to increase efficiency of health investments
- Efficient CCM Secretariat operations of core functions, enabling and sustaining health governance

CCM Evolution entail

- Threshold: Analyze what is working and identify opportunities for enhancement
- Induction: Prioritize interventions to enhance responsibilities
- Interventions: Tailor to the context and maintain momentum
- Results: Learn and sustain systemic enhancements to governance

Evolution Timeline



Summary of Threshold Results

Threshold results provide an opportunity to prioritize areas for enhancing performance

Leverage results to:

- Identify opportunities
- Prioritize key interventions
- Agree on implementation steps

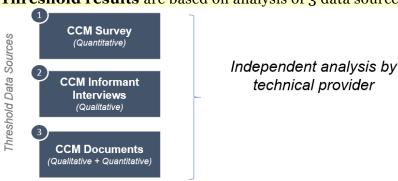
Process flow:

Consultant & CCM Propose prioritized areas and interventions

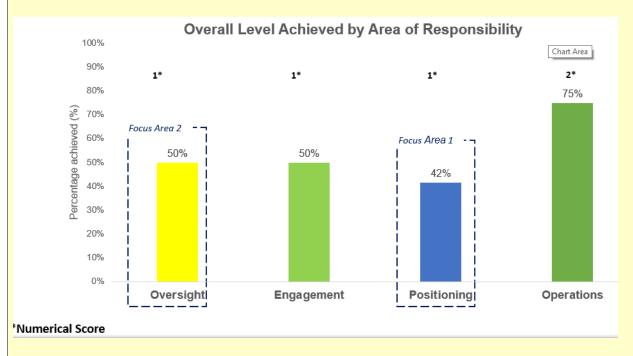
Global Fund Reviews and validates proposed areas and interventions

*CCM*Receives and implements validated interventions

Threshold results are based on analysis of 3 data sources



Lao CCM Threshold Results



CCMs will have to **prioritize** their *Areas* of focus for the project

Priority Level	Areas of responsibility	Objectives	Priority Activities
1	Positioning	To review and revise the CCM governance documents and committee structure to specify its new mandate and reporting processes in relation to the HANSA steering committee, implementation and coordination units	Support to align CCM governance documents with new governance architecture
2	Oversight	To systematize a regular oversight process (in relation to an agreed performance area of the	Oversight Officer position integrated into the Secretariat
3	Engagement	HANSA project, and with respect to any new agreed governance structure) inclusive of Community-Based Monitoring	Implement Community-Based Monitoring in relation to HANSA project component 2

Consultant Notes:

- 1. These activities have been endorsed by the Lao CCM Evolution Taskforce
- 2. HANSA Component 2 is "Strengthening health services at Provincial and Central level through DLIs". The mechanism for linking CBM to HANSA component 2 will need to be worked out

Completed Process

- 1. Threshold results were presented into the Lao CCM Evolution Taskforce and endorsed
- 2. Consultant shared endorsed threshold results with Global Fund CCM Hub
- 3. Global Fund validated the threshold and intervention package and shared back with Lao CCM Evolution Taskforce
- 4. Lao CCM Evolution Taskforce endorsed the proposed intervention package

Next Step

- 5. CCM secretariat uses validated package to re-allocate costed workplan and presents to CCM chair
- 6. Suggest CCM assigns focal points per evolution area to follow-up on implementation of prioritized interventions

Resources for CCMs

CCM Evolution webpage through this Link!

https://www.theglobalfund.org/en/country-coordinating-mechanism/evolution/

Key discussion points and comments from the meeting

- Some additional notes from the Global Fund teams such as: CCM Evolution is providing a room of
 opportunities to improve the four areas including aligning CCM with HANSA project and aligning scope of
 oversight working with the Government structure but how to move forward the CCM to achieve the CCM
 evolution as continued process, how do we do differently and what support need for this process;
- CCM should nominate focal point as core responsibility for each area of CCM Evolution interventions;
- CCM should coordinate with national programs and PR to schedule the monitoring agenda for each area of CCM Evolution interventions;
- The representative from CCM Hub informed that disbursement of the second year CCM Funding covers the period of 1st January to 31st December 2021 has been processed and assumed that CCM will receive the fund soon;
- The GF Country Team will work with CCM Hub and World Bank to continue supporting the CCM functions:
- The meeting agreed with the priority interventions proposed by the GF Consultant and the Global Fund teams.

DECISION(S)						
No decision						
ACTION(S)				KEY PERSON RESPONSIBLE	DU	E DATE
DECISION MAKING	}					
MODE OF DECISION	CONSENSUS*		IF 'VOTING' WAS SELECTED, INDICA	ATE METHOD AND RESULTS		
MAKING (Place 'X' in the relevant box)	VOTING		VOTING METHOD (Place 'X' in the relevant box)	SHOW OF HANDS		
				SECRET BALLOT		
			ENTER THE NUMBER OF MEMBERS	IN FAVOUR OF THE DECISION	>	
			ENTER THE NUMBER OF MEMBERS	AGAINST THE DECISION	>	
*Consensus is general members of a group.	l or widespread agreement by all		ENTER THE NUMBER OF VOTING CO	CM MEMBERS WHO ABSTAINED	>	

AGENDA ITEM #3

Progress Updates on the implementation of the Global Fund Current Grants and Arrangement for the New Grants

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

HIV and TB Programs

The representative of PR PMU has presented the Progress Update on the Global Fund Current Grants and Arrangement for the New Grants as outline below:

- > Grant Closure Planning for HIV and TB
- > Grant Expenditures as at 31 Dec 2020
- ➤ Co-financing update as at 31 Dec 2020
- ➤ Malaria RAI2E & RAI3E will be updated by UNOPS

Grant Closure Planning for HIV and TB

- The DPC-PR/PMU is planning to close out of 2 grants: LAO-T-GFMOH (2018-2020)/RSSH and LAO-H-GFMOH (2018-2020) which has been consolidated into LAO-C-MOH (HANSA) in the Implementation Period 2021-2023
- The Implementation Period of these two grants has been ended on 31 December 2020.
- Closeout required deliverables:
 - 1. Closure budget for Sub-recipients who are not expected to continue under the New Grant: PSI, MPSC, HMIS (Statistic UNIT of DPC), they will develop an itemized costed budget for all activities that will be implemented during the closure period after the Implementation Period end date 31 December 2020), submission due date 15 Sept 2020_DONE;
 - 2. The Closure Budget for Sub-recipients will need to be endorsed by the CCM Chair and Vice-Chair, and reviewed and verified by the Global Fund's Local Fund Agent ("LFA"). DONE and APPROVED;
 - 3. List of Program Assets and Receivables: Submission due date 15 Sept 2020
 - DONE and will be reported once again in 2020 PU which will be submitted on 1st. March 2021
 - 4. All Health Products procured with Grant Funds that are not likely to be used / consumed before the Implementation Period end date;
 - Other Program Assets (including, but not limited to, vehicles, equipment and infrastructure and non-physical assets such as copyright in any Information, Education and Communication ("IEC") materials or television spots) created / acquired with Grant Funds); and
 - All receivables owed to the Principal Recipient by a third party
 - 5. Maintain Program Books and Records In Negotiation with DOF/MOH to keep these records in Central Warehouse/MOH
 - For at least seven years from the date of the last disbursement under the Grant.
 - Develop a plan to determine where and how the Program Books and Records will be stored for that period
 - 6. Final Progress Update for the Grant, Submission due date 1st March 2021 On Going
 - This shall include:
 - The programmatic and financial progress report for the period between the last progress report and the Implementation Period.
 - The expenditure report for the period between the last expenditure report and the Implementation Period end date (including any extensions).
 - 7. Audit Report, Submission due date 30 June 2021_will be conducted in March-April

• This shall cover the last year of the Implementation Period (including any extensions). The Global Fund will inform the PR of the timelines of the audit as this is managed through the regional finance audit initiative by the Global Fund Secretariat.

8. Final Tax Report for the Grant, Submission due date 30 June 2021_Prepared by PMU

• This shall cover the final year of the Implementation Period (including any extensions).

9. Financial Closure Report, Submission due date 1August 2021_Will be prepare by PMU/Finance manager

- This shall include:
- The financial reconciliation of the cash balance as at the end of the Implementation Period (including any extensions);
- The expenditure report covering the period from the last submitted expenditure report up to the end of the closure period (i.e. six months after the end of the Implementation Period); and
- An updated list of financial commitments and financial obligations as at the Implementation Period end date.
- The Grant Closure Reporting Documents will be reviewed and verified by the LFA and the Global Fund
- Any remaining cash, non-compliant expenditures or recoverable amounts should be swiftly determined and returned to the Global Fund.

TB Grant Update PU 2020

Indicator	Type of TB	Target	Achieved	%
1	TB all forms New+ Relapse	8592	8012	93,24
2	Treatment out come	90% /6808	6145	90
3	MDR TB	80	49	61
4	MDRTB Receive SLD	49	39	79.5
5	TB'HIV ART	364	292	80
6	TB Regional	724	169	23

Financial Update: Budget vs Estimated Expenditure as at 31 Dec 2020 – By Module

Module	Budget 2020	Expenditure 2020	Cumulative Budget 2018 -2020	Cumulative Expenditure 2018 -2020	Burn Rate
TB care and prevention	\$2,126,350	\$2,051,422	\$4,741,241	\$4,666,292	98%
Program management	\$808,744	\$694,938	\$2,430,505	\$2,316,669	95%
MDR-TB	\$299,398	\$150,932	\$542,675	\$394,209	73%
TB/HIV	\$54,856	\$50,931	\$136,833	\$132,907	97%
RSSH: Health management information systems and M&E	\$150,842	\$105,250	\$259,510	\$213,918	82%
RSSH: Procurement and supply chain management systems	\$34,588	\$6,921	\$131,864	\$104,196	79%
COVID-19	\$404,390	\$100,127	\$404,390	\$100,127	25%
Grand Total	\$3,879,168	\$3,160,520	\$8,647,017	\$7,928,318	92%

Financial Update: Budget vs Estimated Expenditure as at 31 Dec 2020 – By Implementer

Implementer	Budget 2020	Expenditure 2020	Cumulative Budget 2018 - 2020	Cumulative Expenditure 2018 -2020	Burn Rate
NTC and SSRs	\$3,157,265	\$2,558,846	\$6,693,231	\$6,094,761	91%
HMIS	\$153,079	\$144,539	\$418,072	\$409,532	98%
MPSC	\$64,401	\$49,044	\$291,990	\$276,632	95%
LaoPHA	\$112,048	\$106,795	\$267,369	\$262,116	98%
PEDA	\$78,874	\$73,023	\$193,403	\$187,551	97%
PSI	\$107,876	\$84,780	\$278,118	\$255,021	92%
PMU	\$205,624	\$143,494	\$504,834	\$442,704	88%
Grand Total	\$3,879,168	\$3,160,520	\$8,647,017	\$7,928,318	92%

HIV Grant Update PU 2020

Programmatic Update

Indicators	Target	Achievement	%
KP-1c: Percentage of sex workers reached with HIV prevention programs - defined package of services	10,200	10,108	99%
KP-3c: Percentage of sex workers that have received an HIV test during the reporting period and know their results	9,180	9,099	99%
KP-1a(M): Percentage of men who have sex with men reached with HIV prevention programs - defined package of services	1,400	1,509	108%
KP-3a(M): Percentage of men who have sex with men that have received an HIV test during the reporting period and know their results	1,260	1,419	113%
TCS-1(M): Percentage of people living with HIV currently receiving antiretroviral therapy	7,526	8,182	109%

Financial Update: Budget vs Estimated Expenditure as at 31 December 2020 - By Module

Module	Budget 2020	Expenditure 2020	Cumulative Budget 2018 -2020	Cumulative Expenditure 2018 -2020	Burn Rate
Comprehensive prevention programs for sex workers and their clients	\$333,807	\$354,229	\$723,185	\$743,608	103%
Program management	\$573,297	\$477,209	\$1,641,847	\$1,545,759	94%
Comprehensive prevention programs for MSM	\$183,953	\$211,493	\$328,674	\$356,214	108%
Treatment, care and support	\$1,537,966	\$1,300,035	\$3,024,600	\$2,786,670	92%
HIV Testing Services	\$361,535	\$315,826	\$960,225	\$914,516	95%
TB/HIV	\$1,964	\$2,270	\$5,083	\$5,388	106%
COVID-19 RM	\$1,943,696	\$247,664	\$1,943,696	\$247,664	13%
Grand Total	\$4,936,217	\$2,908,725	\$8,627,309	\$6,599,818	76%

Financial Update: Budget vs Estimated Expenditure as at 31 December 2020 – By Implementer

Implementer	Budget 2020	Expenditure 2020	Cumulative Budget 2018 - 2020	Cumulative Expenditure 2018 -2020	Burn Rate
CHAS	\$3,247,234	\$2,345,118	\$5,760,740	\$4,858,624	84%
PEDA	\$105,533	\$98,418	\$317,992	\$310,878	98%
PSI	\$110,796	\$98,720	\$334,795	\$322,719	96%
LaoPHA	\$253,752	\$203,418	\$675,519	\$625,185	93%
PMU	\$575,051	\$163,052	\$894,411	\$482,412	54%
NTC	\$487,852	\$0	\$487,852	\$0	0%
CMPE	\$156,000	\$0	\$156,000	\$0	0%
Grand Total	\$4,936,217	\$2,908,726	\$8,627,308	\$6,599,817	76%

PSI Program Income Expenditures	Amount USD
Total receipt 2018-2020	\$571,467
Less: expenditure for Condom procurement for social marketing	\$356,833
Less: Management cost for Condom Social Marketing +loss on exchange rates	\$150,885

Tuberculosis Elimination among Migrants (TEAM) PUDR Dec 2020

Financial Update: Budget vs Estimated Expenditure as at 31 Dec 2020 – by Module

Implementer	Budget 2020	Expenditure 2020	Cumulative Budget 2018 -2020	Cumulative Expenditur e 2018 - 2020	Burn Rate
TB care and prevention	214,279.82	202,481.28	710,436.80	543,405.82	76%

Program management	107,004.13	95,205.00	196,784.09	148,540.87	75%
RSSH: Health management information systems and M&E	20,019.61	10,881.92	28,562.68	14,329.04	50%
Grand Total	\$341,304	\$308,568	\$935,784	706,275.73	75%

Financial update: Budget vs Estimated Expenditure as at 31 Dec 2020 – by implementer

Implementer	Budget 2020	Expenditure 2020	Cumulative Budget 2018 - 2020	Cumulative Expenditure 2018 -2020	Burn Rate
NTC	\$201,204	\$177,118	\$697,670	\$521,705	75%
LaoPHA	\$67,426	\$73,639	\$113,631	\$97,872	86%
PEDA	\$66,007	\$57,811	\$111,149	\$86,699	78%
PMU	\$6,667	\$0	\$13,333	\$0	0%
Grand Total	\$341,304	\$308,568	\$935,784	\$706,276	75%

Sustainability of HIV services for Key Populations in Asia (SKPA)_HIV Regional Grant

Implementer	Budget 2020	Expenditure 2020	Cumulative Budget 2018 - 2020	Cumulative Expenditure 2018 -2020	Burn Rate
LaoPHA	\$617,629	\$172,185	\$732,175	\$195,451	27%
Grand Total	\$617,629	\$172,185	\$732,175	\$195,451	27%

Summary of Co-Financing Expenditures 2018-2020

Component	Approved budget 2018-2020	Cumulative Expenditures 01/2018- 12/2020	Obligation carried over to Q1/2021	Projected burn rate
TB	\$1,567,200	\$947,063	\$435,113	88%
HIV	\$1,482,942	\$1,474,373	\$235,154	115%
Mal RAI2E	\$1,604,623	\$1,664,288		104%
Total	\$4,654,765	\$4,085,724	\$670,267	102%

Key discussion points and comments from the meeting for TB and HIV programs

- PMU has provided additional clarification on the reasons of low burn rate of HIV program which are due to delaying on procurement of test kits and health products and equipment for COVID additional grant that is adding to HIV program. The clear plan for transition from the current to the new grant has been prepared and approved by the Global Fund;
- PMU was requested to negotiate with the Global Fund for continued using of the saving money generated from PSI program incomes which is a revolving fund for condom social marketing. In this regards, the program is required to identify the activities and send an official letter and request as supporting documents to the PMU soon;
- Regarding the suggestion on PMU with national program, CSO and international partners should organize the consultation meeting to identify the gaps for implementing the SKPA2 project, the CHAS noted that the evaluation process of SKPA2 is under way. CHAS and CHIAs are currently facilitating and coordinating with GF consultants for the consultation meeting;
- Concerning about the timeline for Year 1 HIV and TB programs implementation under the HANSA project that was raised and discussed in the last OC meeting, the CHAS was representing the national programs updated the timeline and budgets needs for HIV and TB programs in the Year 1 period. The NCPO agreed that we should focus on achievement of DLI Y0 and what are the key activities that HIV and TB programs will carry out to achieve condition DLI Y1 using this DLI Y0 budget. The NPCO are now on the process of requesting to World Bank to transfer the total amount of 3,8 Million USD for achievement of DLI Y0 condition to Ministry of Finance and will continue transfer the money to HIV and TB programs hopefully by Mid of February.

Malaria Program

The representative of UNOPS has presented the Progress Update on RAI2E Malaria Grant and arrangement for RAI3E Malaria Grant as below:

Coverage Indicator	Target	Result	Achievement
	(Jan-Dec 2020)	(Jan-Dec 2020)	%
Indicator 1: LLINs continuous distribution	117,196	98,540	84%
	Target	Result	Achievement
	(Jul-Dec 2020)	(Jul-Dec 2020)	%
Indicator 2: Testing in Public Sector	177,987	216,169	121%
	Target	Result	Achievement
	(Jan-Dec 2020)	(Jan-Dec 2020)	%
Indicator 3: Testing in Community	49,011	60,702	124%
	Target	Result	Achievement
	(Jul-Dec 2020)	(Jul-Dec 2020)	%
Indicator 4: Testing in Private Sector	30,954	37,468	121%
Indicator 5: % Treated in public sector	100%	100%	100%
Indicator 6: % Testing in Community	100%	99%	99%
Indicator 7: % Testing in Private Sector	100%	98%	98%
Indicator 8: % health facilities with no stock-out	95%	79%	83%
Indicator 9: % cases investigated	95%	77%	81%
Indicator 10: % foci investigated	95%	45%	47%
Indicator 11: % timely reports	95%	97%	102%

Programmatic Achievements RAI2E - 2020

- **Trainings**: completed ICCM trainings, surveillance trainings, DHIS2 trainings, drug inspector trainings for all levels of relevant health staff and VMWs; finance trainings of all SRs and all provincial staff;
- **Meetings**: completed biannual bottom-up planning meetings with all provinces and districts, quarterly and biannual review meetings with all SRs, annual review meeting with all SRs and Provinces led by CMPE;
- **Guidelines and manuals**: completed malaria re-stratification 2019andnational strategic plan 2021-2025; , Surveillance guidelines are being drafted;
- **Pf targeted activities**: ACDs, FTAT for forest returnees, high % prescription for PMQ single dose; SMS reporting in hotspots;
- Pv targeted activities: trainings and roll out of PMQ 8 weeks for health centers which do not have G6PD RDTs, VMW assisted referral of Pv patients to HCs, PMQ compliance monitoring and reporting by VMWs
- Other routine activities: supervision visit by different levels, case investigation and response activities, pharmacies and drug companies' inspection;
- **Covid-19 response Reprogramming**: \$425,000 from projected RAI2E savings have been reallocated for Covid efforts;
- **Grant Making for RAI3:** Grant Documents for RAI3E 2021 2023 approved by Global Fund in Q4 2020:
- **PSEA Trainings** organized by PR UNOPS with all CSO SRs;

Estimated 2020 RAI2E Budget Burn Rate - by Module

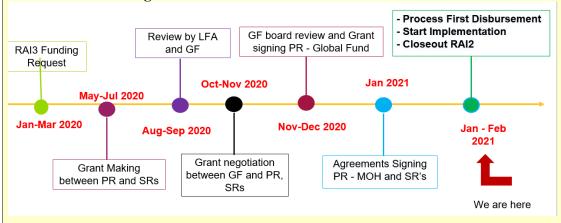
Module	2020 Budget (USD)	2020 Estimated Expense (USD)	Burn Rate
Case management	1,467,221	1,419,420	97%
COVID-19	424,982	429,057	101%
Program management	978,021	945,110	96%
RSSH: Health management information systems and M&E	430,793	383,698	89%
RSSH: National health strategies	536,257	529,079	99%
RSSH: Procurement and supply chain management systems	154,490	142,090	92%
Vector control	72,849	71,877	99%
TOTAL	\$ 4,064,613	\$ 3,920,332	96%

Estimated 2020 RAI2E Budget Burn Rate - by Implementer 2020 Estimated **Burn Rate Module** 2020 Budget (USD) Expense (USD) **CHIas** 218,261 211,671 97% 2,127,909 2,043,595 96% **CMPE** 337,959 93% **HPA** 315,075 **PEDA** 227,527 219,700 97% 99% **PMU** 406,099 404,027 WHO 746,859 726,265 97% **TOTAL** \$ 4,064,613 \$ 3,920,332 96%

Closeout of RAI2E – Outstanding Ineligible Amounts

Category	Total Ineligible Amount (a+b)	Amount for Refund as of 20 January, 2021 (a)	Amount to be justified by 19 February, 2021 (b)
Expenditure Verifications of Provincial Offices in 2020	74,286,000 LAK	1,166,000 LAK	73,120,000 LAK
PR Reviews during 2018 and 2019	7,431,000 LAK	7,431,000 LAK	
PR Review of CMPE Vientiane	850,000 LAK		850,000 LAK
Long Outstanding Advances	10,550,000 LAK		10,550,000 LAK
Total Ineligible	93,117,000 LAK	8,597,000 LAK	84,520,000 LAK

RAI3E Grant Making Process



RAI3E Implementation Arrangement RAI3E Budget - Summary Grant Year 2018-2020

RAI2E GMS: \$ 242.4 M

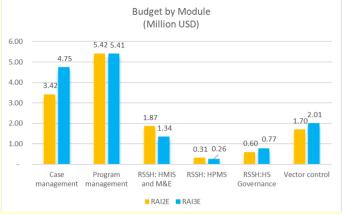
RAI3E GMS: \$ 230.6 M (-5%)

Year 2021-2023

RAI2E Laos: \$ 13.32 M

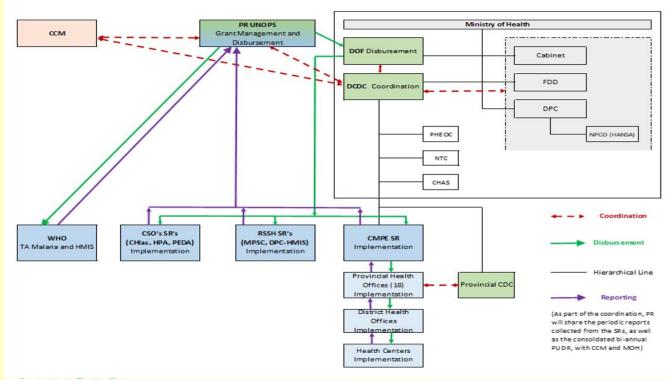
RAI3E Laos \$ 14.54 M (+9%)

RAI3E Laos Budget by Module3E Budget by Module

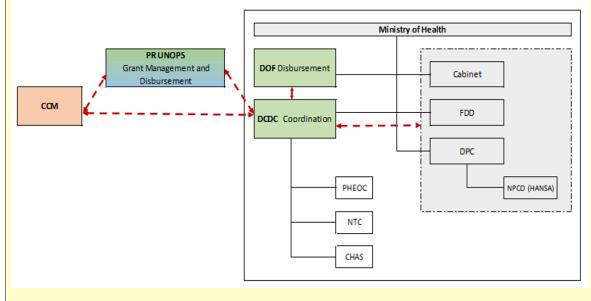


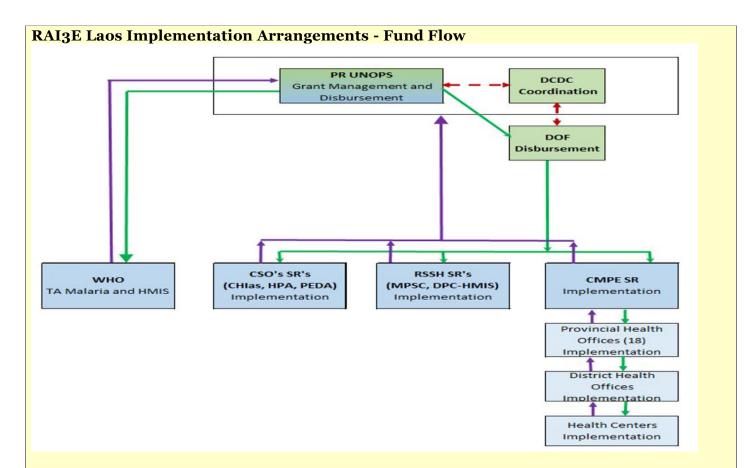
Module	RAI2E Budget (\$)	RAI3E Budget (\$)
Case Management	3,422,909	4,749,209
Program Management	5,418,141	5,411,893
RSSH: HMIS and M&E	1,872,287	1,344,422
RSSH: HPMS	314,304	255,795
RSSH: HS Governance	597,688	766,010
Vector Control	1,696,112	2,013,752
TOTAL	\$ 13,321,441	\$ 14,541,081

RAI3E Laos Implementation Arrangements



RAI3E Laos Implementation Arrangements - Coordination





RAI3E Activities

VMWs - different partners

Province	CMPE	CHias	HPA	PEDA	Grand Total
Saravane	191	400			594
Champasack	314			264	578
Savannakhet	249		293		542
Sekong	76			136	212
Attapeu	40		107		147
Phongsaly	67				67
Khammuane	67				67
Luangprabang	33				33
Oudomxay	3				3
Xaysomboun	3				3
Grand Total	1,043	400	400	400	2,246

VMWs related activities/support Incentive and travel cost

• Monthly incentive and monthly travel cost for reporting to HCs

ICCM trainings

- Training of the new VMWs (# 633) in Q1-2021
- Training of all VMWs (# 2,250) in Q3-2021 and 2023
- Training of 30% of VMWs who are weak performing in 2022

PV patients assisted referral

• Travel cost and food allowance for 1 patient and 1 VMW upon arriving at the HF for G6PD test and/or PMQ for PV cases

VMWs recruitment

• Year 2 - recruitment of new VMWs in villages which become high burden malaria areas as per 2021 revised stratification

Vector control

Entomological monitoring

• Monthly visit in hotspot areas – starting from Fe-2021; CMPE + Province + District + HC

LLINs mass distribution

- Post-distribution meeting between districts and HCs in 2022
- Pre-distribution meetings for different levels government co-financing

IEC and community mobilization

• IEC for LLINs and radio campaign for mass distributions

Bed net survey

• Post distribution – LLINs mass campaigns in 2022

Trainings

ICCM trainings

- All provinces, districts, HCs, VMWs
- In year 2021 and 2023; 30% of HCs and VMWs will be retrained in 2022

DHIS2 trainings

- All provinces and districts
- Every year from 2021 2023

Surveillance and supervision visit SOP trainings

- All provinces, districts, HCs
- In year 2021 and 2023

Surveillance and M&E

iDES

• Integrated drug efficacy surveillance in selected areas

Foci investigation & response

• Elimination targeted areas – 13 central/northern provinces and selected districts in the south (# 19 in 2021)

ACD and outbreak response

• 5 southern provinces

Re-stratification

In the year 2021

Key meetings

Bottom-up planning meetings

For every 6 months' work plan with all provinces and districts

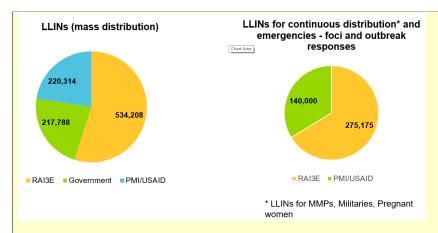
Meeting between HCs and districts

• Every month, for all HCs

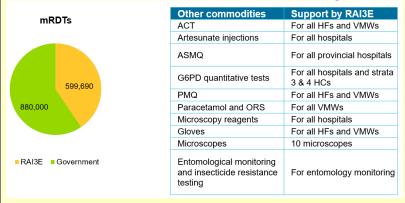
Supervision visits

• By different levels from different partners

Commodities: LLINs (2021-2023)



Commodities: RDTs and others (2021-2023)



RAI3E - Current Priorities

• Agreements Signing:

- Project Cooperation Agreement (PCA) between MOH and PR UNOPS was signed on 22
 January 2021;
- Grant Agreements were signed with CMPE, CHIas, HPA, PEDA;
- Grant Agreements with DPC-HMIS and MPSC are in progress (pending bank accounts);

• Disbursement:

- Following PCA signing, PR UNOPS disbursed the first disbursement to the Bank of Lao confirmation of transfer shared with DOF on February 5;
- RAI3 will use the Bank of Lao bank account of MOH (RAI2 used BCEL bank account) this is a new disbursement process. "The Global Fund will be monitoring the timeliness of the disbursements under this new fund flow with Bank of Laos and should we identify delays that hinder implementation of the programs, we will contact you to revise the structure"
- PR UNOPS is working closely with DOF to process the first transfer in no longer than 10 days from Bank of Lao to the Sub Recipients.

Key discussion points and comments from the meeting for Malaria programs

CMPE representative added some experiences and lessons learned in RAI2E implementation such as
receiving the same signatures on the incentive receipts from some areas, needing verification of the
outstanding ineligible amount which is high, and lowing rate of LLIN distribution due to no budget
for transportation.

DECISION(S)		
No decision		
ACTION(S)	KEY PERSON RESPONSIBLE	DUE DATE

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

MINUTES OF EACH AGENDA ITEM								
AGENDA ITEM #4	AOB Close the me	eeting						
CONFLICT OF INTEREST. (List be	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 A	FTER MEMBERS'	RECUSA	AL DUE TO DECLARED CONFLICTS OF	INTEREST (yes or no) >		NA		
SUMMARY OF PRESENTATIONS	AND ISSUES DISC	USSED						
No AOB.								
DECISION(S)								
No Decision								
ACTION(S)				KEY PERSON RESPONSIBLE	DUE	DATE		
DECISION MAKING								
MODE OF DECISION MAKING	CONSENSUS*		IF 'VOTING' WAS SELECTED, INDICA	ATE METHOD AND RESULTS				
(Place 'X' in the relevant box)	VOTING		VOTING METHOD	SHOW OF HANDS				
(Place 'X' in the relevant box) SECRET BALLOT								
			ENTER THE NUMBER OF MEMBERS	IN FAVOUR OF THE DECISION	>			
			ENTER THE NUMBER OF MEMBERS	AGAINST THE DECISION	>			
*Consensus is general or widespread agreement by all members of a group. ENTER THE NUMBER OF VOTING CCM MEMBERS WHO ABSTAINED >								

SUMMARY OF DECISIONS & ACTION POINTS						
AGENDA ITEM NUMBER	WRITE IN DETAIL THE DECISIONS & ACTION POINTS BELOW	KEY PERSON RESPONSIBLE	DUE DATE			
AGENDA ITEM #1						
AGENDA ITEM #2						
AGENDA ITEM #3						
AGENDA ITEM #4						

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>I 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 15 days of endorsement.			

CCM MINUTES PREP	PARE	D BY:				
TYPE / PRINT NAME	>	Mr. Budhsalee Rattana	DATE	>	19 Feb 2021	
FUNCTION	>	Coordinator and Finance Officer	SIGNATURE	>	R. Donner	
CCM MINUTES APPROVAL:						
APPROVED BY (NAME)	>	Assoc. Prof. Dr. Phouthone Muongpak	DATE	>	19 Feb 2021	
FUNCTION	>	CCM Chair	SIGNATURE	>	Luybuthere	