

# The 1<sup>st</sup> Plenary CCM Meeting Minute

INPUT FIELDS INDICATED BY YELLOW BOXES



MEETING DETAILS										
COUNTRY (CCM)		Lao PDR			TOTAL NUMBER OF CCM MEMBERS PRESENT (INCLUDING ALTERNATE)			22		
MEETING NUMBER (if applicable)		01			TOTAL NUMBER OF VOTING MEMBERS PRESENT (INCLUDING ALTERNATES)			16		
DATE (dd.mm.yy)		27 March 2025			TOTAL NUMBER OF NON-CCM MEMBERS / OBSERVERS PRESENT (INCLUDING OC AND CCM SEC. STAFF)			23		
DETAILS OF PERSON WHO CHAIRED THE MEETING					TOTAL PARTICIPANTS (INCLUDING ONLINE)			45		
HIS / HER NAME & ORGANISATION		First name	Prof. Dr. Phouthone			QUORUM FOR MEETING WAS ACHIEVED (yes or no)			Yes	
		Family name	Muongpak			DURATION OF THE MEETING (in hours)			8	
		Organization	CCM Lao PDR			VENUE / LOCATION		Amari Hotel		
HIS / HER ROLE ON CCM (Place 'X' in the relevant box)		Chair		X	MEETING TYPE (Place 'X' in the relevant box)		Regular CCM meeting		X	
		Vice-Chair					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)								FPM / PO		X
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

AGENDA SUMMARY																
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	T.A solicitation / progress	Other
OPENING PROGRAM	<ul style="list-style-type: none"> <li>Introduction and endorsement of agenda</li> <li>Quorum verification and conflict of interest identification</li> <li>Update follow up action from the last meeting</li> </ul>	X														
AGENDA ITEM #1	Update on the CCM Work Plan and Costed Workplan Year 2025		X													



SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED

The CCM Secretariat presented the CCM Work Plan and Costed Workplan Year 2025 (For more information, please see the attached PPT).

**CCM Workplan 2025**

No.	Activity Description	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1	Oversite field visit					5 <sup>th</sup> - 11 <sup>th</sup>			4 <sup>th</sup> - 10 <sup>th</sup>			2 <sup>nd</sup> - 8 <sup>th</sup>	
2	Joint meeting of Oversight Committee (OC), Resource Mobilization Committee (RMC) and Executive Committee (ExCom) at CCM Secretariat Meeting Room/Ministry of Health (When require)			13 <sup>th</sup>			12 <sup>th</sup>			11 <sup>th</sup>			9 <sup>th</sup>
3	Full-day CCM plenary meeting at hotel in Vientiane Capital.			27 <sup>th</sup>			25 <sup>th</sup>			24 <sup>th</sup>			23 <sup>rd</sup>
4	Ad-hoc meeting/workshop (when require)												
5	CCM Website development & maintenance												
6	Communication, material, documentation, translation and publication												
7	CSO Coordinating Committee meeting			26 <sup>th</sup>			24 <sup>th</sup>			23 <sup>rd</sup>			22 <sup>nd</sup>

**Key discussion points and comments from the meeting**

- The CCM Secretariat has allocated the budget for CSO to organize quarterly pre-meeting of CSO-KPs-PLWDs coordination committee. In this regard, the representative from CHIA has informed that most of the CCM members representatives CSO have permanent resigned. Therefore, the first quarterly pre-meeting of the CSO-KPs-PLWDs has not been organized due to the meeting quorum is insufficient.
- The meeting suggested that any CSO constituency who has received GF grant should update their activity implementation to the quarterly CCM Meeting.

**MINUTES OF EACH AGENDA ITEM**

**AGENDA ITEM #2** Progress update on the implementation of Global Grant on Malaria Program (RAI4E)

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

No COI was 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

Representative from PR-UNOP and National Programs (CMPE) have provided the achievement of RAI4E as below (For more information, please see the attached PPT).

**Malaria Elimination 2024**

Targets are set 100%

- 95% Of malaria cases are notified within 24 hours of diagnosis
- 95% Of malaria cases are classified as locally transmitted cases or imported cases or introduced cases or relapse cases, etc
- 94% Of active foci are responded within 7 days

**Key activities in 2025**

**Vector Control**

- LLIN mass Campaign in Q2 (around #269,000 nets will be distributed)

- LLIN continuous distribution (around #47,000 nets will be distributed)
- Bednet survey in Q3

#### Case Management

- Case Management through 3 sectors
- Notification, classification and response approach (CIFIR- 1-3-7 approach)
- ICCM trainings

#### SPI

- Reactive Accelerator strategies
  - Reactive Drug administration in areas where indigenous cases reported in both Burden and Elimination areas

#### RSSH

- Case-based surveillance & DHIS2 trainings
- Elimination Certification trainings and self-assessment
- Monitoring & Supervision
- Strengthening the financial management system

#### National Strategic Plan 2026-2030

- The current NSP 2021-2025 is due to be updated
- There have been major gains in program strengthening and malaria elimination, since the last NSP development in 2019
- The updated NSP will focus on reaching 0 cases, microscopy strengthening, SNV, national malaria-free certification, POR, integration and sustainability

#### Timeline

- Feb – Mar 2025 Desktop review
- Apr Consultation workshop
- May – Jun 2025 Development of National Strategic Plan
- 2025 – 2026 Prepare GF grant application

#### Key Highlights

- Case notification within 24 hours, Case Investigation within 3 days, and foci responses within 7 days are improving, though challenges exist such as a communication gap between the staff (e.g. between hospital staff and Malaria focal for a timely notification, and sharing information)
- Cross-border cases (between the neighboring countries) recording and reporting : no proper mechanism for timely reporting between countries
- Microscopic testing is around 7-9% a year. Hospital staff mainly use RDT for quick and easy procedures. Strengthening of microscopic testing is needed.
- PvSeroTAT of RAS is costly as the dry blood samples are sent to IPC (in Cambodia) for laboratory investigation. The strengthening of local PCR lab is required.

#### Co-financing update (as of Feb 2025)

Activities	Budget USD	Expenditure USD	Status
Training on diagnosis & treatment of malaria for PPMs	\$15,445	\$15,445	Done
Integrated Entomology surveillance and IRS training for provincial staff in Southern Laos	\$11,495	\$11,495	Done
Microscopy training for PAMs, provincial hospital staff, district hospital staff & lab technicians	\$70,309	\$70,309	Done
World Malaria Day campaigns at national and sub-national levels	\$3,000	\$2,999	Done
PMEC annual Elimination Certification meetings in provinces to share progress and lessons learnt	\$11,887	\$11,886	Done
SBC/IEC TOT Training for malaria prevention & control for provincial staff	\$12,188	\$12,188	Done
Procurement of bookshelves, folders and drive storage for elimination certification documentation	\$90,565	\$90,564	Done

Procurement of Laboratory Package commodities (product cost: 2024-2025-2026)	\$71,893	\$71,887	Done
Procurement of Ento Package commodities (product cost: 2024-2025-2026)	\$10,701	\$10,451	Done
Procurement of IRS Package commodities (product cost: 2024-2025-2026)	\$2,295	\$2,293	On going
Procurement of Paracetamol (product cost: 2024-2025-2026)	\$45,754	\$28,607	Done
Procurement of ORS (product cost: 2024-2025-2026)	\$20,840	\$20,824	Done
Procurement of side effect drugs for Accelerator Strategies TDA	\$8,692	\$8,673	Done
Boxes for District Facilitators - for transport of malaria commodities	\$4,195	\$4,187	Done
<b>Total</b>	<b>\$383,146</b>	<b>\$365,696</b>	<b>95%</b>

#### Budget Plan 2025 for all SRs

- CHIAS: 8%
- CMPE: 58%
- DCDC: 1%
- DPF: 1%
- HPA: 9%
- MPSC: 2%
- PEDDA: 9%
- WHO: 12%

#### Malaria Commodities Procurement for 2025 arrived timely

Products	Product cost USD
Malaria Rapid Diagnostic Test	200,000
Pyramax 60+180mg	68,010
Primaquine 7.5 mg	4613
G6PD Test Strips	29700
G6PD Control	7500
LLIN	279,984
<b>Total</b>	<b>589,807</b>

#### Key discussion points and comments from the meeting

- Refer to the question on the percent of achievement of Malaria activities, the representative from CMPE has confirmed that the activity implementation has achieved 100%. In this regard, this is planning for the transition and sustainability of Malaria in Lao PDR, which has been discussed with CMPE and the relevant departments of MOH to establish the Task Force Committee signed by the Minister of Health.

#### MINUTES OF EACH AGENDA ITEM

<b>AGENDA ITEM #3</b>	Progress update on the implementation of the Global Grant on HIV and TB Program
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	
Representative from National Programs CHAS provided progress update on implementation of HIV Grants (For more information, please see the attached PPT).	
<b>HIV/AIDS Program</b>	
<b>PBC 6: Key populations and people living with HIV/AIDS access to HIV services</b>	
<ul style="list-style-type: none"> <li>● This PBC aims to increase access to quality of people-centered based approach for HIV services for all the people living with HIV, key populations through adoption and expansion of innovative and differentiated service delivery (DSD) models including HIV testing, PrEP and ART with strong involvement and participation of the affected communities and key populations.</li> </ul>	

**Annual Operational Plan Year 2025 (21 Activities)**

Activity Code	Activity Description	Budget (US\$)
PBC 6.1.2	TOT for PCCA, health providers and community workers on HIV prevention strategy including virtual intervention to increase access on HIV services among KPs, promote PrEP, Index testing, and in line with Digital for health strategy.	9,380
PBC 6.1.7	Training workshop for S&D core team to build capacity and support CQI S&D reduction for KPLHIV in community - 3 days training to build capacity of CSOs staff and outreach workers on S&D reduction in community	8,160
PBC 6.1.16	Printing IEC materials for HIV knowledge and prevention	5,000
PBC 6.2.15	Progress update Meeting to review project implementation on HIV services among KPs including data assurance through DHIS2 system	10,600
PBC 6.3.1.1	Advocacy on ART point of care (POC) implementation including site assessment for new POC sites at district level. Target 4 new POC sites each year.	8,180
PBC 6.3.1.2	Job training for new POC staff on HIV care and treatment services at ART site - to build capacity on HIV services and case management before establishing POC site services.	12,000
PBC 6.3.2.1	Clinical workshop to improve AHD case management and DSD integrating NCDs and mental health for 11 ART sites	9,750
PBC 6.3.2.2	Refresh training on ARV and OI case management for POC sites including ARV optimization and POC VL testing and EID at district level	9,750
PBC 6.3.2.3	Technical workshop to improve HTS integration through PHC services, and ensure linkage PW HIV+ to access care and treatment, including tracking and follow up system for EID among HIV exposed-infants.	9,750
PBC 6.3.3.3	Support S&D workshop to improve quality of services related to S&D reduction among HCWs in selected ART&POC sites - 1 day workshop to disseminate S&D monitoring results and lesson learned on QI-S&D among HCWs at ART&POC sites (50 ps@coffee break 2\$@2\$copies@10 times/year. Roll-out 2 ART sites in 2024, 4 ART sites in 2025 and 6 ART sites in 2026	8,000
PBC 6.3.3.5	Support S&D strategy interventions in educational and workplace setting through advocacy and demonstration S&D reduction project in those setting for extra MOH	8,000
PBC 6.3.5.1	Workshop to refresh on ARV tracker/DHIS2 reporting data entry and data check for ART and POC sites	16,500
PBC 6.3.5.2	On site coaching for HIV care and treatment services including DQA and ARV tracker in selected ART/POC sites (central, provincial and district levels) and PCCA for RDQA	8,925
PBC 6.3.6.1	Annual review meeting on HIV component under HANSA project. This meeting aims to review on HIV interventions implemented under HANSA budget through a year with all targeted provinces and CSO partners, to sharing lesson learned and challenges in order to improve with all efforts to achieve the targets. This meeting will be conducted in Q4 each year (174 participants from 18 province and Hospitals; 3 days meeting). 1 time/year	22,000
PBC 6.3.6.2	Disseminate updated HIV Law	15,261
PBC 6.4.4	Support Phone credit for HCWs and PEs at all ART and POC sites to reinforce linking and tracking HIV+ cases from VCT site services, including ARV retention, VL testing/suppression, prevent LTFU through tele-health counselling and psycho-social and mental health support for PLHIV/KPLHIV	5,000
PBC 6.4.5	Lesson learned workshop to review HIV care and treatment services and intensify package for POC for VL testing and EID including monitoring with case management approach, quality of VL decentralization and data reporting.	11,700
PBC 6.5.1	Workshop to advocate and scaling up PrEP implementation with adaptation on HIVST and index testing - to increase PrEP user and improve PrEP service delivery for continue PrEP and further planning for next year	6,825

PBC 6.5.4	Training on data management for PCCA, health providers and community partners for HIV services such as VCT, STI, PrEP, Index testing), 1 T/Y, 4days, 5 CHAS, 1 DPF, 32PEs, 8PCCAs	13,000
PBC 6.5.6	On site coaching for PrEP services including DQA and data analysis for prevention outcome through PrEP services in target ART/POC sites (central, provincial and district levels)	7,875
PBC 6.5.7	WAD campaign to promote the ending HIV theme including PrEP, stigma and discrimination reduction and reinforce U=U objectives	8,000
PBC 6.5.2	Basic steps and PrEP drug, HIV installation and treatment among MSM/TG in all 4 provinces were the highest	5,000
PBC 6.5.5	Establish community health service centers in target areas in a one-stop service model, providing HIV services including: HIV testing kits, PrEP, and condoms	10,000

#### HIV Procurement under co-financing

Component	Cost Input	Budget approved Y1 (2024)	Budget plan Y2 (2025)	Budget plan Y3 (2026)	Total 3 years
HIV	Antiretroviral medicines	-	349,626.00	248,357.00	597,983.00
	HIV Rapid Diagnostic Tests	121,905.56	69,058.21	133,254.64	324,218.40
	HIV VL and EID cartridges	-	49,697.61	158,801.41	208,499.02
	OI/STI drugs	171,901.89	138,112.00	149,535.00	459,548.89
	Lab reagents (TB-LAM, VISITEC)	13,344.44	23,252.04	22,065.00	58,661.48
	Lab consumables	17,995.00	12,550.00	12,970.00	43,515.00
	PSM cost for ARVs	-	101,503.82	72,103.00	173,606.82
<b>Total (\$US)</b>		<b>325,146.89</b>	<b>743,799.67</b>	<b>797,086.05</b>	<b>1,866,032.61</b>

#### Key discussion points and comments from the meeting

- The representative from CHAS has emphasized on the lessons learned, issues and challenges in implementing HIV:
  - PrEP for MSM/TG was not achieved as planned (achieved 78.09%) due to delayed budget allocation, which resulted in a delayed implementation in 2024. There is a risk of not achieving it in 2025 due to the suspension of USAID grant to support FHI/Epic partners in implementing activities to reach out to at-risk MSM/TG and refer them for PrEP in 3 provinces: Vientiane Capital, Savannakhet and Champasak. The representative from WHO recommended that the consultation meeting should be taken place between the CCM and the relevant parts of the Ministry lines to discuss if there is no more grant support by USAID.
  - DPF requested an adjustment to the 2025 implementation plan to further support PBC 6.4, which will be submitted by the end of April.
  - There will have more issues and challenges in the near future due to the activities, which supported by USAID in 4 southern provinces was suspended. There are HIV positive cases that are not disclosed and the prisoners with HIV are also lacking off ARV drugs.
- Representative from CHAS made declaration that would appreciate if WHO assist on the self-stigma and discrimination as well as PREP solution. At the same time, CHAS noted that there is a system to follow up the HIV positive cases and encourage MSM access to PREP, building capacity and conduct IEC through social media. In this regard, APL<sup>+</sup> is required to assist to control HIV infection over 12 provinces and coordinate with the provincial health department to facilitate accessing to the prisoners.
- DPF has double checked and readjusted for the activity supported by USAID, the prioritized activities have been addressed and the HANSA2 budget disbursement has been transferred and will be started implementation in early 2025.
- The meeting proposed WHO to mobilize more fund sources to support more activities.

#### TB Program

Representative from National Programs (NTC) provided progress update on implementation of TB grant (*For more information, please see the attached PPT*).

#### HANSA 2 PBC 7 Activity

- PBC 7.1 (Condition 1): DHIS2 (Number of notified TB cases of all forms (New and Relapse)

- PBC 7.2 (Condition 2): Number of households contact eligible received Tuberculosis Preventive Treatment (TPT)

**Lessons learned, issues and challenges in implementing TB (PBC 7):**

- PBC 7.1: The referral of sputum sample for analyzing from the health center have not well implemented.
- PBC 7.2:
  - Home visits to patients have not been carried out as planned due to several factors;
  - The input of personal information of closed patients into the system has not been well implemented.
- **Finance**
  - NTB is still unable to monitor and access financial activities at the provincial and district levels, especially in terms of reporting and implementation of village visit activities;
  - Financial staff at province (some provinces) and district still do not understand the reporting form (recommendation for financial training at each level).

**Annual Operational Plan Year 2025 (USD)**

- Central 262,344
- NTC 212,344
- PEDAs (CSO) 25,000
- CHIAs (CSO) 25,000
- Province 210,023
- Total: 472,367**

**Key discussion points and comments from the meeting**

- After listening to the presentation, all participants of the meeting have agreed and has no more comments.

**MINUTES OF EACH AGENDA ITEM**

**AGENDA ITEM #4** Progress Update on the Implementation of the Global Fund Grants for HANSA2

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

No COI was 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**

Representative from DPF (PR for HIV/TB Grants) will provide progress update on implementation of the Global Fund grants for HANSA Project (*For more information, please see the attached PPT*).

**Management Actions Updates based on Agreed Actions in the last Mission by October 2024**

**There are some agrees actions have not been done as listed in below table**

Thematic Area	PR Actions	Status
Reimbursement of HANSA 1 funding to CSOs	Following DPF confirmation that HANSA 1 funding will be reimbursed to CSOs, DPF to provide an update on the status of the reimbursement by 28 February.	DPF/NPCO submitted the documents to the Cabinet of MoH by February 26, 2025. Currently, the documents have already been approved from the MoH. DPF/NPCO is now preparing the documents to submit to the Ministry of Finance for approval by next week.
Non-compliant expenditure	By no later than 31 January, the CT will provide details of the expenditure classified as non-compliant during the 2022-2024 grant period and request additional justification and/or reimbursement from the Principal Recipient.	We have received the letter from GF by the timeline, and we have already proceeded and sent the notification to the relevant stakeholders, and some of the partners have already transferred the money back to PR. So, we expected to inform/refund to the GF soon.
Privileges and Immunities for the Global Fund	DPF to coordinate with the cabinet office on the Global Fund request for the Government to take prompt action to fulfill its long-standing commitment to grant the Global Fund Privileges and Immunities. We request an update on this	In the process of preparing documents and submit to the MOH Cabinet by next week.

	matter by 28 February. Please refer to Global Fund email on 9 Dec 2024.	
PU/DR submission	The PU/DR report was shared with the DPF via the Partner Portal and it is ready for completion. The DPF is required to comply with the following deadlines: -By 10 March, submission of the Finance Section of the PU/DR. -By 24 March, submission of all other areas (i.e Programmatic, PSM, Grant Management, etc.).	Currently, we are working on it, and expect to submit it to the GF by this Friday.
C19RM Fixed Asset Verification	By no later than 07 March, DPF to provide a response on the issues identified during the verification of the fixed assets procured with Covid-19 Response Mechanism (C19RM) grant funds.	DPF/NPCO has sent the notification to the relevant stakeholders to conduct the final physical inventory of fixed assets by March 4, 2025. The verification has already been completed by March 26, 2025. In this regard, we expected to submit the Fixed Asset Verification in the updated version to the GF soon.

#### Key discussion points and comments from the meeting

- The budget has been transferred the provincial health department, but the activities of all provinces have not been implemented, except only Borlikhamxay.
- DPF proposed all concerned parts to fully report and the report should be in detail and correct in amount number of the grant.

#### MINUTES OF EACH AGENDA ITEM

##### AGENDA ITEM #5 Progress Update on the Implementation of the Global Fund Grants for NCLE

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

No COI was 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

Representative from NCLE has provided the progress update on the Catalytic Matching Funds as below (*For more information, please see the attached PPT*).

#### Budget Plan 2025

##### Developing a policy framework for an integrated analytical laboratory

- MF 5: Publication Guidelines - National Standard Manual for Infrastructure, Testing, Techniques and Equipment for laboratory (not yet implemented)
- MF 7: Publication Guidelines - SOPs for Laboratory Integration - Operations and Sample Management (not yet implemented)
- MF 8: Strengthen existing EQA integration - Support EQA workshop, at Thavisuk Hotel, Vang Vieng District, Vientiane Province (fund request is in progress)
- MF 9: Contract with the selected company for waste disposal dispose of expired chemicals and to dispose of broken equipment (not yet implemented)

##### Strengthening biosafety/biosecurity capabilities

- MF 10: Dissemination workshop on biosafety/safety improvement (not yet implemented)
- MF 11: Handbook and publication of documents for biosafety/safety improvement (not yet implemented)
- MF 15: Verification of 40 sterile cabinets in 17 provincial hospital laboratories and 6 central laboratories (not yet implemented)
- MF 28: Procurement of biosafe HEPA Filters, UV lamps and replacement services for HEPA Filters in sterile cabinets (removal and replacement of exhaust HEPA Filters) (Preparing documents for procurement)

**Strengthening the Laboratory Information Management System (LIMS). Since this activity took a long time to organize, the activities and budget were adjusted.**

- MF 21: LIMS Consultation Meeting on 25-26 February 2025, at Don Chan Palace Hotel (Completed)
- MF 24: Internet Network Improvements within the Center for Analysis and Epidemiology (Preparing documents for budget request)
- MF 26: GXP (GeneXpert Warranty Extension Plus Agreement 2 years entered into force 1 Jan 2025) Contract with Cepheid through GDF

**Key discussion points and comments from the meeting**

- According to the agreement of MOF on the financial regulation, there are the detail of using loan and grant. Through the verification of expenditures has found some missing and ineligible payment. Therefore, the activity budget plan needs to be readjusted according to the current status.
- The meeting recommended NCLE to share experience and ideas with other centers and departments on the Matching Fund implementation.

**MINUTES OF EACH AGENDA ITEM**

**AGENDA ITEM #6** Update information and activities from the CSO-KPs-PLWDs Coordinating Committee

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

No COI was 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**

Representative from CSO-KPs-PLWDs presented on the progress update the new election of CSO, KPs and PLWDs for CCM Members and the road map of New Election Process for CSO, KPs and PLWDs for CCM Members (*For more information, please see the attached PPT*).

**Main objective:**

- Strengthen the representation, commitment and engagement of key populations representatives, PLWD, CSOs and youth at the CCM.

**Specific objectives:**

- Identify the current implementation challenges, existing gaps and accomplishments
- Update the TORs for the representatives
- Support the election process
- Access and enhance the knowledge and the capacity of the newly elected CSO KPs and PLWD

**Timeline for the election process**

- TORs advertised for 2-3 weeks (April 2025)
- Q&A session to clarify any questions that candidates may have (April 2025).
- The election committee review the expression of interest to select the candidates that meet the minimum criteria (First week of April 2025)
- KPs, CSOs workshop in Vientiane; general orientation of the candidates, election (4<sup>th</sup> week of April).
- Assessment of the elected candidates to adapt the capacity building plan during the workshop.

**CCM Eligibility criteria to receive GF funding**

- CCM renewal based on the existing guideline
- Integrated Performance framework (IPF) assessment by CCM Hub in 2025
- CSO-KP-PLWDs memberships are identified based on election based on transparent, participatory, competitive by own constituencies
- KP populations and representatives; CSO, FSW, MSM, TG, Youth, PLWHIV, TB, Malaria, FSW, MSM, TG, Youth, PLWHIV, TB, Malaria
- The election must be well-documented and submitted to GF

**Next steps**

- May: capacity building of the newly elected candidates through webinars
- Within May, the capacity building training on CCM GF work will be organized for new CCM members representative CSO-KP-PLWD and youth through online seminars/trainings.

**Recommendations for OC & ExCom to consider**

- CSO-KP-PLWDs election (election workshop, during 7<sup>th</sup> to 10<sup>th</sup> April 2025)
- Duration of advertisement from CCM secretariat to release it and follow up by CHIAs via online, (15 days)
- Election committee confirm (3 people; government rep, international/multi-bilateral rep, CSO rep)
- Confirm Timeline (election completed in April after Lao New Year)
- CSO-KP-PLWDs election (election workshop (2 days), last week of April 2025)

**Key discussion points and comments from the meeting**

- The meeting recommended that other CSOs are required to be engaged into the CCM and those CSOs should update their activities supported by the GF and they are also required to report their received grants from the different sources to the CCM.
- CCM Secretariat has prepared proposals to the concerned parts to inform the representative to be part of the Electoral Committee for CSO constituency selection to be the CCM member representing from the CSO-KPs-PLWDs.
- The representative from CHIAs has informed that most of the CCM members representatives CSO have permanent resigned. Therefore, the first quarterly pre-meeting of the CSO-KPs-PLWDs has not been organized due to the meeting quorum is insufficient.
- The meeting suggested that any CSO constituency who has received GF grant should update their activity implementation to the CCM.
- The meeting agreed to nominate the representative from WHO, MOH and CSO to be the Electoral Committee. In this regard, CCM Secretariat to continue coordination with the WHO, MOH and CSO for the of each representative to be part of the Electoral Committee for CSO constituency selection. For the representative from CSO, Dr. Souphon, Executive Director of Promotion of Family Health Association (PFHA) is requested to coordinate the national CSO to be informed the representative from CSO constituency to CCM Secretariat.
- GF has confirmed that the CSO constituency will be selected to be the CCM member representing from the CSO-KPs-PLWDs will not be SR from the GF grant.

**MINUTES OF EACH AGENDA ITEM**

<b>AGENDA ITEM #7</b>	<b>AOB and closed the meeting</b>
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)	
No COI was 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	


**SUMMARY OF DECISIONS & ACTION POINTS**

AGENDA ITEM NUMBER	WRITE IN DETAIL THE DECISIONS & ACTION POINTS BELOW	KEY PERSON RESPONSIBLE	DUE DATE
AGENDA ITEM #	<p><b>The meeting chair summary:</b></p> <ol style="list-style-type: none"> <li>1. Congratulations to all parties for preparing detailed and fully reports</li> <li>2. All parts have updated on the implementation of the project in detail including progressive, issues, challenges and solutions; however, CSOs did not report on the implementation of their activities or did not report to each relevant centers and assigned the national programs and center to monitor the implementation of CSO activities as their SRs because CSOs used the national program's strategy to be the evident to enclose with their funding application.</li> <li>3. All centers should review and assess the impact of implementing their activities related to USAID grant and continue to improve and solve the implement priority activities.</li> <li>4. DPF should review whether the budget for 2025 has been transferred to the provincial level as planned or</li> </ol>		

	<p>not and should focus on the implementation of the first 6 months of the year and the oversight field visit team of CCM will conduct the site visits according to the CCM work plan for 2025.</p> <p>5. NCLE should have a lesson learned with relevant departments and centers such as DCDC MOH on how to monitor their SRs' implementation.</p> <p>6. The meeting assigned Dr. Souphon, Executive Director of PFHA to coordinate and consult with the president of LCCC on the nomination of CSO representatives to be part of the Electoral Committee for CSO constituency selection to be the CCM member representing from the CSO-KPs-PLWDs.</p> <p>7. CSO TA to continue to implement the selection process for CSO constituency selection to be the CCM member representing from the CSO-KPs-PLWDs.</p>		
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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:		

HECKLIST	(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 <sup>A</sup>	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 >	Budhsalee Rattana	DATE >	25 April 2025
FUNCTION >	Coordinator and Finance Officer	SIGNATURE >	

CCM MINUTES APPROVAL:			
APPROVED BY (NAME) >	Prof. Dr. Phouthone Muongpak	DATE >	
FUNCTION >	CCM Chair	SIGNATURE >	