

Report of the Portfolio Committee

Geneva, 28 April 2008 K. Sujatha Rao, Chair of the PC



- Approval of Round 8 Proposal Form and Guidelines
- Review of Quality Assurance Policy
- CCM Matters
- Update on LFA retendering
- Architecture of the Global Fund
- Additional Safeguards Policy



Outline

Issues for Decision by the Board:

- 1. Terms of Reference of the Technical Review Panel (TRP)
- 2. TRP Membership for Round 8
- 3. Grant Closure Activities
- 4. Continuity of Services Policy



1. TRP Matters

The PC Considered 4 Issues:

- a. Creating an "HSS" separate group for TRP,
- b. Gender issues,
- c. Filling TRP Vacancies for Round 8, and
 - Decision
- d. Amending TRP Terms of Reference
 - Decision



1a. Creating Separate "HSS Group"

- TRP Currently has 4 review "Groups"
 - 1. HIV
 - 2. Tuberculosis
 - 3. Malaria and
 - 4. Cross Cutting
- Additional group not recommended because:
 - HSS is a separate component
 - Overall architecture discussion underway and is likely to impact TRP in various ways
 - Availability of GAVI Independent Review Committee HSS experts to be part of "Cross Cutting Group" as TRP members on an exceptional basis



1b. Gender issues and the TRP

- PC assured of existing TRP expertise:
 - TRP self-assessment for *existing* gender competencies
 - Visibility of gender issues significant in Round 8
 Proposal Forms and Guidelines
- Gender expertise will be criteria for selection of full TRP "replenishment" in 2009

- Informed by final Board Decision on Gender

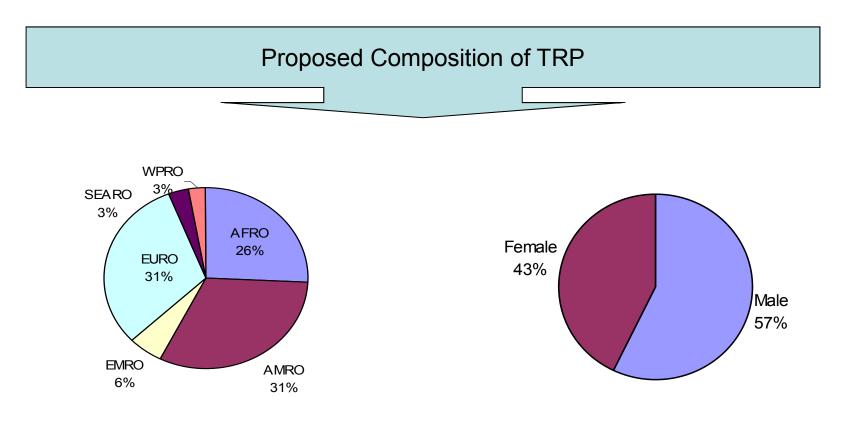


1c. TRP Vacancies for 2008

- Nine (9) vacancies
 - One each in HIV, TB and Malaria
 - Six in the cross cutting review category
- PC convened Sub-Working Group on TRP Membership for 2008
 - Meeting held on 27 April 2008
 - Chaired by PC Chair and Vice Chair
 - With TRP Chair and Vice Chair
 - Representatives from WHO, UNAIDS, WB
 - Expertise brought to Sub Working Group in reviewing candidates' CVs



1c. TRP Vacancies for 2008





1c. TRP Vacancies for 2008 Decision

Recommended Decision Point 1:

The Board approves:

• Dr Fernando Del Castillo (HIV), Dr Ahmed Awad Adeel Adbel-Hameed (Malaria), Dr Omou Younoussa Bah-Sow (Tuberculosis), and Drs Beatriz Ayala-Ostrom, Grace Murindwa, Alison Heywood and Maggie Huff-Rouselle (Cross-Cutting) as Permanent Members of the TRP to serve up to four Rounds commencing from Round 8;

• On an exceptional basis, and to strengthen the TRP's expertise in health systems strengthening (HSS) pending a full replenishment of the TRP Support Group in 2009, two persons currently serving as members of the GAVI Alliance HSS Independent Review Committee, Dr Elsie Le Franc and Dr Bola Oyeledun; and

• In respect of calls for proposals made in 2008, the eighteen (18) persons identified as Alternate Members in the PC Report GF/B17/5 Revision 1 ,

each of whom have been recommended by the Portfolio Committee and the Executive Director upon consideration of required technical expertise, as well as geographical distribution and gender balance.

There are no material budgetary implications for this decision.



1d. TRP Terms of Reference Decision

- Strategic Approach to Health Systems Strengthening (GF/B16/DP10)
 - PC recommends amendment to TRP TORs
 - TRP will review disease section in two parts: i) disease section and ii) HSS section
 - Recall that approval of HSS sections must be linked directly to ATM outcomes



1. TRP Terms of Reference

Recommended Decision Point 2:

The Board amends Article 32 of the TRP Terms of Reference [GF/B15/7 Annex 2] as follows:

32. The TRP shall review each Rounds based proposal as a whole and not separately evaluate elements within a proposal and recommend some to the Board for funding and not others. <u>However, in reviewing a disease component which</u> <u>contains a cross-cutting HSS section, the TRP may recommend for funding</u> either:

> The entire disease component, including the cross-cutting HSS section; The disease component excluding the cross-cutting HSS section; or Only the cross-cutting HSS section if the interventions in that section materially contribute to overcoming health systems constraints to improved HIV, tuberculosis and malaria outcomes.

In addition. tThe TRP can however recommend modification or even elimination of weak elements in an otherwise strong proposal where those weak elements are not a key or major aspect of the proposal.

This decision does not have material budgetary implications







Outline

Issues for Decision by the Board:

- 1. Terms of Reference of the Technical Review Panel (TRP)
- 2. TRP Membership

3. Grant Closure

Continuity of Services Policy



3. Grant Closure Activities

Context:

- Secretariat has been closing grants that reach their "Grant End Date"
- Lessons learned
- Need for clarity for Board-delegated authority to the Secretariat



3. Grant Closure Activities

Lessons Learned:

- Grant closure integral part of grant lifecycle
- Programmatic activities end, but not all closure-related activities can cease by Grant End Date
- Rigorous LFA, Secretariat and CCM oversight is necessary during closure
- Board involvement sometimes needed on funding decisions related to Grant Closure
- Need for clear communication on grant closure to all stakeholders
- Contextual factors especially important in unanticipated grant closures



3. Grant Closures: Principles (1/2)

PC Agreed that:

- Grant closure must be managed with same rigor and oversight as grant implementation
- Grant closure activities may begin during lifetime of grant, but end after "Grant End Date"
 - Six months average time needed (exceptions possible)
 - Example: Audits, final inventories, liquidation or transfer of assets etc
- Grant funds may be used to finance grant closure activities



3. Grant Closure: Principles (2/2)

- Unused grant funds must be returned to the Global Fund
- Grants will be considered closed upon issuance of formal final documentation
- Grant final report will be made public along with other grant-related information



3. Grant Closure

Exceptional Circumstances:

- If a grant terminated prematurely ("No Go" or "termination") PR has no time to plan
 - Therefore, orderly and ethically responsible wind-down may involve some continued but time-limited programmatic activity
- Some circumstances may warrant a disbursement of existing grant funds after the grant end date
 - Board has not expressed clear indication of its expectation in this regard



3. Grant Closure

PC Recommendation:

- Provide time-limited funding for programmatic activities in <u>unanticipated terminations</u>.
- Allow disbursements from remaining grant funds for grant closure activities after the grant end date on an <u>exceptional basis</u>



<u>Recommended Decision Point 3 (1/3):</u>

The Board notes the Secretariat's principles for grant closure set out in Annex 1 of the Portfolio Committee Report (GF/B17/5).

The Board recognizes that, in the exceptional circumstances of unanticipated terminations, there may be a need for continued funding for programmatic activities in order to ensure the orderly and ethically responsible closure of the grant. The Board endorses the Secretariat's authority, as part of its grant management responsibilities, to provide continued funding for programmatic activities in cases of unanticipated termination from remaining grant funds, based on the Secretariat's grant closure principles, emphasizing that any such funding be timelimited.

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<u>Recommended Decision Point 3 (2/3):</u>

The Board also acknowledges that, in exceptional cases, funds disbursed prior to the grant end date may not be sufficient to cover grant closure expenses. The Board delegates to the Secretariat the authority to allow disbursements of remaining grant funds for grant closure activities after the grant end date in exceptional circumstances, provided the expenses are reasonable and permitted in accordance with the Secretariat's grant closure principles.

The authorities of the Secretariat referred to above relate to funds remaining under the grant. Board approval continues to be required for any incremental funding that is necessary to finance grant closure expenses that exceed the remaining grant funds.



3. Grant Closure Activities

<u>Recommended Decision Point 3 (3/3):</u>

The Portfolio Committee will continue to oversee the application of the Secretariat's grant closure policy as part of its on-going responsibility to review regular portfolio updates from the Secretariat. The Secretariat will report to the Portfolio Committee on a regular basis on all unanticipated terminations and suspensions of grants during the preceding reporting period and the arrangements for such grants. These reports will include the specific amounts of funding to be allocated for grant closure, their use and other key issues.

This decision does not have material budgetary implications.



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4. Continuity of Services Policy



4. Continuity of Services Policy <u>Decision</u>

Context:

 Current Secretariat practice refers <u>all</u> requests for Continuity of Services to the Board, even if no incremental funding is required.

PC Recommendation:

- Secretariat authority to approve funding under the Continuity of Services Policy if incremental funding is not required
- Board will be <u>notified</u> when funding under the Continuity of Services Policy is approved without incremental funding



4. Continuity of Services Policy <u>Decision</u>

<u>Recommended Decision Point 4:</u>

The Board amends the Continuity of Services Policy (GF/B14/DP11) by amending paragraph v as follows:

v. The Secretariat will review the Extraordinary Request, and provide a funding recommendation to the Board for its approval if incremental funding is needed. If incremental funding is not required because there are sufficient funds remaining under the ending grant to cover the Extraordinary Request, the Board authorizes the Secretariat to approve the Request, on the same conditions and subject to the same limitations as set out in this policy. The Secretariat will take into account performance issues, as appropriate, and shall make any adjustments to existing implementation arrangements necessary to ensure the effective use of Global Fund financing.

This decision does not have material budgetary implications.

