

Technical Review Panel Learnings from the First Review Windows of the New Funding Model

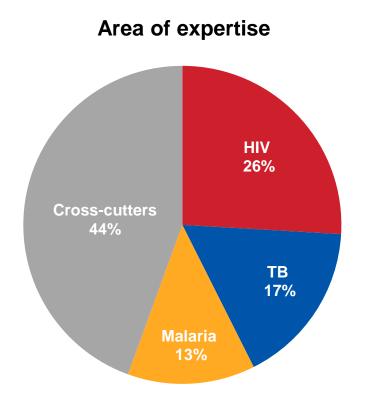
GF/B32/10 Montreux, Switzerland 20-21 November 2014



Agenda

- 1 TRP review process
- 2 Outcomes of TRP reviews
- 3 Policy issues for Board consideration
- 4 General lessons learned for applicants from window 3
- 5 Technical lessons learned for applicants from window 3

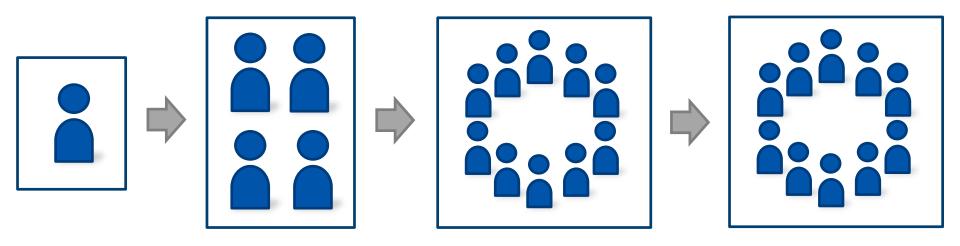
Who are the TRP members?



58 current Serving MembersIncluding:1 Chair2 Vice-Chairs

How does the TRP conduct its reviews?

To the extent possible, recommendations will be made by consensus of the serving TRP members participating in the relevant review.



Individual review

Small group review and discussion (morning)

Presentation and plenary discussion (afternoon)

Final plenary discussion (last day)

Changes in TRP role and functioning



TRP adapted its review focus under the new funding model

- Focus of concept note review has shifted.
 - The TRP still reviews proposals on technical soundness, including:
 - Soundness of approach
 - Feasibility
 - Potential for sustainable outcomes
 - Value for money
 - TRP now also strongly considers strategic focus of the concept notes for maximum impact of Global Fund investment in countries.
- In addition, TRP assesses above allocation request for its soundness to assess
 whether it can be considered quality demand and be entered into the register of
 unfunded quality demand to be considered if additional funding becomes
 available.
- TRP recommends allocation of available incentive funding among those eligible countries that are competing for incentive funding in a given window.

Changes in TRP role and functioning



TRP adapted its role in response to the new funding model

- Working towards grant approval with:
 - Frequent review windows (four in 2014 and four in 2015), allowing quick turn around of iterations.
 - Clear feedback and recommendations for improvements to support iterations.
 - More issues for clarification and revisions in the concept note are delegated to the Secretariat for follow up.
 - Sharing lessons and general feedback by TRP after each review window in form of lessons learned presentations for the Secretariat, partners and CCMs to support future applications.
- Engagement with country teams and partners has been established through:
 - Briefing notes by the country teams to the TRP and in-person briefings as input at the start of concept note review.
 - Debriefings on individual concept note review to country teams in support of country dialogue, if needed.

Changes in TRP role and functioning



TRP adapted its role in response to the new funding model

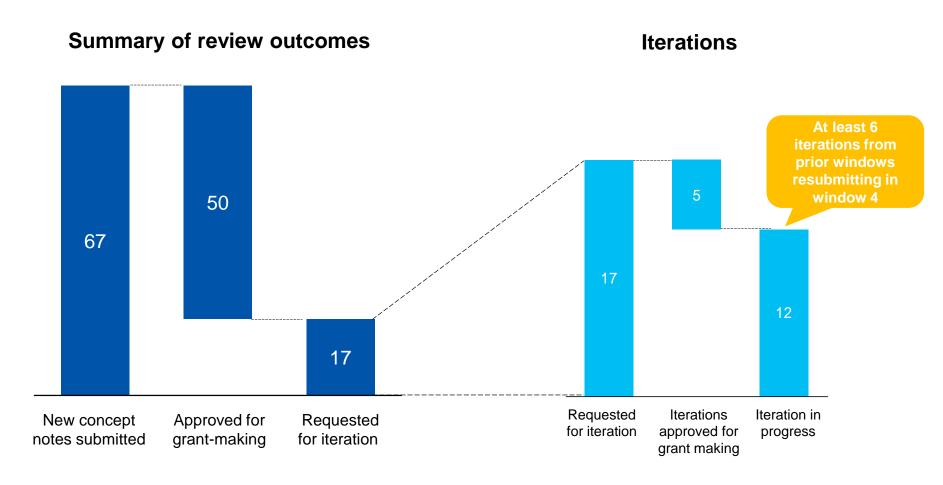
- Engagement and feedback loop between TRP and GAC includes:
 - Debriefing by TRP to GAC members on review outcome before GAC meeting, including a summary document on incentive funding recommendations and rationale.
 - Debriefing by GAC to TRP after each GAC meeting on outcome of GAC deliberations.
 - Discussion between GAC and TRP in case of divergent view between TRP and GAC, and opportunity for reassessment by TRP if fresh information becomes available.
- TRP carefully guards its independence while engaging with GAC and Secretariat by ensuring decisions are made by full TRP panel only.
- Strict conflict of interest policy is maintained.

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67 new concept notes reviewed in first 3 windows

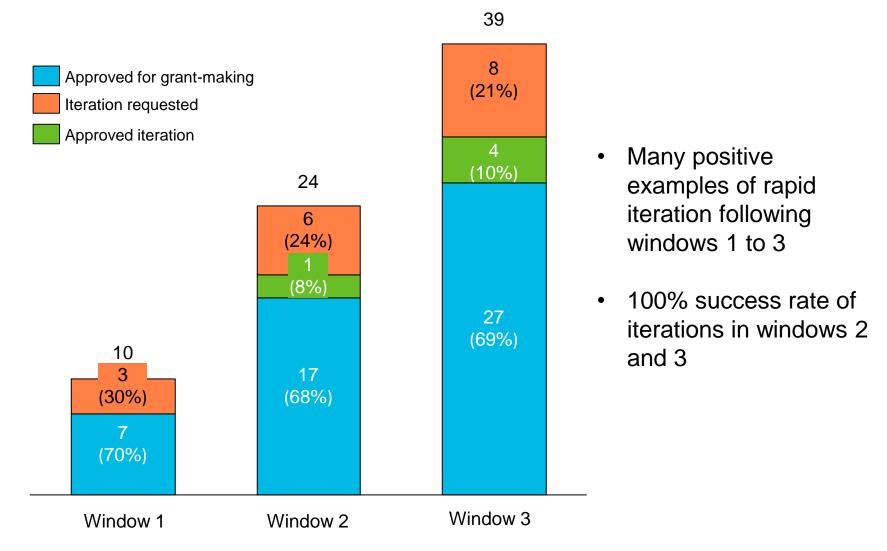
82% currently in grant-making and 18% working on iterations



Note: Includes regional concept notes

Source: Access to Funding database

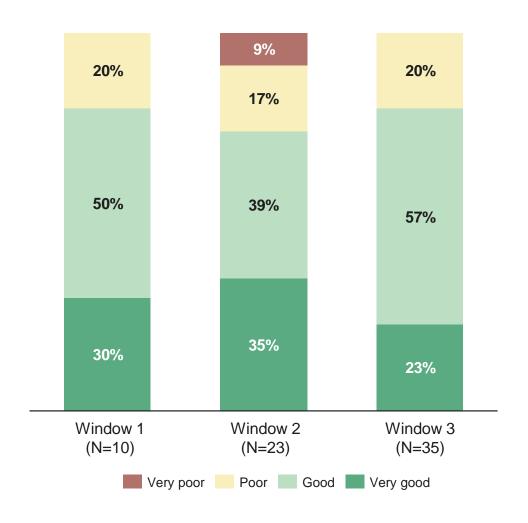
Approval rate of concept notes by window



Note: For window 2, evaluation of Philippines TB early application for incentive funding is counted. For window 3, Sudan is counted as a single integrated concept note

Source: Access to Funding database

Concept note quality by window



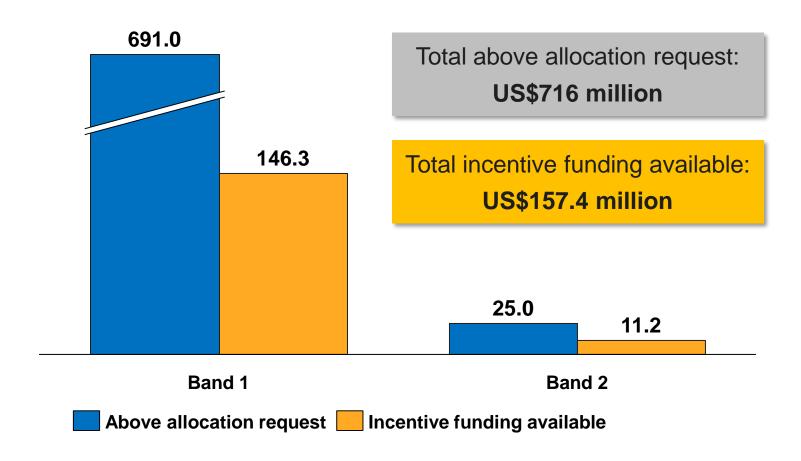
 Overall, concept notes strategically focused and evidence based

Incentive funding recommendations

US\$336.8 million available for incentive funding

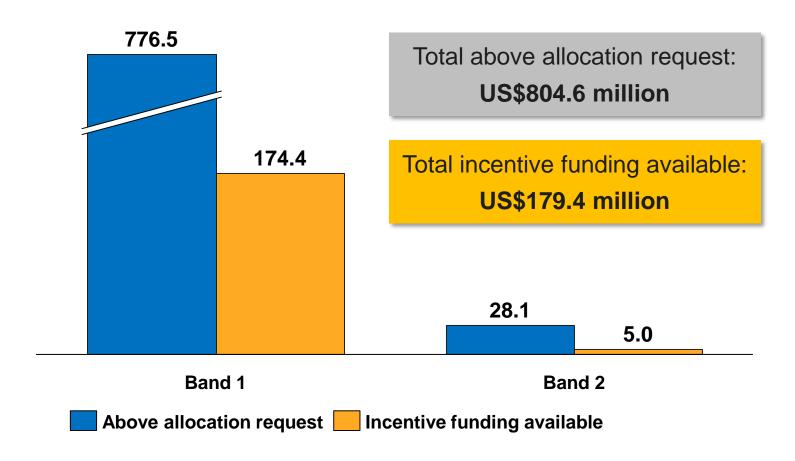
- 35 components considered eligible
 - 5 did not request above allocation
 - 4 requested for further iteration
 - 26 competed for incentive funding
- 21 recommended for incentive funding
- The TRP recommended a total of US\$364.6 million of incentive funding.
- After prioritizing interventions within concept notes, the TRP took into account potential to leverage more domestic funding, potential for impact and past performance.
 - Impact defined first as covering critical programmatic gaps.
- TRP recommended an amount above the available funds with the understanding that grant negotiations would produce savings.

Above allocation request vs. incentive funding available



Note: Includes countries / components eligible for incentive funding only

Above allocation request vs. incentive funding available



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Policy issues for Board consideration

Issues identified during windows 1-3 reviews

- 1 Reconsider full expression of demand and incentive funding process
- 2 Consider operational challenges when developing policies, e.g. grant duration
- Encourage greater focus on sustainability well before funding ends
- 4 Evaluate results-based financing models
- 5 Develop sub-national strategies to work effectively with large federal states
- 6 Explore more flexible approaches to support in fragile countries
- 7 Encourage more strategic investment of domestic resources

Summary of issue 1: Above allocation request

1 Reconsider full expression of demand and incentive funding process

- The full expression of demand and incentive funding not achieving their purpose.
 - Above allocation request is not full expression of demand.
 - Incentive funding and full expression of demand processes do not favor strategic investment decisions for impact across whole portfolio.
- Unintended consequence: the unrealistic hope of resources may undermine real prioritization and lessens drive to mobilize domestic and other donor funding.
- Evidence that developing above allocation and allocation funding requests represents an undue burden on countries.

Ongoing learning: Imperative to document how TRP recommendations on incentive funding and unfunded quality demand are translated into budgeting, grant-making, implementation and results.

Issue 1: Above allocation request

1 Reconsider full expression of demand and incentive funding process

- Above allocation request is not the full expression of demand.
 - 19 out of 67 concept notes did not formulate an above allocation request (including 5 eligible for incentive funding).
 - In many cases above allocation request only covers the elements put forward to compete for incentive funding or for which chances are considered higher.
 - Easier ways exist to inventory full needs.
- Incentive funding and full expression of demand processes do not favor strategic investment decisions for impact across whole portfolio.
 - No evidence to suggest that it encourages innovative, creative approaches; rather it was used to fill gaps in essential services.
 - TRP recommendations for incentive funding heavily influenced by "gaping holes" in basic life-saving programs due to under allocation.
 - Amount available and the number of competitors in a given window is arbitrary.

Issue 1: Above allocation request

1 Reconsider full expression of demand and incentive funding process

- Unintended consequences:
 - The unrealistic hope of resources may undermine real prioritization and lessens drive to mobilize domestic and other donor funding.
 - Countries continue to put higher priority activities in the above allocation request to make the case more compelling for incentive funding.
- Evidence that developing above allocation and allocation funding requests represents an undue burden on countries.
 - TRP requires detailed justification and costed action plans to allow a more informed assessment what constitutes *quality* demand (to file in the register of unfunded quality demand).
 - In practice countries are required to write two full funding requests in one concept note (or three if competing for incentive funding).

Issue 2: Shortened grant duration

Consider operational challenges when developing policies, e.g. grant duration

- The TRP reviewed nine concept notes with shortened grant duration and has considerable concerns around the complexities in implementing this Board decision.
- Major concerns were raised by TRP around:
 - Equity: Some countries advantaged over others and end up receiving more funding.
 - **Prioritization:** Hard to prioritize above allocation activities and award incentive funding due to challenges in separating out activities in final year.
 - Allocation: Continuity of services meant further increase in allocation for already over-allocated countries.
- Given obligation to cover shortened grant durations, few other countries will receive additional funding, questioning the value of unfunded quality demand within the Global Fund.
- The Global Fund should:
 - Seriously consider operational consequences of any last-minute decisions.
 - Consider less complex ways to enlarge allocations to countries that would have allocations below what is needed cover essential services previously covered by the Global Fund (e.g. two rounds of LLINs, covering patients on ART).

Issue 3: Sustainability

3 General observations – Transitioning from Global Fund funding

- In window 2, there was one country voluntarily transitioning out from Global Fund support, with a well-defined exit strategy, which the TRP commends and encourages to learn from and eventually disseminate as a good practice.
- The current three-year transitional funding period may not be enough and early consideration is required.
- The Global Fund should encourage planning for eventual exit in pre-exit grants, including in national strategy development and through sharing best practices.
- Work with technical partners to develop guidelines for "scaling down" when changes in the epidemiological situation and limited resources call for it.

HIV-related transitioning issues

- Collaboration between CSOs and governments and payment of CSOs by governments to provide services for key populations is a particular risk area.
- The Global Fund should consider incentives to encourage national mechanisms to fund civil society involvement in pre-exit grants to ensure continuation of key population services.

Issue 3: Sustainability

3 TB-related transitioning issues

- TB has similar issues as HIV (i.e. role of CSOs), as well as very costly MDR-TB drugs and diagnostics. The Global Fund should:
 - Encourage early planning of sustainable provision of MDR-TB drugs, and tackle early on issues of IP to ensure there is a competitive market.
 - Work with technical partners to negotiate price reductions for RX for MDR-TB and GeneXpert equipment.

Malaria-related transitioning issues

- The massive expansion of access to LLINs is a concern given lack of guidance on pre-elimination situations. The Global Fund should:
 - Commission guidance from technical partners on options for sustainable malaria control to cover financing (e.g. negotiated prices, co-payments, social marketing).
 - Consider building regional approaches into country grants as a phased exit strategy.
 - Check on the quality of essential functional surveillance and response systems.
 - Given lack of clarity on Global Fund policy for elimination, the Global Fund should:
 - Articulate the relative balance of funding for malaria control and elimination.
 - Work with partners to clarify exit strategy for transitioning countries.

Issue 4: Results-based financing

4 Evaluate results-based financing models

- Observations based on two concept notes using results-based financing model and some earlier reviews.
- The Global Fund vision and objectives regarding RBF are quite clear and worthwhile supporting:
 - Improve results and performance.
 - Simplify grants execution.
 - Strengthen health systems.
 - Incentivize impact to achieve value for money.
- It is an evolving funding model with a drive towards differentiation. The TRP is concerned about the number of models taking off at the same time, without being comprehensively modeled and well understood by all concerned, including TRP.
- Each model should be assessed, elaborated and lessons learned while being piloted.
- Some identified risks: i.e. Global Fund contributions being part of a bigger pool; consequently
 Global Fund envisaged results dependent on commitments by other partners, affecting outputs.
- Challenges in agreeing on the appropriate targets and indicators as well as the mechanism for linking fund disbursement to achieving such indicators. Taking contingencies such as adverse events and external factors into consideration.

Issue 5 and 6: Alternative strategies

- 5 Develop sub-national strategies to work effectively with large federal states
 - The Global Fund needs to develop country-specific strategies to deal with large, federal states (e.g. Pakistan, Nigeria). The Global Fund should:
 - Develop country-specific analyses of engagement options in large countries, considering burden of disease, political power, national structures and policy.
 - Analyses should be sensitive to country views on engagement, efficiency in delivering programs and cost implications for the Secretariat.
- 6 Explore more flexible approaches to support in fragile countries
 - The Global Fund is well suited to strengthen health systems in fragile countries of benefit to all three diseases. The Global Fund should:
 - Have flexible use of country split of programs that maximize gains across all areas.
 - Differentiate fragile states (e.g. weak states and disasters/wars with internally displaced persons).
 - Explore phased planning and grant-making modalities for country programming around the three diseases.
 - Document and learn from experiences in fragile states and use of the emergency fund, and be guided by international good practices on human rights of displaced groups.

Issue 7: National budgetary contributions

7 Encourage more strategic investment of domestic resources

- In its policies, the Global Fund is not assessing strategic value of government investments to indicate which are acceptable for counterpart financing and willingness-to-pay.
- In reviewing concept notes, TRP has repeated evidence of sub-optimal government allocation of resources which undermines the Global Fund's focus on investment for impact.
 - For example, governments paying for larviciding, IRS before elections, or in-patient TB treatment.
- The TRP notes that the Global Fund's focus of proposal policy seems to discourage domestic funding for key populations for the countries close to transitioning from Global Fund funding.
 - This may reduce the sustainability of programs for key populations in long run.
- The Global Fund should:
 - In the short term, advocate for national investments to be invested for greatest impact.
 - In the longer term, adapt the counterpart financing policy or willingness-to-pay commitment to encourage investments in high-impact interventions or services.
 - In the longer term, reconsider the focus of proposal requirement.

Agenda

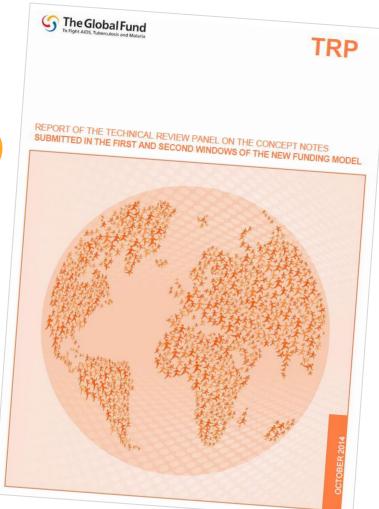
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Lessons learned from windows 1-3

 For lessons learned from windows 1 and 2, please consult the Report of the Technical Review Panel on the Concept Notes Submitted in the First and Second Windows of the New Funding Model.



 The following slides describe initial lessons learned from window 3.



TRP appreciated...

General observations from window 3

- 1 Iterations addressed issues, showing improvements in strategic focus
- 2 Applicants clearly identified key populations and gender-based violence issues
- 3 TB/HIV concept notes showed positive examples of service delivery integration

For CCMs, country teams and technical partners: General lessons from window 3

To strengthen concept notes, the TRP recommends applicants:

- Provide clear description of, justification for and separated budgets for prioritized interventions in above allocation vs. allocation
- Match and align selected interventions to the epidemiological and programmatic gap analysis
- 3 Include gender-sensitive programs and activities in concept notes
- Provide information on key donor investments and their expected contribution to program objectives
- 5 Strengthen sustainability through more deliberate transition plannings
- 6 Build health system capacity

Lesson 1: Prioritize funding request

- Provide clear description of, justification for and separated budgets for prioritized interventions in above allocation vs. allocation
 - The TRP recognizes an overall improvement in prioritization within concept notes.
 - However, some applicants:
 - Still struggle with separating the allocation from the above allocation request.
 - Are presenting essential activities in the above allocation request. This does not make the case more compelling for incentive funding.
 - When the allocation vs. above allocation split is unclear, it is difficult for the TRP to assess the application and recommend incentive funding or unfunded quality demand.
 - TRP may ask for reiteration if prioritization is neither clearly specified nor strategically focused.
 - The TRP asks applicants to clearly separate the allocation from the above allocation request and justify the choice.
 - In the narrative, include a clear explanation **why** certain geographic regions, modules and interventions have been put in either allocation or above allocation request.
 - In the modular template, clearly separate the **activities** as well as the overall budget for the allocation vs. above allocation.

Lesson 2: Identify appropriate interventions

Match and align selected interventions to the epidemiological and programmatic gap analysis

- The TRP applauds a notable improvement of situational analysis and programmatic gap analysis in concept notes, and better discussion of geographic variations in epidemiology and program access.
- However, stronger situational analyses have not always translated into programs and budgets. For example:
 - HIV: key populations are identified, but concept notes lack interventions to address the programmatic challenges
 - Malaria: geographical analysis is described but not linked to stratified program interventions and impact
 - **TB/HIV**: even where collaboration between TB and HIV programs is noted, a comprehensive response to TB/HIV that builds on both TB and HIV platforms is not articulated
 - TB: low case detection levels acknowledged, but strategies for increasing case detection are not proposed
 - **HSS**: weak data systems are identified, but without requesting adequate HMIS funding (or explaining how this will be addressed by other donors/government funding)
- The narrative should make the link between the programmatic gaps, priorities and proposed activities, and the modular template should support the narrative with budgetary details.
- When applicants are unsure which activity is best suited to address issues identified, the TRP encourages the inclusion of pilot programs and operational research to test and develop effective interventions.

Lesson 3: Include gender-sensitive programs

3 Include gender-sensitive programs and activities in concept notes

- The TRP was disappointed that most concept notes paid little attention to addressing gender-specific needs.
 - The TRP continues to find a lack of **prevention and treatment programs for adolescent** girls and young women.
 - Substantial efforts are needed to address gender-based violence.
 - Sex-disaggregated data not always presented.
- Applicants seem to struggle to know how to address gender-related issues, offering generic solutions.
 - The issue seems less about political will than about knowing which programs and interventions will work.
- The TRP requests technical partners and civil society partners with expertise in gender issues to engage with CCMs during country dialogue – to identify appropriate interventions and ensure they are included in the budget.
- As previously mentioned, pilot programs are encouraged if needed.

Lesson 4: Provide donor funding information

Provide information on key donor investments and their expected contribution to program objectives

- The TRP noted a lack of information regarding where other donor funding is invested, in areas complementary to government and Global Fund funding.
- The TRP asks applicants to provide a brief overview of main donor and national funding by diseases and its planned use with a focus on how it is being spent and the gaps remaining.
 - Any intersections with, and impact on, Global Fund programs should be highlighted.
 - Ideally, there should be a donor funding table showing the complementarity of Global Fund funding within the overall funding available.
- The TRP reaffirms that co-financing with other donors is ideal and highly encourages other donors and countries to maximize the impact of all funding.
 - The TRP noted one fully integrated co-financing program with another donor, enabling higher coverage rates in key areas than would have been possible with Global Fund financing alone.

Lesson 5: Think ahead for sustainability

5 Strengthen sustainability through more deliberate transition plannings

- The TRP is concerned that successful transition to sustainability will require forward planning, which is not visible in most applications.
- It is important to work ahead for sustainability of programs around key populations.
 - Encourage increased government investment in key populations programs and activities sooner rather than later.
 - Promote active government collaboration and co-implementation with community-based organizations and NGOs (joint activities, not just contracting CSOs).
- All applicants should think about how to appropriately plan for sustainability of their programs, and those that may transition soon need to do so with urgency.
 - Plan for sequenced government assumption of all program and commodity costs in the future.
 - Encourage domestic country contributions and work to develop other funding sources (e.g. insurance, private sector corporations).
 - Maximize the use of health systems strengthening funding to integrate Global Fund-requested activities into national health programs and strengthen human capacity, national supply chain management and monitoring and evaluation systems.

Lesson 6: Strengthen health systems

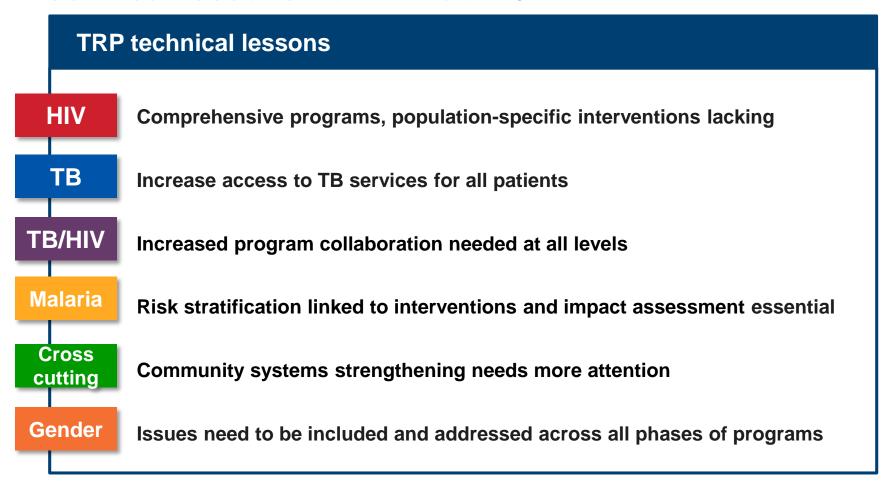
5 Build health system capacity

- The TRP affirms that health system capacity is the fundamental basis for the success of all health programs, including AIDS, TB and malaria.
 - Not all concept notes have demonstrated sufficient investment. The TRP would like to see health systems strengthening considered and addressed by more concept notes.
- General areas of strengthening needed:
 - Clarity in international guidance helping countries integrate HSS.
 - Focused technical assistance from partners to ensure robust and holistic response to health systems weaknesses.
 - Applicants to ensure sufficient focus on broader HSS along with progress on disease-specific interventions.
 - Applicants to clearly show how HSS investments from different domestic and external funding sources are filling identified gaps.
- RMNCH notably missing from many concept notes reviewed. Opportunities for better integration of disease-specific interventions with RMNCH activities needs to be explored.

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For CCMs, country teams and technical partners: Technical lessons from window 3



Key technical lessons: HIV

HIV

Comprehensive programs, population-specific interventions lacking

- Limited or inequitable access to ART for some populations remains a problem
 - Need operationally feasible programs to expand access for key populations, adolescents, children and PMTCT
- Comprehensive programs for entire prevention and treatment cascade
 - Expand HIV testing access and ensure timely referral to care and treatment
 - · Include efforts to improve adherence and retention across the cascade
 - Develop indicators to adequately monitor cascade and treatment outcomes
 - Increase emphasis on quality of care, including measuring viral load suppression
- Key populations
 - Data weaknesses in estimating size, prevalence, program impacts
 - Too much focus remains on lower-impact programs in the general population without demonstrated effectiveness in the local context
 - Prevention efforts sometimes fail to address key modes of transmission from analyses
 - Emphasize essential package of services
 - Too little attention to concretely addressing barriers to services for key populations
 - Few concept notes consider prisoners

Also see TRP report on windows 1-2 for previous lessons on adoption of 2013 ART guidelines, PreP and lack of programs for young women: theglobalfund.org/en/trp/

Key technical lessons: TB

Increase access to TB services for all patients, including MDR-TB, XDR-TB and TB/HIV patients

Quality of concept notes

- Overall, concept notes in line with international standards, aligned with national strategic plans
- Solid situational analysis with challenges that need to be overcome
- However, link between programmatic gaps, priorities and activities sometimes lacking

Insufficient resources for TB programs

- Resource gaps seem to limit innovation, ability to scale up, and adoption of post-2015 approaches
- Need to find cost efficiencies to promote innovation
- Partners should support TB programs to identify sufficient resources to fully fund programs and to engage in the program split decisions
- In-country discussions not recognizing increased costs of PMDT, TB not benefiting from reallocations

Other issues

- Insufficient description of capacity to implement proposed activities and operationalize increased access
- Insufficient attention to ensure comprehensive and good quality programs of basic TB services to prevent MDR-TB
- Lack of interventions for key populations, including children
- Limited introduction and scale up of contacts investigation

Key technical lessons: TB/HIV

TB/HIV Increased program collaboration needed at all levels

- Coordination between TB and HIV programs
 - Some concept notes showed high level of integration and collaboration
 - Others appeared more like two proposals put together, seemingly not changing level of coordination in country
 - Where there are identified weaknesses, countries should be more specific on how-they intend to address them
 - Screening for TB among PLHIV still weak
- Integrated service delivery
 - Diagnosing, identifying and treating patients through integrated service delivery between TB and HIV programs is not well developed
 - When service delivery is planned, attention to infection control is lacking
- Prison populations
 - Needs not well addressed and clear operational details lacking

Key technical lessons: Malaria

Malaria

Risk stratification linked to interventions and impact assessment essential

Geographic stratification

 All countries should be using or putting in place systems to stratify risk at lowest administrative levels possible, which should be linked to intervention planning and data reporting

Private sector

- Where private sector is a major service provider, countries should articulate an approach that ensures service quality and effective collaboration
- Applicants including private sector copayment need to provide solid justification and data on the efficacy of such co-payment

Monitoring and evaluation

- Increased attention to HMIS and M&E, linked to stratification, should be a priority and reflected as such in the budget
- Active and passive surveillance must be clearly distinguished
- Revised MERG 2013 Household Survey Indicators (e.g. for net access) should be used

Key technical lessons: Cross-cutting issues

Cross cutting

Community systems strengthening needs more attention

- Community systems strengthening
 - Need to make clear how important CSS is, especially in bringing a client perspective to policy development and service delivery
 - CSS is an appendix right now, but needs to be brought into mainstream
 - Gaps are often clear but interventions are often not connected to community-based organizations – and with no clear feedback loops
 - Too many community-level programs are outsourced without clear systems to monitor and ensure quality of service
- Health systems strengthening
 - Missed opportunities to integrate and link other health programs such as RMNCH and other chronic disease care, such as diabetes

Key technical lessons: Gender issues

Gender

Issues need to be included and addressed across all phases of programs

Gender

- Data should be disaggregated by sex and age to ensure women and girls are benefiting from interventions
- Applicants need to include not only women and girls but should also explore and address specific vulnerabilities of men and boys
- Concept notes need to make clear how interventions are empowering and creating equal access and demand for vulnerable women, girls, men and boys
- Global Fund and partner support is needed for applicants on how to operationalize gender-focused intervention guidance throughout concept notes

Gender-based violence

- More substantial efforts are needed to address gender-based violence
- When gender-based violence is highly prevalent, efforts to combat it need to be stated in all appropriate parts of the concept note and appropriately budgeted