

June 2010 Phase 2 Funding Decision

Confirmed 14 June 2010

Decision Point GF/B21/EDP/04:

The Board approves additional funding for the Phase 2 period for the proposals listed in Schedule A in the amounts indicated for each proposal, with the clear understanding that the amounts approved are upper ceilings rather than final funding amounts, and based on an understanding that the Secretariat shall pursue ongoing implementation arrangements for each proposal consistent with the recommendations set forth in its Grant Scorecard. Approval is also subject to paragraph 3.c. of the revised Comprehensive Funding Policy (GF/B20/DP9).²

The Board reaffirms that the maximum funding amount for Phase 2 of each proposal shall be the sum of the amount approved by this decision and the amount of any funds approved for Phase 1 which have not been disbursed by the Global Fund at the end of the Phase 1 period.

SCHEDULE A

	Country, Disease, Round	Grant Number(s)	CCM Requested Amount (Incremental in US\$ or Euros)	Approved Funding Amount (Incremental in US\$ or Euros)	Recommendation Category
1.	Benin, Malaria, Round 7	BEN-708-G07-M	Euros 7,056,927	Euros 2,809,045 = US\$ 3,455,240 *	Conditional Go
2.	Bhutan, Malaria, Round 7	BTN-708-G05-M	US\$ 1,268,060	US\$ 905,938	Conditional Go
3.	Cote d'Ivoire, Malaria, Round 6	CIV-607-G06-M	Euros 5,765,695	Euros 3,348,647 = US\$ 4,118,970 **	Go
4.	Lesotho, HIV, Round 7	LSO-708-G05-H	US\$ 20,224,887	US\$ 15,249,526 ***	Conditional Go
5.	Nepal, TB, Round 7	NEP-708-G08-T	US\$ 9,145,040	US\$ 8,815,424	Go

² Where the Board approves additional funding for a period greater than two years, the Secretariat is required to commit that additional funding limited to two years. A third year of additional funding may subsequently be committed by the Secretariat, not earlier than eighteen months from the start of additional funding, conditional upon the availability of funding.

	Country, Disease, Round	Grant Number(s)	CCM Requested Amount (Incremental in US\$ or Euros)	Approved Funding Amount (Incremental in US\$ or Euros)	Recommendation Category
6.	Niger Malaria, Round 7	NGR-708-G07-M	Euros 6,038,018	Euros 5,914,863 = US\$ 7,275,520*	Go
7.	Mali, Malaria, Round 6	MAL-607-G04-M	US\$ 3,669,912	US\$ 3,604,863	Conditional Go
8.	Mongolia, HIV, Round 7	MON-708-G05-H	US\$ 1,359,539	US\$ 1,349,344	Go
9.	Multi- Country Western Pacific, TB, Round 7	MWP-708-G07-T	US\$ 7,344,790	US\$ 5,625,579	Go
10.	Paraguay TB, Round 7	PRY-708-G03-T	US\$ 3,481,687	US\$ 3,427,420	Go
11.	Senegal, Malaria, Round 7	SNG-708-G07-M	Euros 20,836,866	Euros 15,032,313= US\$ 18,490,300 *	Conditional Go
12.	Thailand, Malaria, Round 7	THA-708-G09-	US\$ 10,425,580	US\$ 9,282,734	Conditional Go
Total				US\$ 81,600,858	

NOTES:

(*) The Malaria proposals for Benin, Cote d'Ivoire, Niger and Senegal were approved in Euros and the CCM has requested Phase 2 funding in Euro currency. To give the Board the most up-to-date picture of what the EUR/USD equivalent is at the time of the Phase 2 submission, the recommended incremental funding amount has been computed in USD using the rate of exchange that is published at www.oanda.com on 1 June 2010 (Euro1 = US\$1.23004).

(**) The Secretariat determined that due to weak management by the PR (primarily oversight of SRs) the grant should receive a 'No Go' recommendation. However, in its request the CCM had requested that two PRs take on the Phase 2 implementation, including PNLP. It is the view of the Secretariat that the 'No Go' derives from poor management and not from poor results of the program per se. Therefore the Secretariat recommends that the portion of the program and budget allocable to PNLP should be allowed to continue, whilst that under the management of CARE will be discontinued. The Secretariat is not requesting any incremental amount for CARE.

(***) This incremental amount of US\$ 15,249,526 excludes the funds which may be requested by the CCM at the later date to support the National Prevention of Mother-to-Child Transmission (PMTCT) efforts which has been encouraged by the Board.

This decision does not have material budgetary implications.