



COVID-19 RESPONSE MECHANISM

# **C19RM Monthly Update to the Board**

Report for April – June 2023 (Q2)

Publication Date: 10 July 2023

Geneva, Switzerland

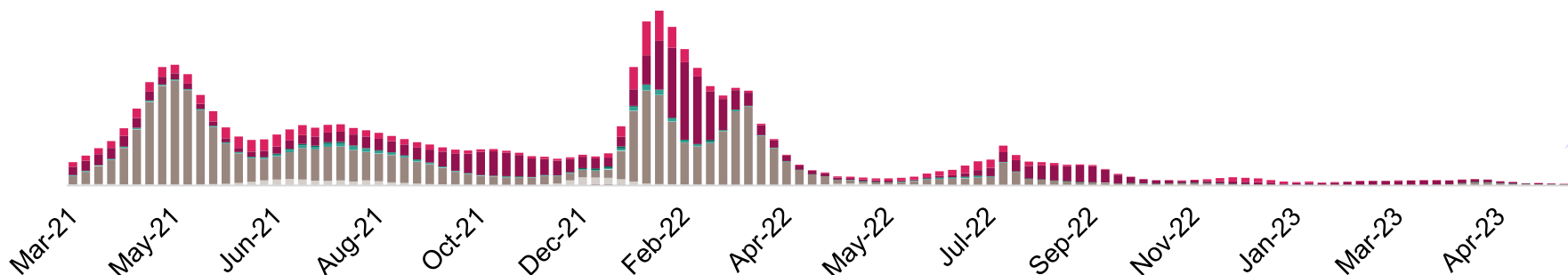
# Executive Summary for April – June Report (Q2)

- 1 Looking Back - COVID-19 Pandemic Response and Pandemic Evolution:** During the COVID-19 emergency response, 75% of C19RM investments focused on COVID-19 control and containment. The response to procurement needs was quick; demand for HTM mitigation was based on a solid organizational infrastructure, as well as the speed and agility in deployment of funds. C19RM support allowed countries to have timely and secure access to COVID-19 diagnostics, PPE and oxygen. Investments in HTM mitigation enabled rapid recovery across key programmatic areas. Urgent investments in health systems and centrally management limited investments (CMLIs) further supported strengthening longer term investments. As the COVID-19 pandemic evolved, country demand for COVID-19 health products and C19RM expenditure decreased.
- 2 Making the Shift – Strengthening Systems for Pandemic Preparedness:** Countries are no longer spending money on health products that are no longer needed for their COVID-19 response. This has presented a unique opportunity to invest unused funds into activities that strengthen components of health systems, underpin pandemic preparedness and align with funding needs. Making the shift will entail understanding the (re)investment landscape to mobilize remaining COVID-19 response funds to finance the strategic priorities aligned with the Board extension. C19RM portfolio optimization Wave 2 will also be used to further drive the C19RM strategic shift, holistically complimenting GC7 grants to bolster systems for health and pandemic preparedness.
- 3 Supporting Implementation:** Implementation of C19RM strategic shift requires massive scale up in the RSSH priority areas including medical oxygen and respiratory care, surveillance, lab strengthening, community health workers, and health product and waste management. To address capacity gaps and bottlenecks during implementation, Technical Assistance (TA) through CMLIs (e.g., BOXER and STELLAR) and engaging new actors is key.
- 4 C19RM Monitoring, Oversight and Evaluation:** Monitoring & Oversight (M&O), Monitoring & Evaluation (M&E) and assurance frameworks have been aligned with the strategic shift to drive results. Performance Frameworks have been introduced for a cohort of high investment grants to track results against targets to drive accountability for delivery. Recognizing the countries are at different stages of health systems maturity, we will adopt a cohort approach towards investments and monitoring of expected results across prioritized RSSH investment countries and will continue leveraging the monitoring processes that have worked well from 2021, including Pulse Checks and internal M&O processes.
- 5 Key Risks, Concerns and Looking Ahead:** While progressing into the strategic shift, we continue to adapt and learn. Key risks and concerns are monitored and managed, such as the capacity of implementers, operational risk in execution of massive scale-up of RSSH investments, supply operations risk and pressure on national systems. Countries are encouraged to strengthen investments in C19RM Monitoring & Oversight (M&O) and differentiated assurance approaches. There is a unique opportunity to meet the countries' demands to strengthen systems for health and to explore complementarity with other funding streams, such as GC7 and Pandemic Fund. Additional analysis for tracking C19RM progress on making the shift, execution, and results will be provided in the next Q3 report.

# Overview of C19RM Implementation

The Global Fund responded swiftly to the COVID-19 pandemic by enabling grant flexibilities and through additional donor funding. C19RM continues to leverage opportunities to meet demand to strengthen health systems and pandemic preparedness.

Number of New COVID-19 Cases



5 May 2023  
End of COVID-19 as a  
public health emergency

## 1 Emergency Response

In the beginning, **75% of C19RM investments** focused on COVID-19 control and containment. The Global Fund responded quickly to procurement needs based on a solid organizational infrastructure, also providing grant flexibilities. HTM mitigation and urgent improvement to systems for health were also prioritized.

March 2020 – March 2022

- Grant flexibilities
- Acute response
- Fast Track, Full Funding, Additional Funding

## 2 Pandemic Evolution and Uncertainty

**Investments landscape remained unchanged** – demand / orders for COVID-19 commodities dropped dramatically but countries did not want to risk reprogramming in case of future surges. Extreme uncertainty delayed continuation of investments by countries.

April 2022 – April 2023

- Started the shift
- Evolved strategic priorities: labs, surveillance, oxygen, supply chain and community health workers.
- Extension of Implementation
- Portfolio Optimization Wave 1

## 3 Transition to Systems Strengthening

**Five strategic priorities:** Surveillance systems, laboratory systems, HRH and community systems, medical oxygen and respiratory care, health product and waste management.  
**Actions to drive the shift:** (i) visibility on reinvestment landscape; (ii) maintain urgency and agility in funds deployment; (iii) enhance monitoring and support implementation

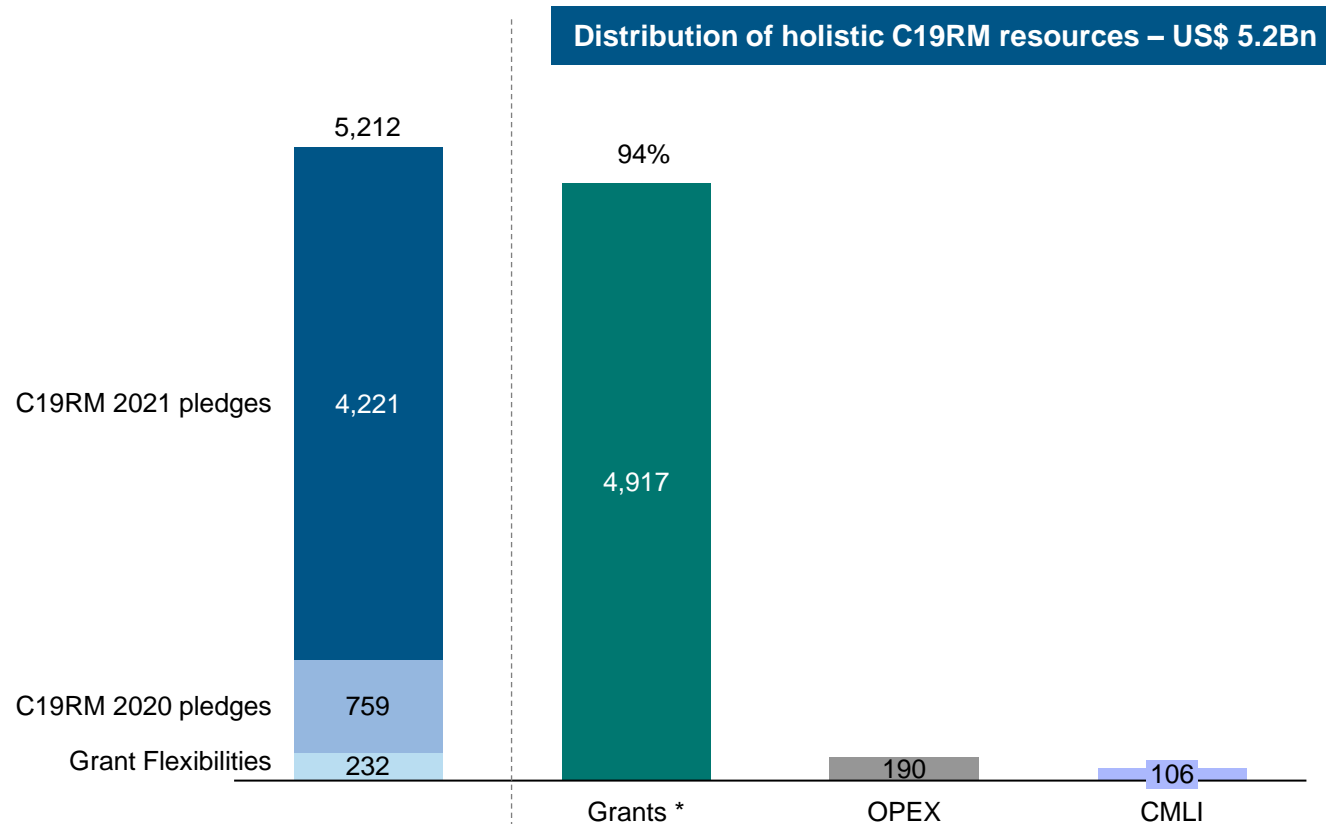
May 2023 – December 2025

- Portfolio Optimization Wave 2
- Reinvestment towards Strategic Priorities, planning holistically with GC7
- Multi-prong approach for enabling effective implementation

# Distribution Overview of C19RM Resources

94% of C19RM holistic resources is directed towards funding in-country activity implementation

Note: Figures may not sum due to rounding



## Insights on distribution of C19RM resources

- **100% of C19RM pledges (C19RM 2020 & 2021) encashed**, indicating that funds are readily available to enable the shift in investment landscape.
- **94% of total C19RM resources** assigned for implementation through country grant mechanism.
- **CMLI investments represent 2% of total C19RM resources** (or 2.5% of C19RM 2021 adjusted pledges) to provide technical assistance & support to facilitate activity implementation at grant levels.
- **OPEX is 4.5% of C19RM 2021 adjusted pledges** and in line with Board decision (*GF/B48/DP03*).

Pledges of support for C19RM 2020: Germany, Canada, Denmark, Sweden, Norway

Pledges of support for C19RM 2021: USA, Germany, Switzerland, Norway, Netherlands, Canada, Luxembourg, UK, New Zealand, EU

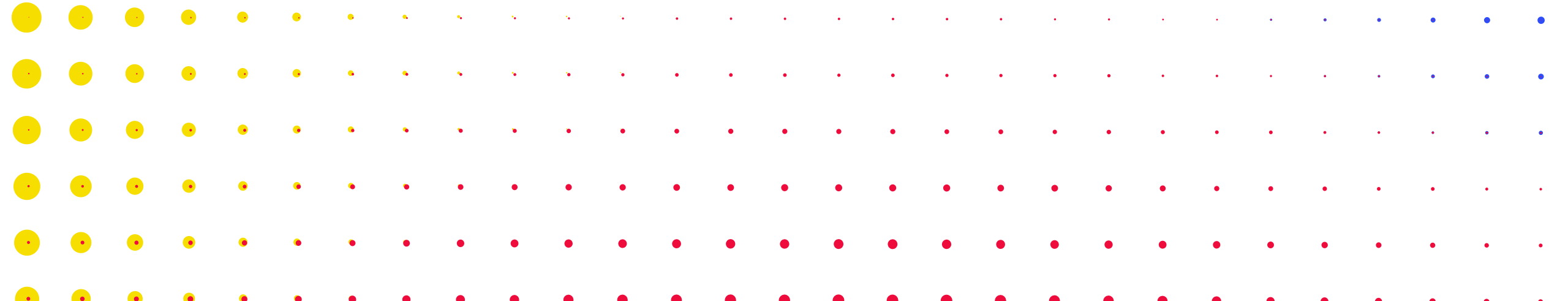
\* Portfolio optimization of US\$ 400M is excluded



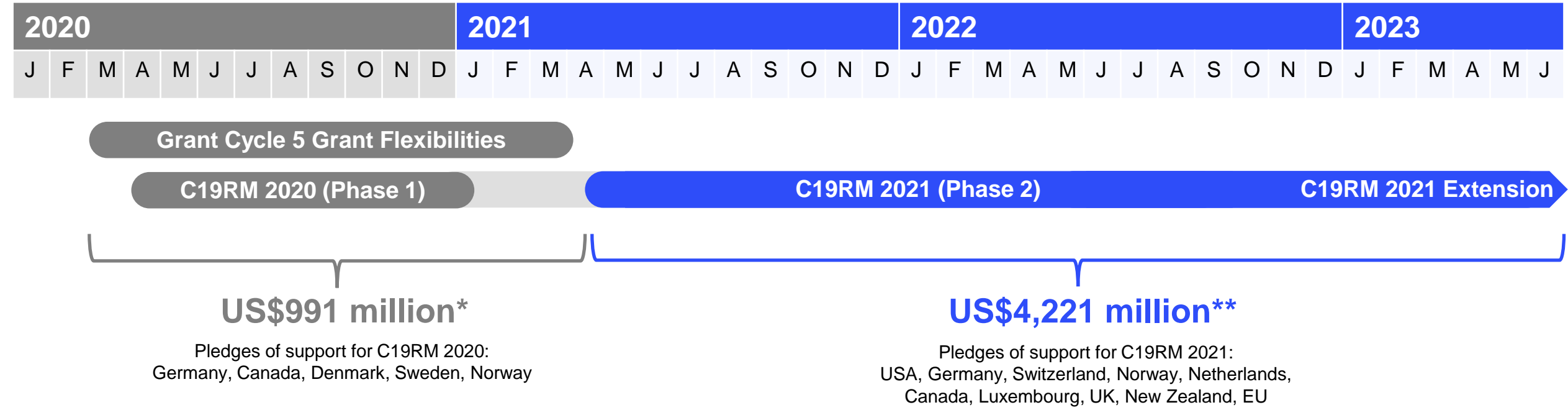
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# Looking Back: COVID-19 Pandemic Response

Results from investments to date



# COVID-19 Response Mechanism: US\$5 billion invested



**Data availability**

- Grant Flexibilities
- C19RM 2020
- C19RM 2021

**Awards per country (grant)**

**Awards per country, board priority area and focused health products (Dx, PPE)**

**Awards per country, board priority area, intervention (strategic priority) and detailed health products**

*\*US\$232 million grant flexibilities & US\$759 million C19RM Funds*

*\*\*A portion of this amount has also been invested in CMLI and OPEX*

# Looking Back: C19RM results

## 1 Emergency Response

In the beginning, **75% of C19RM investments** focused on COVID-19 control and containment. **The Global Fund responded quickly** to procurement needs based on a solid organizational infrastructure, also providing grant flexibilities. HTM mitigation and urgent improvement to systems for health were also prioritized.

March 2020 – March 2022

- Grant Flexibilities
- Acute response
- Fast Track, Full Funding, Additional Funding

C19RM support allowed countries to have timely and secure access to tests, PPE and interventions to mitigate the impact of COVID-19 on programs for HIV, TB and malaria so progress is not derailed.

### Looking back, C19RM has supported:



**Dx:** rapid scale-up of Dx services (PCR and Ag RDT); decentralization of testing; self-testing; 60% of tests were ordered before the largest peaks in the pandemic.



**PPE:** rapid scale-up of essential PPE (masks, gloves,) and key IPC interventions that protect frontline health workers from COVID-19 and other infectious diseases.



**Oxygen:** previously neglected in global health; C19RM boosted medium- and longer-term access and availability of medical O2.



**HTM mitigation:** enabled HTM programs to maintain essential services and keep targets despite COVID-19 disruptions through program adaptations, service integration, decentralization of services from facilities to communities, leaning into health and community systems and removal of COVID-19 related barriers, like incremental PSM costs for life-saving commodities.



**Systems strengthening:** Provided support to support to Ministries of Health and civil society to scale-up health systems responses to the pandemic e.g., development of new policies and guidelines, coordination of national responses.

# C19RM financial performance also reflects the need for transition. Visibility of the re-investment landscape will facilitate the transition & narrow the execution gap.

## Financial Performance - 31 December 2022

	C19RM 2021		
	AU <sup>1</sup>	BU <sup>2</sup>	ICA <sup>3</sup>
Target:	91%	95%	85%
West & Central Africa (WCA)	92%	53%	38%
Rest of Africa (RoA)	91%	74%	45%
Rest of the World (RoW)	94%	69%	41%
<b>Overall Results</b>	<b>94%</b>	<b>66%</b>	<b>42%</b>

1. AU (Allocation utilization) at 31 December 2022

2. BU (Budget utilization) at 31 March 2023

3. ICA (In-country absorption) at 31 December 2022 (compliance rate for GC6 is 82%)

Financial performance improved with ICA of 42% at Dec. 2022 (+14pp vs 30 June 2022) but remains sub-optimal. This reaffirms the need to accelerate reprogramming of available resources to create the shift in investment landscape and allow scale-up of implementation during the extension phase.

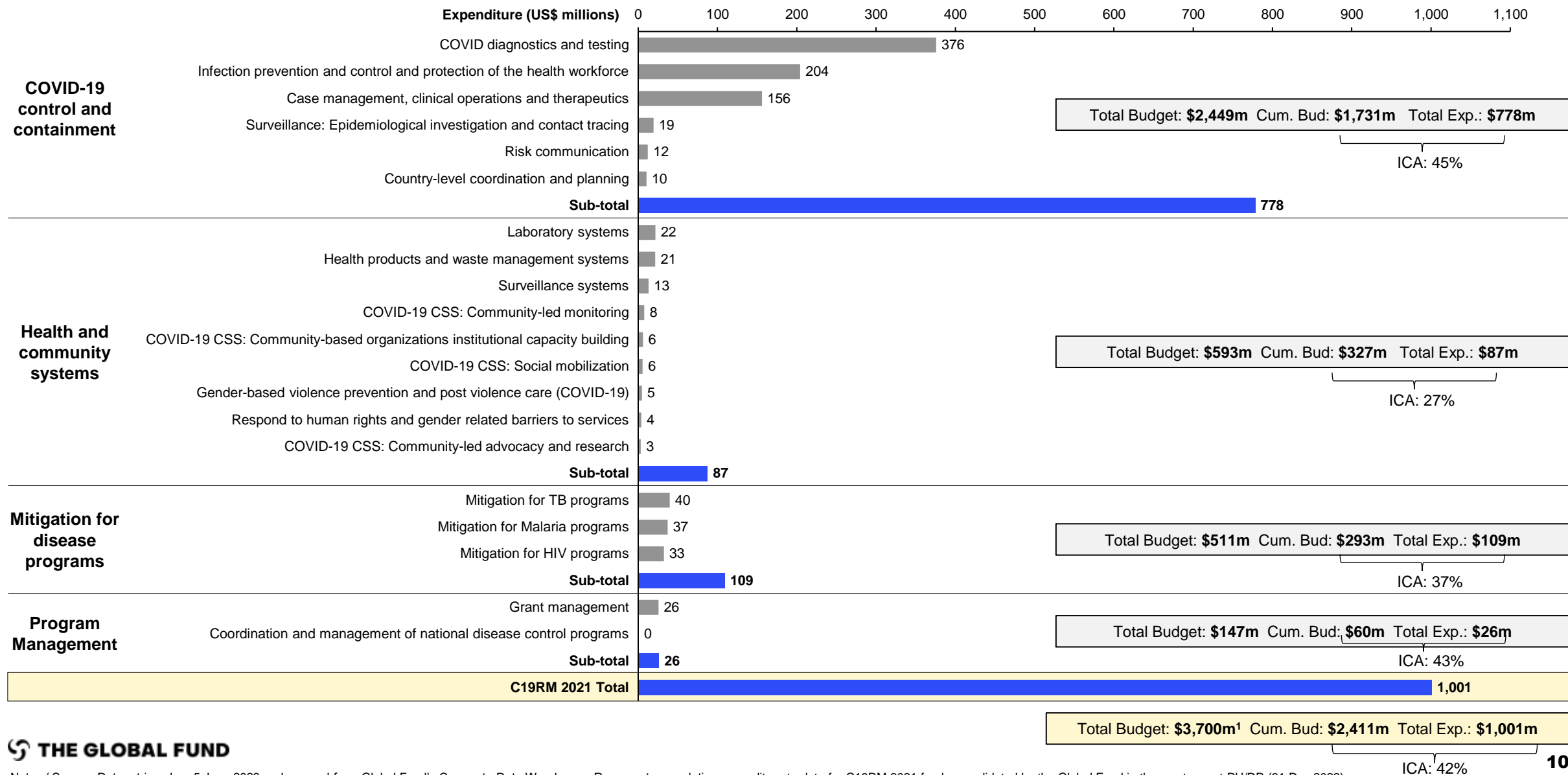
### Actions underway to support acceleration of implementation scale-up during C19RM Extension

- **Operationalized Portfolio Optimization Wave 1.**
- **Country deep dive** to identify implementation bottlenecks & opportunities for tactical shifts in investment that will inform budget revisions in 2023. These country cases will be stress tested against financial modelling to assess scale-up feasibility.
- **Portfolio Optimization Wave 2** underway with IC currently assessing funding requests submitted with potential awards of US\$ 323M.
- **Revised C19RM Guidelines** issued in May 2023 allow countries to submit re-investment plans. This will facilitate re-programming towards longer term needs with impact and absorption potential.
- Quarterly pulse check allows close **monitoring & oversight** of financial absorption and to identify implementation gaps that requires problem solving to course correct execution.



# C19RM 2021: Cumulative expenditure by intervention

Expenditure to date has been largely focused on supporting the COVID-19 response. To reduce the execution gap, it is imperative to reorient available resources towards new strategic priorities and implementation support during the extension.



# Looking back: COVID-19 Dx: Budget conversion (PPM & Non-PPM) & product availability snapshot

	Data source	Cutoff date
Budget	HPMT	24 April
POs	wambo.org	24 April
Deliveries	PSA	24 April
Non-PPM	PPRT*	10 Feb
OSA	Spot Checks	16 Jan

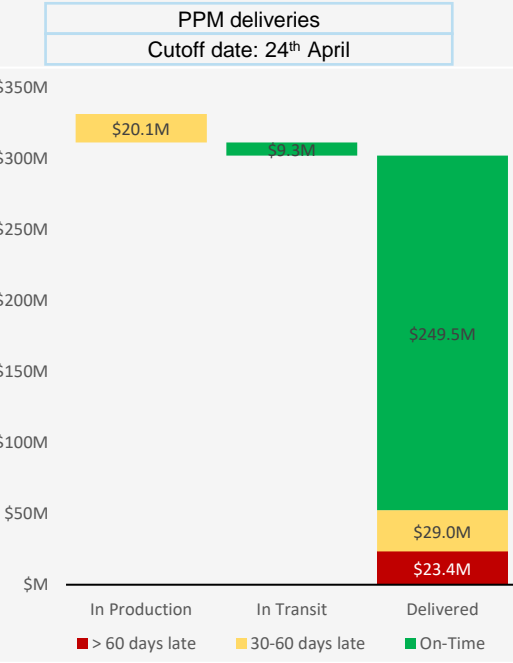
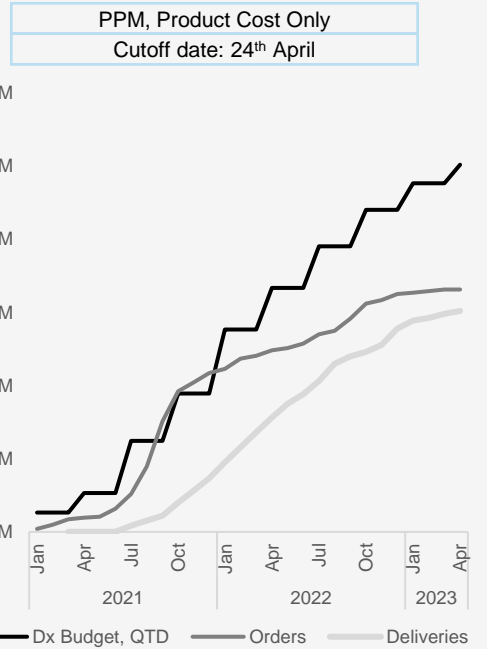
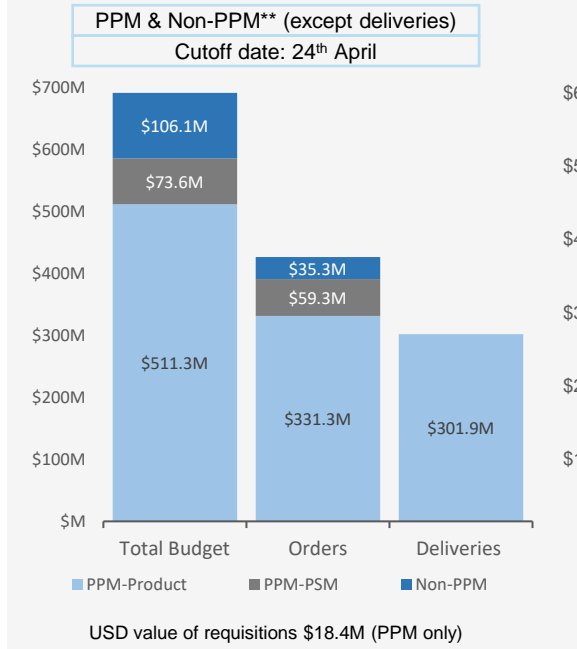
## Budget summary (PPM & Non-PPM)

Total Dx budget (3yr)	\$691M
Dx budget converted	\$426M
Dx budget remaining (3yr)	\$265M

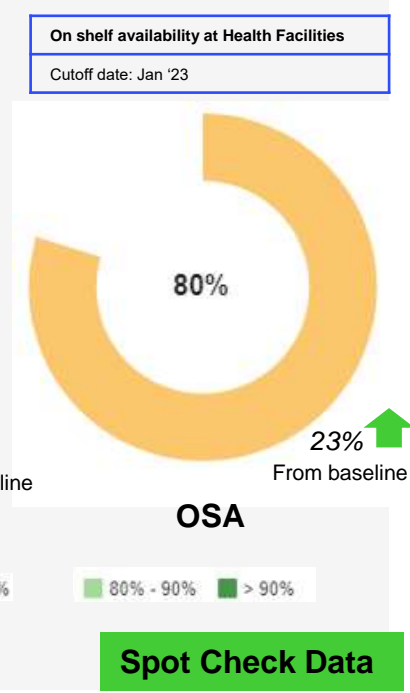
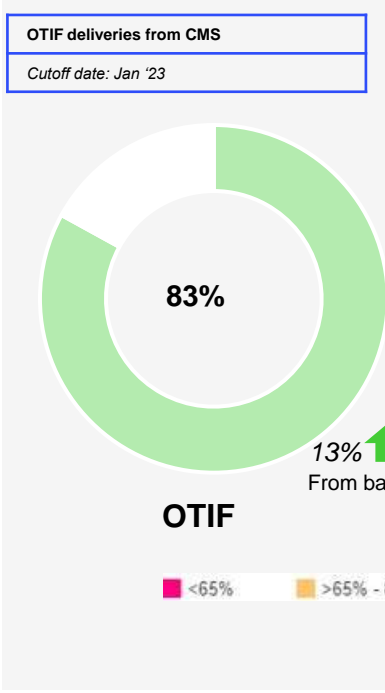
**63%**  
Dx Budget,  
Quarter to Date  
conversion

- Overall budget conversion rate stands at 63%<sup>1</sup>
- A significant portion of PPM orders have been delivered, with most deliveries being on time despite the prevailing global supply chain disruption and impact of covid control measures at origin and/or destination
- High conversion of orders into deliveries and strong in-country delivery performance are drivers for high on shelf availability of tracer products at health facilities
- Overall availability of Dx tracer products has improved over the three rounds of Spot Checks

## Procurement summary



## In-country Supply Chain Metrics<sup>2</sup>



**Spot Check Data**

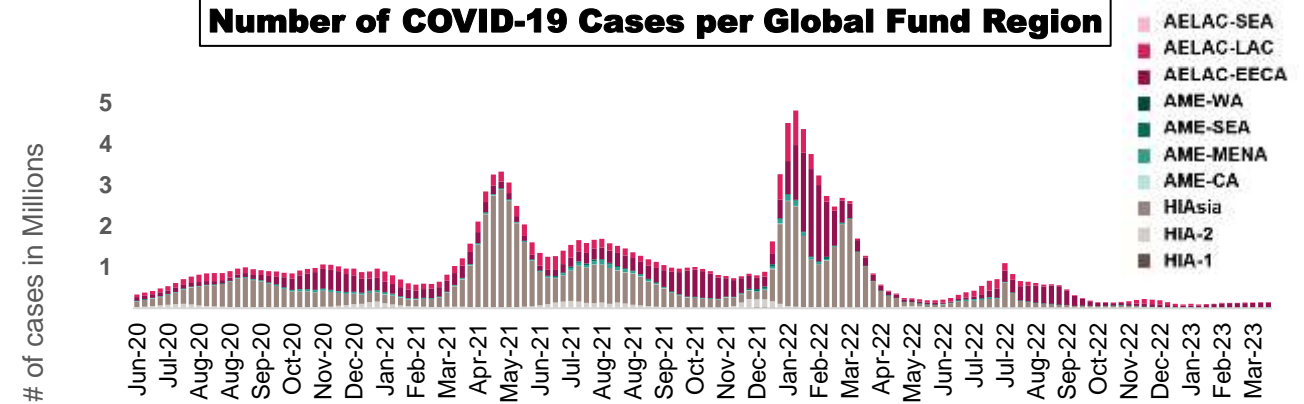
\*PPRT: procurement progress reporting template  
\*\* Non-PPM 'Orders' figures based on top 45 countries only

Notes (1) conversion based on pre-reinvestment / pre-PO budgets; (2) as per data from round 3 of spot-checks (3) # of HF's that routinely stocked C19 Dx products – 1,410 & # of HF's that had C19 Dx products available on day of visit = 1,125

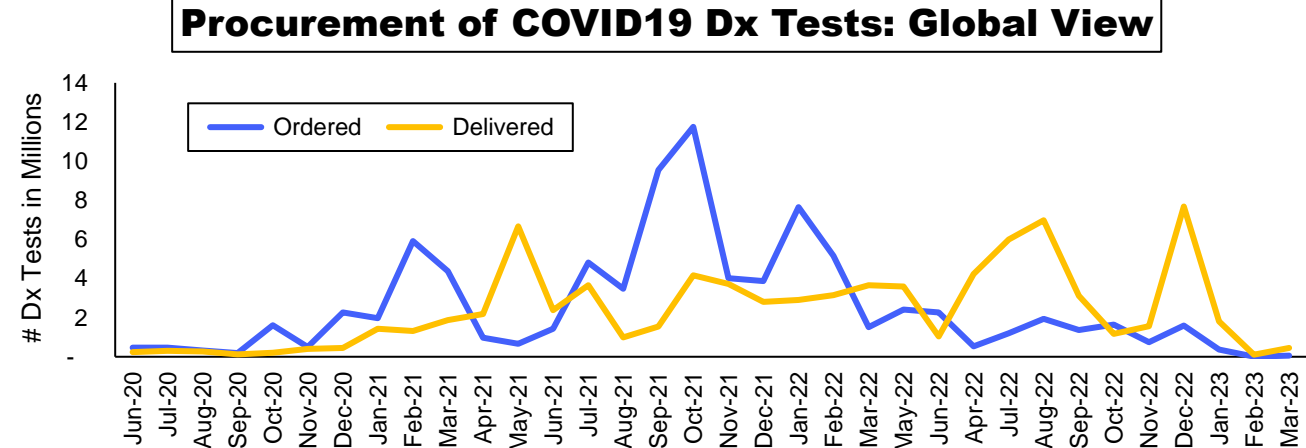
# Tests have been delivered ahead of or alongside with the COVID-19 peaks

- US\$391 million of the diagnostic-related Purchase Orders issued through PPM/wambo.org
- The volume of orders dropped by mid-2022 following the shift in the course of the pandemic.
- 67% of the PPM/wambo.org diagnostic budget (only) converted into Purchase Orders\* (US\$391M/584M; inclusive of all Ag RDT, PCR reagents, and related equipment/consumables)
- Orders peaked before December 2021 wave with a steady delivery of tests during 2022.
- 63% of tests procured were ordered before the December 2021 peak of the pandemic and were sent to manufacturer for production and delivery before December 2021

**Number of COVID-19 Cases per Global Fund Region**



**Procurement of COVID19 Dx Tests: Global View**



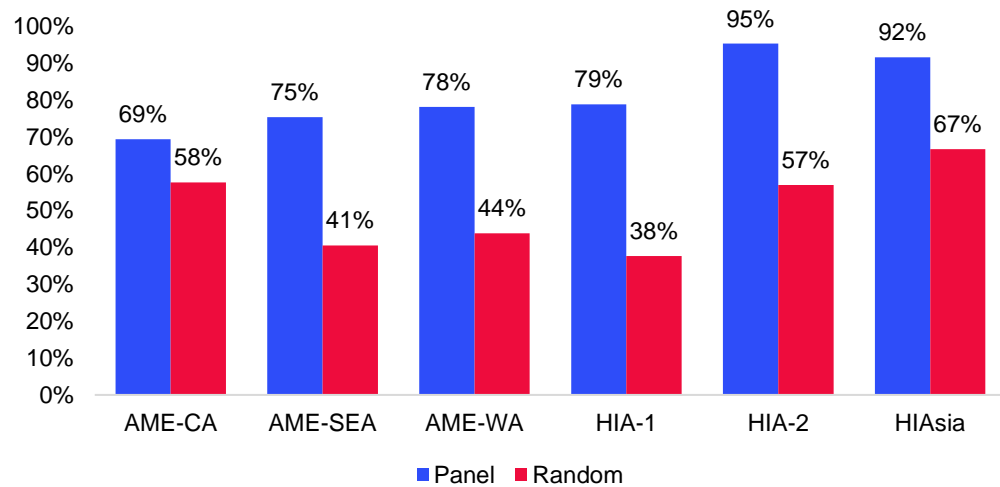
	Oct 21	Jun 22	Oct 22	Spot Check Data
% facilities On-Shelf Availability of C19 Dx =>	57%	78%	80%	

\*conversion based on pre-reinvestment / pre-PO budgets

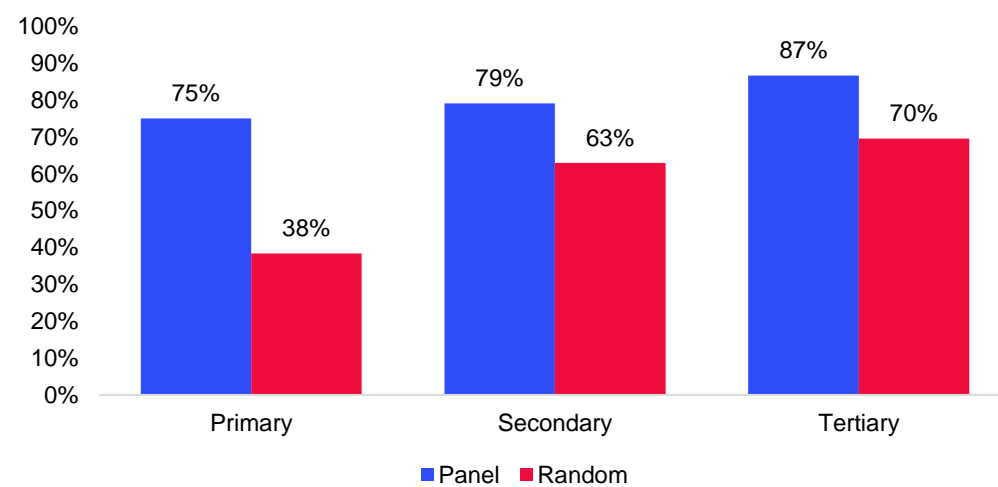
# Facilities with Global Fund support showed higher levels of COVID-19 testing and diagnosis compared to non-supported facilities across all regions and facility types

Comparison of GF supported (Panel) facilities vs. non-GF supported (Random) facilities – Round 3 data\*

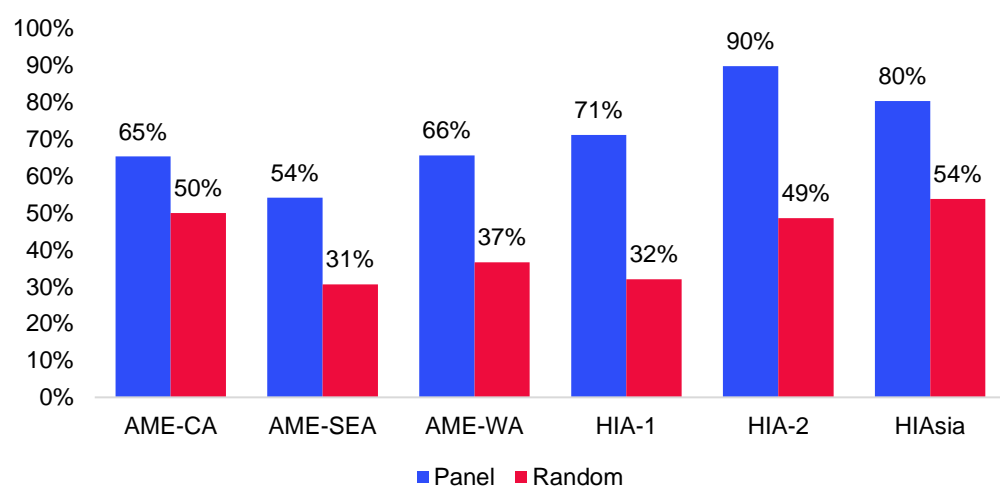
Facilities that provide C19 Testing Services



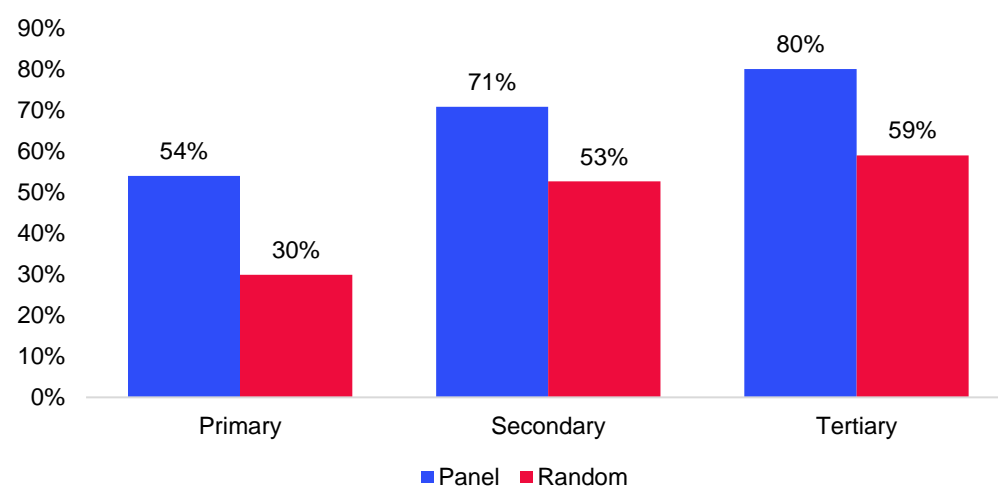
Facilities that provide C19 Testing Services



Facilities that provide Onsite C19 Diagnosis



Facilities that provide Onsite C19 Diagnosis



\* Consistent (similar) results in the Round 2 data

# Project Stellar provided a link between the acute response and laboratory systems strengthening



## Policy and Governance

- Development of National Essential Diagnostic Lists
- Supporting drafting of GC7 RSSH requests



Zambia's GC7 RSSH writing group

- Activate Lab TWGs to improve absorption of GC6 and C19RM lab budgets



## Access to Testing

- Shifted from COVID-19 training to multi-disease diagnostic integration
- Example training modules
  - Quality Management Systems
  - Biosafety & biosecurity
  - Multi-disease algorithms & testing
  - Data management for POC
  - Logistics management
- Shifting COVID-19 focused supervision to Integrated Technical Supportive Supervision



## Data Management

- Assessments for the integration and interoperability of digital health systems
- Integrated various data platforms into a centralized data repository
- Dashboards for centralized data visualization






## Other Lab System Strengthening

- Specimen management and referral networks:
  - training for riders
  - convening stakeholder workshops
  - develop guidelines/ SOPs
- Develop checklist and assessments of selected labs for Antimicrobial Resistance Surveillance

# Project Stellar's support– COVID-19 Self-Testing

Strategies/guidelines development, distribution, linkage to care

	 <b>Ethiopia</b>	 <b>Mali</b>	 <b>Zambia</b>
<b>Governance and Policy</b>	<ul style="list-style-type: none"> <li>Finalized the National Strategy and Guidelines for COVID-19 Self-testing</li> </ul>	<ul style="list-style-type: none"> <li>Finalized the National Strategy for COVID-19 self-testing; validated by the MOH</li> </ul>	<ul style="list-style-type: none"> <li>Finalized the National Strategies and Guidelines for COVID-19, including self-testing as one of the key strategies</li> </ul>
<b>Access to Testing Implementation</b>	<ul style="list-style-type: none"> <li>Trained 17 pharmacies and sites for self-testing distribution, and preparing for next training for the other 23 pharmacies</li> <li>Started pilot in 17 public and private pharmacies through a collaborative effort of EPHI, CHAI, and KNCV</li> </ul>	<ul style="list-style-type: none"> <li>Trained 17 district focal points to facilitate the distribution of kits</li> <li>Oriented 18 pharmacists</li> <li>Drafted distribution plan, and shared with the Directorate of Pharmacy and Medicine for dispatch</li> </ul>	<ul style="list-style-type: none"> <li>Following up with suppliers and local representatives for self-test validation processes</li> <li>Supporting and facilitating the self-test kits donation process</li> <li>Updated COVID-19 training package to include COVID-19 self testing targeting community health workers</li> </ul>

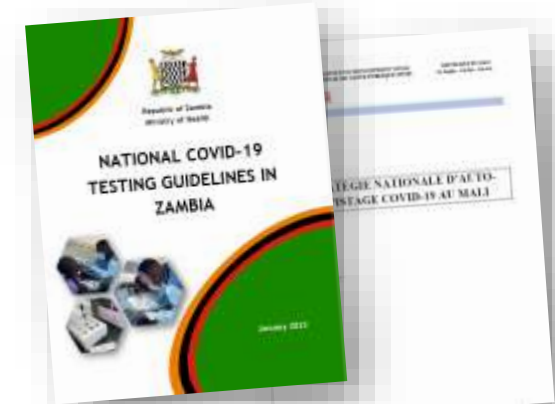
## Other considerations

- IEC/BCC materials developed for education and demand generation
- Strengthen and integrate COVID-19 self-test distribution into the existing stock management
- Individual use data is not feasible to be tracked, but distribution data will be tracked
- Process for linking to genomic sequencing is yet to be established

## Self-testing poster and training from Ethiopia



## COVID-19 and Self-testing guidelines from Zambia and Mali



# COVID-19 PPE: Budget conversion (PPM & Non-PPM) & product availability snapshot

	Data source	Cutoff date
Budget	HPMT	24 April
POs	wambo.org	24 April
Deliveries	PSA	24 April
Non-PPM	PPRT*	10 Feb
OSA	Spot Checks	16 Jan

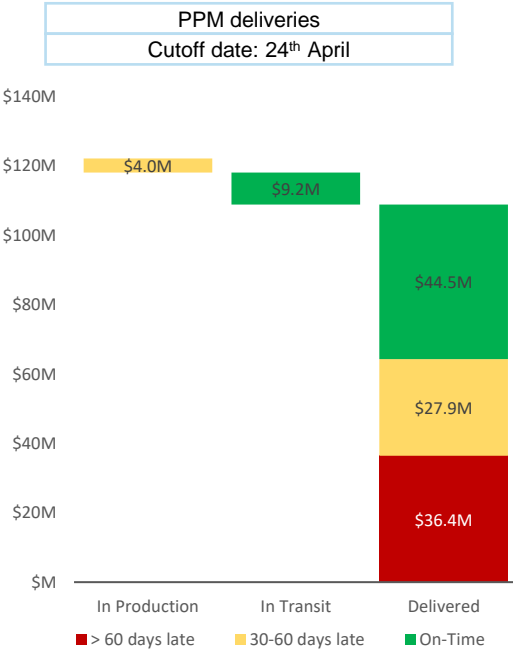
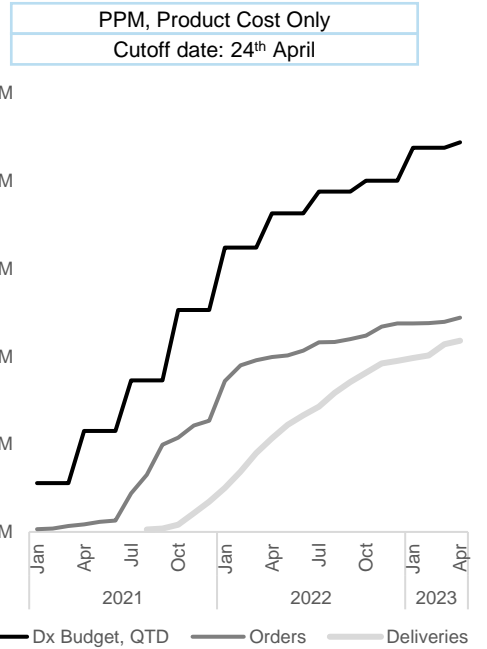
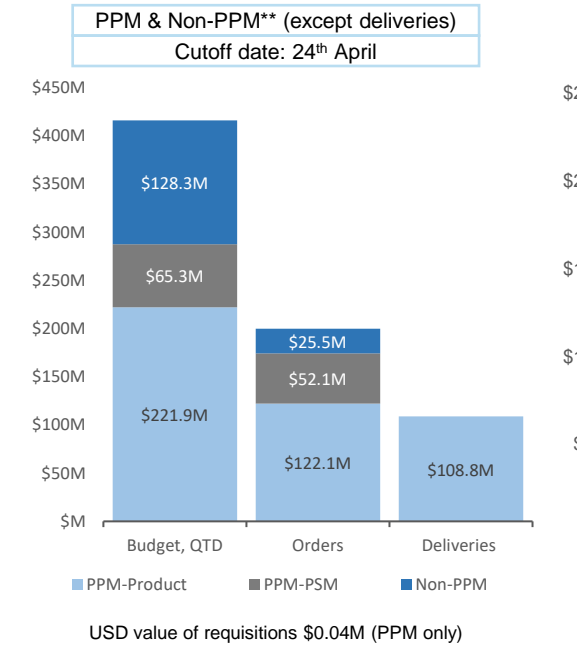
## Budget summary (PPM & Non-PPM)

Total PPE budget (3yr)	\$425.5M
Quarter to date budget	\$415.6M
PPE budget converted	\$199.7M
<b>PPE budget remaining (3yr)</b>	<b>\$225.8M</b>

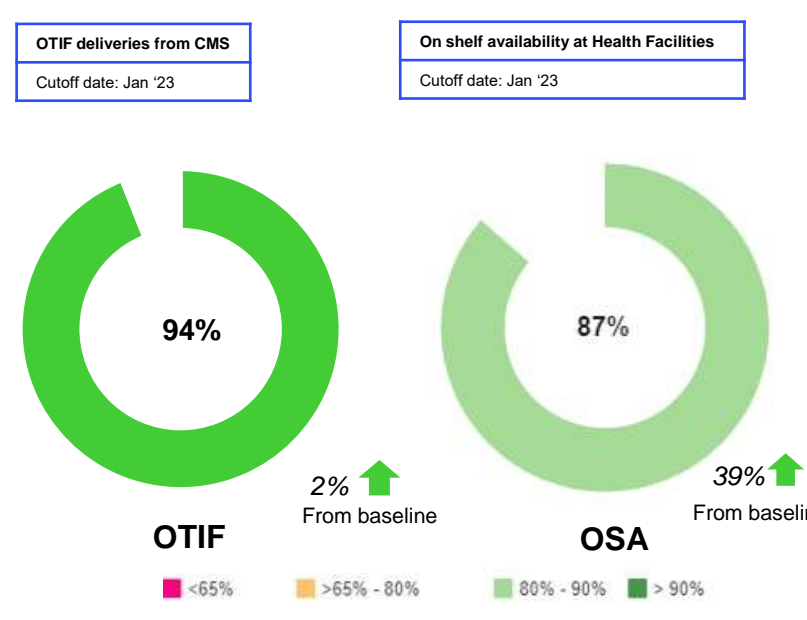
**48%**  
PPE Budget,  
Quarter to Date  
conversion

- Overall budget conversion rate stands at 48%<sup>1</sup> noting that prices dropped by 13% in Q1 2022 alone with prices overall 60% lower in 2022 compared to 2020
- Most PPE orders have been delivered on-time with quite a number of deliveries rescheduled/ staggered to better manage receipt and storage that resulted in later deliveries.
- Most countries have more than adequate quantities of PPE in stock that correlates with the high on-time in-full distribution to health facilities and on shelf availability.
- Overall availability of PPE tracer products has improved over the 3 rounds of Spot Checks

## Procurement summary



## In-country Supply Chain Metrics<sup>2</sup>



## Spot Check Data

\*PPRT: procurement progress reporting template  
\*\*Non-PPM 'Orders' figures based on top 45 countries only

Notes (1) conversion based on pre-reinvestment / pre-PO budgets; (2) Based on data from round 3 of spot-checks (2) # of HFs that routinely stocked C19 PPE products – 1,682 & # of HFs that had C19 PPE products available on day of visit = 1,455

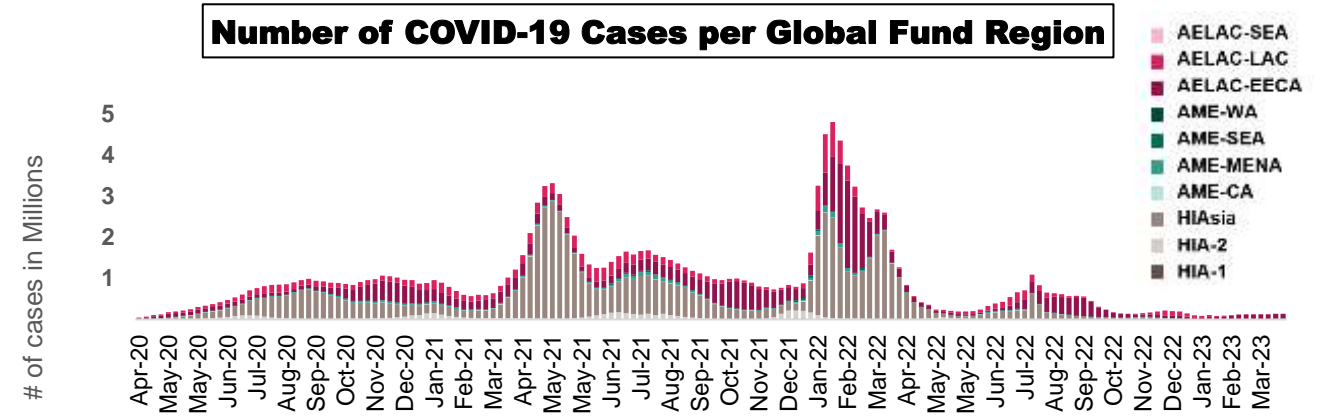
# Countries used C19RM funding to order masks throughout the pandemic



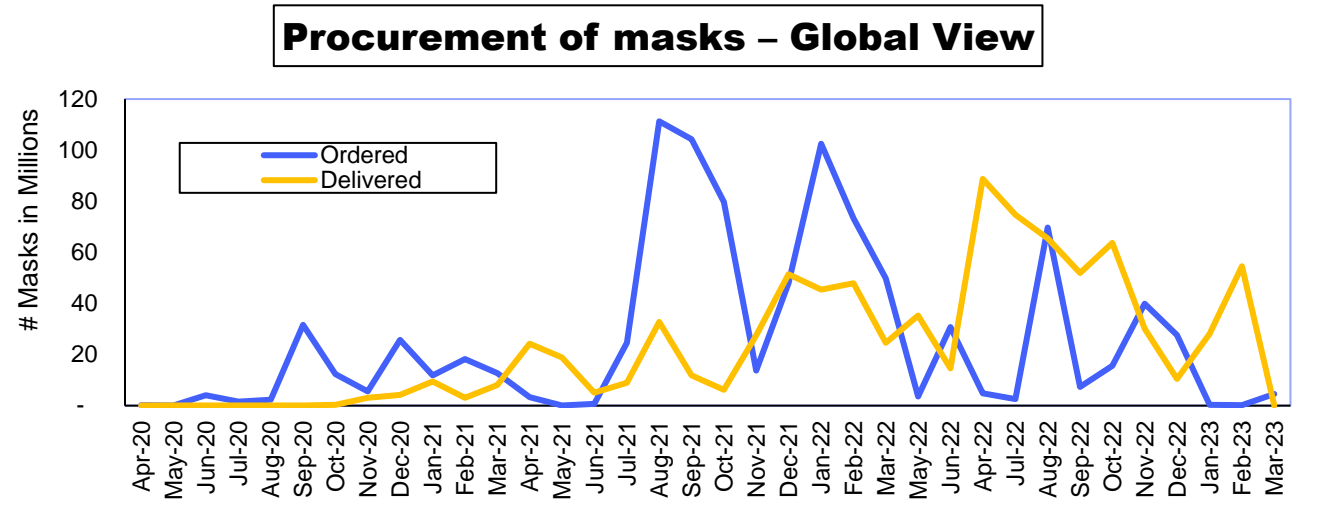
- US\$174 million of PPE-related purchase orders issued through PPM/wambo.org
- The volume of orders has declined following the shift of the pandemic, with the peak of the demand occurring early in 2022.
- Delivery of masks took place during the first COVID-19 peak, and ahead of the second peak.
- 60% of the PPM/wambo.org PPE budget (only) converted into purchase orders\* (US\$174 million/US\$290 million)

\*conversion based on pre-reinvestment / pre-PO budgets

**Number of COVID-19 Cases per Global Fund Region**



**Procurement of masks – Global View**



Oct 21  
48%

Jun 22  
90%

Oct 22  
87%

Spot Check Data

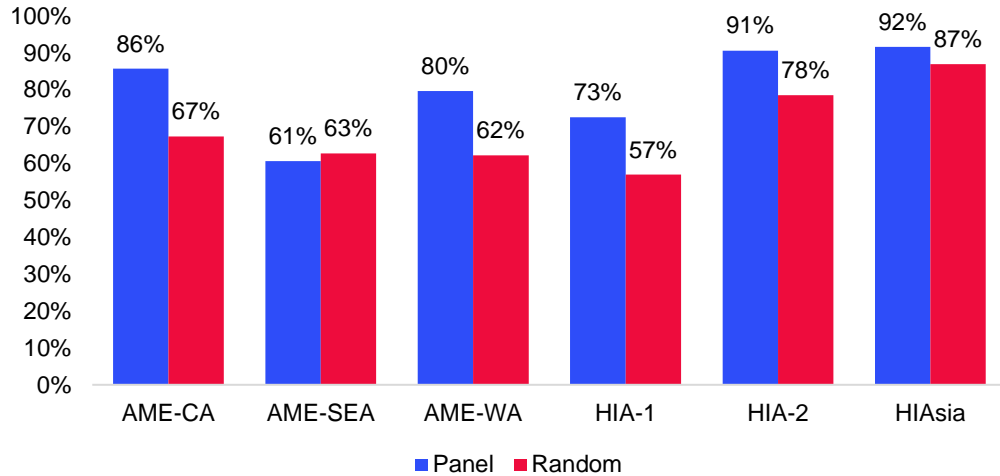
% facilities On-Shelf Availability of C19 PPE =>



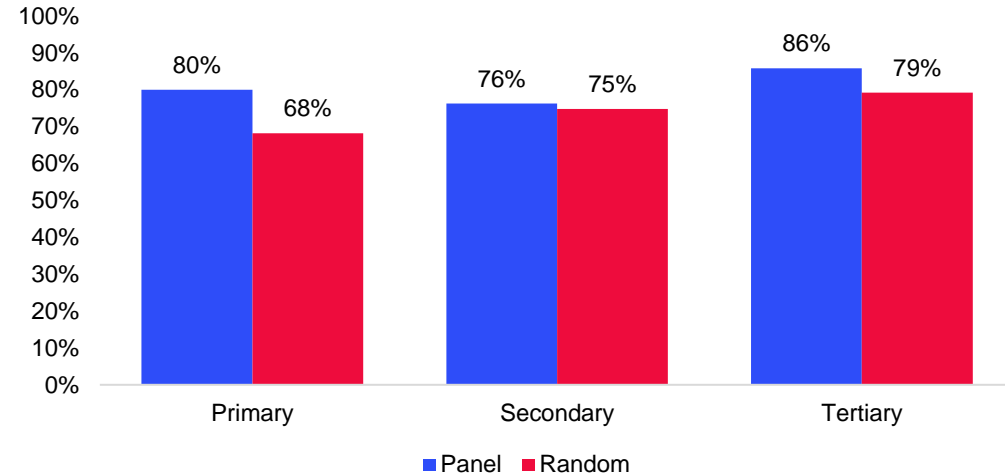
# Facilities with Global Fund funding support showed higher PPE availability and IPC training compared to non-support facilities

Comparison of GF supported (Panel) facilities vs. non-GF supported (Random) facilities – Round 3 data\*

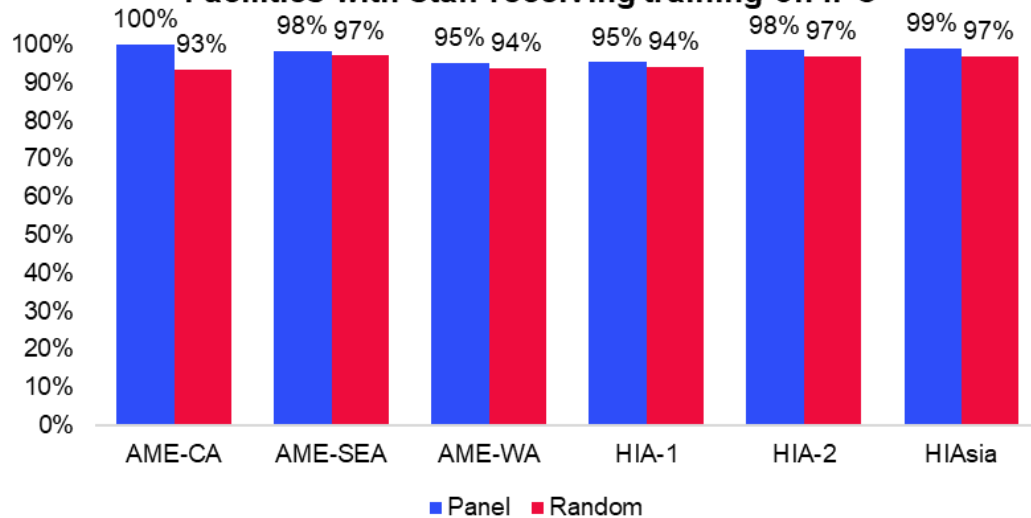
Facilities with staff receiving PPE



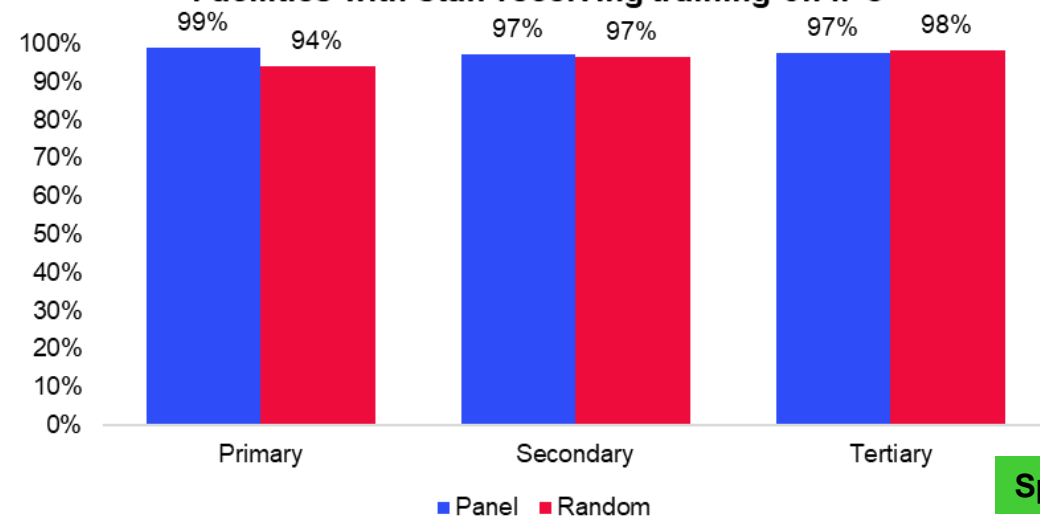
Facilities with staff receiving PPE



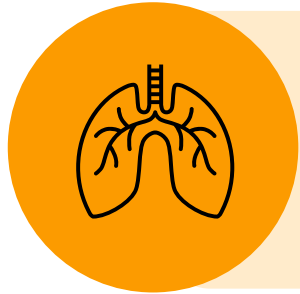
Facilities with staff receiving training on IPC



Facilities with staff receiving training on IPC



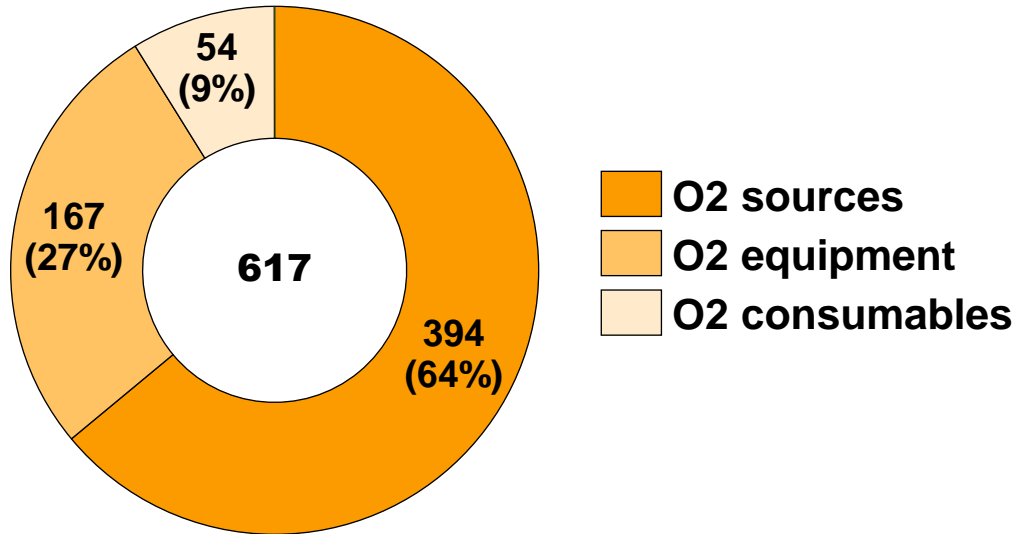
# Oxygen & Respiratory Care awards - overview



A total of **US\$617 million** awarded responding to country demand for immediate support and investing in longer term Oxygen systems infrastructure.

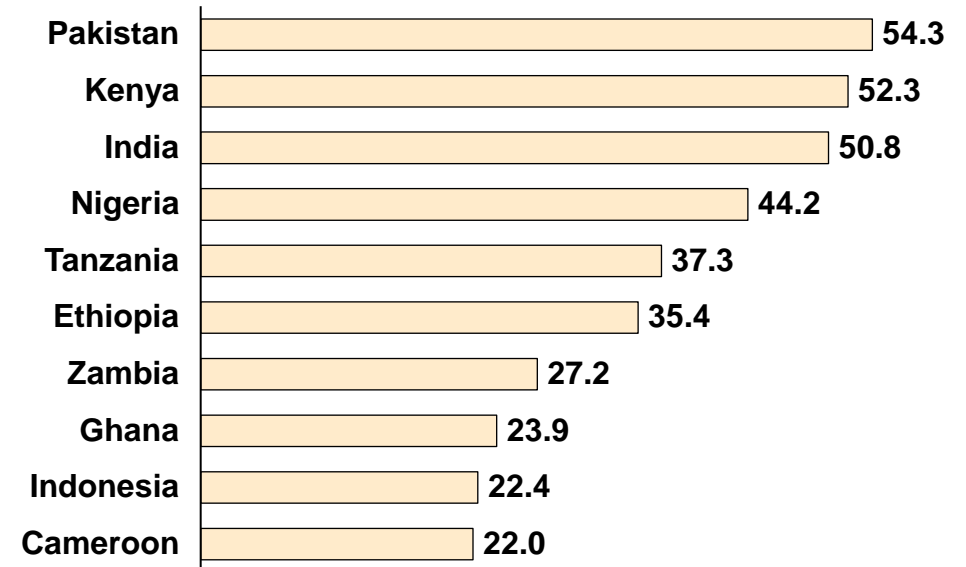
**O2 sources** includes **PSA plants** and cylinders, **O2 equipment** constitutes of all health equipment needed for **Oxygen patient delivery (ventilators, concentrators, oximeters)** and **O2 consumables** include one-time use products needed for Oxygen patient delivery, often procured together with equipment.

**C19RM 2021 Awards in Oxygen & Respiratory care (US\$ million)**



\*Data from C19RM Detailed Budget Data as of 20<sup>th</sup> June 2023, includes all PO Wave 1 Awards.

**C19RM 2021 Top ten countries in Oxygen & Respiratory care (US\$ million)**

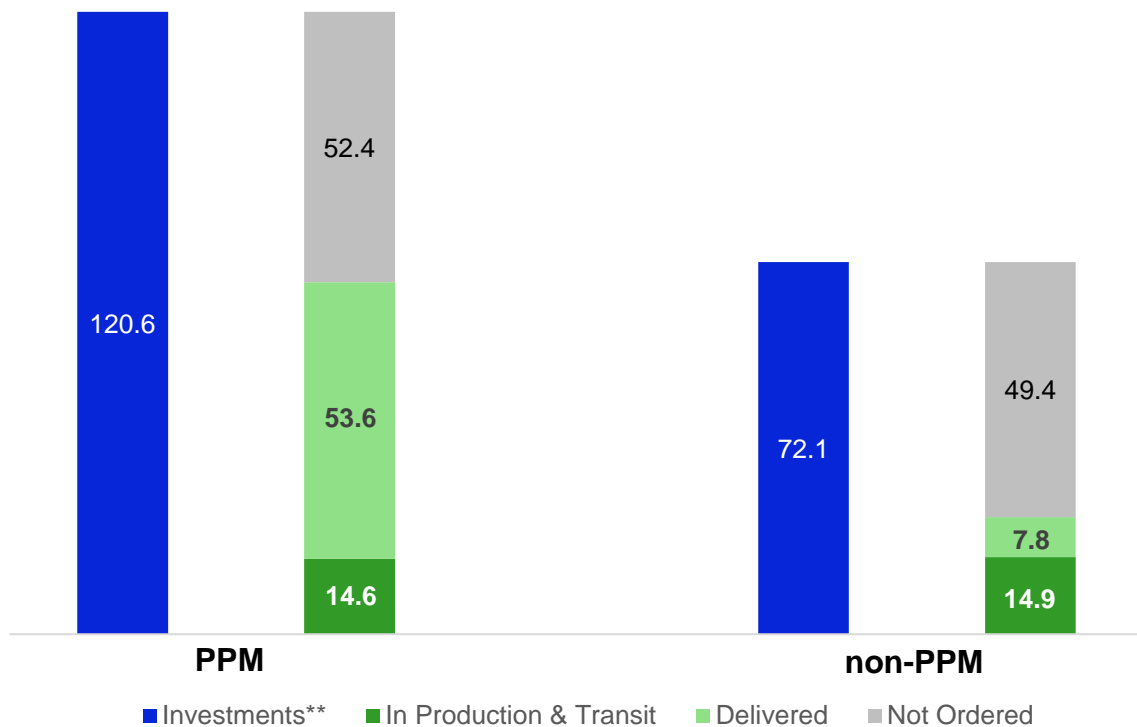


# Pipeline for Oxygen Equipment & Consumables

C19RM investments supported procurement Oxygen health products to increase country capacity during the response.

O2 E&C budget US\$192.1M\*; US\$90.9M\*\* ordered (PPM & Non-PPM)

O2 E&C Investments vs Order Delivery Progress  
US\$ million



- **47% of overall O2 E&C investments ordered**

- PPM: US\$68.2m (56.8% utilization)
- non-PPM: US\$22.7m (31.3% utilization)

- **32% of overall O2 E&C investments delivered**

- PPM: 44.7%
- non-PPM: 10.9%

- **Three strategic items account for 84.1% of total order value (US\$ ePO value, PPM & non-PPM)**

- Ventilators (incl. consumables) US\$37.9m
- Oxygen concentrator (incl. consumables) US\$25.2m
- Pulse Oximeter US\$13.4m

- **Key countries by O2 E&C investments**

- Ethiopia
- Nigeria
- Indonesia
- Ghana

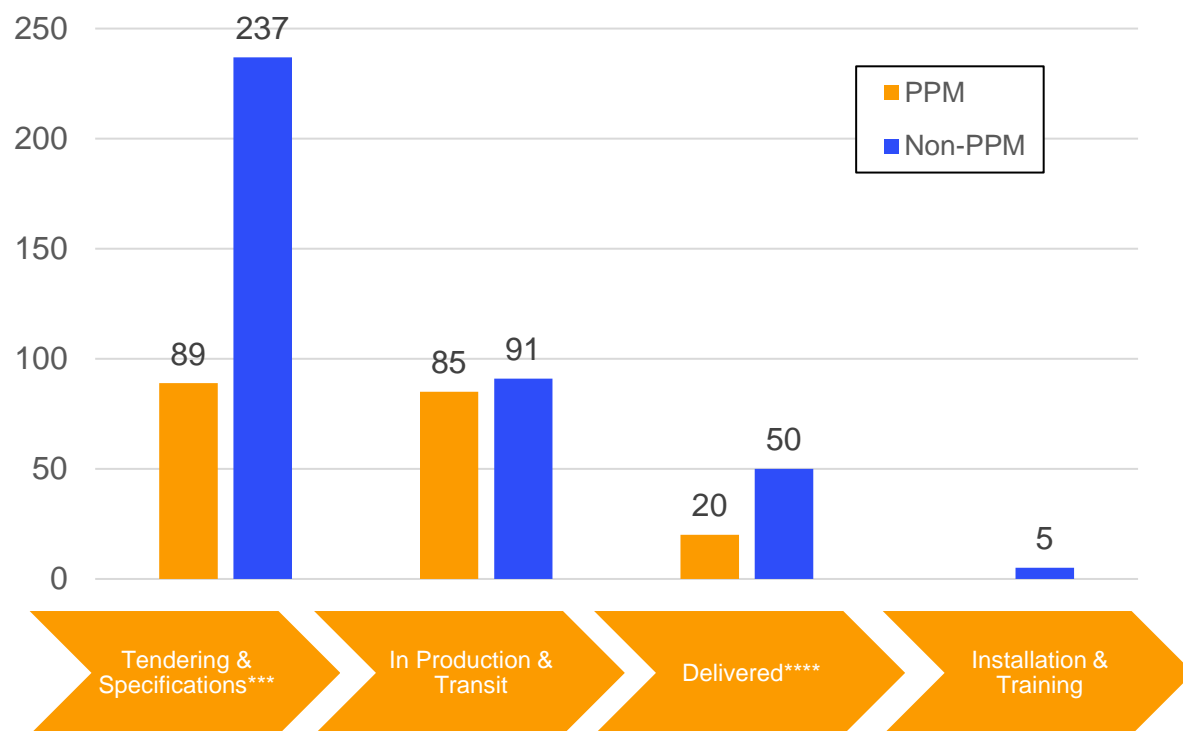
\*22 May HPMT data extract; may not include all PO wave 1 awards

\*\*ePO Value only; excl. open requisitions

# Investments in Oxygen reflect country demand expressed during the emergency response; supporting implementation drives the shift to further strengthening health systems and pandemic preparedness.

Pipeline of PSA plants is progressing with close monitoring and intensive technical support from Project BOXER and partners. Partner coordination and strengthening capacity at country level required.

PSA Plants Investments vs Order Delivery Progress (# plants)



**Total Oxygen & Respiratory care investments:** US\$499.1m\*\*; out of which PSA plant budget US\$308.5m\*\* (577 plants) across 75 countries; US\$153.9m\*\* (291 plants) ordered (PPM & Non-PPM)

**Lessons learned:** while not completed, we have learned a lot from execution of Oxygen investments. M&O approach and lessons will be used to strengthen work in other strategic priority areas.

### Progress to date

- 49.2% PSA plant budget investments ordered: PPM (105 plants, US\$45.0m) and non-PPM (146, US\$109.0m)
- Increasing deliveries while site readiness preparation activities scale-up. The first PSA plants have completed installation and commissioning.
- 44.5% (US\$139.2m) of PSA plant investments in PSA plants being installed by YE2023\*\*

\* 5 June HPMT data only; may not include all PO wave 1 awards

\*\*\* Includes countries that have planned investments

\*\* ePO Value only; excl. open requisitions

\*\*\*\* Syria and PNG PSA plants are finishing delivery to installation

# Project Boxer: TA provided to 51 countries planning to invest US\$ 189 million to procure 357 PSA plants

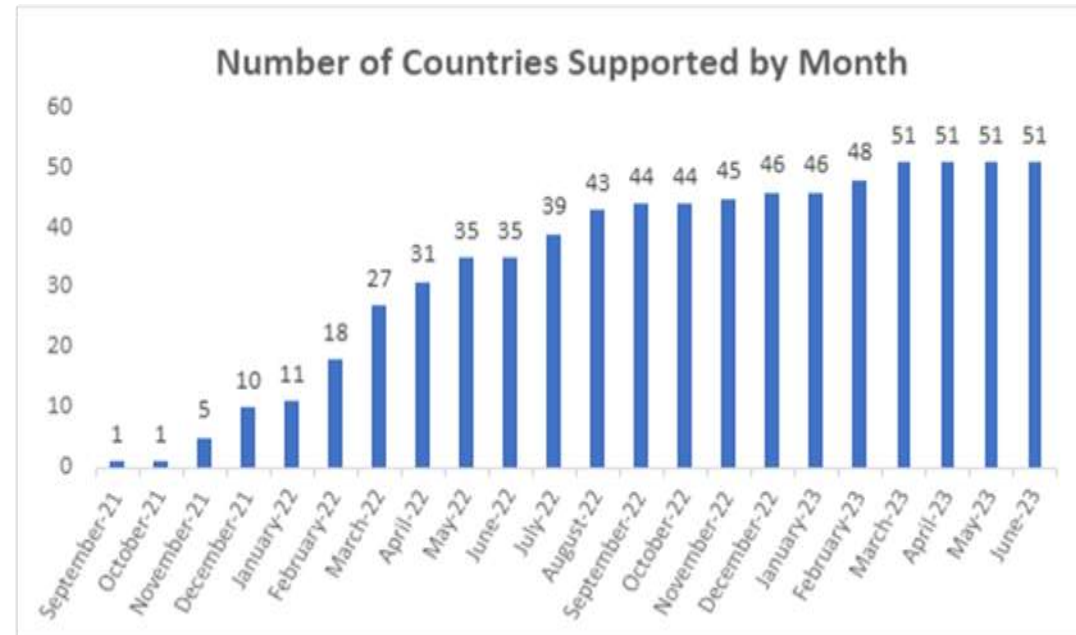
(as of June 2023, 163 PPM, 194 non-PPM)

This represents 85% (50\* out of 59) of countries with planned C19RM PSA investments, 60% of investments and 62% of plants. Of Project BOXER BHI-supported countries, 31 (62%) of the 50\* use central procurement channel (PPM) for PSA plants.

BOXER Support	# Countries	Budget	% of total	# Plants	% of total
Yes	51*	\$189m	60%	357	62%
No	9	\$124m	40%	220	38%
<b>Total</b>	<b>60*</b>	<b>\$313m</b>		<b>577</b>	

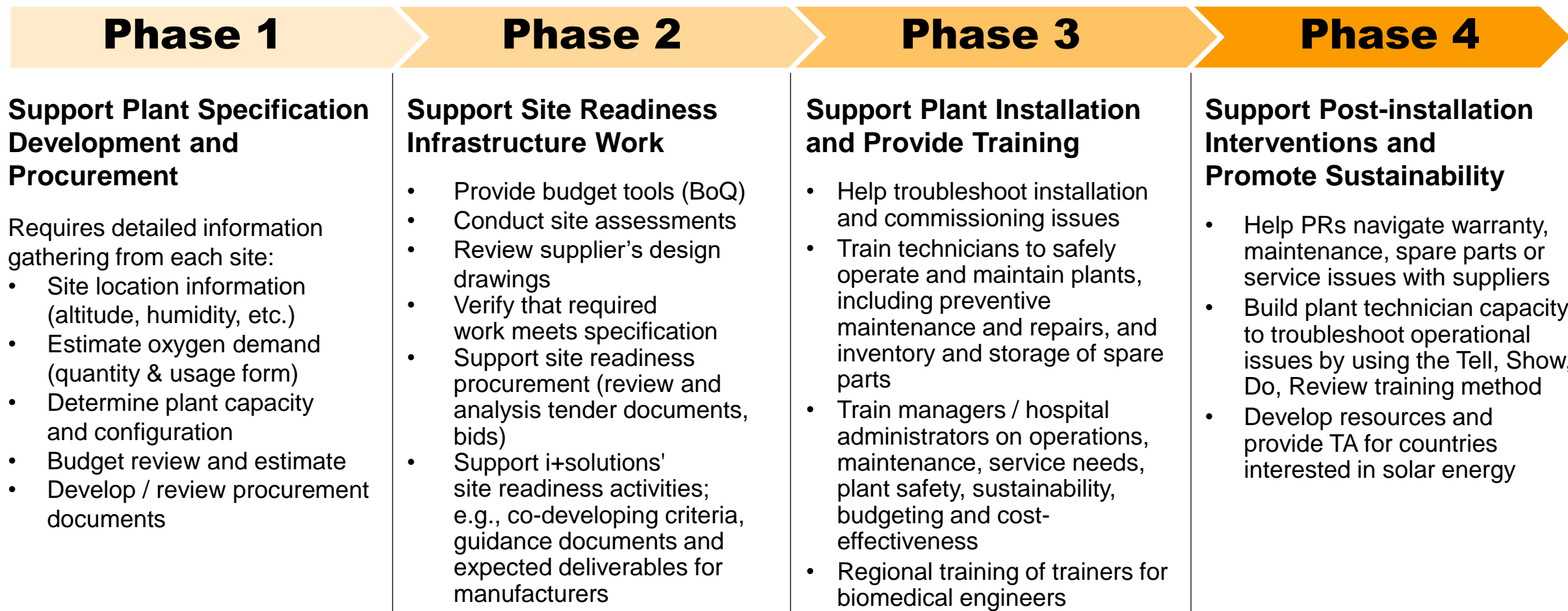


Countries receiving BHI TA



\* Guinea-Bissau is accessing BHI TA to support 2 non-C19RM-funded PSA plants

# Project BOXER: overview of M&O milestones, end to end implementation support and promoting sustainability

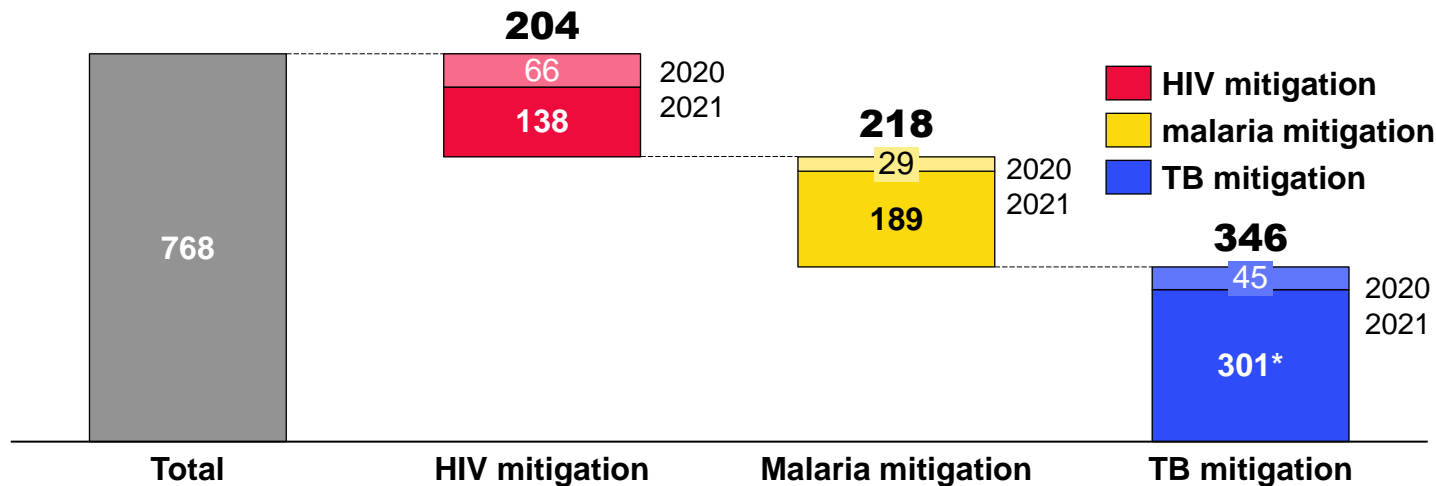


# C19RM investments in HTM mitigation - Overview



- A total of **US\$768 million** cumulative C19RM 2020 and 2021 awards to HIV, TB and malaria mitigation. This is in addition to cross-cutting investments in COVID-19 control and containment, including PPE and multi-disease testing platforms.
- The Global Fund supported the scale up of service delivery adaptations to minimize risk to COVID-19 exposure for people living with HIV, while ensuring access to essential HIV services.
- C19RM support intensified TB case notification efforts, strengthening the TB program resilience to rapidly counteract the impact of the COVID-19 pandemic on the coverage of TB services.
- Investments in malaria mitigation focused on campaign adaptations, increased operational costs due to COVID-19, as well as covering increases in international freight costs (especially for malaria health product procurement).

## C19RM 2020\*\* & 2021 Awards in Mitigation (US\$ million)



## Additional Investments

- **C19RM 2020: US\$103 million** was awarded for PPE procurement to support programmatic adaptations, including mass campaigns.
- **C19RM 2021: additional US\$115 million** was awarded for multi-disease testing platforms under COVID-19 control and containment.

\*Includes **US\$103 million** awarded for **multi-disease testing platforms**. Going forward, all investments in multi-disease testing platforms under **Health & Community Systems**, in line with the strategic shift.

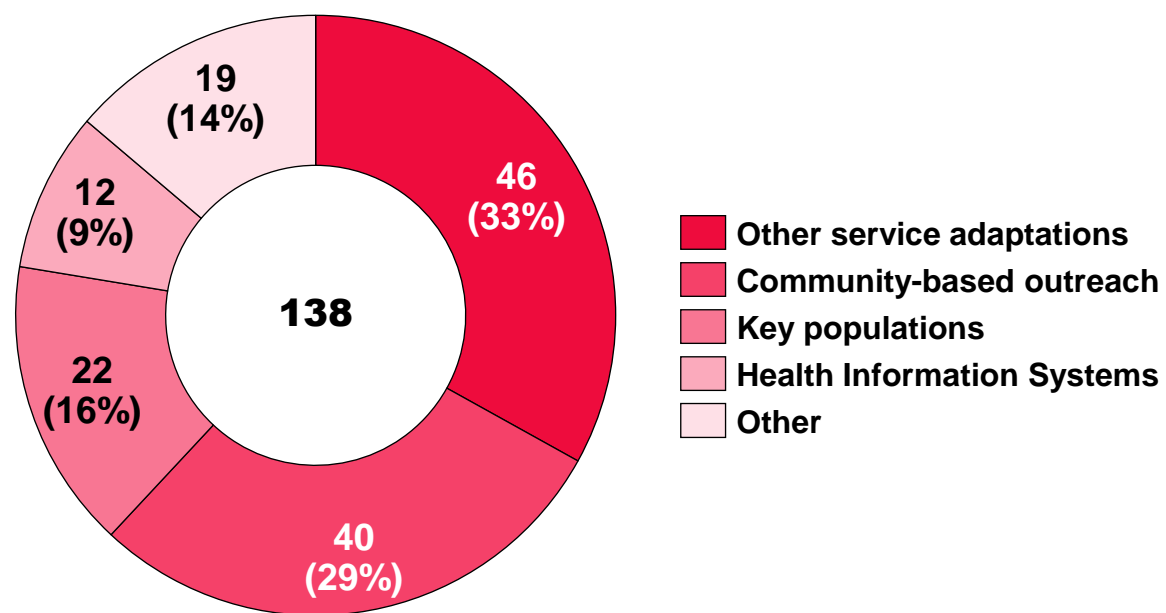
\*\*Disease mitigation categorization based on grant disease component.

# Highest priority was to ensure continuity of treatment

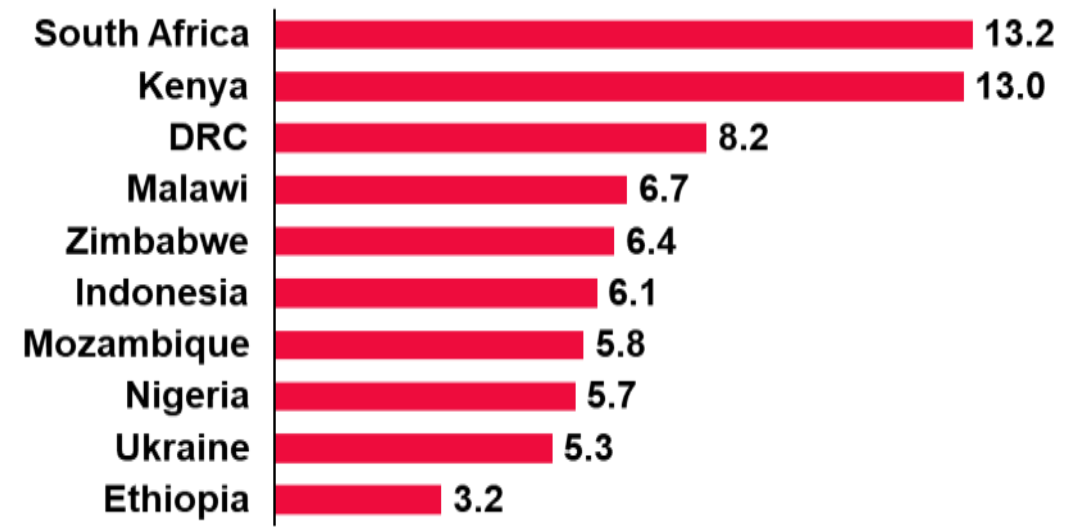


- A total of **US\$138 million** has been awarded to HIV mitigation. Together with HIV technical partners, the Global Fund prioritized program adaptations, innovations in service delivery models and scale-up to maintain critical prevention and treatment programs.
- The urgent need for adapted services in 2019 accelerated the adoption and implementation of differentiated models.
- **Investments in HIV mitigation of US\$138 million composed of: US\$108 million (78%) for service adaptations including US\$40 million (29%) for community-based services and US\$22 million (16%) for targeted services for key populations. US\$12 million (9%) was invested in strengthening of health information systems and US\$19 million (14%) for other activities.**

**C19RM 2021 Awards in HIV Mitigation (US\$ million)**



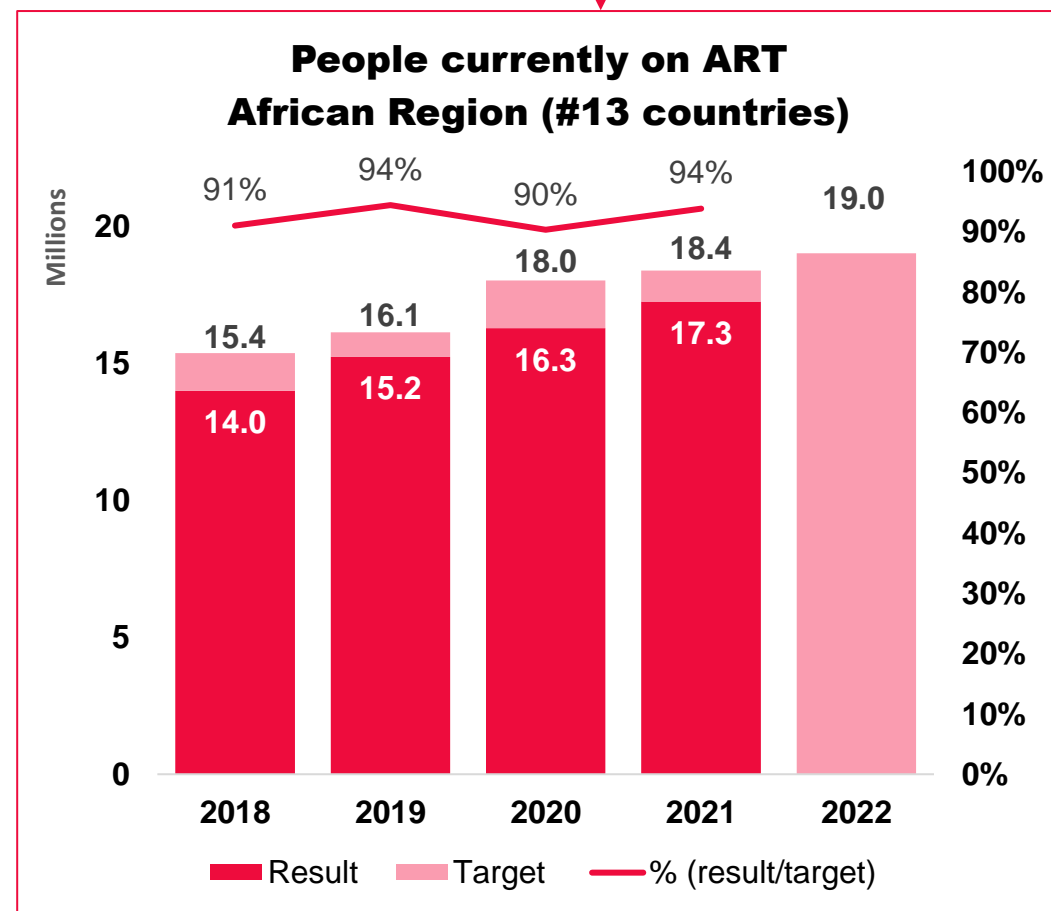
**C19RM 2021 Top 10 in HIV Mitigation (US\$ million)**





# C19RM supported program initiation, scale-up, and intensification during the COVID-19 pandemic to ensure continuity of life-saving treatment

Partnership	Technical focus	HIV Treatment
<p><b>Shared priorities</b></p>	<p><b>5 interventions</b></p>	<p><b>No net loss</b></p>
<ul style="list-style-type: none"> <li>• <b>Together with HIV technical partners</b>, Global Fund prioritized program adaptations, innovation in service delivery models and scale-up to maintain critical prevention and treatment programs.</li> <li>• <b>C19RM resources effectively leveraged and complemented grants and investments of governments and partners</b> (e.g., PEPFAR) to expand key mitigation activities <b>supporting continuity of HIV services</b>.</li> </ul>	<ul style="list-style-type: none"> <li>• The global partnership articulated five priority interventions to <b>focus attention and resources</b> crucial to maintain service continuity</li> <ol style="list-style-type: none"> <li>1. Multi-month dispensing (MMD)</li> <li>2. Out-of-facility dispensing</li> <li>3. Virtual service delivery</li> <li>4. Differentiated HIV testing (incl. self-testing)</li> <li>5. Service delivery adaptation to minimize spread of COVID</li> </ol> </ul>	<ul style="list-style-type: none"> <li>• <b>Resilient HIV treatment during the pandemic:</b> global <b>increase</b> in the number of <b>people on ART:</b> from 2019 (25.4 million) to 2020 (27.8 million) with 28.2 million as of 30 June 2021 (UNAIDS reports).</li> </ul>



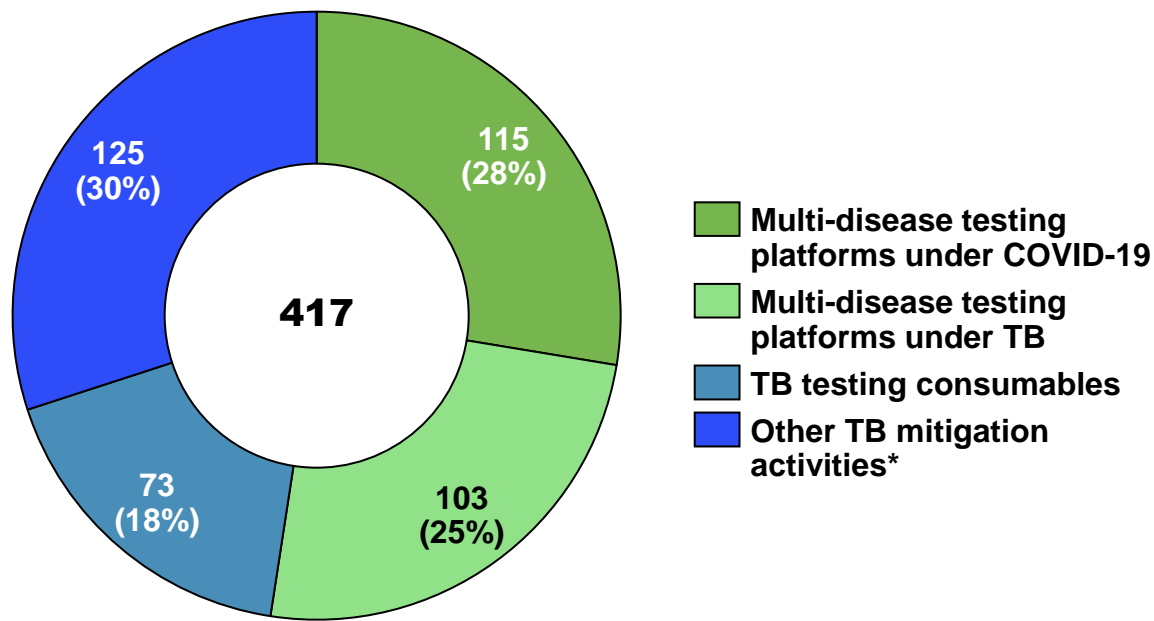
Sourced from Performance Framework data gathered from HIV grants in the following countries: Cameroon, Côte d'Ivoire, Ethiopia, Ghana, Kenya, Mozambique, Malawi, Nigeria, Tanzania, Uganda, South Africa, Zambia and Zimbabwe.

# C19RM was critical for TB recovery



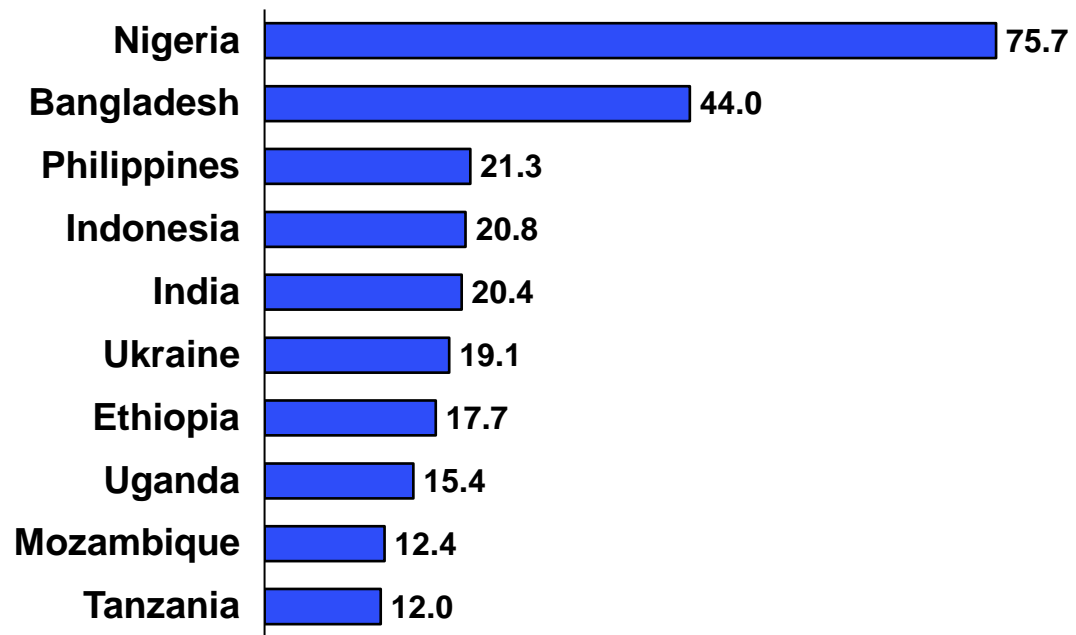
- **US\$301 million** has been awarded under **TB Mitigation** and **US\$115 million** under **COVID-19 control and containment** for a **total of US\$417 million**. Requests for **integrated screening and testing** are both submitted and awarded under the TB mitigation, as well as COVID-19 control and containment interventions, while contributing to strengthening **multi-disease lab systems and diagnostics networks**. **Not including US\$45 million of C19RM 2020 awards**.
- **Total US\$417 million composed of: US\$115 million (28%)** for multi-disease testing platforms awarded under COVID-19, **US\$103 million (25%)** for multi-disease awarded under TB, **US\$73 million (18%)** is targeted to **TB testing consumables** (bi-directional screening in 2021-2022) and **US\$125 million (30%)** of other interventions, **specified below\***.

**C19RM 2021 Awards in TB Mitigation (US\$ million)**



\*Other TB mitigation activities include **Mobile Testing Vans**, additional operational & campaign costs, community health workers (outreach).

**C19RM 2021 Top 10 in TB Mitigation\*\* (US\$ million)**



\*\*Including all multi-disease testing platforms.

# Update on TB Mitigation – Key Results

## Evolving Response

- Ensuring that **TB resources and facilities** are **maintained** and **access to TB/DR-TB services** are **improved**, including through implementation of active case finding.
- **Procurement** of additional **screening/diagnostic tests**.
- Risk communication.
- Community and private sector engagement.

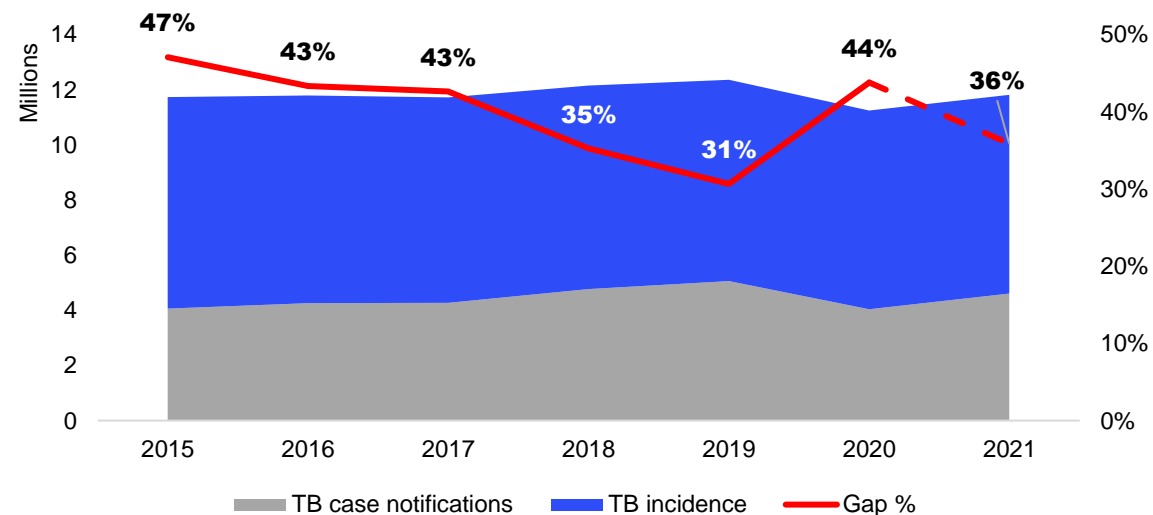
## TB Programs Adaptation

- Countries encouraged to maintain the targets set in their National Strategic Plans and grants and **strive to achieve higher to make up for the loss**.
- Supporting countries to **adapt** their reprogramming and implement **people-centered approaches** for diagnosis and treatment and **Improving surveillance**.
- These efforts contributed to a **quick recovery on case notification** in some countries.

## Optimizing Screening and Testing

- **Procurement of digital X-rays and molecular diagnostic platforms** that support both the COVID-19 and TB responses, strengthen the health system and contribute to pandemic preparedness.

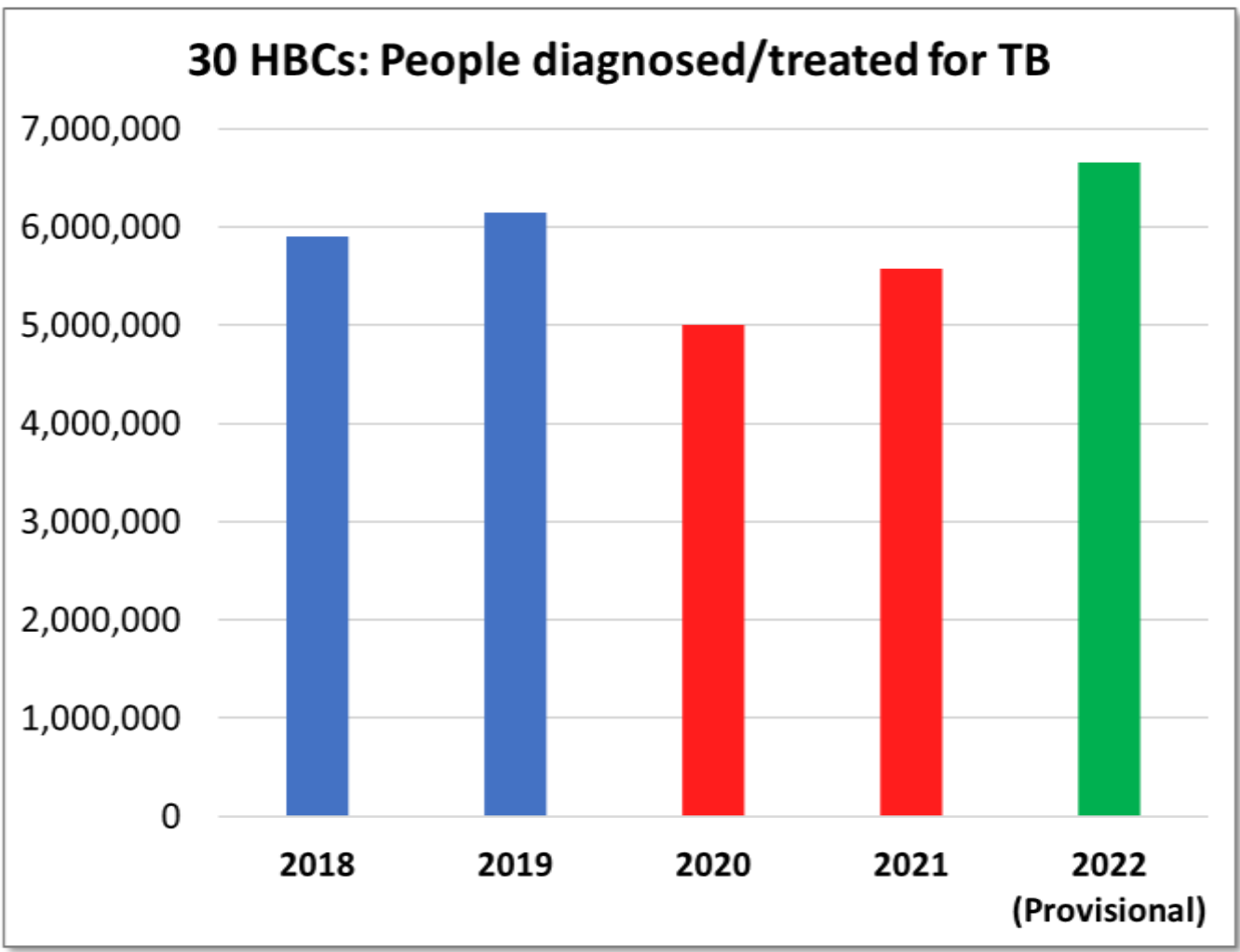
**TB Notification Gap across 19 TB Focus Countries\***



**Even 2020 saw a dramatic drop in TB testing and treatment, C19RM mitigation measures have proved vital in reversing that trend in 2021 and 2022.**

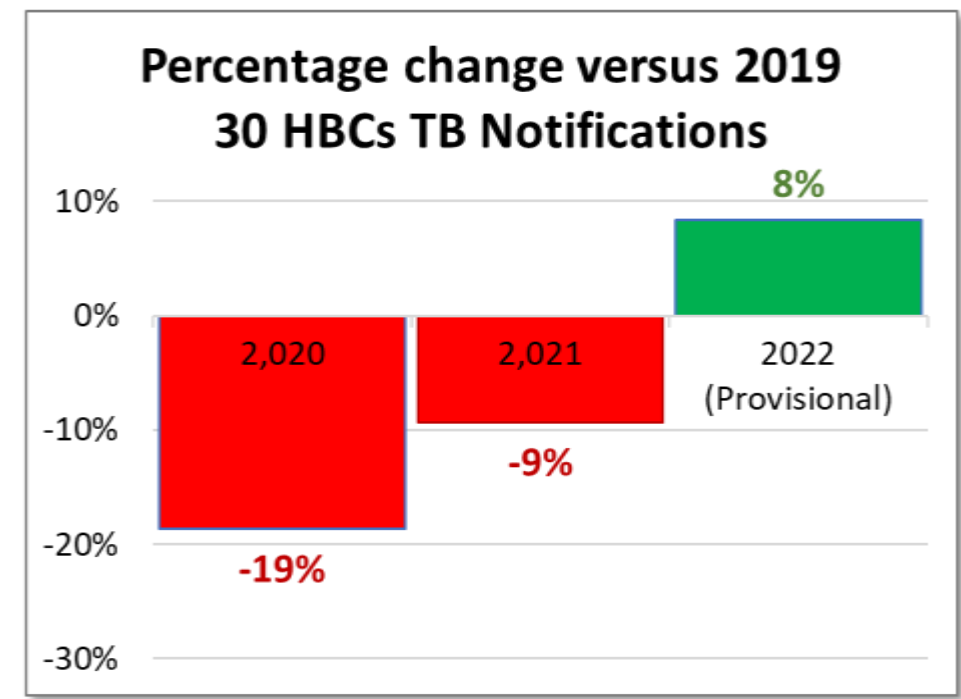
# TB recovery exceeded pre-COVID-19 progress

- 2022 was the highest levels of TB diagnosis & treatment compared to previous years
- Recovery from COVID-19 impact – 30 High Burden Countries (HBCs)



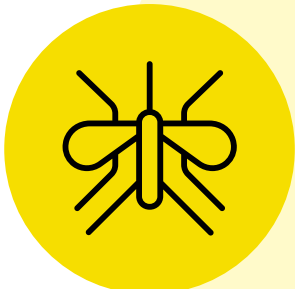
## Recovery to more than pre-COVID-19 levels

2022 TB notification > 2019



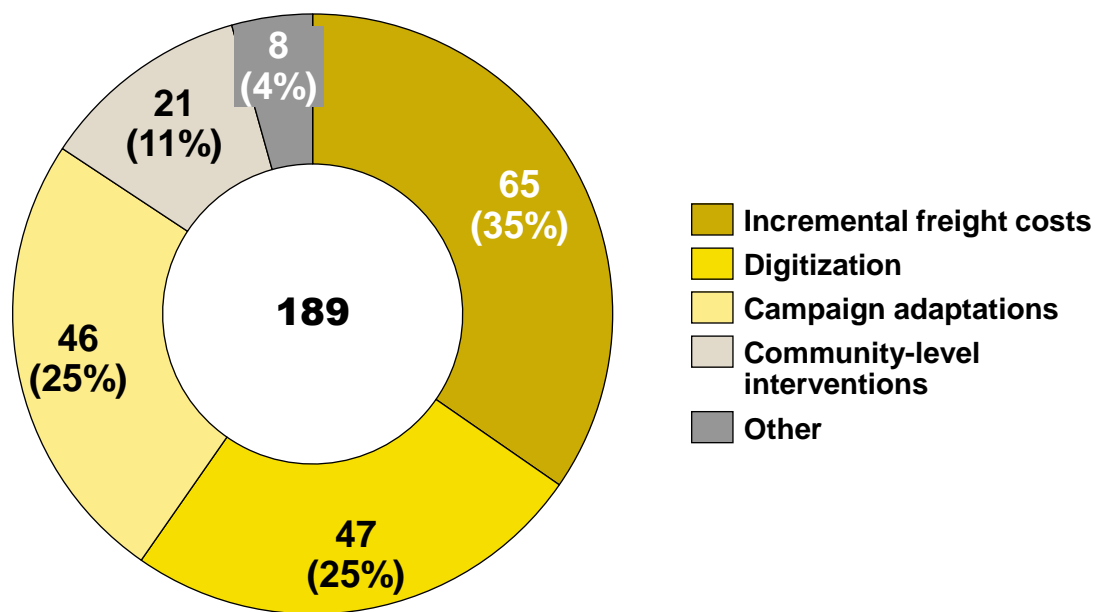
Source: Provisional WHO results

# C19RM helped maintain critical routine services and ensured key prevention campaigns

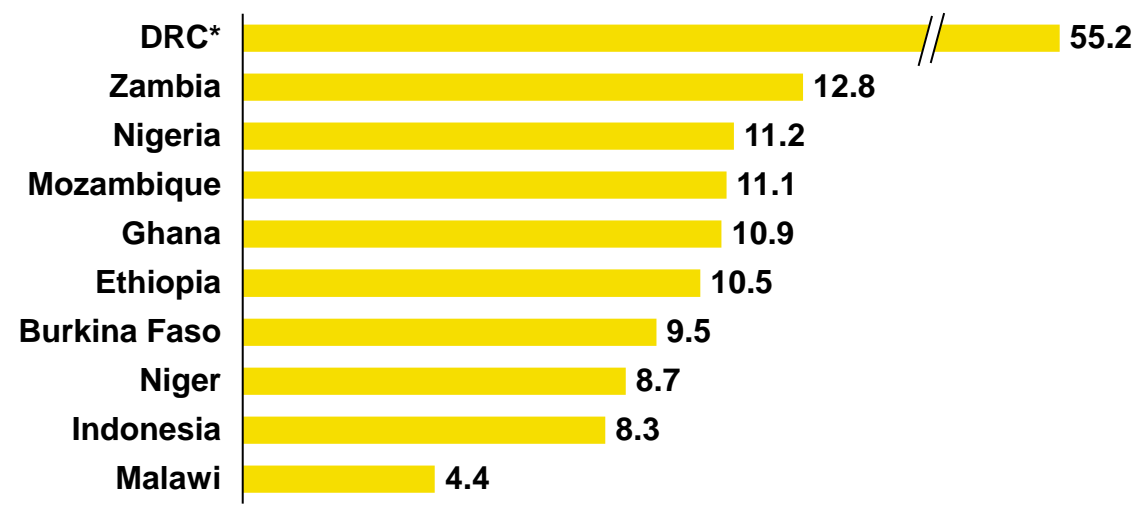


- A total of **US\$189 million** has been awarded to **Malaria Mitigation**. Critical prevention campaign efforts for insecticide-treated bed-nets (ITN), indoor residual spraying (IRS), and seasonal malaria campaigns (SMC). **Not including US\$29 million of C19RM 2020 awards.**
- Investments in malaria mitigation of **US\$189 million** composed of: **US\$65 million (35%)** for increased freight costs and **US\$47 million (25%)** for digitization, **US\$46 million (25%)** is targeted to **malaria campaign adaptations**; **US\$21 million (11%)** for **community-level interventions: service adaptations, sensitization and messaging** and **US\$8 million (4%)** for other activities.

**C19RM 2021 Malaria Mitigation (US\$ million)**



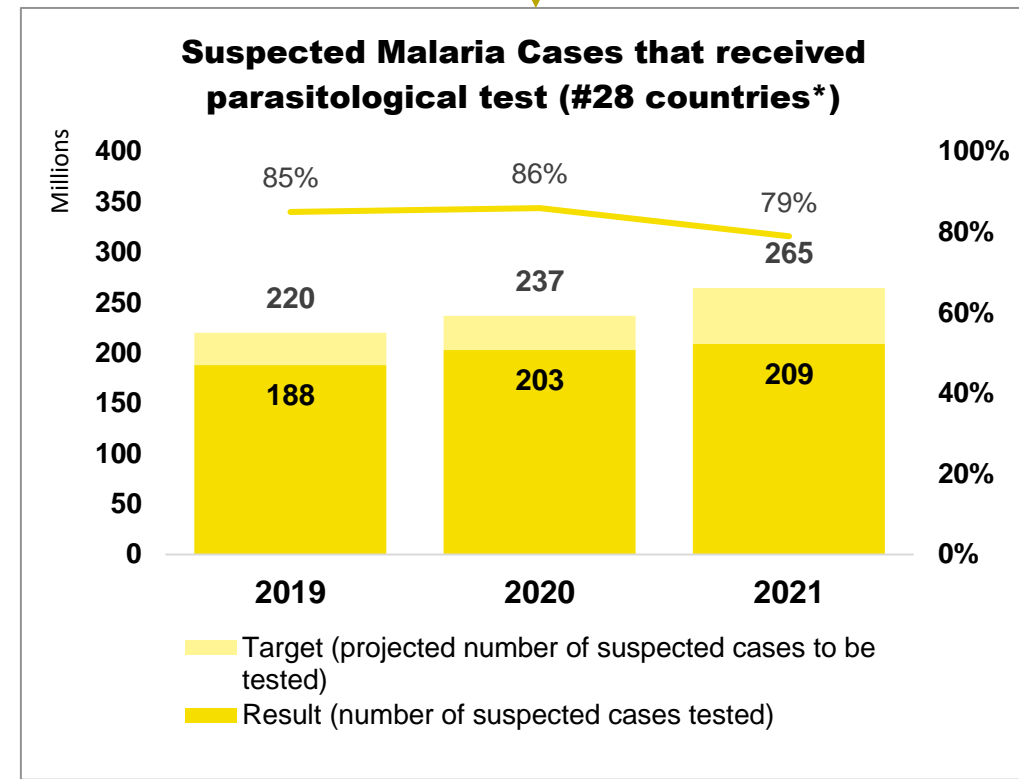
**C19RM 2021 Top 10 in Malaria Mitigation (US\$ million)**



\*DRC got awarded US\$36 million for increased freight costs.

# Update on Malaria Mitigation – Key Results

Malaria Diagnostics & Treatment	Malaria Suspected Cases	Malaria Campaigns
<p><b>On Target</b> <input checked="" type="checkbox"/></p>	<p><b>Slight Increment</b> ▲</p>	<p><b>Remains on Track</b> <input checked="" type="checkbox"/></p>
<ul style="list-style-type: none"> <li>• <b>On-shelf availability</b> for malaria <b>diagnostics</b> and malaria first-line drugs across all reporting countries is 76% and 75%, respectively – <b>at or above the 75% target rate</b>.</li> <li>• Malaria <b>case management service delivery</b> showed a <b>significant increase</b> along the seasonal patterns.</li> </ul>	<ul style="list-style-type: none"> <li>• Slight increment from 2019 to 2020 in the <b>total number of suspected malaria cases tested</b>, with results varying widely across Global Fund regions.</li> <li>• Given the overlap in symptoms, and the <b>need to test suspected</b> cases for <b>both diseases</b>, it is <b>unsurprising</b> that the expected number of suspected cases needing malaria testing, and the <b>testing itself, increased</b> in areas with COVID-19 burden.</li> </ul>	<ul style="list-style-type: none"> <li>• While challenging due to restrictions and behavior changes, <b>most campaigns were successfully implemented in 2021</b>, ensuring <b>delivery of lifesaving products</b>.</li> <li>• <b>Close planning with national authorities and partners.</b></li> <li>• <b>SMC campaigns:</b> Number of reached children increased each year. In 2021, highest ever number of children protected (20 million in 2019 to 35 million in 2021).</li> <li>• <b>ITN campaigns:</b> In 2020, 19 of 28 campaigns completed with nine partially delayed into the following year. In 2021, 27 of 32 campaigns completed with five delayed.</li> <li>• <b>IRS campaigns:</b> Of 21 countries, four delayed – three due to the COVID-19 impact, one due to unrelated factors to COVID-19.</li> </ul>
<p>* Sourced from Performance Framework data gathered from malaria grants in the following countries: Burundi, Burkina Faso, Bangladesh, Central Africa Republic, Côte d'Ivoire, Cameroon, Congo (Democratic Republic), Ethiopia, Ghana, Guinea, Indonesia, Liberia, Madagascar, Mozambique, Malawi, Niger, Nigeria, Pakistan, Papua New Guinea, Sudan, Sierra Leone, Somalia, Chad, Togo, Tanzania, Uganda, Zambia, Zimbabwe</p>		




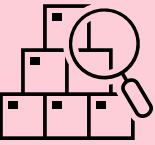
**Success Stories**








- Bolivia:** PPE for malaria brigades/volunteers doubled-up as COVID-19 response teams.
- Nigeria:** Campaign adaptations put in place to ensure successful completion, together with a robust evaluation to understand, document and share experiences on usefulness and costs.
- Burundi:** Effective cross-partner collaboration in support of campaign digitalization to help implementation of the campaign during COVID-19, leveraging support for other cross-disease interventions.

**Malaria implementation activities were less impacted than TB and HIV. Only 14% of modules were at risk or off-track with major issues in Q3 2021, often due to delays in delivery, particularly for ITNs for vector control, alongside health care worker shortages.**

# For HIV/TB/malaria products...

 On-shelf availability and in-country on-time in-full delivery has been improved from Q4 2021 to Q2 2022.

 However, central stores had a low percentage of stock according to plan, indicating challenges in warehousing operations and planning.

	 <b>HIV</b>			 <b>TB</b>			 <b>Malaria</b>		
	R1	R2	R3	R1	R2	R3	R1	R2	R3
 <b>SATP</b>	10%	26%	22%	8%	24%	18%	17%	24%	20%
 <b>OTIF</b>	38%	94%	92%	57%	98%	95%	66%	70%	96%
 <b>LMIS RR<sup>1</sup></b>	91%	70%	85%	71%	51%	82%	92%	83%	91%
 <b>OSA</b>	71%	83%	85%	54%	81%	80%	70%	84%	83%

- Overall product availability has shown improvements across HTM product categories with the aid of in-country delivery performance and better use of information systems.
- Warehousing & operational planning at central warehouses also requires improvement.
- While LMIS reporting rates improved, timeliness and saturation of eLMIS remains an issue in some countries
- Several of these areas are being earmarked for investment in C19 PO Wave 2 & GC7

SATP: Stock according to plan at the central medical stores

OTIF: On-time in-full

LMIS RR: Logistics management information system reporting rate

OSA: On-shelf availability of products

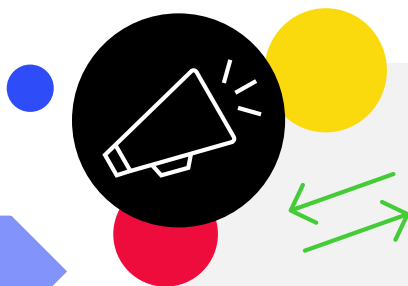
# C19RM unused funds in COVID-19 control and containment present a unique opportunity to strengthen systems and prepare for pandemics

## 2 Pandemic Evolution and Uncertainty

**Investments landscape remained unchanged**  
– demand / orders for COVID-19 commodities dropped dramatically but countries did not want to risk reprogramming in case of future surges. Extreme uncertainty delayed continuation of investments by countries.

April 2022 – April 2023

- Started the shift
- Evolved strategic priorities
- Extension of Implementation
- Portfolio Optimization Wave 1



The transitioning phase was an important one and expenditure being lower than expected turned out to present an important opportunity for countries to invest in systems for health and prepare for the next pandemic instead.



It is worth noting that countries did not use the funds to purchase health products they no longer needed.



The remaining funding is significant enough to support countries build their health systems, as funding for RSSH in GC7 remains limited.



Remaining C19RM funding present a **unique opportunity** for countries, donors and partners to work together to support systems for health and pandemic preparedness.





2

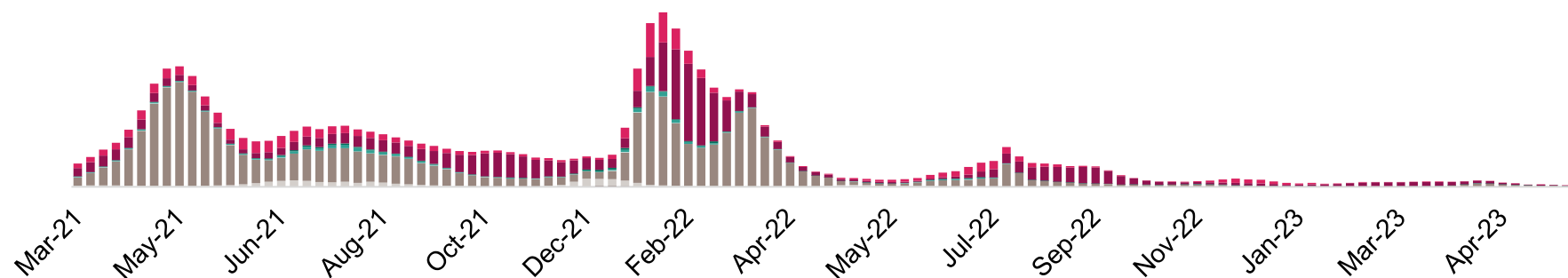
# Making the Shift: Strengthening Systems for Pandemic Preparedness

Strategic priorities going forward



# Making the strategic shift in the third phase of C19RM

Number of New COVID-19 Cases



5<sup>th</sup> May 2023  
End of COVID-19 as a public health emergency

## 1 Emergency Response

In the beginning, **75% of C19RM investments** focused on COVID-19 control and containment. The Global Fund responded quickly to procurement needs based on a solid organizational infrastructure, also providing grant flexibilities. HTM mitigation and urgent improvement to systems for health were also prioritized.

**March 2020 – March 2022**

- Grant flexibilities
- Acute response
- Fast Track, Full Funding, Additional Funding

## 2 Pandemic Evolution and Uncertainty

**Investments landscape remained unchanged** – demand / orders for COVID-19 commodities dropped dramatically but countries did not want to risk reprogramming in case of future surges. Extreme uncertainty delayed continuation of investments by countries.

**April 2022 – April 2023**

- Started the shift
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- Portfolio Optimization Wave 1

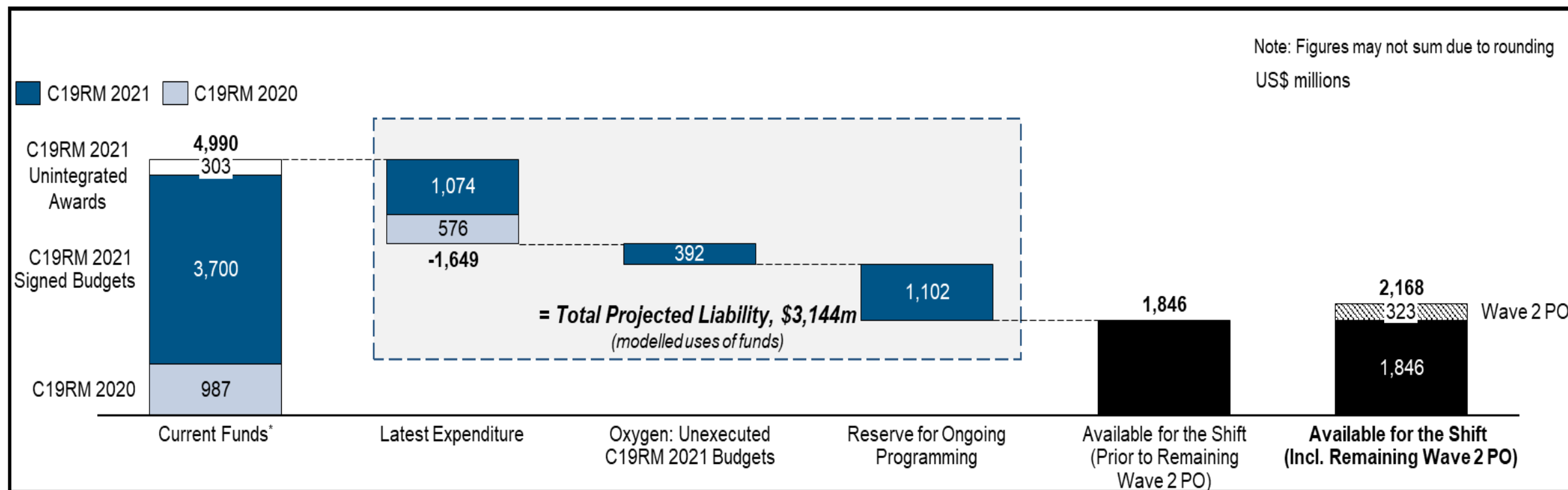
## 3 Transition to Systems Strengthening

**Five strategic priorities:** Surveillance systems, laboratory systems, HRH and community systems, medical oxygen and respiratory care, health product and waste management.  
**Actions to drive the shift:** (i) visibility on reinvestment landscape; (ii) maintain urgency and agility in funds deployment; (iii) enhance monitoring and support implementation

**May 2023 – December 2025**

- Portfolio Optimization Wave 2
- Reinvestment towards Strategic Priorities
- Multi-prong approach to implementation support

## Financial modelling indicates ~US\$2.2Bn potentially available to enable the shift in investment landscape towards strategic & longer-term needs



- Continuous monitoring of C19RM performance through M&O and quarterly proximal financial data will provide **visibility on progress in grant rebudgeting, reinvestment, and revisions; program execution; and identify implementation bottlenecks** that require problem solving to course correct.

**Aligned on Health and Community Systems and Pandemic Preparedness Programmatic Priorities to be covered by the C19RM Extension and Portfolio Optimization Wave 2 request as outlined in the updated Technical Information Note**



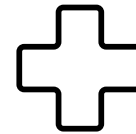
**Surveillance  
system  
strengthening**



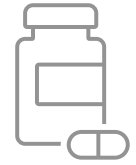
**Laboratory  
and  
diagnostics**



**Human  
resources for  
health and  
community  
system  
strengthening**



**Medical  
oxygen,  
respiratory  
care and  
therapeutics**



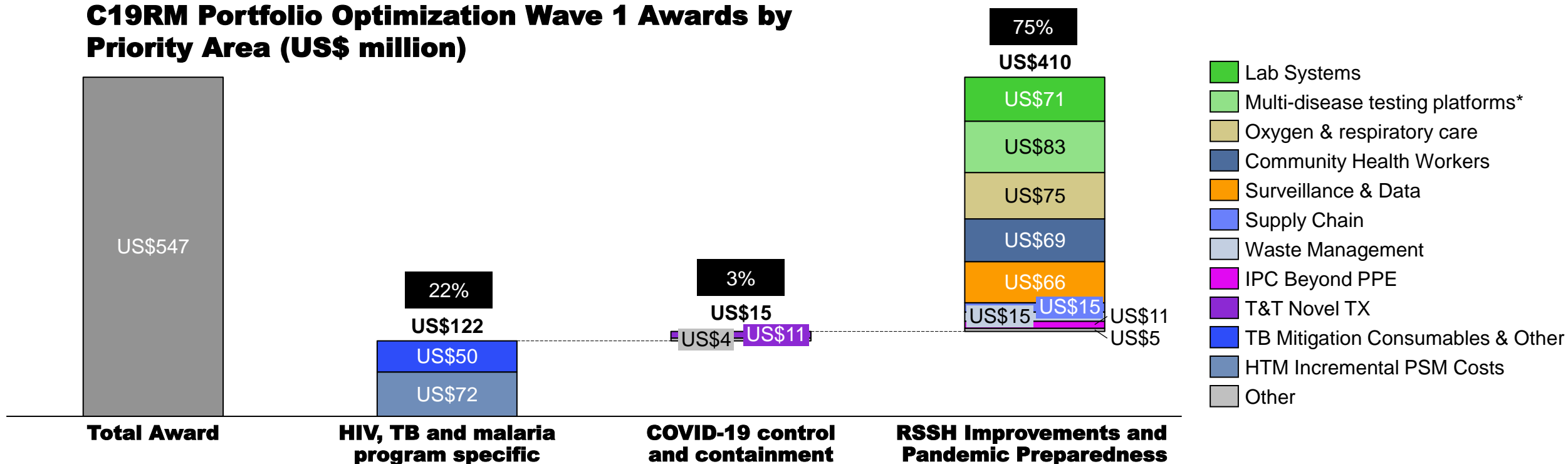
**Health  
product and  
waste  
management  
systems**

# Investment of US\$547M Portfolio Optimization Wave 1 awards reflects efforts to advance the strategic shift to systems strengthening



C19RM Portfolio Optimization Wave 1 awards reflect a shift in funding to align with strategic priorities to finance strengthen pandemic preparedness. Including: oxygen and respiratory care, Test & Treat, IPC beyond PPE, multi-disease diagnostic platforms, lab systems, surveillance & data, supply chain and community health workers.

## C19RM Portfolio Optimization Wave 1 Awards by Priority Area (US\$ million)



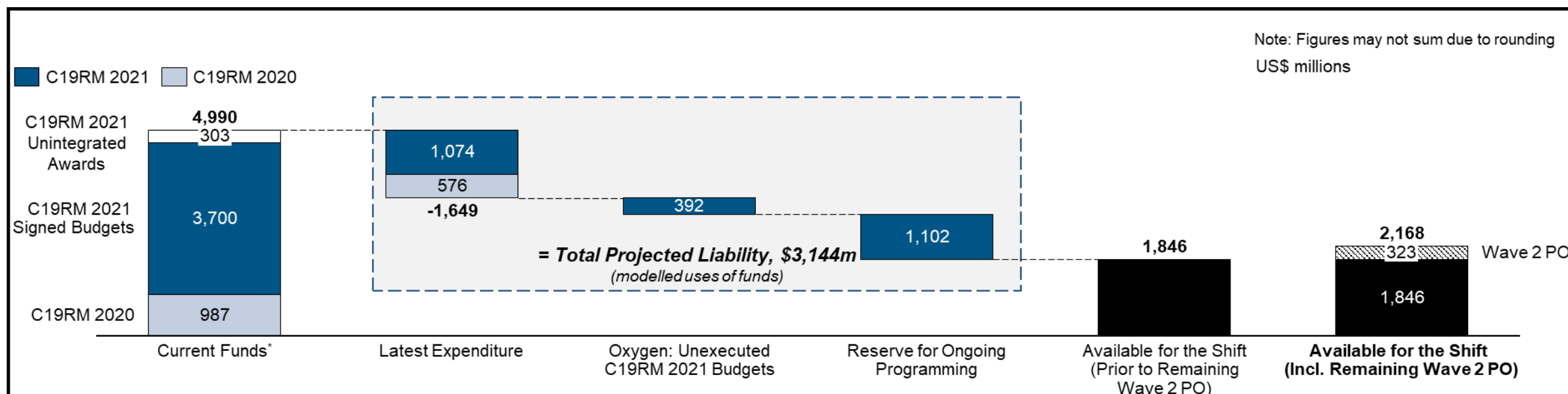
# Strategic investment shift for C19RM will be driven through proactive engagement of multiple levers

*Levers for driving the strategic investment shift*

<p><b>C19RM grants continuing through extension period (2023 – 2025)</b></p> <p><b>Portfolio segmentation and differentiation to focus on 40 countries that account for 80% of the strategic shift</b></p>	<p><b>Lever 1: Grant rebudgeting, reinvestment and revision (redistributing money within a country)</b></p> <p>Shift investment profile of existing grants to drive alignment with the strategic shift</p> <ul style="list-style-type: none"> <li>• <b>Required</b> for all countries with C19RM grants through 2023 – 2025.</li> <li>• <b>Potential funds available through <u>Lever 1: est. US\$1.8bn</u>, investment opportunity for driving the strategic shift.</b></li> <li>• <b>Determines activities that should be continued / executed</b> during extended implementation period.</li> <li>• <b>Provides required assurance</b>, improve forecasting and determine the right level of Portfolio Optimization for each country.</li> <li>• <b>Targeted implementation support and monitoring</b> will reduce the gap between programmatic and forecast ambition (utilization); and implementation (absorption) to maximize impact.</li> </ul>	<p>Investments made through both levers must be guided by several <b>key principles</b></p> <ul style="list-style-type: none"> <li>• Align with <b>strategic investment priorities</b> of the C19RM extension.</li> <li>• Provide <b>in-depth understanding of current programmatic and grant financial position.</b></li> <li>• <b>Provide visibility on investment and reinvestment landscape</b> – including expenditure; projected liability; funds available for reinvestment to finance the strategic shift; prioritized additional funding request and/or Unfunded Quality Demand (UQD).</li> <li>• Consider <b>complementarity with GC7 and other funding streams.</b></li> <li>• <b>Use of program data and assessment of feasibility</b> to inform investment decisions, Technical Assistance (TA) needs, monitoring and assurance.</li> </ul>
	<p><b>Lever 2: C19RM Portfolio Optimization Wave 2 (redistributing money between countries)</b></p> <p>Award additional funds in line with C19RM strategic investment priorities (i.e., RSSH and pandemic preparedness) building on outcomes of Lever 1</p> <ul style="list-style-type: none"> <li>• <b>Available to all countries</b> with C19RM grants through 2023 – 2025.</li> <li>• <b>Potential funds becoming available through <u>Lever 2: US\$323M</u> investment opportunity to further catalyze the strategic shift.</b></li> <li>• <b>Targeted approach</b> initially focusing on RSSH priority countries for awarding funds.</li> <li>• <b>Countries must provide visibility on reinvestment / rebudgeting</b> progress to be considered for additional funding through portfolio optimization.</li> </ul> <p><i>Requests received from 48 countries for total of \$1.71bn.</i></p>	

# Lever 1: Grant rebudgeting, reinvestment and revisions

- Financial modelling to stress test and inform grant rebudgeting, reinvestment and revisions indicates ~US\$1.8Bn potentially available to enable the shift in investment landscape towards strategic and longer-term needs.
- Opportunity to leverage grant rebudgeting and reinvestment: ongoing financial analysis and modeling of in-country absorption, analysis and PR reports on programmatic execution establish latest expenditure; activities to be continued and projected liability during extended implementation period; determine funds available for reinvestment to finance the strategic shift. Informs reorientation of investment landscape, reinvestment prioritization and decisions.



- Continuous monitoring of C19RM performance through M&O and quarterly proximal financial data will provide **visibility on progress in grant rebudgeting, reinvestment, and revisions; program execution; and identify implementation bottlenecks** that require problem solving to course correct.

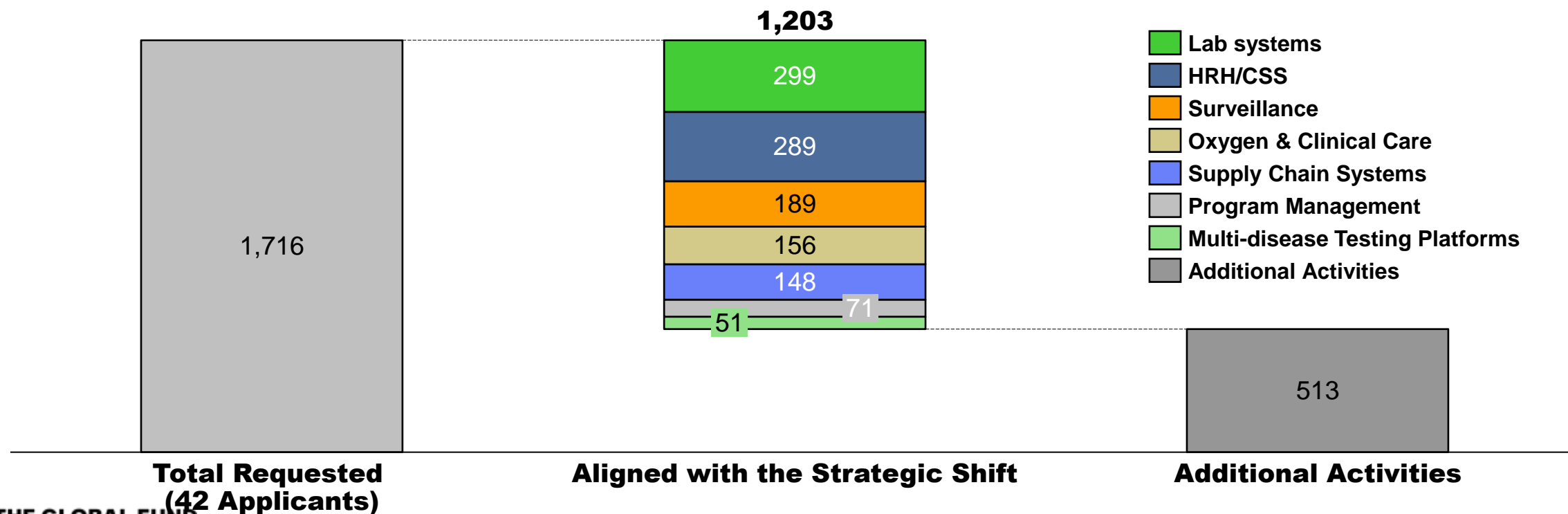
\*Analysis assumes all C19RM 2020 awards were integrated into budgets. Grant flexibilities may be adjusted within the range of +/- US\$ 1M – 4M upon completion of the C19RM 2020 reconciliation exercise. Latest expenditure uses PR-reported expenditure for C19RM 2021 given current PU/DR compliance; C19RM 2020 uses GF-amounts. Expenditure and budget data sourced from CDW on 12 June 2023

# Lever 2: C19RM Portfolio Optimization Wave 2 Pipeline: opportunity to further drive the shift, leveraging additional funding



- **48 applicants submitted** a request for C19RM Portfolio Optimization (PO) Wave 2 , of which **45 applicants** submitted complete additional funding budgets for a total of **US\$1,716 million** (received Central African Republic, Liberia and Bolivia this week, along with some updated budgets).
- **US\$1203 million** aligned with the strategic shift: including **US\$299 million (25%)** for Lab systems, **US\$289 million (24%)** for lab systems, **US\$189 million (16%)** for surveillance, **US\$156 million (13%)** are targeted to oxygen and clinical care, **US\$148 million(12%)** for supply chain systems, **US\$71 million (6%)** for program management and **US\$51 million (4%)** for multi-disease testing platforms.

**C19RM Portfolio Optimization Wave 2 Unfunded Demand Pipeline (US\$ million)**





# Making the Shift: What are we learning?



## Challenges

- **Massive scale-up of key Resilient and Sustainable Systems for Health (RSSH) modules and implementation at this magnitude has not been done before.** This requires addressing multiple bottlenecks, including implementation arrangements, technical assistance to address capacity gaps, routine reporting for hands-on monitoring and accountability.
- **Making the awards to enable the shift is a new way of doing business. It will be challenging and needs collective effort.** Anticipate learning by doing.
- **Making the shift prioritizes new technical areas, new stakeholders, new implementers. Strengthening engagement and implementation** arrangements for new areas needed.



## What we need to make it work

- **Prioritization.** We will need to prioritize and phase investments rationally as country needs for strengthening health and community systems remain substantial and long-term.
- **Visibility on investment and reinvestment landscape** is needed to reorient funding towards longer term investments for RSSH and Pandemic Preparedness (PP).
- **Needs assessment mapping and coordination of investments** at country level, allowing more effective synergies and complementarity with other funding sources (C19RM Portfolio Optimization; Pandemic Fund; GC7; and others).
- **Implementation support and availability of demand driven or embedded surge Technical Assistance (TA) critical** in supporting quality execution, accelerating implementation and oversight in line with approved plans, course correcting as necessary – for robust investments aligned with the shift.
- More **proactive communication and engagement with countries** on strategic investment priorities and reinvestment.



## Making the shift needs data and time

If we rush, we will fail.

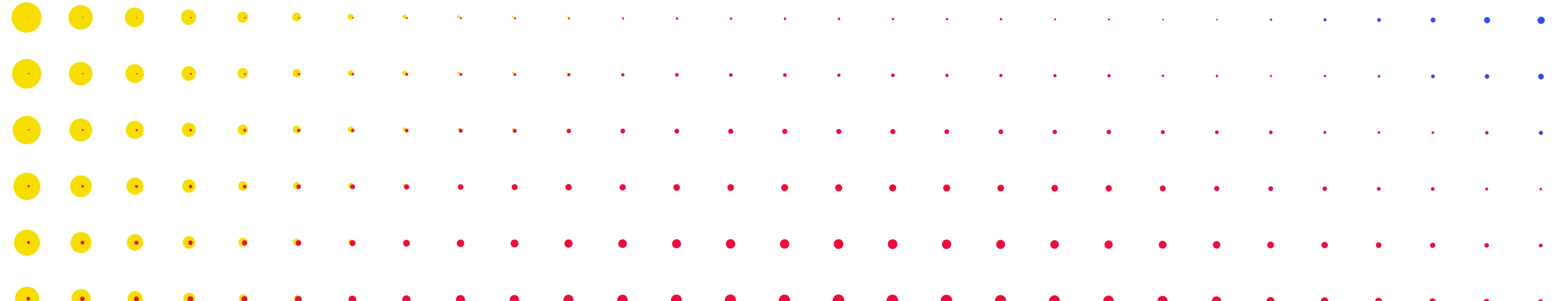
- **Systems-strengthening investments are complex**, take longer to prepare, review, implement effectively and demonstrate results.
- **Both financial and programmatic data will ensure effective investment prioritization.**



3

# Supporting Implementation

Applying lessons learned to focus efforts



# What we will do to execute the shift: A set of bold options will be explored

Multi-pronged approach for doing things differently to accelerate implementation

Countries	Program Areas	Approaches (examples)
<ul style="list-style-type: none"> <li>• <b>Focus</b> intensive secretariat and TA support on top 25 countries that receive C19RM funds (follow \$) and RSSH priority countries</li> <li>• <b>Active use</b> of dynamic portfolio management and leverage the forecast as a mechanism to incentivize reprogramming (reinvest to optimize opportunity within implementation period)</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Maintain focus</b> on the strategic priority areas</li> <li>• <b>Rigorous review</b> of technical and operational feasibility of reinvestment and additional funding requests</li> </ul>	<p>Address long-standing root causes of low RSSH absorption identified in in-depth analyses, <u>based on country contexts</u>:</p> <ul style="list-style-type: none"> <li>• <b>Address implementation arrangements</b> <ul style="list-style-type: none"> <li>• Engage new stakeholders including RSSH-PPR entities (NPHI, lab directorate, CHW unit) in implementation</li> </ul> </li> <li>• <b>Strengthen implementation capacities</b> <ul style="list-style-type: none"> <li>• Expand coverage of thematic TA, including CMLI</li> <li>• Strengthen PR/SR/PMU via management TA for RSSH-PPR</li> </ul> </li> <li>• <b>Strengthen M&amp;O and accountability:</b> Use performance framework and CMLI-supported monitoring to monitor, support and incentivize implementation</li> </ul>

# Opportunities to leverage CMLIs: Technical Assistance to Facilitate Implementation in Program Areas aligned with the Strategic Shift

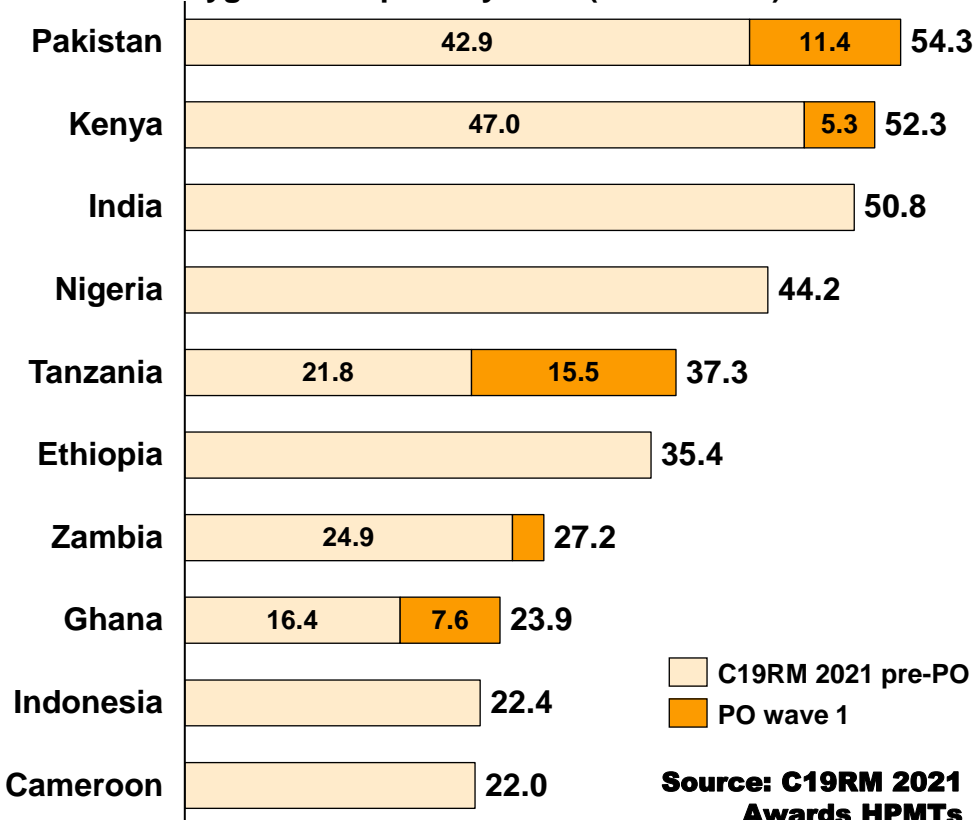
<b>Surveillance system strengthening</b>	<ul style="list-style-type: none"> <li>• <b>Surveillance CMLI:</b> Extensive in country technical support from Task Force for Global Health (TFGH) for up to 9 countries for <b>early warning surveillance</b>; TFGH support to 5 countries for C19RM FR development</li> <li>• <b>RTSL Support:</b> BGMF-funded virtual support led by Resolve to Save Lives to 5 countries for FR development for early warning surveillance and country intensive TA for 4 countries</li> </ul>
<b>Laboratory and diagnostics</b>	<b>Project STELLAR:</b> CHAI, ASLM and APHL support TA in 23 countries for lab diagnostics and systems strengthening investment, including Wastewater-Based Surveillance and genomic sequencing in 6 countries.
<b>Multiple areas incl. Lab and Surveillance</b>	<b>USG set-aside:</b> USAID and US CDC via various partners incl. FHI360, ICAP, JHPIEGO, Georgetown for various RSSH-PPR technical areas including <b>labs, surveillance, IPC</b> in 34 countries.
<b>Human resources for health and community system strengthening</b>	<ul style="list-style-type: none"> <li>• <b>Project BIRCH:</b> Last Mile Health support via various partners (MUSO, Living Goods, Financing Alliance for Health, Community Health Impact Coalition, UNICEF and more and working with Africa CDC) for <b>CHW</b> programs in at least 11 countries incl. support to FR development and to accompany grant implementation</li> <li>• <b>CRG's CLM CMLI:</b> On-demand short-term technical assistance for setting-up CLM mechanisms and adaptations to C19, and support CLM implementation in C19RM grants. Provided 22 TA support in 13 countries.</li> </ul>
<b>Medical oxygen, respiratory care and therapeutics</b>	<b>Project BOXER:</b> BHI (Build Health International) support in 51 countries for PSA plants for bulk <b>oxygen</b> production
<b>Test &amp; Treat</b>	<b>Project TNT:</b> CHAI support for <b>COVID-19 Test and Treat</b> in 3 countries

# Oxygen & Respiratory Care

C19RM Portfolio Optimization Wave 1 yielded a **14% increase** in investments within Oxygen & Respiratory Care.

## Total C19RM 2021 Awards: US\$617 million

C19RM 2021 Top ten countries in Oxygen & Respiratory Care (US\$ million)



## Expected Results by 2025

- Majority of the approved and additional investments in PSA plants are procured, site preparation has been completed, plants are delivered, installed, commissioned and operational by the end of the C19RM grants period.
- The PSA plants have the required warranty and maintenance, spare parts to cover the warranty period at minimum till the end of the grant or 5 years.
- Oxygen and respiratory care equipment: countries have the essential systems and resources including management, technicians and operators trained to maintain and operate them sustainably.
- Oxygen generated with C19RM investments is delivered to the PoC and its quality and use is monitored.

## Prioritized Investment Activities

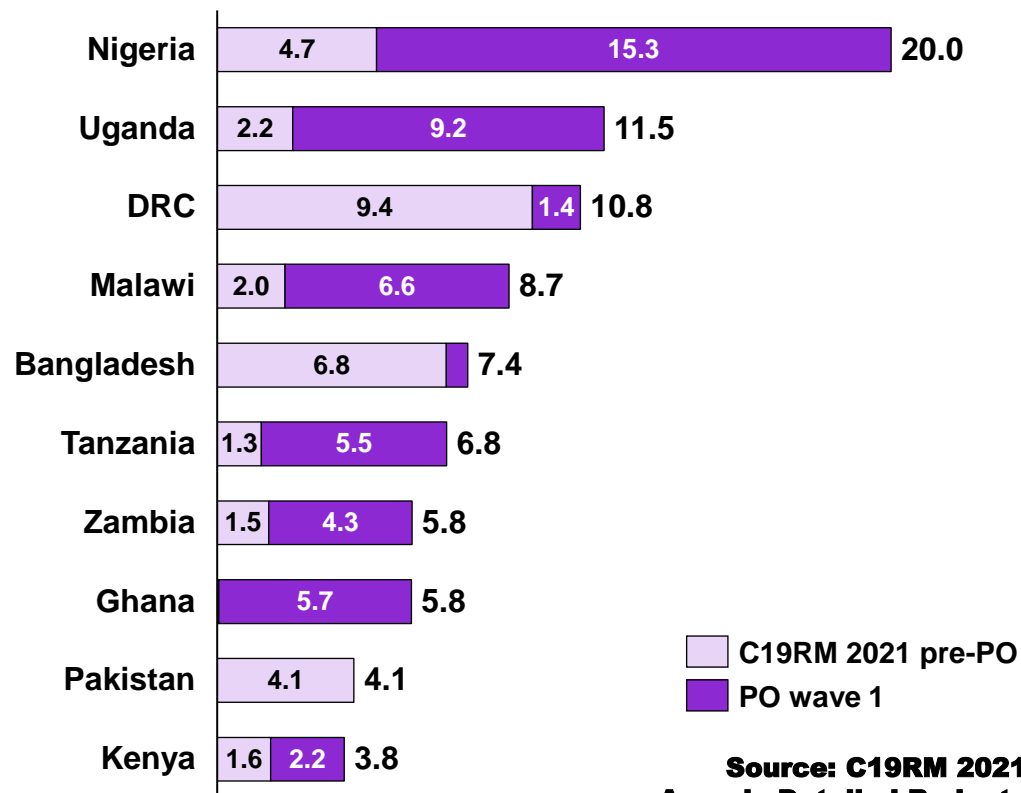
1. Support the end-to-end implementation C19RM oxygen and respiratory care capital investments in generation capacity, specifically PSA plants
  - i. Procurement and delivery
  - ii. Site Preparation and Installation
  - iii. Post installation services
2. Strengthen oxygen and respiratory care ecosystems
  - i. Additional oxygen generation capacity where critically needed
  - ii. Strengthen oxygen distribution systems
  - iii. Strengthen oxygen delivery and use to the PoC
  - iv. Strengthen oxygen systems e.g., governance management and operations training, monitoring and evaluation

# Integrated Laboratory Systems Strengthening

C19RM Portfolio Optimization Wave 1 yielded a **90% increase** in investments within Laboratory Systems.

## Total C19RM 2021 Awards: US\$151 million

### Top ten countries in Laboratory Systems Strengthening (US\$ million)

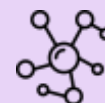


Source: C19RM 2021 Awards Detailed Budgets

## Expected Results by 2025

- Strengthen **coordination** and **collaboration** with regional bodies
- **Integrated** COVID-19 diagnostics into routine diagnostic services at the primary healthcare level
- **Data** from wastewater surveillance reports and multi-pathogen surveillance to **inform public health** and **social measures** (PHSM)
- Strengthened coordination between Lab Directorates & partners to support lab systems readiness

## Prioritized Investment Activities



Promote **integration** of COVID-19 testing into national essential diagnostics services



Augmenting support to strengthening integrated laboratory systems by leveraging previous investments



Promote Wastewater Based Surveillance and next generation sequencing as early warning response tools



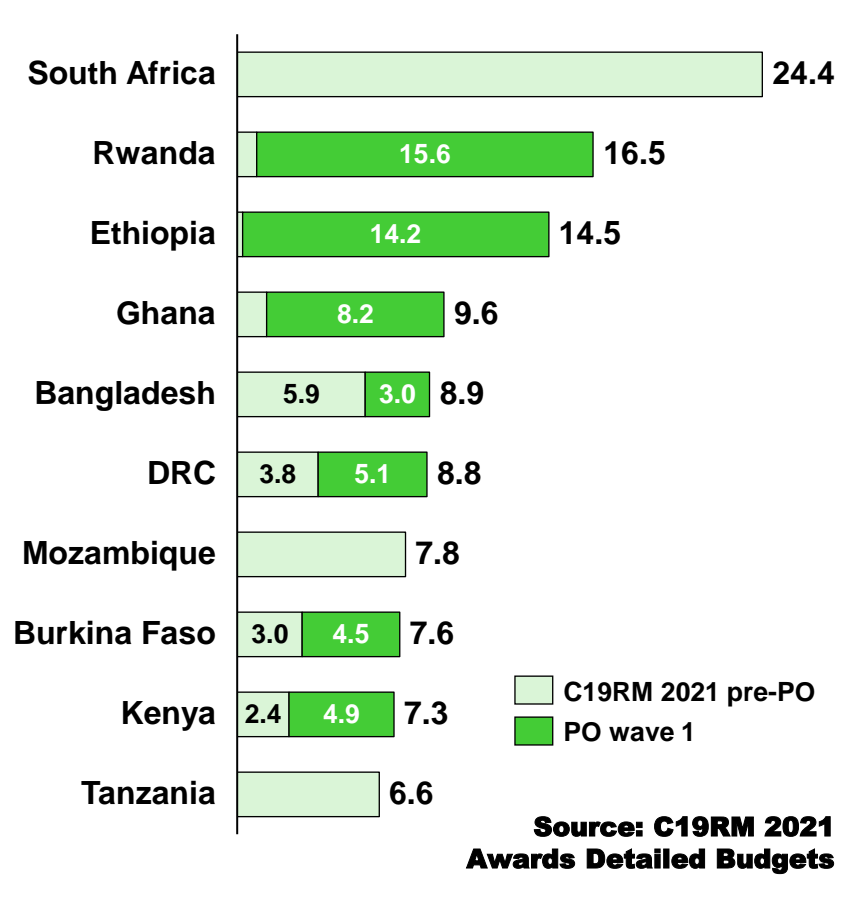
Upgrading laboratory infrastructure towards achieving international standards for accreditation and biosafety and biosecurity



# Community Health Workers

C19RM Portfolio Optimization Wave 1 yielded a **51% increase** in investments Community Health Workers.

## Total C19RM 2021 Awards: US\$204 million



## Expected Results by Dec 2025

- Improved system readiness to scale and progress along CHW maturity model**, including
- **CHW level:** improved receipt of integrated supportive supervision, contracts, on-time & in-full payment, reduced stockouts of key commodities and equipment
  - **Systems level:**
    - Reduced funding gaps across systems components (in complement to GC7, domestic and other sources)
    - Integration of CHWs within national HRH and health sector strategies
    - Costed national CH strategies and long-term financing plans
    - Enhanced pandemic preparedness capabilities (e.g., community event-based (CEB) and indicator-based surveillance\* linked to surveillance priority area)
    - Functional national georeferenced CHW master list hosted in a registry

## Prioritized Investment Activities

Integrated investments into the following areas based on the identified gaps (e.g., through GC7 CHWs gap table and spot check data (CHWs heatmap):

Governance, policy, planning & coordination

Remuneration

Training and accreditation

Supportive supervision

Referral

Equipment

Info systems, M&E & surveillance

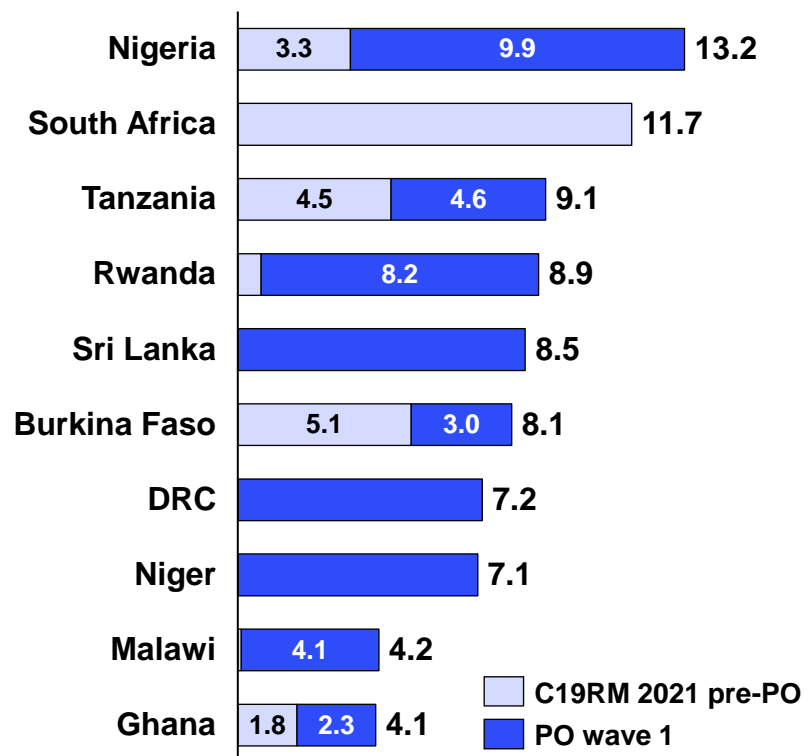
# Surveillance Systems



C19RM Portfolio Optimization Wave 1 yielded a **94% increase** in investments within Surveillance Systems.

## Total C19RM 2021 Awards: US\$136 million

### Top 10 countries in Surveillance Systems (US\$ million)



Source: C19RM 2021 Awards Detailed Budgets

## Expected Results by Dec 2025

Reduced time between outbreak detection and response limiting the size of outbreaks by institutionalizing early warning surveillance by:

- Improving near real time capabilities of outbreak detection and reporting from communities and health facilities
- Strengthening National and sub-national level capacity to analyze and use data from different sources for timely disease detection and response.
- Demonstrating an approach to integrate malaria surveillance into national early warning systems.
- Increasing engagement with surveillance/response stakeholders.

## Prioritized Investment Activities

- Training of community actors, CHW, health facilities (both private and public) to look for and report outbreaks and public health events
- Digital tools and capabilities that will allow near real time reporting from a variety of sources
- Investments in data hubs/data observatories that will allow data linkages, analyses and data for action

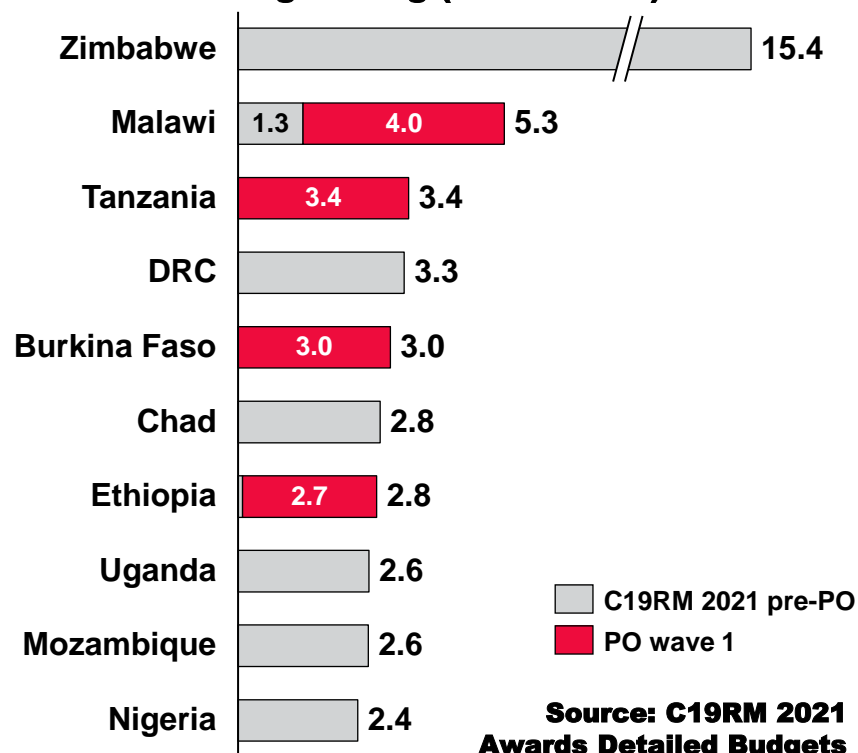


# Strengthening in-country supply chain systems

C19RM Portfolio Optimization Wave 1 yielded a **31% increase** in investments within Supply Chain Systems.

## Total C19RM 2021 Awards: US\$63 million

### Top 10 countries in Supply Chain Strengthening (US\$ million)



## Expected Results by Dec 2025

- **Accelerating agility using data:** Enabling data-driven decision-making at all levels of the supply chain is vital. Focus on implementing standards-based information systems to enable reporting requirements & improve efficiency & effectiveness of downstream supply chain processes.
- **Flexible capacity for efficient surge management:** Managing country specific strategic stockpile of critical health products through existing capacity or additional temporary capacities. It could also warrant distributing an increased throughput, through in-country logistics providers for new product introductions & reverse logistics.
- **Effective Supply Chain System Governance** - Creation, review and renewal of national supply chain strategic plans including elements of pandemic preparedness that directly work to strengthen the oversight of key supply chain functions and governance bodies.

## Prioritized Investment Activities



- **Deployment of information systems** and insights platforms integrating multiple systems to ensure end-to-end visibility and accelerated data availability



- **Supporting optimal design of distribution and storage systems** to ensure agility in responding to surge demand and continued product availability



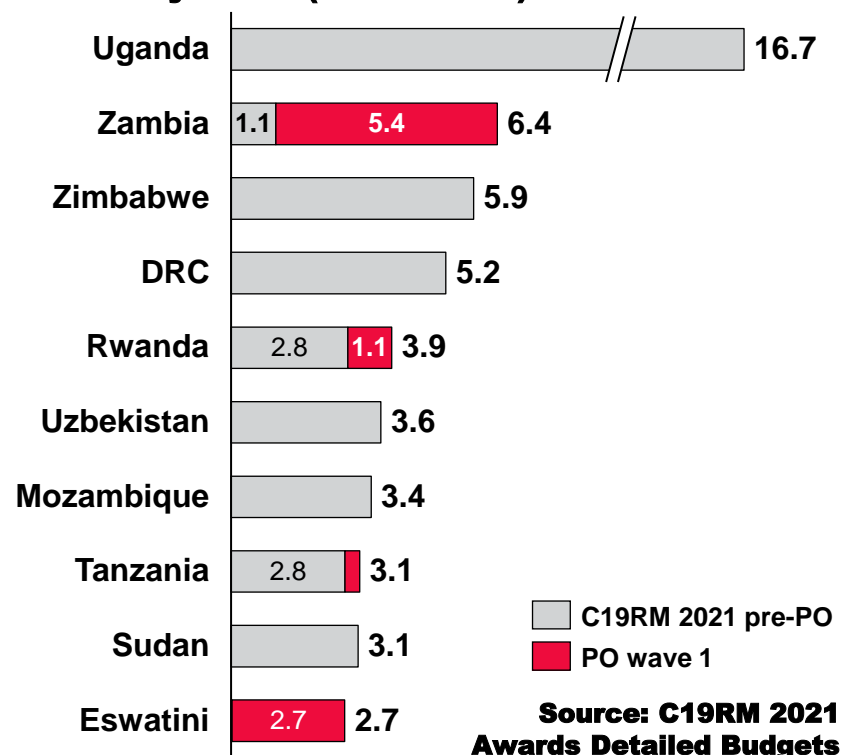
- **Development of national costed supply chains strategies** and provide critical capability building tools to facilitate development of strong governance mechanisms

# Strengthening health product waste management systems

C19RM Portfolio Optimization Wave 1 yielded a **19% increase** in investments within HPWMS<sup>1</sup>

**Total C19RM 2021 Awards: US\$ 86 million**

## Top 10 countries in Waste Management Systems (US\$ million)



Note (1) HPWMS – Health Product Waste Management Systems

## Expected Results by Dec 2025

- **Established national policies and strategies** that are aligned with global health care waste management best practices and support decarbonization of the health care waste management supply chain leveraging reverse logistics and circular economy principles.
- **Increased country capacity, including infrastructure**, that support the collection, transportation of health care waste in compliance with environmental standards.
- **Improved national awareness and capacity** to support sustainability and environmentally and occupationally friendly way of managing waste

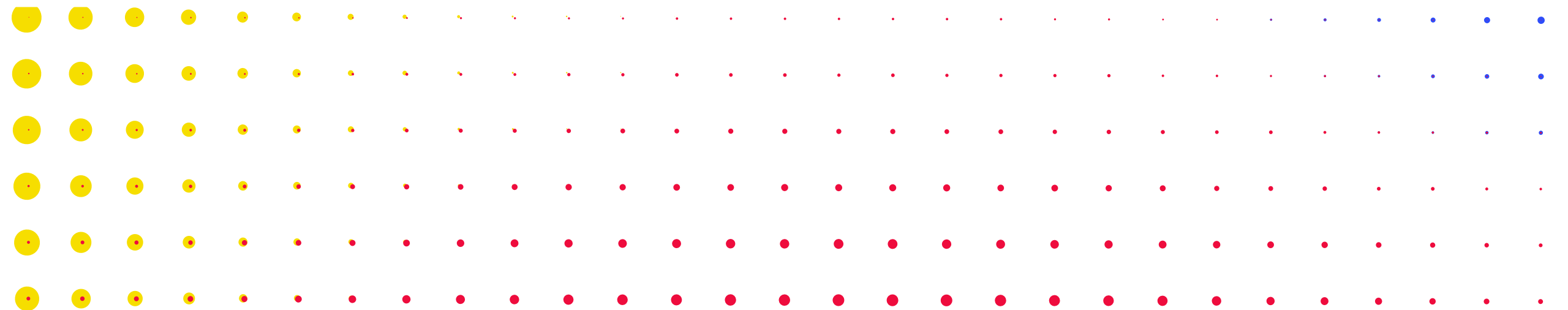
## Prioritized Investment Activities

- **Systematic assessment of health care waste and needs**, to inform development of a national or subnational waste management strategy.
- **Development of national, sub-national, and facility level policy frameworks, guidance or operational plans** for management of health product wastage;
- **Training of human resources across all tiers** in the public and private sector to increase awareness and improve competency in waste management practices
- **Infrastructure and equipment for the collection, transport, treatment and disposal of health care waste** that are compliant with environmental and occupational health standards;



# 4

## **C19RM Monitoring, Oversight and Evaluation** M&E Framework and M&O Plan



# Looking Forward: Monitoring, Oversight, and Evaluation

To better follow the money, we have aligned the Monitoring & Oversight (M&O) and Monitoring & Evaluation (M&E) and assurance frameworks.



- The **revised C19RM M&E framework** was adapted to align with the strategic shifts.
- Introduced **Performance Frameworks for a cohort of high investment grants** to track results against targets to drive accountability for delivery.
- Recognizing the time it takes to see impact of investments in systems strengthening, we also are working with Country Teams on the inclusion of **Work Plan Tracking Measures** to monitor the implementation of the grant investments.
- Recognizing the different countries are at different stages of health systems maturity, we will take a **cohort approach towards investments and monitoring of expected results** across prioritized RSSH investment countries.
- We are **leveraging existing reporting systems** (WHO, national systems, PR reporting) to complement C19RM grant reporting to provide a fuller picture on the results.
- Risk based and targeted LFA assurances for verification of implementation and validation of reported results
- In addition, we will continue to **leverage the monitoring processes that have worked well from 2021**, including Pulse Checks and internal M&O processes.

## **With the shift in the pandemic and investments priorities, we will shift our efforts on Spot Checks to a more targeted approach in monitoring and assurance**

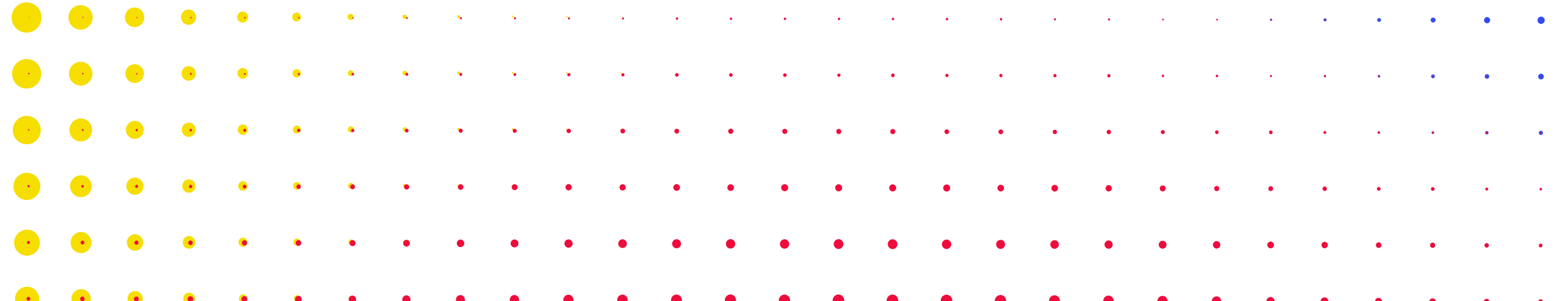


- For **commodities**, we will **continue with Spot Checks** to monitor down stream execution and availability and use of health products (in ~45 countries)
- For **systems strengthening**, we will **focus** our monitoring and assurance of C19RM investments in systems strengthening for pandemic preparedness we will
  - Leverage LFA mechanism to verify progress measures in C19RM investments reported by the grantees through the Performance Framework
  - Leverage Central TA providers to monitor progress in countries receiving additional support by the CMLIs
  - Conduct targeted HFAs in 16+ RSSH priority countries monitoring improvements in systems maturity



**5**

# Key Risks, Concerns and Looking Ahead



# Strategic Risks and Concerns

Continue to monitor and manage the following risks and concerns, including through investing in strengthened C19RM Monitoring & Oversight (M&O) and differentiated assurance approaches



- **Capacity of implementers to manage the shift: Principal Recipient (PR) Capacity/Implementation Arrangements:** Evolution in C19RM funding has created increased workload for the PR in complex areas and/or where it has limited capacity and experience (e.g., Early Warning Surveillance is new in many country contexts). This will be addressed through investments in strengthening implementation capacity including direct contracting of Technical Assistant (TA) support, and strengthening assurance.
- **Operational risk in execution of massive scale-up of RSSH investments:** this will be addressed through more dynamic portfolio management, reinvestments, Portfolio Optimization, CMLI implementation support and enhanced M&O.
- **Supply operations risk and pressure on national systems:** strategic shift will entail shifting focus on more complex procurement including oxygen and other health equipment in an accelerated timeframe. Maintaining focus on order conversation rates, and delivery of health products/equipment (e.g., PSA plants, diagnostic platforms etc.) will be key to optimizing and managing procurement risks.
- **Optimizing synergies with other investment streams** – including GC7 and Pandemic Fund
- **Need to focus on implementation and timely delivery of TA needs:** slow deployment of TA has undermined effectiveness of execution of key programs and funds utilization. This will be managed by strengthening partners' TA coordination and leveraging CMLIs and strengthening M&O to enable costs correction to optimize programs and maximize results.
- **Enhance use of program and financial data** to inform investment decisions and to be more targeted in M&O and assurance.

# Looking Ahead



- We are **progressing** in making the shift – reinvestments and C19RM PO Wave 2 awards.
- But we need **all hands-on deck**: technical assistance and the partnership.
- We are **continuously adapting and learning**.
- It is **not going to be easy** due to capacity issues and massive scale up never done before.
- We have a **unique opportunity** to meet the countries' demands **to strengthen systems in areas that complement GC7**; coordination is important.
- We will **continue monitoring results** and provide additional analysis for **tracking C19RM progress on making the shift, execution, and results**.
- **Next report** will be finalized by the end of **Q3 2023**.