

## Round 9 - Frequently Asked Questions (FAQ)

(Revision 1, 21 November

2008 – updated to reflect changes from the 18<sup>th</sup> Board meeting)

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Introduction: Key Changes to Proposal Form and Guidelines		<a href="#" style="color: white; text-decoration: none;">Back to top</a>
FAQ Intro 1	What is new in the Round 9 Proposal Form and Guidelines?	<p>Since Round 8, the Proposal Form and Guidelines have changed significantly from those in previous Rounds, and now include :</p> <ul style="list-style-type: none"> <li>The recommended inclusion of both government and non-government Principal Recipients in proposals for Global Fund financing (referred to as <b>dual-track financing</b>);</li> <li>The option to combine two or more existing Global Fund grants (or, a newly approved Global Fund proposal and one or more existing Global Fund grants) into a single consolidated grant agreement following proposal approval (referred to as <b>grant consolidation</b>).</li> <li>The encouragement of <b>strengthened support for community systems</b> in Global Fund proposals;</li> <li>Expanded options for including <b>health systems strengthening</b> requests; and,</li> <li>Strengthened emphasis on <b>encouraging gender sensitive approaches</b> in Global Fund proposals.</li> </ul> <p><i>Please refer to Round 9 Guidelines and Fact Sheets at the following link for information regarding these topics: <a href="http://www.theglobalfund.org/en/rounds/9/">http://www.theglobalfund.org/en/rounds/9/</a></i></p> <p>In addition:  <b>→</b>There are now <b>two versions of the proposal form</b>: one for single country applicants (Country Coordinating Mechanisms (CCMs), Sub-CCMs and Non-CCMs) and one for multi-country applicants (Regional Coordinating Mechanisms (RCMs) and Regional Organizations).</p>

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		<p>→ Changes have been made to country income level eligibility criteria and there are new <b>cost sharing</b> requirements for upper-middle income and lower-middle income countries (see FAQs on eligibility requirements below).</p> <p>→ CCMs are recommended to include representatives from <b>key affected populations</b> in their membership. Also, CCMs can no longer apply for funding for CCM costs through a proposal, but must submit an application for funding directly to the Secretariat.</p>
FAQ Intro 2	Has country income level eligibility criteria changed from previous Rounds?	<p>Yes. Country income level eligibility criteria has been revised as of Round 8. Key changes include:</p> <ul style="list-style-type: none"> <li>• Countries in the lower-middle income and upper-middle income categories must now meet new “cost sharing” requirements to show that the Global Fund’s total contribution to the national disease program needs over the proposal term does not exceed certain amounts (This replaces the “counterpart financing” approach in previous Rounds).</li> <li>• Certain new countries are eligible to submit HIV proposals based on significant disease prevalence in identified population groups.</li> <li>• Countries whose income level moves up from one income level to another between two rounds of funding will be given a one year “grace period” to adjust to their new ranking, i.e. these countries can apply for funding as if their income level classification remained at the old income level.</li> </ul> <p>→ See FAQ numbers 4-13 below and Section 2 of the Guidelines for Proposals – Round 9, for detailed information regarding these important changes. <b>Annex 1 of the Guidelines lists countries eligible to apply in Round 9 by income level classification.</b></p>
FAQ Intro 3	How can I contact the Global Fund if I have any questions?	Please contact the Global Fund’s proposals hotline through our NEW My Global Fund website: <a href="http://myglobalfund.org/">http://myglobalfund.org/</a>

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<b>ROUND 9 ELIGIBILITY</b>		
<b>→ Eligibility requirements</b>		<a href="#">Back to top</a>
1.	<b>Who can submit a proposal</b> for funding from the Global Fund?	<p>Proposals can be submitted by a:</p> <ul style="list-style-type: none"> <li>• Country Coordinating Mechanism (CCM);</li> <li>• Sub-national Country Coordinating Mechanism (Sub-CCM); or</li> <li>• Regional Coordinating Mechanism (RCM).</li> <li>• Regional Organizations (RO); or</li> <li>• <b>In limited circumstances only</b>, non-CCM applicants.</li> </ul> <p>→ For more information on types of applicants and eligibility requirements, see the <a href="#">Revised Guidelines on the Purpose, Structure and Composition of Country Coordinating Mechanisms and Requirements for Grant Eligibility</a>.</p>
2.	<b>How many Proposal Forms</b> can an applicant submit?	<b>Each applicant may <u>only</u> submit <u>one Proposal Form</u></b> which may include one, two or three diseases, and which may have different nominated Principal Recipients for each disease.
3.	What is an <b>eligible</b> proposal?	<p>In order to be eligible, a proposal must fulfill the two minimum requirements for funding: (i) income level, and (ii) applicant eligibility.</p> <p><i>Full details on these requirements can be found in section 2 of the Round 9 Guidelines for Proposals.</i></p>

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→ Country income level classification		<a href="#">Back to top</a>
4.	Where do applicants find out the <b>income level classification</b> of their country?	The income level classification is included in Annex 1 to the Round 9 Guidelines for Proposals.
5.	What is the impact of a change in income level classification on an application to the Global Fund?	<p>Countries must meet certain eligibility criteria based on their World Bank classification of income level. These eligibility requirements are explained in section 2 of the Round 9 Guidelines for Proposals.</p> <p>New since Round 8, countries that move up from one income category to another will benefit from a one year “grace period”, meaning that their eligibility requirements will remain the same as the previous Round for one year.</p>
6.	Are upper-middle income countries eligible to submit a single country proposal to the Global Fund in Round 9?	<p>Yes. However, only those countries listed in Annex 1 of the Round 9 Guidelines for Proposals, are eligible to submit a proposal, and only for the disease components expressly mentioned for the country. Also, lower middle income and upper middle income countries must meet additional eligibility requirement as explained in section 2 of the Round 9 Guidelines for Proposals.</p> <p>Upper-middle income countries not included in Annex 1 may still be included in a <b>multi-country proposal</b> if the number of upper-middle Income countries is less than 50% of the total number of countries targeted in the proposal.</p>
7.	What is “ <b>cost sharing</b> ”?	Since Round 8, the Global Fund has revised its eligibility rules and moved from the concept of “counterpart financing” to “cost sharing”. Cost sharing means that to be eligible for funding, lower-middle income and upper-middle income countries must demonstrate a certain level of financial contribution, as follows:.

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		<ul style="list-style-type: none"> <li>- Lower-middle-income countries must demonstrate that Global Fund total country support does not exceed 65% of the overall disease program need.</li> <li>- Upper-middle income countries must demonstrate that Global Fund total country support does not exceed 35% of overall disease program need</li> </ul> <p>→ Refer to Section 2 of the Round 9 Guidelines for Proposals</p>
<p>→ <b>Requirements for Coordinating Mechanisms</b> <span style="float: right;"><a href="#">Back to top</a></span></p>		
<p><b>(1) Overview of Coordinating Mechanisms</b></p> <p>→ <i>Note: For these FAQs, CCM, RCM and Sub-CCM applicants are all referred to as Coordinating Mechanisms.</i></p>		
8.	What is a <b>Coordinating Mechanism</b> ?	In these FAQs, the term Coordinating Mechanism (or the abbreviation "CM") refers to a CCM, a RCM, or a Sub-CCM.
9.	Where can applicants find details regarding <b>the CCM or Sub-CCM relevant to their country</b> ?	Please refer to <a href="http://www.theglobalfund.org/programs/search.aspx?search=4&amp;lang=en">http://www.theglobalfund.org/programs/search.aspx?search=4&amp;lang=en</a> and select " <b>Country Coordinating Mechanisms (CCMs)</b> " in the left hand side box under "Program Search". In the right hand side box select your country's name.
10.	How do I know if my region has a RCM already in operation?	Please refer to the same link above, and in the "country" box on the right hand side of the "Program Search" scroll down to entries commencing with "M", and go to RCMs that start with "Multi-country" and then the regional area.
11.	Do all <b>RCM and RO</b> applicants have to coordinate with a national CCM?	<p>Yes. RCM and RO applicants must coordinate with a national CCM.</p> <p>The National CCMs for each country in which a RO or RCM plans to operate must <b>approve the proposal</b> for the application to be eligible for funding</p> <p>RCM and RO applicants are strongly encouraged to read the Round 9 Guidelines for Proposals concerning multi-country applicants before preparing their proposals: <a href="http://www.theglobalfund.org/en/rounds/9/multiple/">http://www.theglobalfund.org/en/rounds/9/multiple/</a></p>

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12.	<p>What are the <b>minimum CM eligibility requirements for CCMs, Sub-CCMs and RCMs before</b> they apply for funding?</p>	<p><b>There are six (6) minimum funding eligibility requirements for CCMs</b> outlined in more detail in the FAQs below</p> <p>→ For more information, see the Global Fund's "<a href="#">Revised Guidelines on the Purpose, Structure and Composition of the Country Coordinating Mechanisms</a>".</p> <p>→ Applicants are also advised to refer to the "Users Guide for CCM Performance Checklist" and the "Clarifications of CCM Requirements" documents available on the Global Fund website at: <a href="http://www.theglobalfund.org/en/ccm/">http://www.theglobalfund.org/en/ccm/</a></p>
<b>(2) Types of CM members and the sectors they represent</b>		
13.	<p>What is meant by <b>non-government sectors</b>?</p>	<p>Non-governmental sectors include <b>civil society</b> (including people living with and/or affected by the three diseases, community based organizations, other not-for profit organizations) and the <b>private sector</b>.</p>
14.	<p>What is the recommended <b>minimum number</b> of members representing <b>non-government sectors</b>?</p>	<p>It is recommended that the membership of a Coordinating Mechanism comprise a <b>minimum of 40%</b> representation from non-government sectors.</p> <p>→ Refer to section 2 of the Round 9 Guidelines for Proposals.</p>
15.	<p>What does the term '<b>key affected populations</b>' mean?</p>	<p>The Global Fund adopts the UNAIDS definition of key affected populations, as follows: women and girls, youth, men who have sex with men, injecting and other drug users, sex workers, people living in poverty, prisoners, migrants and migrant laborers, people in conflict and post-conflict situations, refugees and displaced persons.</p> <p>CCMs are recommended to include representatives from key affected populations in their membership.</p>

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16.	What does the Global Fund mean when using the term <b>private sector</b> ?	<p>The Global Fund defines private sector as <b>for-profit organizations, their representative bodies, and foundations they establish</b>. The Round 9 Guidelines for Proposals provide a clear definition of the specific type of organizations, bodies and foundations that the Global Fund considers to be <b>private sector</b> bodies.</p> <p>→Refer to section 4 of the Round 9 Guidelines for Proposals.</p>
17.	Why is the <b>private sector a key player</b> in the fight against HIV/AIDS, tuberculosis and malaria?	<p>The three diseases affect the active population in society, and therefore have a significant impact on business and the communities relying on income flowing there from. By establishing HIV/AIDS, tuberculosis and malaria workplace and community outreach programs, the private sector has demonstrated that it can successfully contribute to the fight against the three diseases. The private sector brings experience, specific skills and competencies, thereby adding value to the design and implementation of proposals submitted to the Global Fund.</p>
18.	What is “co-investment”?	<p>“Co-investment” refers to the harmonized and coordinated joint investment of public and private resources with the common objective of improving equitable access to the provision of HIV/AIDS, tuberculosis or malaria services. Resources and possible contributions of the private sector are, for example, existing business infrastructures and facilities (including companies’ in-house hospitals), but also business and management expertise that can be applicable to managing health programs.</p> <p>A guide to co-investment, "Making Co-Investment a Reality", and <u>case studies</u> are available at:  <a href="http://www.ilo.org/public/english/protection/trav/aids/publ/gtzgbccoinvest.pdf">http://www.ilo.org/public/english/protection/trav/aids/publ/gtzgbccoinvest.pdf</a></p>
<b>(3) The six minimum eligibility requirements for CCM, RCM and Sub-CCMs</b>		
19.	Do all applicants have to demonstrate	No. Applicants that were determined compliant with the six minimum requirements in

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	<p>their compliance with the six minimum requirements in Round 9?</p>	<p>Round 7 and/or Round 8 do not need to demonstrate compliance with all six requirements in Round 9. All other applicants must demonstrate compliance with the six minimum requirements.</p> <p>However, all applicants must demonstrate that they are compliant with the Round 9 proposal specific requirements (i.e., the process to transparently solicit and review submissions for possible integration into the proposal form, the process to ensure input of stakeholders in proposal development, and the process to transparently select the Principal Recipient(s).</p>
<p>20.</p>	<p><u>CM Requirement 1:</u> How do applicants show that <b>CM members representing the non-government sectors</b> have been selected by their own sectors, based on <b>each sector's own</b> documented and transparent process?</p>	<p>Applicants should provide written material (including minutes of sector meetings, letters and other documents, and where available, the voting records of the sector meetings) <b>from the sectors themselves</b> demonstrating that the sector met and transparently selected their own representative.</p> <p>→ Applicants are also advised to refer to the "Users Guide for CCM Performance Checklist" and the "Clarifications of CCM Requirements" documents available on the Global Fund website at: <a href="http://www.theglobalfund.org/en/ccm/">http://www.theglobalfund.org/en/ccm/</a></p>
<p>21.</p>	<p><u>CM Requirement 2:</u> How do applicants show <b>representation of persons living with and/or affected by the disease(s)</b>?</p>	<p>Applicants should provide written material (including minutes of sector meetings, letters and other documents) that the <b>network(s) and other organization(s) working with, representing, supporting and/or providing services to persons living with and/or affected by the disease(s)</b> met as a sector and selected their own representative.</p> <p>→ Applicants are advised to refer to the "Users Guide for CCM Performance Checklist at: <a href="http://www.theglobalfund.org/en/ccm/">http://www.theglobalfund.org/en/ccm/</a> and the <a href="#">Clarifications on CCM Requirements</a>.</p>

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22.	Do the representatives <b>themselves have to be living with or affected by the disease(s)</b> to be an eligible representative for the sector?	<p>No. However, the Global Fund <b>strongly encourages the involvement</b> of people living with and/or affected by the disease(s) at the CM level to ensure that the interests of these persons/groups are fully represented. However, people living with and/or affected by the disease(s) that are sector representatives <b>do not have to disclose their status</b> to be representatives of the sector if this disclosure would lead to stigma or other challenges.</p> <p>→ Applicants are advised to refer to the "Users Guide for CCM Performance Checklist at: <a href="http://www.theglobalfund.org/en/ccm/">http://www.theglobalfund.org/en/ccm/</a> and the <a href="#">Clarifications on CCM Requirements</a>.</p>
23.	<p><u>CM Requirement 3:</u> How do applicants show that the CM has put in place <b>documented and transparent processes to (a) solicit and (b) review submissions for possible integration into the one proposal?</b></p>	<p>There is no single way to demonstrate this. However, some options include attaching to the proposal <b>copies of announcements</b> by the CM to the public inviting submissions for inclusion in the CM's consolidated proposal. Applicants can also attach the signed minutes from the CM meeting(s) at which submissions were reviewed and discussed for possible integration in the one (1) consolidated proposal.</p> <p>→ Applicants are advised to refer to the "Users Guide for CCM Performance Checklist at: <a href="http://www.theglobalfund.org/en/ccm/">http://www.theglobalfund.org/en/ccm/</a> and the <a href="#">Clarifications on CCM Requirements</a>.</p>
24.	<p><u>CM Requirement 4:</u> How do applicants show that the CM has put in place <b>documented and transparent processes to (a) nominate the PR(s) and (b) oversee program implementation?</b></p>	<p>There is no single way to demonstrate this. However, some options include attaching to the proposal <b>copies of announcements</b> by the CM inviting proposals from potential implementing agencies to be considered as PRs in the CM's consolidated proposal. Applicants can also attach <b>the signed minutes of CM meetings, including CM Secretariat meetings, where the process for selecting the PR is described. (records of decisions about PR nominations, criteria used for the selection process, results of votes, definitions of what constitutes a quorum for selection of the PR).</b></p> <p><b>For program oversight, applicants can attach to the proposal a description of how the CCM will oversee the PR(s) implementation responsibilities and how the CCM will be involved in planning and decisions during implementation. This may also be in the form of a CCM work plan describing process for overseeing program</b></p>

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		<p><b>implementation.</b></p> <p>→ Applicants are advised to refer to the "Users Guide for CCM Performance Checklist at: <a href="http://www.theglobalfund.org/en/ccm/">http://www.theglobalfund.org/en/ccm/</a> and the <a href="#">Clarifications on CCM Requirements</a>.</p>
25.	<p><u>CM Requirement 5:</u> How do applicants show that the CM has put in place <b>documented and transparent processes to ensure the input of a broad range of stakeholders in (a) proposal development and (b) grant-oversight process?</b></p>	<p>There is no single way to demonstrate this. However, some options include attaching to the proposal minutes of CM meetings documenting how non-CCM members participated in CCM committees and/or proposal review panels or program oversight panels and/or newspaper or email announcements (with distribution lists) inviting stakeholders to participate in proposal development. In addition, the applicant may attach the <b>CM accepted rules of procedures for the CM, and the minutes from the CM meeting where the policies of the CM were accepted.</b></p> <p>→ Applicants are advised to refer to the "Users Guide for CCM Performance Checklist at: <a href="http://www.theglobalfund.org/en/ccm/">http://www.theglobalfund.org/en/ccm/</a> and the <a href="#">Clarifications on CCM Requirements</a>.</p>
26.	<p><u>CM Requirement 6:</u> How do applicants show that they have in place a <b>documented policy to mitigate a potential conflict of interest</b> where the Chair and/or Vice Chair of the CM are from the <b>same entity</b> as the nominated PR?</p>	<p>There is no single preferred version of a conflict of interest policy. However, the <a href="#">CCM Guidelines</a> set out the kinds of deliberations and decisions that the CCM Chair or Vice Chair should excuse themselves from if they are from the same entity as any PR for any Global Fund grant. These are considered a <b>minimum standard.</b></p> <p>→ Applicants are advised to refer to the "Users Guide for CCM Performance Checklist at: <a href="http://www.theglobalfund.org/en/ccm/">http://www.theglobalfund.org/en/ccm/</a> and the <a href="#">Clarifications on CCM Requirements</a>.</p>
27.	<p>What does <b>same entity mean</b> when considering if the CM must have a conflict of interest plan?</p>	<p>It means the same body. If government, it means the same ministry or department, and includes a connected ministry (such as finance or treasury, in circumstances where the finance or treasury ministry is receiving grant funds and passing these through to another</p>

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		ministry, and the PR is the ministry or department receiving the grant funds from the finance or treasury ministry).
28.	<b>Should other</b> CM members (including SRs on the CM) also be subject to a <b>Conflict of Interest Policy</b> ?	<p>Yes, it is recommended that a CM's Conflict of Interest Policy be broad enough to deal with all potential conflicts, across all sectors represented on the CM, including potential conflicts with sub-recipient relationships.</p> <p>→ For more information, please see the <a href="#">Clarifications on CCM Requirements</a>.</p>
29.	Can CCMs, RCMs or Sub-CCMs apply to the Global Fund to use grant funds for financial support to <b>strengthen the operations of their Coordinating Mechanism</b> ?	<p>No. <b>CCM operating costs are no longer to be included in a proposal.</b> However CCMs, sub-CCMs and RCMs can apply for funding for CCM costs by contacting the Secretariat at <a href="mailto:ccm@theglobalfund.org">ccm@theglobalfund.org</a>.</p> <p>→ Refer to the <i>Guidelines for CCM Funding</i> available at <a href="http://www.theglobalfund.org/en/ccm/">http://www.theglobalfund.org/en/ccm/</a></p>
30.	Does the <b>CM have to approve the proposal</b> before it gets sent to the Global Fund?	<p>Yes. The CM is the custodian of the proposal during its development, and continues to have an ongoing important role in overseeing implementation and harmonization with other programs during the program term. It is the CM that applies for Phase 2 funding.</p> <p>For these reasons, it is <b>strongly recommended</b> that the whole CM has at a minimum not less than one (1) complete week to read through the single consolidated CM proposal before the CM meets to approve it and submit it to the Global Fund. This recommendation is made to ensure that the proposal addresses relevant in-country gaps, and is in line with current disease strategies as supported by a broad range of in-country partners and stakeholders. <b>All CM members should sign the proposal to certify that they have reviewed the final proposal and endorse it.</b></p> <p>→ For more information, see the <i>Round 9 Guidelines for Proposals, section 2</i>.</p>

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31.	What does it mean to <b>obtain the "approval"</b> of the CCM, Sub-CCM or RCM?	<p>It means that:</p> <p>(a) all the <b>contact details for all members</b> of the CCM, Sub-CCM or RCM must be included in the <u>Attachment C to the Proposal Form</u> → titled "Membership details of CCM, Sub-CCM or RCM"; and</p> <p>(b) <b>ALL members</b> sign "Attachment C" to confirm that they considered the proposal and approve it.</p> <p>→ <i>More information on proposal endorsement can be found in the Round 9 Guidelines for Proposals, section 2.</i></p>
32.	What happens if a <b>CCM, RCM or Sub-CCM member is unable to sign</b> an applicant's proposal?	<p>A CCM, RCM or Sub-CCM member who is either unable or objects to signing the proposal must inform <b>the Global Fund in writing of the reasons for doing so</b>. The CCM, RCM or Sub-CCM should also indicate that a member has not approved the proposal when submitting the proposal and, if they know the reason, explain this.</p> <p>→ There may be good reasons for a member not to sign a proposal (they are unwell or absent from the country for an extended period). Otherwise, it is expected that all members sign the proposal to show that the proposal has been broadly discussed and is supported by in-country stakeholders.</p> <p>→ <i>More information on proposal endorsement can be found in the Round 9 Guidelines for Proposals, section 2.</i></p>
<b>→ Non-CM applicants</b>		<a href="#">Back to top</a>
33.	I represent a local <b>Non-Governmental Organization (NGO) or a Private Sector Organization,</b>	<p><b>You should FIRST contact the CCM in your country/ or RCM in your region</b> to discuss funding opportunities with them. This is because many eligible countries are already funded by the Global Fund through their Country Coordinating Mechanism (CCM, Sub-</p>

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	and would like to apply for funding from the Global Fund. What should I do?	CCM or RCM).  <b>Importantly</b> , unless an NGO is from a country that satisfies one or more of the <b>three eligibility criteria for Non-CCM proposals</b> , it is <u>not eligible</u> to send a proposal directly to the Global Fund.
34.	How do we apply to the Global Fund when <b>no 'CCM' exists</b> in our country?	There are <b>two (2) categories of cases</b> in which the Global Fund anticipates that there is no National Coordinating Mechanism ( <b>whether termed a 'CCM'</b> , or whether it has a different name because it is an existing multi-stakeholder broadly representative body).  These are:  <b>1. Small Island Developing States</b> are not required to form their own national CCM but can form a Regional Coordinating Mechanism (RCM) to prepare and submit a proposal. RCMs must meet the same guiding principles and meet the same minimum eligibility requirements as national CCMs. Individual organizations in Small Island Developing States should contact the RCM for inclusion within their consolidated proposal.  <b>2. Countries where at least one (1) of the following applies:</b> <ul style="list-style-type: none"> <li>i. A country, at the national level, which is in conflict, facing natural disaster or in a complex emergency situations;</li> <li>ii. A country that suppresses or has not established partnerships with civil society and non-governmental organizations; or</li> <li>iii. A state without a national government, and not being administered by a recognized interim administration.</li> </ul>
35.	Can I apply directly to the Global Fund if I can <b>provide clear documented evidence</b> of one of the	If one or more of the above three (3) <b>limited exceptions</b> apply, the relevant organization may apply directly to the Global Fund, provided that they <b>clearly and fully explain why the proposal could not be considered under a national CCM process</b> (i.e. which of the

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	above three limited exceptions?	three exceptions apply and how). If such a proposal is submitted, the Global Fund will consider the reasons stated and determine whether the proposal will be reviewed for technical merit.
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<b>→ Submitting a proposal</b>		<a href="#">Back to top</a>
36.	Where are the Round 9 application <b>Forms and Guidelines for Proposals</b> ?	<b>All key documents related to the Round 9 Call for Proposals</b> can be found at <a href="http://www.theglobalfund.org/en/rounds/9/">http://www.theglobalfund.org/en/rounds/9/</a>
37.	When is the <b>deadline for applications</b> for Round 9?	<p>The <b>deadline</b> for submission of Round 9 is <b>12h00 Geneva Time, Monday 1 June 2009</b>.</p> <ol style="list-style-type: none"> <li>1. An <u>electronic <b>WORD</b> (not PDF) version of the proposal</u> (comprising section 1 and 2 and relevant disease component section 3 to 5 and if relevant, section 4B and 5B within one of the disease component section), EXCEL documents (for Attachments A, B and C, and the detailed budget) and WORD or EXCEL documents for the work plan, must be received by the Global Fund, in the inbox of <a href="mailto:proposals@theglobalfund.org">proposals@theglobalfund.org</a> by this time and date.</li> <li>2. The <u>identical signed printed paper version</u> of the <b>same</b> proposal must have been sent (that is, has a postal stamp or courier collection voucher dated) not later than Monday 1 June 2009.</li> </ol> <p>Late proposals are disqualified and will not be considered.</p> <p>Applicants are encouraged not to wait until the last minute to submit their proposal. Proposals will be accepted at any time in between the call for proposals (1 October 2008) and the <b>deadline for submissions</b> (1 June 2009), and applicants should <b>submit their</b></p>

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		<b>proposals as soon as they are finalized and complete.</b>
38.	Should the <u>current level</u> of available Global Fund resources impact an applicant's decision on what is an appropriate Round 9 request for funding?	No. Rather, applicants should: (a) undertake a program and financial gap analysis to determine the level of existing and planned coverage towards nationally desired disease prevention and control outcomes; and (b) Request funding with regard to current and planned capacity.
39.	What will happen to any Round 9 proposals recommended for funding at the 20 <sup>th</sup> Board meeting if there are <b>insufficient available resources</b> ?	Should this situation materialize, the Global Fund will, at the time it announces its decision regarding the proposals recommended by the TRP for funding, indicate the <b>prioritization it will apply</b> to the approval of funding for proposals.  At this time, the Board may, at its sole discretion, carry over any TRP recommended proposals for which funding is not available, for approval at a later date. In all previous Rounds all TRP approved proposals were fully funded. However, the Global Fund cannot give any assurances at this time that all TRP recommended proposals will be funded in Round 9.
<b>→ After proposal submission – Screening and Technical Review Panel (TRP) review</b>		<a href="#">Back to top</a>
40.	<b>What happens</b> to an application after it has been submitted?	Starting June 2 <sup>nd</sup> , 2009, the Global Fund will <b>screen proposals for eligibility</b> to ensure that CCM, Sub-CCM and RCM proposals demonstrate compliance with the six minimum eligibility requirements, and that all proposals have been appropriately <b>endorsed</b> . Proposals determined ineligible by the Global Fund will not be considered further.  The Global Fund <b>may contact applicants</b> to seek clarifications on eligible proposals. <b>Importantly</b> , missing information (for example a missing detailed year 1-2 budget or target and indicators table) is <u>not</u> a clarification but an incomplete proposal.

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41.	Why is it important to <b>give detailed contact information</b> for two people in the application?	<p>If the Secretariat has questions, <b>the applicant may be contacted for clarifications.</b></p> <p>The person identified as a contact must therefore be <b>available and ready</b> to answer questions in the weeks immediately following the deadline for proposals. Please make sure that the contact information provided is detailed and correct.</p>
42.	What happens <b>after proposals are screened</b> for eligibility?	<p>All eligible proposals will be <b>forwarded to the TRP</b> for technical evaluation. The TRP will then <b>make recommendations</b> for funding to the Global Fund Board.</p>
43.	What is the <b>TRP</b> ?	<p>The TRP is an <b>independent body comprised of international experts</b> in HIV/AIDS, tuberculosis, malaria, and cross-cutting issues. The TRP meets to review all eligible proposals then makes recommendations for funding to the Board.</p> <p>→ For more information on the TRP, refer to “Criteria for TRP review of proposals” in Annex 2 of the Round 9 Guidelines for Proposals or see <a href="http://www.theglobalfund.org/en/trp/">http://www.theglobalfund.org/en/trp/</a>.</p>
44.	What does the <b>TRP do</b> ?	<p>The TRP <b>reviews proposals</b> according to the criteria of soundness of approach, feasibility and potential for sustainability.</p> <p>→ Refer to the Round 9 Guidelines for Proposals, Annex 2, for more specific information about these criteria.</p>

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45.	<p><b>What information</b> does the TRP consider when reviewing each component?</p>	<p>In addition to reviewing the overview information in sections 1-3, the TRP looks at the detailed <b>description of the planned component</b> in section 4 and the year 1 and 2 detailed budget; the Work Plan and intended performance outcomes (to be set in the Targets and Indicators table) to see if they are consistent and feasible.</p> <p>The TRP also considers a <b>broad range of other information</b>, such as performance of existing Global Fund grants and information provided by technical partners (including, where available, UNAIDS, WHO and the World Bank). In making funding decisions, the TRP relies on the individual expertise of its members. Previous TRP comments on weaknesses and areas of improvements from earlier Rounds are also taken into consideration.</p>
46.	<p>Where can I find <b>information on prior performance for existing Global Fund grants</b> for the same component(s) to be applied for in Round 9?</p>	<p>Information can be found in the <b>Grant Performance Report (GPR)</b>. GPRs are available at the country page for each grant, and are typically updated after each disbursement request (including during Phase 2).</p> <p>Also, if a grant has completed the <a href="#">Phase 2</a> process, information can also be found in the <b>Grant Score Cards (GSC)</b> for each grant. The GSCs are available on the Global Fund website, at <a href="http://www.theglobalfund.org/en/funds_raised/gsc/">http://www.theglobalfund.org/en/funds_raised/gsc/</a></p> <p>Applicants may (at their sole discretion and without endorsement from the Global Fund) also wish to have reference to the Aidspace guide titled "An Analysis of Strengths and Weaknesses in Rounds 3-6 based on TRP comments" at the following link: <a href="#">Webpage for Aidspace Guide's</a>, which, from Aidspace's perspective, discusses lessons learned.</p>
47.	<p><b>How</b> does the TRP provide its recommendations?</p>	<p>The TRP provides its comments in writing, in a document titled "<b>TRP Review Form</b>". The TRP Review Form outlines the main strengths and weaknesses of the proposal, and gives</p>

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		<p>the TRP recommendations to the Board.</p> <p><b>There are four (4) categories of TRP recommendations:</b></p> <p>Category 1: Recommended for approval without changes (no or minor clarifications);  or  Category 2: Recommended for approval provided that clarifications or adjustments are completed within a limited timeframe; or  Category 3: Not recommended for approval in its present form but encouraged to resubmit following major revision; or  Category 4: Rejected</p>
48.	Are the TRP Review Forms made public in the Global Fund Website?	No. TRP Review Forms are not publicly disclosed. The Global Fund provides applicants with their TRP Review Form.
49.	Where can applicants find the TRP Review Forms?	<b>All applicants</b> have been sent, by email, the TRP Review Form for each component after the Board decision on funding at the end of each Round. Interested stakeholders should contact the CCM, RCM or Sub-CCM (as relevant) to obtain copies.
50.	<b>When will applicants know the outcome of the TRP's recommendations?</b>	Preliminary notification to applicants of the TRP's funding recommendations on Round 9 proposals will be made after the TRP convenes. This is not a final decision, as the Board retains the authority to make a decision different to the TRP recommendations. Final notifications to all Round 9 applicants on the outcome of the Board's consideration of TRP funding recommendations will be made following the Board meeting.
<b>THE PROPOSAL FORM</b>		

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→ Proposal form		<a href="#">Back to top</a>
51.	Are there any <b>automated features</b> in the Round 9 Proposal Form?	Yes. A small number of 'macros' are included in the Proposal Form to: (i) Maintain the layout and formatting as text is included in each box; (ii) Only permit 'one' box to be 'checked' if the choice can only be one option.
52. <b>UPDATED</b>	Can an applicant use the <b>application form from previous Rounds</b> to submit a proposal for Round 9?	No. Applicants must only <b>use the 'Round 9' proposal forms</b> for their proposal. However, if the proposal was a resubmission of the Round 8 disease proposal, applicant may use the Round 8 proposal form. If that was the case, please refer to the FAQs on Resubmissions for more details.
53.	Does an applicant have to provide an <b>English translation</b> of a proposal?	<b>No, applicants can choose</b> whether to submit their proposals in English, French, Spanish, Arabic, Russian or Chinese.  → The technical review of the application will be done in English. Unless the applicant sends their own identical translation of the proposal to the Global Fund by the 1st of June 2009 closing date, the Secretariat will translate non-English proposals and mandatory attachments (but not large annexes) into English.
54.	Should applicants include <b>lessons learned from implementation challenges</b> in earlier Rounds in their Round 9 proposals?	It is <u>very important</u> to incorporate lessons learned from earlier Rounds in your proposal because:  (a) lessons learned from past capacity constraints are important inputs into planning for new resources, and avoiding potential future bottlenecks; and  (b) <b>the TRP will take into account performance under <u>existing programs</u></b> (including Global Fund grants and other key donor funded loans/grants).

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		<p>→ <i>To assist applicants to address these very important issues, the Round 9 Proposal Form has specific questions on these topics in section 4.</i></p> <p>Applicants should discuss how they have addressed prior and current in-country challenges in planning, implementation, sub-recipient disbursement, etc. in the Round 9 proposal.</p>
55.	What does <b>additionality</b> mean in the context of requests for funding?	<p>Additionality means that the Global Fund only supports proposals that <b>add to funds already being spent (or committed)</b>, but does not replace funds. Furthermore, there are certain minimum eligibility requirements regarding the proportion of funding that may be requested from the Global Fund from lower-middle and upper-middle income countries.</p> <p>→ <i>For more details, please refer to the Round 9 Guidelines for Proposals section 2.</i></p>
56.	What is meant by ‘ <b>Technical and management assistance</b> ’ in section 4 of the Proposal Form?	<p><b>Technical and/or management assistance (TMA) may include items such as</b> consultants and other human resources that provide assistance on planning for the technical and management aspects of anticipated implementation challenges and/or monitoring and evaluation and procurement and supply management activities during the program term. TMA may be planned to benefit the PR(s) and/or key sub-recipients at any time during the program.</p> <p><b>A few non-exhaustive examples of where TMA may be useful are:</b></p> <ul style="list-style-type: none"> <li>• If a program intends to fund the purchase of medicines to treat multi-drug resistant tuberculosis in year 3, but the country has no prior experience in this area, TMA may be useful in years 1-2 to help the PR to plan for management training and procurement and supply issues arising.</li> </ul>

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		<ul style="list-style-type: none"> <li>In expanding HIV/AIDS treatment to different regions, a PR may need TMA to help in matters such as assessing human resource capacity to provide treatment in the regions, assessing training needs, and improving procurement and supply management, etc.</li> <li>If an applicant wishes to fund expanded access to new malaria treatments (e.g. ACTs), TMA may be needed to help plan for successful implementation of the new treatment regimes at the same time as discontinuing other regimes.</li> </ul>
57.	Does all TMA have to be budgeted for as a final cost?	No. Some organizations (e.g. civil society or the private sector) may, if approached by CMs, offer to provide medium to long term TMA as a partnership model to support the response to the disease. Some possible partners may be accessible through the Global Business Coalition (GBC), focal point for the Private Sector Delegation at the Global Fund. Email: <a href="mailto:psd@businessfightsaids.org">psd@businessfightsaids.org</a>
<b>→ Regional Proposals</b>		<a href="#">Back to top</a>
58.	Should multi-country applicants use the same Proposal Form to apply for Round 9 as single country applicants?	No, since Round 8 there are specific Proposal Form and Guidelines for multi-country applicants. These are available on the Global Fund website at the following link: <a href="http://www.theglobalfund.org/en/rounds/9/multiple/">http://www.theglobalfund.org/en/rounds/9/multiple/</a>
59.	Do all regional proposals (submitted by an RCM or a RO ) have to be endorsed by all the CCM of the country targeted in the Regional Proposal?	Yes. To ensure that the planned interventions in a multi-country proposal are understood and, as relevant, consistent with national programs, the <u>membership of each CCM</u> must agree to endorse the regional proposal. The CCM is not approving the budget, or the specific interventions. Rather, the CCM is endorsing the overall approach so far as the multi-country proposal relates to that country.

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		For more information regarding CCM endorsement of regional proposal, please refer to the Round 9 Guidelines for proposals.
<b>→ Disease Specific Questions</b>		<a href="#">Back to top</a>
60.	Who should I contact to find out whether the interventions that a CCM, RCM or Sub-CCM is planning to include in a Round 9 application are the type of interventions that are appropriate?	<p>Your technical partners will be the most helpful source of information.</p> <p>In addition, Annex 3 to the Round 9 Guidelines for Proposals provides information on the types of activities/interventions that may be included in a proposal. However, Annex 3 is a guide only, not an exhaustive list.</p>
61.	Are there agencies that may be able to provide more information related to <b>Sexual and Reproductive Health in respect to HIV and Malaria</b> ?	<p>You may consider contacting one or more of the organizations from the following non-exhaustive list:</p> <ul style="list-style-type: none"> <li>• Global AIDS Alliance</li> <li>• Interact</li> <li>• International HIV/AIDS Alliance</li> <li>• International Planned Parenthood Foundation</li> <li>• Population Action International</li> <li>• Roll Back Malaria Partnership</li> <li>• WHO, including the Global Malaria Programme</li> <li>• UNAIDS</li> <li>• UNFPA</li> </ul> <p>Applicants may also wish to contact a variety of other technical assistance partners for further information.</p>
62.	Is there any <u>guidance</u> from technical partners on including <b>Sexual and</b>	Yes. Applicants may (at their sole discretion and without endorsement from the Global Fund) also wish to have reference to the Global AIDS Alliance Guide entitled: "Advocacy

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	<b>Reproductive Health in HIV and Malaria Programs?</b>	Action Plan: Integration of Sexual and Reproductive Health Within the HIV and Malaria Components of Country Coordinated Proposals: Global Fund Round 7 " available at the following link: <a href="http://aidsalliance.3cdn.net/388fc7a60d314bbdfe_fym6bnzwc.pdf">http://aidsalliance.3cdn.net/388fc7a60d314bbdfe_fym6bnzwc.pdf</a>
63.	Is there any guidance from technical partners on including <b>Children and HIV</b> specific issues in prevention and control strategies?	<p>Yes.</p> <p>→ For more information, applicants may wish to refer to the following website: <a href="http://www.unicef.org/uniteforchildren/makeadifference/makediff_29275.htm">http://www.unicef.org/uniteforchildren/makeadifference/makediff_29275.htm</a></p> <p>→ Applicants may (at their sole discretion and without endorsement from the Global Fund) also wish to have reference to the Aidspan Guide entitled "Guide to Developing Global Fund Proposals to Benefit Children Affected by HIV/AIDS" at: <a href="http://aidspan.org/documents/guides/aidspan-caba-guide-en.pdf">http://aidspan.org/documents/guides/aidspan-caba-guide-en.pdf</a></p>
64.	Is there any publicly available information on the interactions between <b>HIV and Malaria</b> ?	<p>The interaction between malaria and HIV is being publicly discussed in a number of articles and web-based services. An example is available at: <a href="http://www.kaisernetwork.org/daily_reports/rep_index.cfm?hint=4&amp;DR_ID=41551">http://www.kaisernetwork.org/daily_reports/rep_index.cfm?hint=4&amp;DR_ID=41551</a></p> <p>If this discussion is relevant to an applicant's in-country circumstances, applicants may wish, at their sole discretion, contact partners for further information.</p> <p>Relevant (but not exclusive) partners may include: WHO, the Global Malaria Programme and the Roll Back Malaria Partnership.</p>
<b>→ Health systems strengthening questions</b>		<b><a href="#">Back to top</a></b>
65.	Can applicants include <b>Health Systems Strengthening requests</b> in Round 9 proposals?	Yes. As in prior Rounds, applicants are <b>strongly encouraged</b> to apply for health systems strengthening needs that are essential to reducing the impact and spread of the disease(s) targeted in the applicant's proposal.

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		<p>→ For further information, please refer to the Round 9 Guidelines for Proposals and the Fact Sheet, <i>The Global Fund's Approach to Health Systems Strengthening</i> at: <a href="http://www.theglobalfund.org/en/rounds/9/faq/">http://www.theglobalfund.org/en/rounds/9/faq/</a></p>
66.	Where should applicants include Health Systems <b>Strengthening needs</b> in a Round 9 proposal?	<p>As in prior Rounds, the Global Fund encourages applicants, wherever possible, to integrate their responses to these health system weaknesses and gaps within the relevant disease component(s) of their proposals.</p> <p>All responses to health systems weaknesses that are specific to only one disease must be included in the implementation strategy for that disease only.</p> <p>However, the Global Fund also recognizes that certain cross-cutting responses may not always be easily included within disease program strategies. Where this is the case, applicants may request funding for the necessary HSS cross-cutting interventions through a distinct but complementary section (section 4.B, the 'cross-cutting HSS section'<sup>1</sup>) in only one of the disease components applied for in the proposal.</p>
67.	How should HSS interventions that <b>benefit more than one component (HSS Cross-cutting interventions)</b> be included in Round 9 proposals?	<p>Detailed information on how to include HSS interventions that benefit more than one disease is provided in the Fact Sheet: <i>The Global Fund's Approach to Health Systems Strengthening</i>, available in the Global Fund website at the following link: <a href="http://www.theglobalfund.org/en/rounds/9/faq/">http://www.theglobalfund.org/en/rounds/9/faq/</a></p>
68.	What is meant by the term " <b>HSS</b>	This term refers to areas of work that impact on the functioning of the health system as it

<sup>1</sup> The relevant sections comprise section 4B and 5B, and are available from the Global Fund's call for proposals website.

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	<b>interventions"</b> in the Round 9 documentation?	<p>relates to the three diseases.</p> <p>An intervention may comprise of a number of specific HSS activities, including training of health workers, purchase and maintenance of important diagnostic equipment, and development of strengthened procurement systems.</p> <p>Applicants should refer to the broad list of examples of HSS interventions in annex 3 of the <a href="#">Round 9 Guidelines for Proposals</a>.</p>
69.	Does WHO have any information on health systems strengthening that may be helpful during proposal development?	<p>Applicants may refer to information WHO website at the following links:</p> <ul style="list-style-type: none"> <li>• WHO portal: <a href="http://www.who.int/globalfund/en/">http://www.who.int/globalfund/en/</a></li> <li>• WHO HSS webpage: <a href="http://www.who.int/healthsystems/en/">http://www.who.int/healthsystems/en/</a></li> <li>• WHO HSS webpage – R9 support: <a href="http://www.who.int/healthsystems/gf_round9/en/index.html">http://www.who.int/healthsystems/gf_round9/en/index.html</a></li> </ul>
70.	Is there <b>other information published on health systems strengthening (HSS)</b> that applicants can refer to in order to consider relevant health systems gaps and HSS needs?	<p>Applicants may (at their sole discretion and without endorsement from the Global Fund) refer to information prepared by the Physicians for Human Rights' group at the following link: <a href="http://physiciansforhumanrights.org/library/report-2007-02-27.html">http://physiciansforhumanrights.org/library/report-2007-02-27.html</a></p>
71.	Is there a way to <b>validate and improve</b> statistical information that is relied upon by an applicant to present information on health services?	<p>Many countries are concerned about the validity of routine administrative statistics on human resources for health and health services. In such cases, Service Availability Mapping may provide a practical approach to collecting and presenting basic information on health services: health infrastructure, human resources, and services offered. Refer to: <a href="http://physiciansforhumanrights.org/library/report-2007-02-27.html">http://physiciansforhumanrights.org/library/report-2007-02-27.html</a></p>
72.	If disease specific health systems capacity issues are <b>impacting</b>	<p>Yes. Applicants are strongly encouraged to review section 4.3 and section 4.5 of the <a href="#">Round 9 Guidelines for Proposals</a> and the Proposal Form in preparing any request for</p>

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	<b>performance</b> of the national program, is it possible to apply for funding for HSS interventions within the relevant disease component?	funding for HSS within a disease component.
73.	Where can applicants find information on human resources strengthening to improve HIV/AIDS, TB and malaria outcomes	Applicants may refer to WHO website at the following link: <a href="http://www.who.int/healthsystems/gf_hrh_guidelines08.pdf">http://www.who.int/healthsystems/gf_hrh_guidelines08.pdf</a>
74.	Can requests for HSS support be a significant part of a Round 9 proposal?	Yes. HSS can be a significant part of the proposal, provided that the proposal also contains disease specific interventions and the HSS interventions are essential to ensure that the disease specific interventions will be achieved. That is, a Round 9 proposal cannot be a proposal which is composed solely of HSS. If the proposal is predominantly HSS, the gap analysis and rationale for the HSS interventions must be clear and well linked to the achievement of the disease interventions.
75.	Are HSS Interventions only for public sector?	No. The Global Fund recognizes that non-government organizations, the private sector and communities affected by the disease(s) are each an integral component of the Health System in a country, as is the public sector. Applicants are encouraged to consider measures which strengthen public, non-governmental, communities and private sector systems to ensure greater impact of prevention and control strategies.
76.	Which areas of <b>human resources support</b> are typically integrated with HSS programs?	Please refer to the M&E Toolkit available at: <a href="http://www.theglobalfund.org/en/me/">http://www.theglobalfund.org/en/me/</a>

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→ Monitoring and evaluation questions		<a href="#">Back to top</a>
77.	Where does an applicant identify the <b>intended performance indicators over the proposal term</b> (regular performance-based funding measures) and <b>programmatic outcomes for the program term</b> ?	<p>This information must be provided in Attachment A to the Proposal Form (Performance Framework) on a per-disease component basis. <i>Please refer to section 4 of the Round 9 Guidelines for Proposals</i></p> <p><b>In Round 9</b> "Attachment A" has been separated into 3 documents, one for each of the diseases. Each document (available for download at the following webpage <a href="http://www.theglobalfund.org/en/rounds/9/">http://www.theglobalfund.org/en/rounds/9/</a>) has instructions on a separate worksheet of the Microsoft Excel file, to assist with completion.</p>
78.	<b>How do I use the Attachment A?</b>	<p>Applicants can either use the pre-filled list of potential indicators where relevant to their proposal, or include their own indicators in the table.</p> <p>→ <i>Refer to the instructions in the Microsoft Excel file for help on completing Attachment A, and also overwriting the indicators if appropriate.</i></p>
79.	<b>How many indicators</b> should an applicant include in a proposal?	<p>Although there is no fixed number, it is recommended that each disease component have <b>between about 8 and 18 indicators in total.</b></p> <p>In Phase 1 (years 1 to 2 of the proposal) it is anticipated that the indicators will be focused at output level (especially people reached by services, service points strengthened or established and people trained), with additional focus on outcome and impact indicators during Phase 2 (years 3 and beyond).</p> <p>It is also anticipated that more input and process focused indicators will be included in the detailed M&amp;E Plan as measures of preliminary activities supporting implementation.</p>
80.	Do all regular performance reporting targets in Attachment A to the	<p>No. For tuberculosis particularly, there are some targets that are annual only (e.g. Number and percentage of new smear positive TB cases detected, as these might have to be</p>

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	Proposal Form have to be <b>cumulative</b> ?	revised based on latest available estimates). Where appropriate to the country/disease burden context, applicants must <b>clearly describe</b> for <b>each</b> relevant indicator and target why they are not using cumulative targets in the "Methods and frequency of data collection" box in Attachment A.
81.	Are there any <b>mandatory "Global Fund" indicators</b> ?	<p>No. The Global Fund does, however, rely heavily on the <b>Top 10 Indicators for Routine Reporting</b> (<i>table 5 in the M&amp;E Toolkit</i>) and the <b>Top 10 Outcome and Impact Indicators</b> (<i>table 6 in the M&amp;E Toolkit</i>) to collate data to report on overall impact of programs supported by the Global Fund (as supported by each of the partners named on the front cover of this multi-agency toolkit).</p> <p><b>Applicants are therefore requested to select from the "Top 10" lists</b> where appropriate to the planned interventions and overall planned outcomes. Each of the disease specific "Attachment A" documents has these and other indicators routinely reported on to assist applicants in their indicator selection.</p> <p>→ Please refer to <a href="http://www.theglobalfund.org/en/me/">http://www.theglobalfund.org/en/me/</a> for information on the M&amp;E Toolkit.</p>
82.	Where can applicants find information on M&E capacity building?	<p>For more information on M&amp;E capacity building Applicants can consult the following link for Measure Evaluation: <a href="http://www.cpc.unc.edu/measure">http://www.cpc.unc.edu/measure</a></p> <p>Applicants can also subscribe to the AIMenet moderator to receive ongoing information on M&amp;E issues, such as training, specific to HIV.</p> <p>→ For more details, please refer to the following website: <a href="http://www.cpc.unc.edu/measure/">http://www.cpc.unc.edu/measure/</a></p>
83.	Where can one find the <b>StopTB</b>	The new TB control strategy is described in The Stop TB Strategy:

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	revised strategy on tuberculosis control?	<a href="http://www.who.int/tb/publications/2006/en/index.html">http://www.who.int/tb/publications/2006/en/index.html</a>  A list of potential Stop TB Strategy SDAs are found in the STB planning matrix: <a href="http://www.who.int/tb/dots/planningframeworks/gf_tb_proposals_preparation/en/index.html">http://www.who.int/tb/dots/planningframeworks/gf_tb_proposals_preparation/en/index.html</a> .  <i>→ Applicants may also wish refer to additional information on the Stop TB Strategy (and planning framework for tuberculosis components especially) when planning their tuberculosis proposal and the detailed component budget. This information is available at:</i> <a href="http://www.who.int/tb/dots/planningframeworks/en/index.html">http://www.who.int/tb/dots/planningframeworks/en/index.html</a>
84.	Are there any <b>tools available to help applicants identify indicators for malaria in pregnancy (MIP) and incorporate these indicators into ANC registers and maternal health cards</b> for monitoring and evaluation purposes and the strengthening of health information systems at country level?	Consider making use of the <b>MIP Monitoring and Evaluation Guide</b> which will be available within the <b>MIP Tool KIT</b> <a href="http://www.who.int/malaria/docs/mip/mip_guidelines.pdf">http://www.who.int/malaria/docs/mip/mip_guidelines.pdf</a> (mainly for Sub-Saharan African countries).
<b>→ Implementation arrangements and financial management questions</b>		<b><a href="#">Back to top</a></b>
85.	What is a <b>Principal Recipient (PR)</b> ?	<b>A Principal Recipient (PR) is the lead implementing and management body</b> for a proposal. The PR enters into a Grant Agreement with the Global Fund. It must therefore be a legal entity.
86.	<b>Who</b> selects the PR?	In the proposal, <b>the applicant should transparently select suitable PRs to be responsible for program implementation</b> (subject to proposal approval and grant negotiations) <b>and be accountable for the grant to the Global Fund.</b>

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		<p><b>Applicants should ensure that they refer back to the minimum eligibility requirements for CCMs, RCMs and Sub-CCMs on this issue,</b></p> <p>Depending on the proposal and the capacities of different local stakeholders, it is recommended that applicants nominate <u>more than one PR</u> to be responsible for distinct parts of the proposal (either for different disease components or within a single component), such as having one PR for public sector activities and a different PR for civil society and the private sector.</p>
87.	What is <b>dual-track financing</b> ?	<p>Dual-track financing is the recommended inclusion of both government and non-government PRs in proposals for Global Fund financing.</p> <p>The Global Fund recognizes that civil society and the private sector can, and should, play a role in the development of proposals and the implementation and oversight of grants at the country level. As such, <b>applicants are recommended to include both government and non-government PRs in proposals for funding.</b></p> <p>➔ For further information, please refer to the <i>Fact Sheet on Dual-Track Financing</i> available at <a href="http://www.theglobalfund.org/en/rounds/9/faq/">http://www.theglobalfund.org/en/rounds/9/faq/</a></p>
88.	Is dual-track financing required in Round 9?	<p>No. The Global Fund recommends the routine inclusion of proposals with both government and non-government PRs in Round 9, but <b>this is not a requirement</b>. It is recognized that dual-track financing may not be possible in all proposals due to current in-country contextual situations.</p> <p>Where dual-track financing is not possible, applicants are requested to summarize in the proposal form the reasons why this option has not been pursued, and discuss alternative</p>

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		ways in which their proposal aims to ensure both government and non-government sector involvement in grant implementation.
89.	What is the <b>role of the PR</b> ?	<p>The Principal Recipient (PR) leads and manages the implementation of a grant. It assumes programmatic management responsibility and financial accountability for the program. More specifically, <b>the responsibilities of the PR include:</b></p> <ul style="list-style-type: none"> <li>• Receiving disbursements and managing funds;</li> <li>• Implementing/Overseeing implementation of programs;</li> <li>• Making efficient arrangements for disbursement of funds to sub-recipients;</li> <li>• Reporting on results and requesting additional disbursements of funds; and</li> <li>• Assessing and overseeing sub-recipients.</li> <li>•</li> </ul>
90.	What type of entity makes a <b>suitable PR</b> ?	<p>A suitable Principal Recipient (PR) is an organization, public, private or not for profit/civil society, that has proven skills (or the capacity to rapidly strengthen its skills) in financial management, monitoring and evaluation, procurement and supply management, budgeting and planning. A suitable PR is also skilled in tracking performance and transparently overseeing program implementation to ensure maximum financial and programmatic performance.</p> <p><b>The capacity of the PR to implement and manage the program is very important because proposals will be evaluated by the TRP for overall feasibility.</b></p>
91.	What is the <b>PRs relationship to the CCM, Sub-CCM and RCM</b> ?	<p>As set out in the <a href="#">"Revised Guidelines on the Purpose, Structure and Composition of the Country Coordinating Mechanisms"</a>, the PR is the day to day manager and lead implementer of the program. The CCM, Sub-CCM or RCM (as relevant) is intended to oversee longer term performance, together with linkages to the national strategy and other</p>

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		donor funded activities. The particular focus of the Coordinating Mechanism is on achieving harmonization of responses to the disease(s) and achieving the most efficient utilization of resources.
92.	<b>Is the PR the only party that implements</b> a program?	<p>No, this very much <b>depends on the proposal</b>. A CCM, Sub-CCM or RCM (as relevant) can choose to nominate one or more PRs that may be from different sectors to meet differing program needs. Each PR can have one or more sub-recipients who they collaborate with. Sub-recipients can also be important implementers in their own right through sub-contracts with the PR. In addition, the private sector can bring additional resources to speed up and/or scale up the program implementation in the framework of Co-Investment.</p> <p>→ For more information on <b>various possible models of Global Fund in-country structures</b>, see <a href="http://www.theglobalfund.org/en/ccm/">http://www.theglobalfund.org/en/ccm/</a>.</p> <p>It is recommended that sub-recipients also be transparently nominated and referred to in the proposal to assist the TRP in considering capacity and feasibility issues.</p>
93.	<b>When should a PR become involved</b> in the proposal?	<p>A PR should become involved in the proposal <b>during the proposal writing stage</b> so that they are aware of their nomination and intended role. Some proposals are a consolidation of many smaller proposals. In these cases, it is particularly important that the PR is present to oversee compilation of the final proposal, and make comments as to overall feasibility, and potential technical and management assistance needs during implementation. It may be that a potential PR can identify potential needs during implementation to help speed up and/or scale up the program. These additional resources may include private sector involvement through the framework of Co-Investment.</p>
→ <b>Procurement and supply management questions</b>		<a href="#">Back to top</a>
94.	Does the Global Fund have any	Yes. These policies are available in a guide on the Global Fund website at:

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	<b>policies on the management of pharmaceutical and health products?</b>	<p><a href="http://www.theglobalfund.org/en/procurement/guide/">http://www.theglobalfund.org/en/procurement/guide/</a></p> <p>The guide details Global Fund principles and policies for the selection and procurement of pharmaceutical and other health products, intellectual property rights, quality assurance, storage and distribution management and rational use.</p> <p>It is strongly recommended to read this guide before developing the proposal.</p>
95.	Who has <b>overall responsibility</b> for the management of pharmaceutical and health products once a proposal is funded?	In many cases, a range of implementing partners, including sub-recipients, participate in management activities for pharmaceutical and health products. However, <b>Principal Recipients (PR) retain the overall responsibility for ensuring compliance with Global Fund policies</b> , although procurement and supply management functions may be sub-contracted to specialized service providers.
96.	For pharmaceutical products and other health products procured in-country from a local manufacturer, is <b>national regulatory approval enough</b> to enable a PR to buy these products from Global Fund resources?	<p>Not usually. The Global Fund has detailed policies on the procurement of pharmaceutical and health products and <b>quality assurance requirements with regard to pharmaceuticals products</b>.</p> <p>Applicants should refer to the <a href="#">Quality Assurance Information</a> on the Global Fund website before completing Attachment B to the Proposal Form.</p>
97.	Are there any specific requirements if applicants apply for funding for the	Yes. To help limit resistance to second-line anti-tuberculosis medicines, all procurement of these medicines and financed under the grant must be conducted through the <b>Green Light</b>

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	treatment of <b>multi-drug resistant tuberculosis (MDR-TB)</b> ?	<p><b>Committee mechanism of the Global TB Initiative.</b></p> <p>Applicants should indicate in the Proposal Form whether a successful application to the GLC Secretariat has been made or is in progress.</p> <p>→ Refer also to the GLC website:  <a href="http://www.who.int/tb/challenges/mdr/greenlightcommittee/en/index.html">http://www.who.int/tb/challenges/mdr/greenlightcommittee/en/index.html</a></p>
98.	When should an applicant submit an application to the <b>Green Light Committee (GLC)</b> if a proposal seeks funding for multi-drug resistant TB (MDR TB)?	<p>The application to the GLC Secretariat should be submitted after <b>submission of the Round 9 proposal</b> to the Global Fund. However, before submitting the Round 9 proposal, we encourage the applicant to <b>notify the GLC Secretariat</b> of their intent to apply for Round 9 funding in a short, (two to three page maximum) letter of intent so that the GLC Secretariat can plan for this occurrence if the proposal is approved. This will establish the first contact, and will allow the applicant to benefit from technical assistance while preparing the application.</p> <p>Applicants should indicate in the Proposal Form whether a successful application to the GLC has been made or is in progress.</p> <p>→ More information on this can be found at the GLC website:  <a href="http://www.who.int/tb/challenges/mdr/greenlightcommittee/en/index.html">http://www.who.int/tb/challenges/mdr/greenlightcommittee/en/index.html</a></p>
99.	Must applicants include a <b>detailed management plan</b> for pharmaceutical and health products with their proposal?	<p>No. Only a <b>summary of the management plan is required</b> in the Proposal Form.</p> <p>Applicants should review the Global Fund's policies on procurement and supply management, available at: <a href="http://www.theglobalfund.org/en/procurement/">http://www.theglobalfund.org/en/procurement/</a> prior to completing this section of the Proposal Form.</p>
100.	<b>When</b> is a PR required to submit a	Once a proposal has been approved by the Board of the Global Fund, <b>PRs are</b>

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	<p>management plan for pharmaceutical and health products?</p>	<p><b>responsible for submitting a management plan</b>, which describes in greater detail the arrangements for the management of pharmaceutical and health products.</p> <p>Prior to the disbursement of funds for the procurement of products, the Global Fund will assess this plan and the systems that it describes for appropriateness and overall reasonableness – including the unit assumptions for key individual budget items.</p> <p>In all cases, it is preferable that the plan be prepared immediately after the Board has recommended the Proposal for funding. This is so that the Global Fund can assess the nominated PR's management plan and capacity and any clarifications can be dealt with during grant negotiation.</p> <p>→ Please refer to <a href="http://www.theglobalfund.org/en/procurement/">http://www.theglobalfund.org/en/procurement/</a> for a guide to writing a management plan.</p>
<p>→ Finance/budget questions <span style="float: right;"><a href="#">Back to top</a></span></p>		
<p>101.</p>	<p>What <b>types of resource contributions</b> should be included in the financial gap analysis table in section 5.1?</p>	<p>Applicants should try to ensure that they consider <b>all</b> substantive contributions towards the national disease specific prevention and control plan (taking into account essential HSS needs where they can be clearly identified with a disease component).</p> <p>Thus, government (including national resources, loans and other sources); non-government (including significant private sector donations to national programs); and bilateral and multi-lateral contributions (e.g., funding from a UN body, loans and/or grants from other international agencies) are all relevant.</p> <p>→ Refer to the detailed information in section 5.1 of the Round 9 Guidelines for Proposals</p>

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102.	What is the <b>minimum amount</b> that can be applied for?	There is <b>no fixed lower limit</b> on the size of a proposal. However, as the Global Fund promotes comprehensive programs and particularly those aimed at scaling-up proven interventions, the TRP may view negatively requests for small projects. Smaller requests by individual organizations and/or smaller non-governmental organizations should be aggregated into the Coordinating Mechanism's overall comprehensive proposal. In this way, smaller and more innovative approaches can still receive funding.
103.	Is there a <b>maximum funding amount</b> ?	<p>There are no fixed upper limits. However the TRP is likely to view negatively requests that are beyond the perceived absorptive capacity of the country after capacity building activities included in the proposal are taken into account.</p> <p>It is also important for applicants to show that the funds requested are additional to existing resources and that they do not replace existing funding. In determining the funding request, applicants are encouraged to undertake a <b>detailed exercise to assess the status of the disease(s) in the country, the current funding sources and the financial gaps</b>. During this exercise, the applicant should refer to the program gap analysis, section 5.1, and the accompanying guidance notes in the Round 9 Guidelines.</p>
104.	What should be the <b>duration of the request</b> ?	The maximum duration of the funding request should be <b>5 years</b> . Whilst the proposal may be approved for the full 5 years term, funding will <b>initially only be committed by the Global Fund for 2 years</b> .
105.	What <b>currency</b> should be used in the proposal?	<p>Applicants should <b>choose between US Dollars and Euros and use this same currency</b> throughout the whole proposal, and for all diseases.</p> <p>The detailed budget (section 5.2) must be presented in the chosen currency (as indicated on page one of the Proposal Form). However, underlying costs that make up the budget</p>

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		<p>will often be denominated in the local currency.</p> <p>The exchange rates used to translate these costs to the application currency should be disclosed and justified. Refer also to section 5.2 of the Round 9 Guidelines.</p>
106.	The Proposal Form in section 5 requires the Budget information to be <b>analyzed in several ways</b> . Why is this so?	The TRP and the Global Fund need to understand both how the funding request is allocated across objectives and service delivery areas, as well as across broad budget categories by expenditure type. This facilitates both understanding of budgets and comparison between budgets. There are clear guidelines in section 5.2 of the Round 9 Guidelines on how to analyze the budget in these two ways.
107.	Must an applicant complete the Budget Section of the Proposal Form if they are applying for funding to be channeled through a <b>common funding mechanism</b> ?	<p>Yes. If part or all of the funding requested is planned to be contributed through a common funding mechanism (such as Sector-Wide Approach, pooled funding, etc.) applicants should provide the budget information in sections 5.1 to 5.4 of the Proposal Form on the <b>basis of the anticipated use of the requested funds within the common funding mechanism</b>.</p> <p>In addition applicants should provide, as an annex, the operational status of the common funding mechanism (e.g. the established rules and procedures), an explanation of how performance is measured and an explanation of how additionality of Global Fund funding is assured.</p> <p>→ Refer to the Round 9 Guidelines, section 5.4.3.</p>
108.	How much <b>detail</b> should be provided in the budget for years 1-2 and 3-5?	<b>Section 5.2 requires applicants to provide a detailed budget. This is a <u>very important document and will be critical</u> in the TRP's assessment of the reasonableness of an applicant's request and the viability of the program. Applicants must therefore provide sufficient information for the TRP to make this assessment.</b>

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		<p>The budget should be <b>detailed for year 1 and year 2</b>, with information broken down by <b>quarters</b> for both years. Applicants should provide details of all <b>key assumptions</b> in the budget (i.e. costs assumptions for unit prices, number of people on treatment, etc.) as well as details and rationale for administrative costs.</p> <p>For years 3-5, there should be an annual detailed budget with a disclosure of all key assumptions to show the basis of the budget. Where possible, the same degree of detail as in years 1-2 should be provided, particularly for key products or services procured.</p> <p><b>Importantly - Proposals that do not have detailed Budgets and Work Plans</b> that support the proposed interventions from a programmatic and financial feasibility perspective are very difficult to review and recommend for funding.</p>
109.	Is it possible to <b>top up</b> a proposal amount or the final grant amount if there have been currency fluctuations or major increases in cost since proposal submission?	No. The amount recommended for funding is an upper ceiling, which may be subject to adjustment during the TRP clarification process and/or during grant negotiation.
110.	Can applicants make a provision in the budget for inflation?	<p>Provided that the provision is reasonable and uses reliable estimates of future prices (such as recent inflation figures from Central Statistics Offices) then it may be considered.</p> <p>It is important to remember that inflation rates may be affected by exchange rates and, therefore, such relationships need to be understood and explained as part of the budget assumptions. Also, inflation rates may apply differently to different items in the budget.</p>
111.	Are applicants required to use the	The Round 9 budget template is not mandatory. It is an optional tool that applicants may

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	<b>Round 9 budget template?</b>	use to submit their detailed budgets. The automatic version of this template has various features to assist applicants in completing the summary budget sections 5.3 and 5.4 of the proposal form, such as a feature to calculate summary budgets by cost category and service delivery area.
112.	The budget template is not working properly, what should I do?	The budget template uses Macros, which may not be fully enabled on your systems or compatible with your version of Excel. Full instructions on the use of the budget template and technical issues can be found in a worksheet provided within the template.  If you are still experiencing difficulties after following the instructions in the template, please contact <a href="http://myglobalfund.org">myglobalfund.org</a>
113.	Can the budget template also be used as the work plan?	The Global Fund's budget template is not a detailed work plan, but has been designed to enable the applicant to present a detailed budget which is consistent with the work plan.
<b>TOOLS FOR APPLICANTS FOR ROUND 9</b>		<a href="#" style="color: white; text-decoration: underline;">Back to top</a>
114.	Are there any <b>tools available to guide applicants</b> in the development of proposals to adequately support programming <b>for the prevention and control of malaria during pregnancy?</b>	Several WHO documents and tools have been developed to guide countries in the development of strategies for the prevention and control of malaria during pregnancy. These have been pulled together into a toolkit by the RBM partnership Working group for Malaria in Pregnancy (see: <a href="http://www.who.int/malaria/docs/mip/mip_guidelines.pdf">http://www.who.int/malaria/docs/mip/mip_guidelines.pdf</a> ). The toolkit consists of relevant documents as follows:  <b>Malaria in Pregnancy (MIP) Tool Kit</b> a. <a href="#">MIP Strategic Framework</a> (WHO/AFRO) b. <a href="#">IMPAC PCPNC Guidelines</a> (Integrated Management of Pregnancy and Childbirth) c. MIP Monitoring and Evaluation Framework ( <i>being finalized</i> ) d. MIP Implementation Guide ( <i>in preparation</i> ) e. <b>Consensus statements by WHO and Partners on relevant topics:</b>

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		<ul style="list-style-type: none"> <li>i. <a href="#">SP for IPT in areas of SP resistance</a></li> <li>ii. <a href="#">Interactions between HIV and malaria and implications for service delivery</a></li> <li>iii. <a href="#">ITN delivery through ANC</a></li> </ul>
115.	Are there any tools to guide countries in <b>strengthening antenatal care</b> to deliver the necessary interventions <b>for the prevention and control of malaria during pregnancy</b> ?	<p>WHO has guidance on the 4-visit ANC schedule which is expected to provide the platform for the delivery of interventions for malaria during pregnancy. The WHO Integrated Management of Pregnancy and Childbirth (IMPAC) guide provides guidance on MIP implementation within antenatal care. It also provides guidance on a comprehensive approach to maternal and newborn health care.</p> <p>→ Please refer to: <a href="http://www.who.int/reproductive-health/impac/index.html">http://www.who.int/reproductive-health/impac/index.html</a></p>
116.	Is there a tool for applicants who wish to request funding for the <b>treatment and prevention of pediatric HIV/AIDS</b> ?	<p>Consider making use of the Global AIDS Alliance new <a href="#">Pediatric Treatment and Prevention Toolkit</a>, which contains documents developed by organizations such as WHO and UNICEF that outline medically accepted algorithms for the diagnosis, treatment, and care of children with HIV/AIDS.</p>
117.	Is there a tool for applicants who wish to integrate <b>Sexual Reproductive Health and HIV/AIDS</b> prevention, treatment, care and support in their Round 9 proposal?	<p>Applicants may consider (at their sole discretion and without endorsement from the Global Fund) referring to the Global AIDS Alliance Toolkit for Proposals Integrating SRH and HIV/AIDS available at the following link:  <a href="http://www.globalaidsalliance.org/page/-/PDFs/SRH_Toolkit_final.pdf">http://www.globalaidsalliance.org/page/-/PDFs/SRH_Toolkit_final.pdf</a></p>
118.	Are there any tools or guidance for applicants on <b>human resources for health</b> ?	<p>Applicants may (at their sole discretion and without endorsement from the Global Fund) refer to the <b>HRH Action Framework</b> website developed as an initiative of the Global Health Workforce Alliance (GHWA). Applicants may also refer to the website of the <b>Asia Pacific Action Alliance on Human Resources for Health (AAAH)</b> at the following link:</p>

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		<a href="http://www.aaahrh.org/">http://www.aaahrh.org/</a>
119.	Are there any <b>tools available to help us identify gaps</b> in our monitoring and evaluation and health information systems?	Consider making use of the <b>Health Metrics Network assessment tool</b> ( <a href="http://www.who.int/healthmetrics/tools/en">http://www.who.int/healthmetrics/tools/en</a> ) to diagnose weaknesses in the health information system and provide a baseline for evaluating progress with strengthening of the health information system.
120.	Is there any guidance for applicants regarding operations/ implementation research activities?	<p>Applicants may consider referring to a <b>non-exhaustive list</b> of information on program-based operations/implementation research including technical partner website details.</p> <p>→ Please refer to <b>Item 3</b> at the following link:  <a href="http://www.theglobalfund.org/en/rounds/9/other/">http://www.theglobalfund.org/en/rounds/9/other/</a></p> <p>→ A voluntary checklist for applicants planning to include operations research in their proposal is available at <b>Item 2</b> at the following link:  <a href="http://www.theglobalfund.org/en/rounds/9/or/?lang=en">http://www.theglobalfund.org/en/rounds/9/or/?lang=en</a></p> <p>→ Further information is also available in the M&amp;E Toolkit:  <a href="http://www.theglobalfund.org/en/me/">http://www.theglobalfund.org/en/me/</a></p>
121.	Does <b>Aidspan</b> have any tools to provide guidance to applicants during proposal development?	<p><b>Aidspan prepares numerous guides on proposal development topics as part of its service provision role.</b></p> <p>→ For more information please go to the following website:  <a href="http://www.Aidspan.org/index.php?page=guides">http://www.Aidspan.org/index.php?page=guides</a></p> <p><b>Aidspan</b> is a non-governmental organization whose mission is:</p> <p><i>"To reinforce the effectiveness of the Global Fund. Aidspan does so by serving as an</i></p>

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		<p><i>independent watchdog of the Fund, and by providing services that can benefit all countries wishing to obtain and make effective use of Global Fund financing. Aidsplan finances its work primarily through grants from foundations, and does not accept Global Fund money."</i></p> <p>Please note that the Global Fund does not endorse this website, or any of the guidance notes that have been prepared by Aidsplan.</p>
<b>AFTER BOARD DECISION ON ROUND 9 PROPOSALS</b>		<a href="#" style="color: white; text-decoration: none;">Back to top</a>
122.	<b>When</b> will the applicant be <b>notified of the outcomes</b> of the application?	<p>Preliminary notification to applicants of the TRP's funding recommendations on Round 9 proposals will be made following the TRP meeting. This is not a final decision, as the Board retains the authority to make a decision different to the TRP recommendations.</p> <p>Final notifications to all Round 9 applicants on the outcome of the Board's consideration of TRP funding recommendations will be made shortly after the 20<sup>th</sup> Board meeting.</p> <p>Applicants whose proposals were screened out as <b>ineligible</b> (and therefore not to be reviewed by the TRP) will also be notified of the outcome of the screening and the reasons they were screened out after the 20<sup>th</sup> Board meeting.</p>
123.	Can <b>any information be clarified or changed</b> after Board approval?	<p><b>Some information may be subject to change after Board approval, during Grant negotiations.</b> The Board approved amount is not a fixed grant amount, but is a maximum ceiling which may be modified during the TRP clarification and grant negotiation processes if <b>savings or budget reductions</b> are identified.</p> <p>It is unlikely that there would be reductions agreed to for proposed targets and indicators other than if requested by the TRP.</p>

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124.	What is the timeframe for signing a <b>Grant Agreement</b> ?	It is desirable that the Grant Agreement be signed <b>within six months of the Board approval</b> , to enable more rapid access to funds. However, all Grant Agreements must be signed within 12 months or the Board approval lapses.
125.	Is it possible to <b>have access to grant money from a Round 9 proposal before</b> the grant agreement has been signed to help with matters such as Technical and Management Assistance and salary set up costs?	No. However in certain cases (to be agreed with the Global Fund in writing during grant negotiations) it is possible to retroactively finance certain limited set up costs. This would be discussed with the relevant Fund Portfolio Manager.
<b>MORE INFORMATION</b>		<b><a href="#">Back to top</a></b>
126.	Who should applicants <b>contact</b> if they have any questions regarding the <b>Round 9 proposal submission process</b> ?	Please contact the Global Fund's proposals hotline through our NEW <i>My Global Fund</i> website: <a href="http://myglobalfund.org/">http://myglobalfund.org/</a>
127.	Who should applicants <b>contact for technical/disease information</b> regarding a disease component?	Applicants should make direct contact with the <b>local WHO, UNAIDS, UNICEF, UNDP, UNFPA, World Bank, EU, DFID or other international and/or donor partners represented in the relevant country.</b>  These partners may be able to provide technical, management and/or, perhaps in more limited situations, financial assistance to applicants to complete the proposal process, including assistance to help CCMs, RCMs and Sub-CCMs document compliance with the <b>critical six minimum eligibility</b> requirements.