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# Strategic Performance Report end-2020

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## 45<sup>th</sup> Board Meeting

GF/B45/14

11-12 May 2021, *Virtual*

### Board Information

**Purpose of the paper:** To provide an update on Key Performance Indicators (KPIs) results against targets at end-2020 and share insights on overall performance and areas where the impact of COVID-19 is observed. Two additional documents on adjustments to KPI targets and indicators, and lessons learnt on the current framework to support development of the next KPI framework are submitted as separate reports.

# Executive Summary

## 1. Context

1. The end-2020 Strategic Performance Report reflects a time of significant challenge and momentum for the Global Fund (GF). In 2020, the GF was at the start of a new allocation cycle after a successful replenishment and beginning the process to develop the post-2023 Strategy. The COVID-19 pandemic presented unprecedented challenges for almost everybody and tragedy for those directly and indirectly affected. The impact of COVID-19 on performance towards the current strategic objectives is described in this report, and additional Global Fund sources (includes surveys of specific grants measuring disease indicators and health facility assessments) provide more frequent and granular reporting on COVID-19's impact. Even considering the difficult context, KPI results have largely been maintained or seen only a minor disruption to performance, at least for the data reported for end-2020 noting that several indicators report on data from prior to 2020 such as for the 2017-2019 allocation cycle or for impact up to 2019 (e.g. KP1 – described below)
2. At the impact level, data reported through Global Disease Reports show the considerable progress made on saving lives over the first 3 years of the Strategy. If this trajectory were to be maintained until the end of the GF strategy cycle, targets are likely to be met or even exceeded; however, COVID-19 may make this harder to achieve (KPI 1a). As reported in the last Strategic Performance Report, there is still a gap to 2022 incidence reduction targets across the 3 diseases. It is a key priority for the organization, especially through the grants originating from the 2019-2021 allocation cycle. Service delivery indicators (KPI 2) results for 2020 will be reported in Fall 2021 (according to schedule) where the impact from COVID-19 may be realized based on current in-country evidence. In most cases, stable or improving performance is also maintained for both financial and programmatic KPIs where measured in this report. Detailed results can be found in Annex 1 to this report (GF/B45/14\_Annex 1).
3. As mentioned above, it is possible and likely that greater impact from the pandemic, especially in the area of service delivery, may occur. Monitoring and reporting of the COVID-19 situation on GF-funded programs and countries, does appear to show clear disruptions to service delivery and challenges to health systems while simultaneously showing the impact of adaptive measures taken by both the GF and countries themselves (see Annex 2).
4. Two reports are presented for Board review in addition to the end-2020 Strategic Performance Report. First, 6 adjustments to the KPI Framework are being proposed for Board decision. Details of all proposed adjustments to the KPI Framework are contained in Annex 3 to this report (GF/B45/14\_Annex 3). Second, a supplement to this Strategic Performance Report (GF/B45/16\_Lessons Learned from the implementation of the 2017-2022 KPI Framework) has been shared with the Committees. This document contains a review of our current framework, a proposed set of principles for the next Strategic Performance framework and details on the plan to develop the new framework. This is a crucial step in the development and operationalization of the Post-2023 Strategy development process and therefore inputs on these materials are requested at this time.

## 2. COVID-19 and Strategic Performance

5. This report is the first to document changes in strategic performance due to COVID-19. Therefore, the report makes clear where and how COVID-19 has had an impact on a specific KPI. Among those scheduled to be reported, there was not a widespread reduction in performance attributable to COVID-19. Several RSSH KPIs showed a minor decline in performance in the areas of financial and data systems (KPI 6c and 6d) as did domestic financing (KPI 11). Several KPIs measuring financial components of GF performance have demonstrated improved performance and, in many cases, targets have been exceeded (includes KPI 7a, 10, 12b).
6. As shared in the Fall 2020 Strategic Performance report, the Secretariat will not change KPI targets in response to the COVID-19 pandemic, unless already scheduled or expected. This is in

order to maintain a constant ambition to deliver on the current strategy and to allow for consistent measurement from one report to the next.

7. The Strategic Performance report and KPIs are not structured to provide ongoing, rapid monitoring of the COVID-19 situation for the GF. Instead there are other more frequent and purpose-built monitoring tools that are currently providing data and guidance to the GF and supporting adaptive decision making by the GF.
8. Data from these monitoring systems does show a clear impact of COVID-19 on the provision and utilization of essential services for the 3 diseases as well as overall health system resiliency. As stated above, this could alter the results of several KPIs in future reports especially on service delivery (KPI 2). However, the Secretariat response to COVID-19 remains strong including through C19RM and grant flexibilities. These efforts and the broader global response may help to stem some of the negative effects on Strategic Performance.

### 3. End-2020 KPI Results

#### SO 1: Maximize impact against HIV, TB and Malaria

9. As reported above, the trajectory of lives saved has continued to increase in the 2017-2019 period. Approximately 16 million lives were estimated to have been saved from 2017-19, in the first half of the strategy. This leaves the GF well on the path of meeting the strategic target of 29 million lives saved; however, COVID-19 may alter this result in 2020 and 2021. Incidence reduction has continued with the combined (i.e., all 3 diseases) incidence rate dropping by 11% since baseline but the projected target for this indicator have still not been achieved. The gap in achieving incidence reduction can be explained by specific regions missing their respective targets for 1 of the 3 diseases. (KPI 1b)
10. As shared in earlier reports for the 2017-2019 allocation period, there has been good alignment between the level of investment made in each country and country need ensuring that funds were effectively invested in countries where the need was greatest. Some changes in large countries had a slight impact on the result but overall, the target has still been exceeded (KPI 3)
11. Up from end-2019, 55 assessments have been conducted to assess whether national disease programs, in High Impact countries, are demonstrating program efficiencies. Of the programs assessed, 87% show a decrease of cost per life saved or infection averted over the current allocation period compared to the previous period, indicating overall improved efficiency of national disease programs. Few malaria assessments have been undertaken and steps are being taken to improve this alongside efforts to strengthen assessment approaches for the 2020-2022 allocation cycle. (KPI 4)

#### SO 2: Build resilient and sustainable systems for health

12. With 3 windows of funding request now complete as part of the 2020-2022 allocation period, almost all Global Fund funding requests remain aligned with national priorities outlined in National Strategic Plans (98% of all 125 eligible funding requests) as assessed by the TRP (KPI 6f)
13. Whilst it is recognized that RSSH-related KPIs are not a proxy for health system strength and do not reflect the entirety of Global Fund efforts to strengthen health systems, the data systems, financial management and procurement and supply chain KPIs in this reporting period continue to show progress with most indicators achieving or close to target, even if all of them experience some form of COVID-19-related disruption. More details below
  - **Procurement and Supply chains:** Availability for diagnostics and tracer medicines has been achieved for 3 of the 6 products considered. The three products not meeting this target (first line drugs for malaria and HIV; malaria diagnostics) are very close to it. (KPI 6b) Reporting on domestic procurement prices will be presented in Fall 2021. (KPI 6a)

- **Financial systems:** Progress has been made in public financial management transition efforts as all countries measured in this indicator have now met the required threshold for components of public financial management systems. This is a major achievement and progress on this indicator will still be monitored through the end of the strategic cycle (KPI 6ci). The number of countries that have implemented the required actions to meet defined financial management systems standards for optimal absorption and portfolio management is under the target at 26 countries (target 36). Many countries are either very close or were unable to implement actions due to COVID-19 disruption. (KPI 6c)
- **Data systems:** There have been mixed outcomes for health management information systems strengthening efforts this cycle. Many countries in the High Impact and Core portfolios have seen improvements to their health management information systems (HMIS) since the last reporting period especially integration into national health systems; but only 39% of countries are considered to have fully deployed, functional HMIS at end 2020, which is primarily due to COVID-19 significantly impacting the timeliness of reporting. Direct mitigating actions have been put in place to address these challenges (KPI 6d). It is proposed that reporting of disaggregated results by age and gender through national systems is replaced by a new indicator measuring the use of disaggregated data in country programs for decision-making (planning or implementation); a baseline analysis and appropriate target will be presented in Fall 2021(KPI 6e)

### SO 3: Promote and protect human rights and gender equality

14. KPIs related to reducing human rights barriers to services show a mixed picture of progress. By the end of 2020, mid-term assessments in 8 Breaking Down Barriers countries had been completed and findings from all assessments demonstrated progress against baseline in reducing human rights related barriers in HIV and TB program. HIV programs demonstrate more progress in terms of scale and scope than TB programs. (KPI 9a)
15. First results for KPI 9b in for the 2020-2022 allocation cycle show that Global Fund investment in programs to reduce human rights-related barriers has not yet reached target for HIV grants but exceeds the target for TB grants. However even for HIV grants, the amount of funding from NFM2 to NFM3 has increased substantially.; Due to grant signing timelines, the KPI result at this reporting period has not included results yet from several Upper Middle-Income countries, which are likely to have more grant funding in this area. (KPI 9b)

### SO 4: Mobilize increased resources

16. Global Fund resource mobilization efforts have continued to be successful through the 6th Replenishment period ending at an over 100% pledge conversion rate. COVID-19 has not impacted conversion negatively and has increased specific pledges from several donors especially for targeted COVID-19 programs. (KPI 10).
17. A high rate of allocation utilization continues to be seen (99%) with high utilization across all portfolio categorizations. This can be partly attributed to the COVID-19 context as countries are making use of funds efficiently including through grant flexibility given their clear need for support (KPI 7a)
18. Domestic co-financing commitments to programs supported by the Global Fund for the 2017-19 allocation period reached 129% of the minimum policy prescribed for co-financing which mirrors past progress. This was consistent across all income level brackets. Overall, 141 out of the 151 country components reviewed by the Grant Approvals Committee in 2020 fully complied with co-financing requirements.
19. The quality-assured supplier availability for PPM products is extremely high this cycle – exceeding the target for 90%. This report is the first with the new dual cohort for the KPI with high-volume (four suppliers or more) and low-volume (two suppliers or more) products being reported with results of 93% and 100% of each product category meeting the target. (KPI 12a)

20. Savings achieved through PPM however continue to be high with almost US\$250m of savings achieved in 2020, far exceeding annual savings target of US\$150m. This in large part is because several countries chose to procure early through PPM to anticipate supply disruptions or price shocks due to COVID-19. (KPI 12b)

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# Strategic Performance Reporting

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**45<sup>TH</sup> BOARD MEETING**

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## **Annex 1: Detailed KPI Results**

*Provided in a separate document GF/B45/14\_Annex 1*

## **Annex 2: COVID-19 and Strategic Performance** p. 14

## **Annex 3: Proposed Adjustments to the KPI Framework**

*Provided in a separate document GF/B45/14\_Annex 3*

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# Preamble – KPI results included in this report

The following table outlines the KPIs which are scheduled for reporting in this cycle and the date of measurement for the data used to calculate the KPI result. All KPIs were calculated, verified and validated by the relevant teams using the defined methodology and are therefore the authoritative source of KPI results at end-2020.

## Notes:

- The Secretariat confirms that no error has been detected in KPI results reported at the Fall 2020 Board meeting and that these results remain unchanged.
- The Secretariat proposes a number of adjustments to the KPI Framework that are described in detail in an accompanying document called “Adjustments to the KPI Framework” GF/B45/14\_Annex 3.

### At a glance – KPIs reported and latest result status

KPI	Description	Date of measurement	Status
1a	Lives saved	End 2019 (as per KPI definition)	On track / Achieved
1b	Incidence reduction	End 2019 (as per KPI definition)	At risk / Partially achieved
3	Alignment of investment & need	December 2020	On track / Achieved
4	Investment efficiency	December 2020	On track / Achieved
6b	RSSH: Supply Chains	December 2020	Deteriorating
6c	RSSH: Finance Systems	December 2020	Improving
6d	RSSH: HMIS coverage	December 2020	Deteriorating
6f	RSSH: NSP alignment	December 2020	On track / Achieved

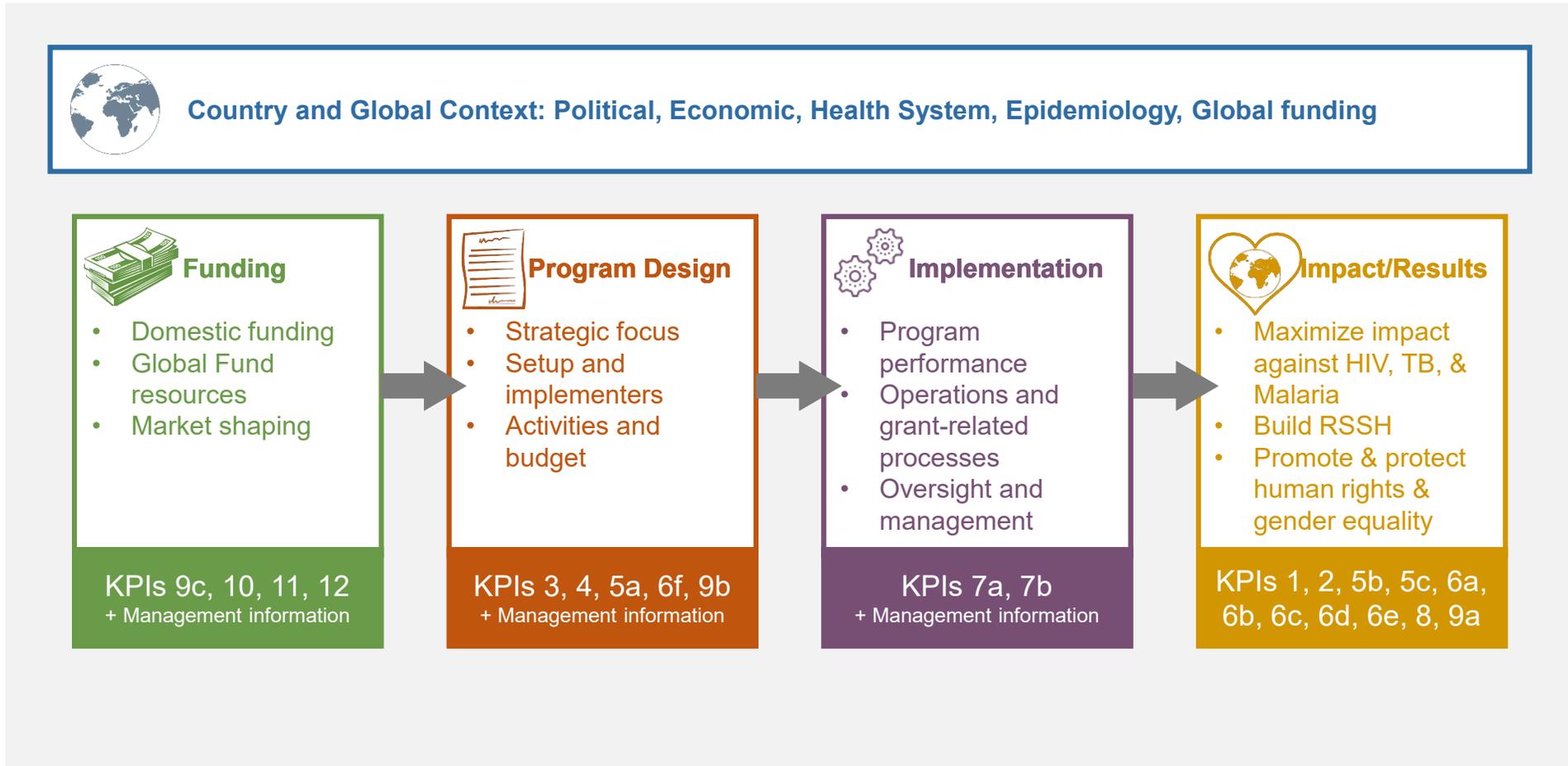
KPI	Description	Date of measurement	Status
7a	Allocation utilization	December 2020	On track / Achieved
9a	Comprehensive programs for Human Rights	December 2020	On track / Achieved
9b	Grant funding for Human Rights	January 2021	Off track / Not achieved
10a	Resource mob. pledges	December 2020	On track / Achieved
10b	Resource mob. contributions	December 2020	On track / Achieved
11	Domestic Funding	December 2020	On track / Achieved
12a	PPM suppliers	December 2020	Improving
12b	PPM savings	December 2020	Improving

● On track / Achieved   
 ● At risk / Partially achieved   
 ● Off track / Not achieved

▲ Improving   
 ▼ Deteriorating

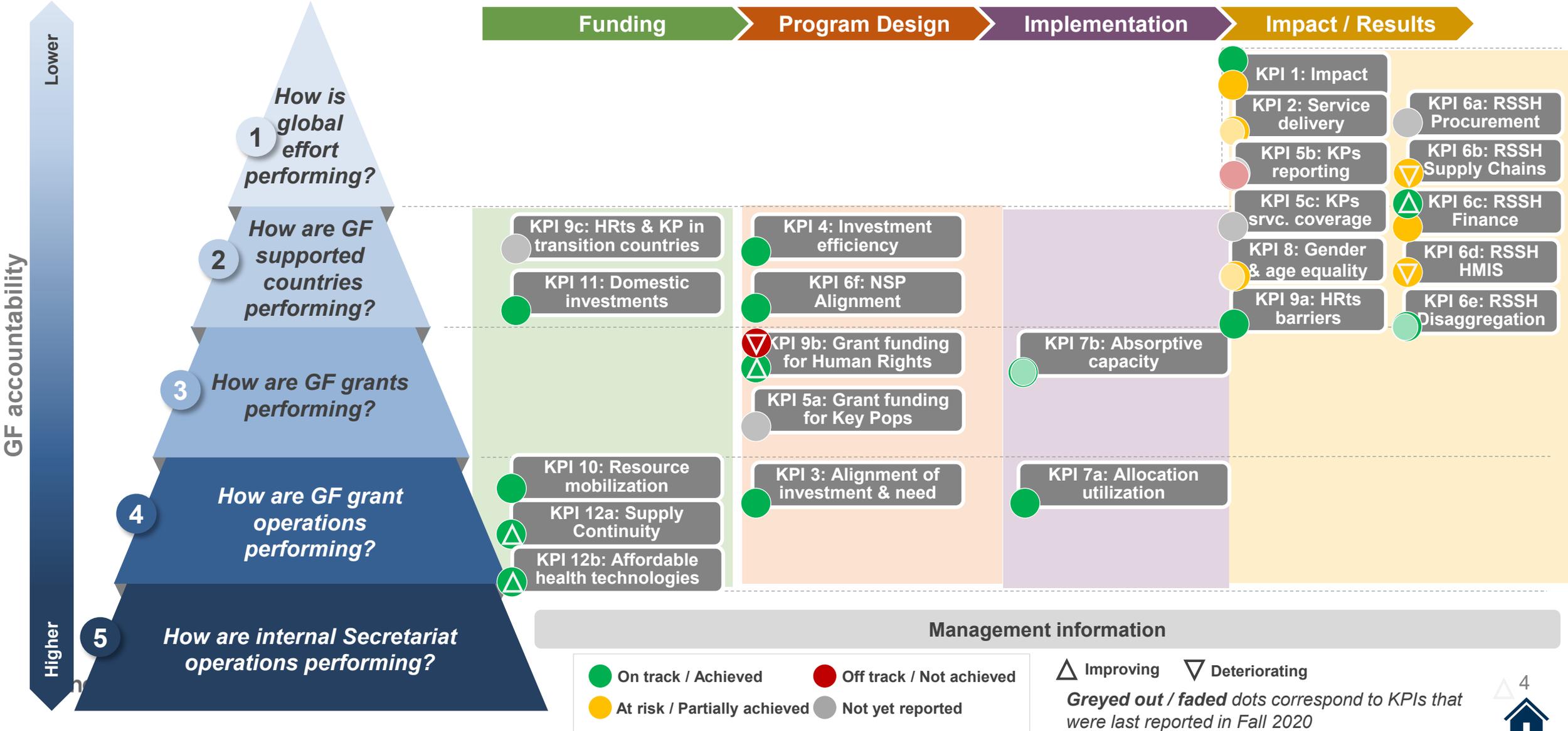


# Performance Reporting Framework



# Current performance and GF level of control – for KPIs included in this report

## Global Fund Performance Reporting Framework



# Performance Paths – KPI progress across reporting periods



## Legend

- Achieved/on track
- At risk/partially achieved
- Off track/Not achieved
- Not available
- No reporting scheduled
- To be reported

*NB: HIV grant investments in Key Populations prevention activities (KPI 5a) will be reported for the first time for the 2020-2022 allocation period in Fall 2021, together with KPIs 5b and 5c to provide a holistic view on Key Population metrics and to ensure a critical mass of quality-assured budget data*

\* Interim indicators

KPI	Description	Fall 2017	Spring 2018	Fall 2018	Spring 2019	Fall 2019	Spring 2020	Fall 2020	Spring 2021	Fall 2021
1a	<b>Impact – Lives saved</b>	●	●	●	●	●	●	●	●	●
1b	<b>Impact – Incidence reduction</b>	●	●	●	●	●	●	●	●	●
2	<b>Service delivery</b>	●	●	●	●	●	●	●	●	●
3	<b>Alignment of investment &amp; need</b>	●	●	●	●	●	●	●	●	●
4	<b>Investment efficiency</b>	●	●	●	●	●	●	●	●	●
5* -> 5b	<b>KPs service coverage (capacity to report)</b>	●	●	●	●	●	●	●	●	●
5a	<b>Grant funding for KPs</b>	●	●	●	●	●	●	●	●	●
5c	<b>KPs service coverage</b>	●	●	●	●	●	●	●	●	●
6a	<b>RSSH: procurement prices</b>	●	●	●	●	●	●	●	●	●
6b	<b>RSSH: supply chains</b>	●	●	●	●	●	●	●	●	●
6c1	<b>RSSH: financial mgmt. transition efforts</b>	●	●	●	●	●	●	●	●	●
6c2	<b>RSSH: financial systems meeting standards</b>	●	●	●	●	●	●	●	●	●
6d	<b>RSSH: HMIS coverage</b>	●	●	●	●	●	●	●	●	●
6e	<b>RSSH: results disaggregation</b>	●	●	●	●	●	●	●	●	●
6f	<b>RSSH – NSP alignment</b>	●	●	●	●	●	●	●	●	●
7a	<b>Allocation utilization</b>	●	●	●	●	●	●	●	●	●
7b	<b>Absorptive capacity</b>	●	●	●	●	●	●	●	●	●
8	<b>Gender and age equality</b>	●	●	●	●	●	●	●	●	●
9a	<b>Reduce human rights barriers to services</b>	●	●	●	●	●	●	●	●	●
9b	<b>Grant funding for Human Rights (HIV)</b>	●	●	●	●	●	●	●	●	●
	<b>Grant funding for Human Rights (TB)</b>	●	●	●	●	●	●	●	●	●
	<b>Grant funding for KPs and Human Rights</b>	●	●	●	●	●	●	●	●	●
9c	<b>Domestic investments in KPs and HRts</b>	●	●	●	●	●	●	●	●	●
9c*	<b>Domestic investments in KPs and HRts (reporting capacity)</b>	●	●	●	●	●	●	●	●	●
10a	<b>Resource mobilization - pledges</b>	●	●	●	●	●	●	●	●	●
10b	<b>Resource mobilization – contributions</b>	●	●	●	●	●	●	●	●	●
11	<b>Domestic investments</b>	●	●	●	●	●	●	●	●	●
12a	<b>Supply Continuity of Health Products</b>	●	●	●	●	●	●	●	●	●
12b	<b>Affordability of health technologies</b>	●	●	●	●	●	●	●	●	●



# Summary – positive results for most KPIs related to Funding and Program Design



## GF resource mobilization still going strong

**KPI 10a** Despite COVID-19 donor fiscal constraints, **pledges** continue to be strong at 102% of the Replenishment target (p.10 of annex)

**KPI 10b** Pledge **conversion** is also on track, with the adjusted pledges at 101% of the initial forecast and 29% already received (p.10 of annex)



## Domestic investments also high in 2017-2019

**KPI 11** For the implementation of the 2017-2019 allocation, there were high levels of **domestic funding**, with co-financing investments at 129% of the policy requirements (p.8 of annex)

- Strong results for all portfolios (especially for upper-LMI countries) and only one country (3 components) not complying so far.
- The reported cohort corresponds to 60 countries and a total of US\$ 8.4b domestic expenditures (p. 8 of annex)



## PPM continues to deliver

**KPI 12a** **Supply continuity** is maintained for the Pooled Procurement Mechanism with 13 high-volume products (out of 14) with four suppliers or more and 10 low-volume products (out of 10) with two suppliers or more (p.11 of annex)

**KPI 12b** **PPM savings** were higher than anticipated at US\$ 249m against a target of US\$ 150m, due mainly to very significant volume increase caused by early order placement (partly motivated by COVID-19) (p.13 of annex)



## Positive initial results for grants in 2020-2022 allocation

**KPI 6f** 98% of Funding Requests cohort from 2020-2022 allocation rated as **aligned to NSPs** by the TRP (p.18 of annex)

**KPI 9b-i** For signed **HIV** grants, share of **investments in HRts** activities is at 2.45%, lower than 3% target. Still, for countries in the reported cohort (69% of the allocation), strong increase compared to the 2017-2019 allocation (p. 20 of annex)

**KPI 9b-ii** **Investment in HRts** has been very strong so far in signed **TB** grants with slightly more than 2% of budget, much higher than in previous allocation (p.21 of annex)



## Final results high for program design of 2017-2019 allocation

**KPI 4** Further assessments confirm high **efficiency gains** for programs in the 2017-2019 allocation with 87% showing gains. Results lower for TB (p.18 of annex)

**KPI 3** For the 2017-2019 allocation, **alignment** of country shares of **needs** (measured as allocation initial calculated amount) and eventual **funding** (measured as 3-year disbursements) stays high with a deviation at 0.30 - lower than the 0.32 target (p.17 of annex)

● On track / Achieved    ● Off track / Not achieved  
● At risk / Partially achieved    ● Not yet reported

▲ Improving    ▼ Deteriorating

Detailed results provided in a separate document GF/B45/14\_Annex 3

# Summary – incidence reduction still too slow and COVID-19 impact on RSSH



## Vast majority of 5<sup>th</sup> Replenishment disbursed

KPI 7a



Continued strong performance on allocation utilization with the majority (99%) of the **5<sup>th</sup> Replenishment disbursed** or forecasted to be. Utilization stays high across all portfolio categorizations (p.23 of annex)



## Incidence reduction still too slow though

KPI 1a



Between 2017 and 2019, close to 16m **lives** are estimated to have been **saved**; on track to reach the target of 28m-30m lives by end 2022 (p.25 of annex)

KPI 1b



However, **incidence** is not reducing at a sufficiently quick pace. Between 2015 and 2019, the reduction is estimated at 11.1%, still far from the 28%-47% target range at end 2022 (p.25 of annex)

- Both forecasts are estimated from published data from technical partners. They are based on trends up to 2019 and therefore do not factor in the expected negative impact of COVID-19. They will be revised once further data is available from partners



## RSSH KPIs impacted by COVID-19

KPI 6b



Supply chains sees mixed results with target met for 3 categories and barely missed for 3 others (malaria mainly) due to COVID-19 disruption (p.31 of annex)

KPI 6c-i



Mixed results for financial systems as # countries completing public financial management transition efforts is at target now (8/8) (p.32 att.)

KPI 6c-ii



However, # countries with financial management systems meeting defined standards is below target at 26/36, due to COVID-19 (p.33 of annex)

KPI 6d



HMIS coverage is also below target at 39%, mainly due to the impact of COVID-19 on the Timeliness score, despite improvements in most other areas (p.34 of annex)



## Positive results for SO-3 related program outcomes

KPI 9a



Mid-term assessment scores available for priority countries with comprehensive programs aimed at reducing human rights barriers with consistently strong improvements over baseline but better results for HIV programs than TB ones (p.35 of annex)

KPI 5c

KPI 6e

New indicators proposed: KPIs related to Key Population coverage (KPI 5c) and usage of data disaggregation, focusing on actual programmatic outcomes (see separate document on 'Adjustments to the KPI framework')

On track / Achieved   
 Off track / Not achieved  
 At risk / Partially achieved   
 Not yet reported

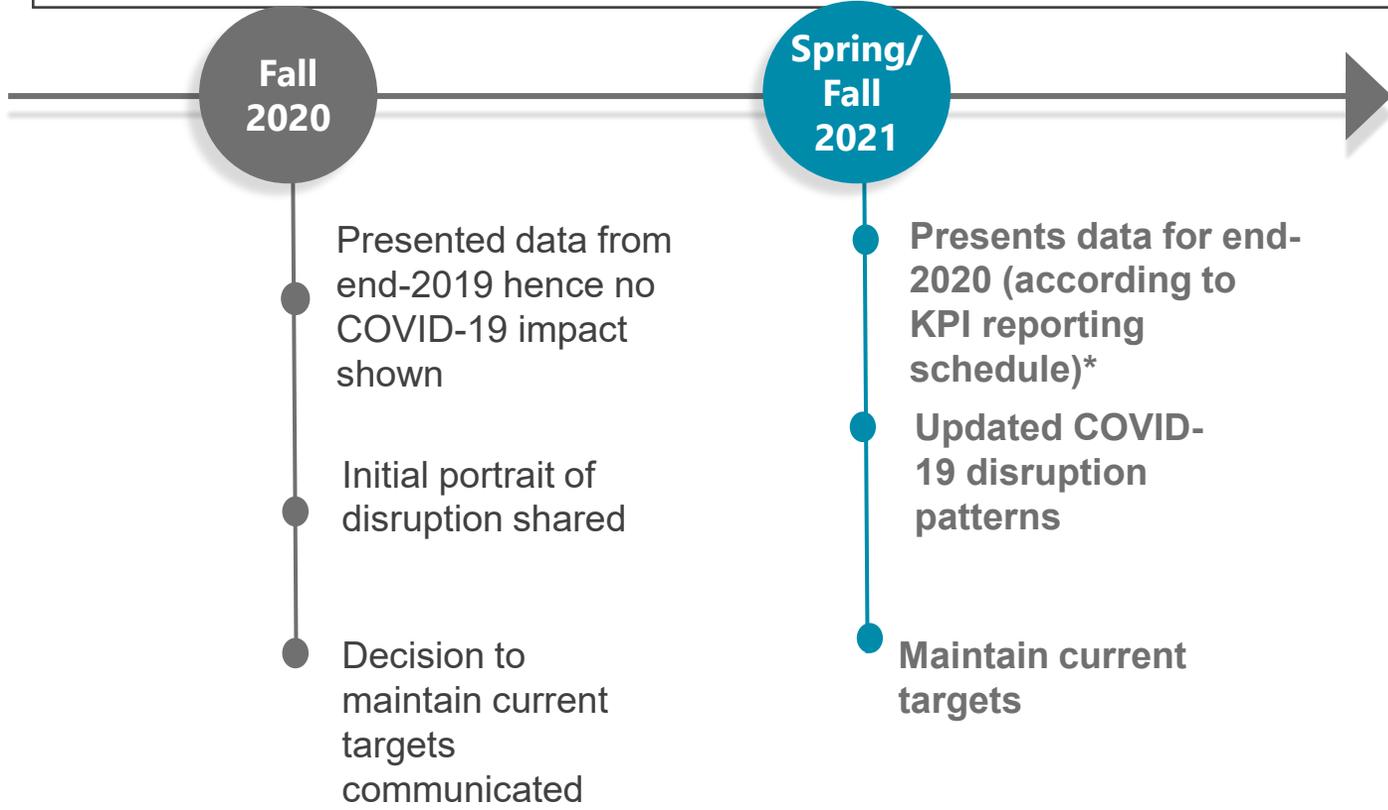
Improving   
 Deteriorating

Detailed results provided in a separate document  
GF/B45/14\_Annex 3



# COVID-19: Impact on Strategic Performance starting to show but full picture still not available

The **End-2020 Strategic Performance Report** shows mixed impact from **COVID-19** on KPIs. Beyond what is recorded below, the impact of COVID can be noted on the individual results pages for each KPI where relevant. Further description on **demonstrated COVID-19 disruption documented in Annex 2** (found in this report).



<b>Which KPIs show COVID-19 impact?</b>	
<b>KPI 1, 2, 8:</b>	Based on prior studies, incidence and mortality likely impacted. However not measured in KPI 1 this report (based on 2019 data). Service delivery disruptions have been noted and will likely impact KPI 2 results in Fall-2021 reporting
<b>KPI 6 b, c and d:</b>	Several RSSH KPIs impacted due to issues relating to timeliness of reporting, challenges around data quality, inability to provide TA, and priority focus shifted away from systems strengthening
<b>KPI 7b:</b>	Absorption will be reported in Fall 2021; reporting will include 2020 financial data. (Note: internal Secretariat reporting shows in-country absorption, while lower than target has been flat in recent quarters)
<b>KPI 9a:</b>	No measured effect but possible to see impact on completion of milestones in future reporting
<b>KPIs 10:</b>	No discernible negative impact on pledges/pledges conversion; new pledges in response to COVID-19
<b>KPI 11:</b>	Slight impact on KPI as domestic funding for 2020 has experienced constraints. Most of the data for this KPI is based on previous budget years though so no significant impact
<b>KPI 12b:</b>	COVID-19 likely to have led to savings higher than expected, as several countries attempted to proactively procure treatment to hedge against supply shocks from subsequent COVID-19 waves

\*Note: although data is collected from end-2020, several KPIs still report on data from prior to that time period as per the defined indicator methodology (e.g., KPIs reporting on prior allocation cycles)

# KPIs at risk of not achieving targets over the past year (1/2)

KPI	Latest Result	Last reported	Update on progress and/or mitigating actions	Affected by Covid-19?
<b>KPI 1b</b> <b>Incidence reduction</b>	<i>Incidence reduction projected at [18%-34%] at risk for target of 38% (28-47% range)</i>	<i>Spring 2021</i>	HIV: Continued efforts in new grants with greater focus on prevention activities and key populations. TB: Finding Missing Cases Strategic Initiative expanded to 20 countries. Success of initiative being observed in KPI 2 metrics at end-2019 (case notification). To be reported next in Fall 2021. Malaria: Focus continues to be on scale up of effective vector control, despite COVID-19, 2020 was a very ambitious year of scale up in LLIN distribution. Results to be reported in Fall 2021	Likely (to be reported in Spring 2022)
<b>KPI 2</b> <b>Service Delivery</b>	<i>Off track / at risk for achieving strategy targets for following services: %ART, PMTCT, %IPT, % TB &amp; MDR-TB TSR, %IPTp3</i>	<i>Fall 2020</i>	A formal step as been added at GAC approval for grants in the 2019-2021 allocation period to ensure alignment of cohorts and targets between newly signed grants and KPI 2. In addition: %ART : Countries with large share of strategy target will continue to scale up in new grants. PMTCT: Continue to work with partners to better align EID & PMTCT with national differentiated testing services %IPT: KPI results triggered IPT Strategic Initiative. TPT scale up with PEPFAR expected in new grants. Considerable momentum following UNGA-HLM. % TB TSR: Progress observed in countries with largest contribution to strategy target but overall progress restricted by smaller countries with challenges such as TB/HIV coinfections. % MDR-TB TSR: Progress in new grants expected through investment in DST and oral and shorter treatment regimes. %IPTp3: Supporting ongoing research with UNITAID on moving from facility to community based delivery.	Likely (to be reported in Fall 2021)
<b>KPI 5b</b> <b>Ability to report on coverage services for at least 2 KPs</b>	<i>64% of countries currently able to report (target 75%)</i>	<i>Fall 2020</i>	Continued coordination with WHO/UNAIDS and guidance developed on population estimates for MSM. Technical assistance to data systems has continued virtually and guidance provided during grant funding request proposals to ensure adequate funding for key population size estimates.	Likely (to be reported in Fall 2021)
<b>KPI6b</b> <b>RSSH: Supply chains</b>	<i>3/6 products meeting target; HIV and Malaria FLD; Malaria Diagnostics missing target</i>	<i>Spring 2021</i>	Data reporting was more challenging this cycle due to COVID-19 impacting ability to gather HF results; Q4 data used but 1-2 countries missing for some products Q2/Q3 had drop in performance but SI and Grant Investments turned this around for Q4 Note that target missed by a very small margin for all 3 products; all except Malaria FLD had OSA performance >90%; Malaria FLD missed target by <1%	Yes



Level of GF accountability (Conifer of control)



Not achieved



At risk/partially achieved

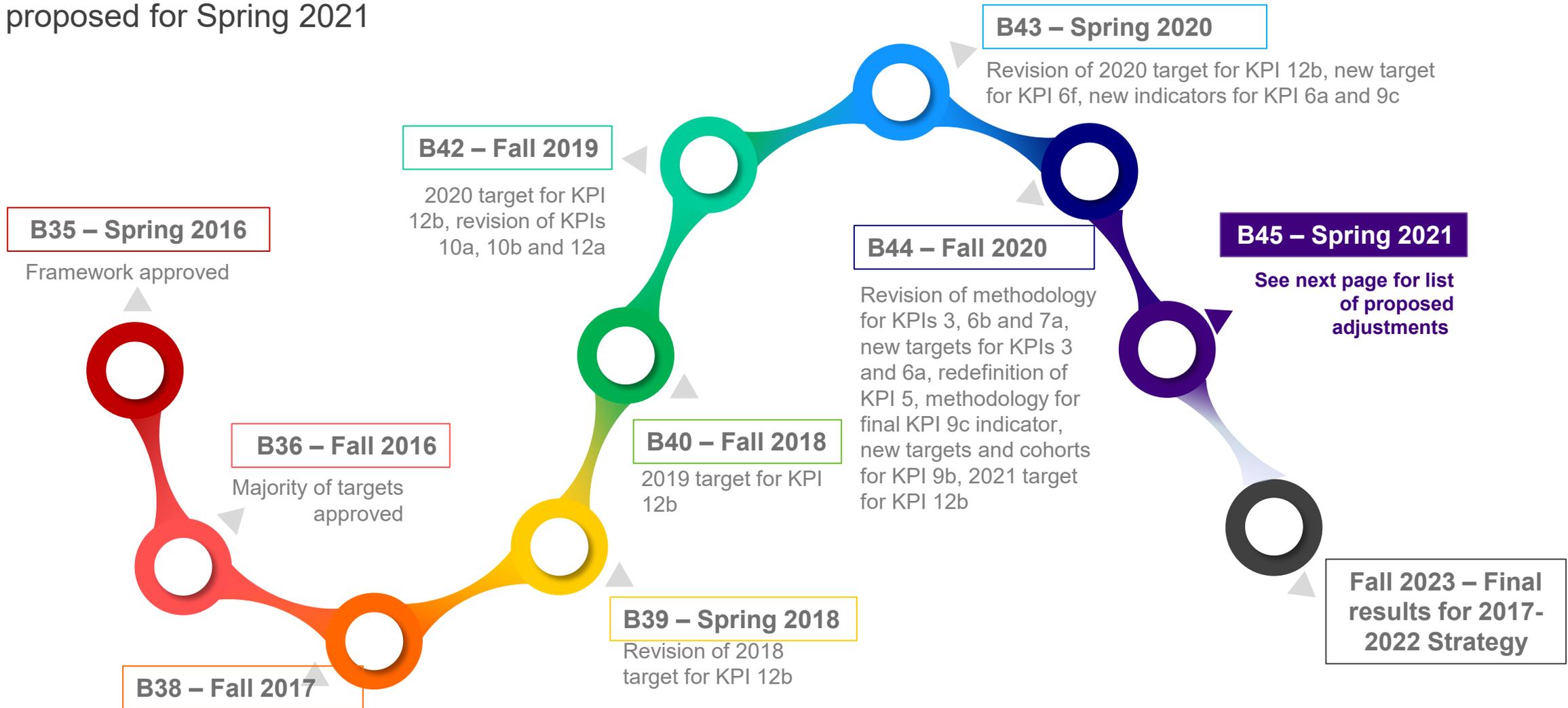


# KPIs at risk of not achieving targets over the past year (2/2)

KPI	Latest Result	Last reported	Update on progress and/or mitigating actions	Affected by Covid-19
 <b>KPI6c (ii) RSSH: Financial management</b>	<b>26 countries have &gt;= 80% agreed actions implemented to meet defined fin mgmt. system standards (target: 36),</b>	Spring 2021	Three reasons cited for underperformance: COVID-19 disruption made it harder to provide TA to complete actions; several countries had a change in scope of actions; GF shifted priorities away from this topic Despite this internal secretariat reporting shows that financial management performance actually improved in High Impact and Core countries	Yes
 <b>KPI6d RSSH: HMIS coverage</b>	<b>39% of countries in cohort have fully functional and deployed HMIS (2019 target 50%; 2022 target 70%)</b>	Spring 2021	Note – while not explicitly identified; extrapolated target for 2020 would be ~57%. All underperformance attributable to challenges around timeliness of reporting which was harder to do due to COVID. Targeted actions for increasing timeliness through grants are underway alongside focus on timeliness in the Data Strategic Initiative	Yes
 <b>KPI 8 AGYW Incidence</b>	<b>31% reduction in HIV incidence from 2015 baseline Incidence reduction projected at [47%-64%] at risk for target of 58% (47%-64% range)</b>	Fall 2020	Conservative projection has improved and lower bound of Strategy target is now in reach. The AGYW SI of USD 8m investment is supporting cohort countries in 1) effective investment approaches (i.e. University of Cape Town Consortium contracted assessing national AGYW strategies in Kenya, Mozambique, Cameroon, Lesotho and Eswatini), 2) adopting innovative HIV prevention technologies & approaches, and 3) promoting quality implementation through regionally-based technical accompaniment (i.e. UNICEF ESARO contracted to support all 13 AGYW priority countries on technical assistance). Despite the challenges of COVID-19 Principle Recipients have deployed innovative methods to ensure continuity of service delivery, a) Namibia: PrEP programs moving to include community distribution and proper use support. b) Botswana, Lesotho, eSwatini, Cameroon, Namibia, Malawi: Multi-month dispensing (ART) is now common for adolescents and young people living with HIV, which supports adherence and reduces their risk associated with clinic visits.	Likely (to be reported in Fall 2021)
 <b>KPI 9b (i) HRts investments in HIV grants</b>	<b>2.45% of HIV grant funds invested in human rights (target: 3.00%)</b>	Spring 2021	Collaboration and joint ownership of KPI 9b performance between CRG and GMD, in the frame of CRG Accelerate, are prerequisites for its achievement. Engagement between CRG, CTs, and PRs throughout the country dialogue, grant making, and implementation to advance progress under KPI 9b targets. As the KPI9b progress tracking in NFM2 has shown, portfolio optimization can significantly affect human rights investments. Future decisions on portfolio optimization should be in line with the GF strategic priorities, including SO3 and its KPIs.	No evidence for now

# History of KPI Framework adjustments

The Secretariat continues to adjust the KPI Framework to ensure it stays fit-for-purpose. A few adjustments are proposed for Spring 2021



# Summary of adjustments to the KPI Framework

The following KPI adjustments are proposed for Board approval. They are described in detail in an accompanying document called “Adjustments to the KPI Framework” (GF/B45/14\_Annex 3)

KPI	Definition	Reason for update	Recommendations
2	<i>Service Delivery</i>	Alignment with technical partners	<input type="checkbox"/> <b>Discontinue “ART retention 12 months”</b> from the KPI 2 indicators list <input type="checkbox"/> <b>Add “Viral Load Suppression (from patients on ART)”</b> to the KPI indicators list, with a cohort of 33 countries and a strategy target range of [83%-90%]
5c	<i>Service coverage for key populations (coverage level)</i>	Moving to final indicator, as scheduled	<input type="checkbox"/> Create new indicator to measure <b>programs performance against their own service coverage target</b> , using grant reporting as a data source <input type="checkbox"/> Focus on <b>achievement rate</b> (comparing actual coverage against program target coverage) instead of aggregate coverage level
6e	<i>RSSH - Disaggregation</i>	Proposed new indicator, more strategic	<input type="checkbox"/> Discontinue current indicator measuring the <b>reporting capacity</b> for disaggregated data <input type="checkbox"/> Replace by new indicator measuring the <b>use of disaggregated data</b> in country for program implementation or planning <input type="checkbox"/> Focus on High Impact countries; baseline and target to be established in Fall
7a	<i>Allocation utilization</i>	Admin update	<input type="checkbox"/> <b>Extension of current target</b> to the end of this Strategy cycle
9c	<i>Domestic investments in Human Rights and Key Populations</i>	Setting target for new indicator, as scheduled	<input type="checkbox"/> <b>New target for newly defined KPI (33% of countries in cohort meeting assigned benchmark)</b> to the end of this Strategy cycle
11	<i>Domestic investments</i>	Admin update	<input type="checkbox"/> <b>Extension of current target</b> to the end of this Strategy cycle



# Schedule for planned adjustments to the KPI Framework

KPI	KPI Description		2021 Spring Board	2021 Fall Board	2022 Spring Board
<b>KPI 1</b>	Performance against impact targets	Annual			
<b>KPI 2</b>	Performance against service delivery targets	Annual	Replacing ART retention (12 months) by Viral Load Suppression		
<b>KPI 3</b>	Alignment of investment & need	Semi-Annual			
<b>KPI 4</b>	Investment efficiency	Semi-Annual		Confirm target for new allocation period	
<b>KPI 5</b>	5c) Service coverage for Key Populations	Annual	Methodology and target for final indicator		
	6a) Procurement prices	Annual			
	6b) Supply chains	Annual			
	6c) Financial management	Annual			
<b>KPI 6</b>	6d) HMIS coverage	Annual			
	6e) Disaggregation	Semi-Annual	Methodology for new indicator	Baseline analysis, target setting	
	6f) NSP Alignment	Semi-Annual			
<b>KPI 7</b>	7a) Fund utilization – Allocation utilization	Semi-Annual	Confirm target for new allocation period		
	7b) Fund utilization – Absorptive capacity	Annual			
<b>KPI 8</b>	Gender & age equality	Annual			
	9a) Human rights programs	Annual			
<b>KPI 9</b>	9b) Human rights grant funding	Semi-Annual			
	9c) Human rights domestic funding	Annual	Target setting		
<b>KPI 10</b>	Resource mobilization	Annual			
<b>KPI 11</b>	Domestic investments	Annual	Confirm target for new allocation period		
<b>KPI 12</b>	12a) Availability of health technologies	Annual			
	12b) Affordability of health products	Annual		2022 target setting	

-  *Change of definition*
-  *Metric adjustment*
-  *New target for existing metric*

# Annex 2: COVID-19 and Strategic Performance

# Reminder: Despite the presence of COVID-19, KPI targets will likely be maintained till the launch of the Next Strategy

Changing targets would reduce the Global Fund's ability to consistently track progress from the start of the Strategy. Measurement of results against the same targets allows GF to better understand patterns of performance over the Strategy period



Strategic targets were set to support a bold aspiration that underlies the Investment Case. Keeping current targets allows GF to maintain ambition but also to measure divergence from this aspiration due to COVID-19.

Setting a target is a complex, consultative process and could divert attention (Board and Secretariat) from other priorities. Other tools are in place to monitor COVID-19 impact (see next pages)

The trajectory of COVID-19 globally and at the country level is uncertain. Disparity can be expected on the state of the 3 diseases + RSSH but the exact outcomes and still not be predicted



# The Secretariat has 2 specific COVID-19 monitoring data sources outside of KPI reporting that influence adaptive measures



Malaria (4)	TB (6)	HIV (13)
<b>Malaria diagnosis</b> Public sector Community Private sector	<b>TB case notification</b> Number of notified cases of TB (all forms)	<b>Key Populations</b> Package of services Testing
<b>Vector Control</b> LLIN continuous distribution	<b>MDR/RR-TB treatment enrollment</b> Nr of cases with drug-resistant TB (RR-TB and/or MDR-TB) that began second-line treatment	<b>Pregnant women</b> receiving ART for PMTCT
	<b>TB/HIV</b> Number of HIV-positive TB patients started on TB treatment during the reporting period on ART	<b>ART Treatment</b> Adults & children: currently on ART newly starting on ART
	<b>Notified TB cases by</b> Government Non-government / private sector, Community	<b>Adolescent Girls/Young Women</b> Package of services Testing

  
**Q2, Q3 2020**  
**403 facilities**  
 (15 per country)

  
**123 grants**  
**24 months**

Theme	Key Components
<b>Extent of health service disruption</b>	<ul style="list-style-type: none"> <li># of COVID-19 cases / deaths</li> <li>Overall level of disruption</li> <li>Service components most disrupted</li> <li>Changes in service demand</li> </ul>
<b>Impact on service providers (healthcare workers)</b>	<ul style="list-style-type: none"> <li># of COVID-19 cases among staff</li> <li>Level of staff disruption</li> <li>Causes of staff disruption</li> <li>Mitigation efforts</li> </ul>
<b>Stock availability &amp; PPE</b>	<ul style="list-style-type: none"> <li>Impact on tracer commodities</li> <li>Stock levels</li> <li>Impact on lab / testing services</li> <li>Availability of PPE</li> <li>Waste disposal measures</li> </ul>
<b>Adaptive measures</b>	<ul style="list-style-type: none"> <li>Types &amp; level of mitigation efforts</li> <li>Efforts to maintain/scale-up services</li> <li>COVID-19 campaigns</li> <li>Budget, reporting, supervision</li> </ul>



# Continued impact on all 3 diseases has been observed

## HIV

- Disruptions continue but some evidence that key services could maintain or increase levels of service
- There may be reductions for certain services (HTS, Tx new, KP) since Nov 2020 (to be confirmed with more data)
- 2020 level of services still below 2019 level

## TB

- Less than 10% of facilities surveyed were stocked out of TB medicines
- Approx. 60% of facilities surveyed had minimum stock of tracer medicines
- Across 14 countries, TB case notification had dropped to 68% in Q3 2020 vs Q3 2019
- 9 countries reporting on MDR TB-3, a reduction of 3301 fewer people moved to MDR TB second line treatment in Q3 2020

## Malaria

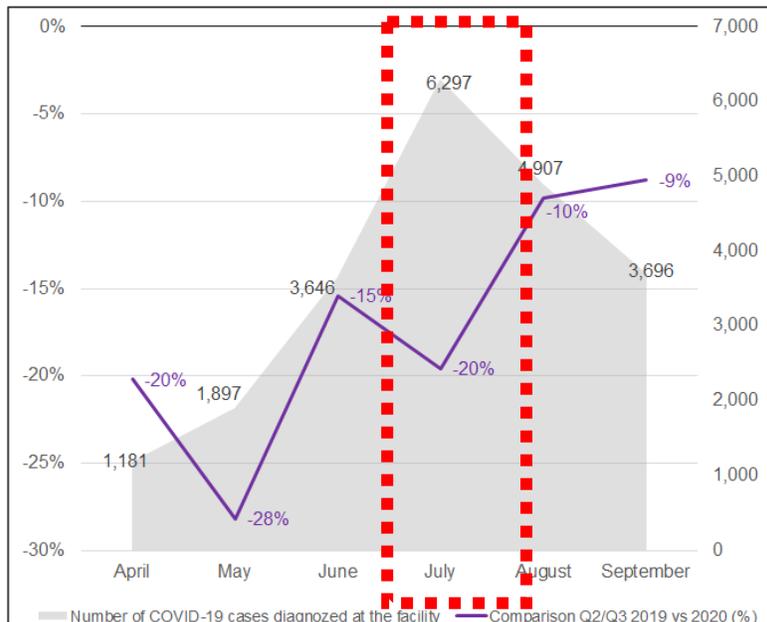
- Malaria indicators remained below 2019 levels by October and November 2020
- Facilities in High Impact Africa 2 countries reported the greatest decline in malaria case management
- Malaria commodities face stock shortages: only 56% of facilities surveyed had 1<sup>st</sup> line treatment for infants
- 80% of facilities had RDTs in stock

### Impact on strategic performance

- Continued disruption on all 3 diseases may continue to affect strategic performance into future cycles
- Will continue to depend on disease/country combination
- While not reported extensively in this report, service deliver indicators and those related to product availability/supply chain may see the greatest impact – more information will be available at Fall 2021 with KPI 2 reporting

# Service disruption continues to be linked to COVID-19

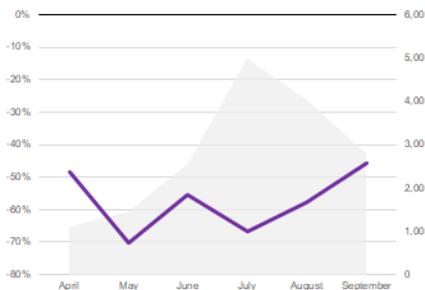
## Reduction in service attendance – Africa sample\*



## Service delivery indicators most disrupted in GF COVID monitoring\*

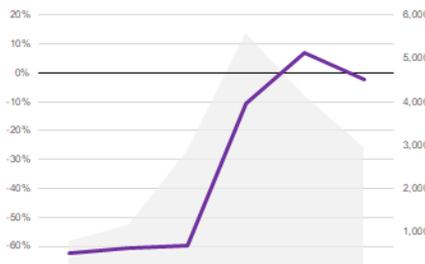
### TB referrals

Improving, but still lower than 2019



### ANC 1

Achieving similar 2019 levels after July



### Viral load

Records for 2020 higher than 2019



### LLIN dist.

Even continuous distribution during peak in July



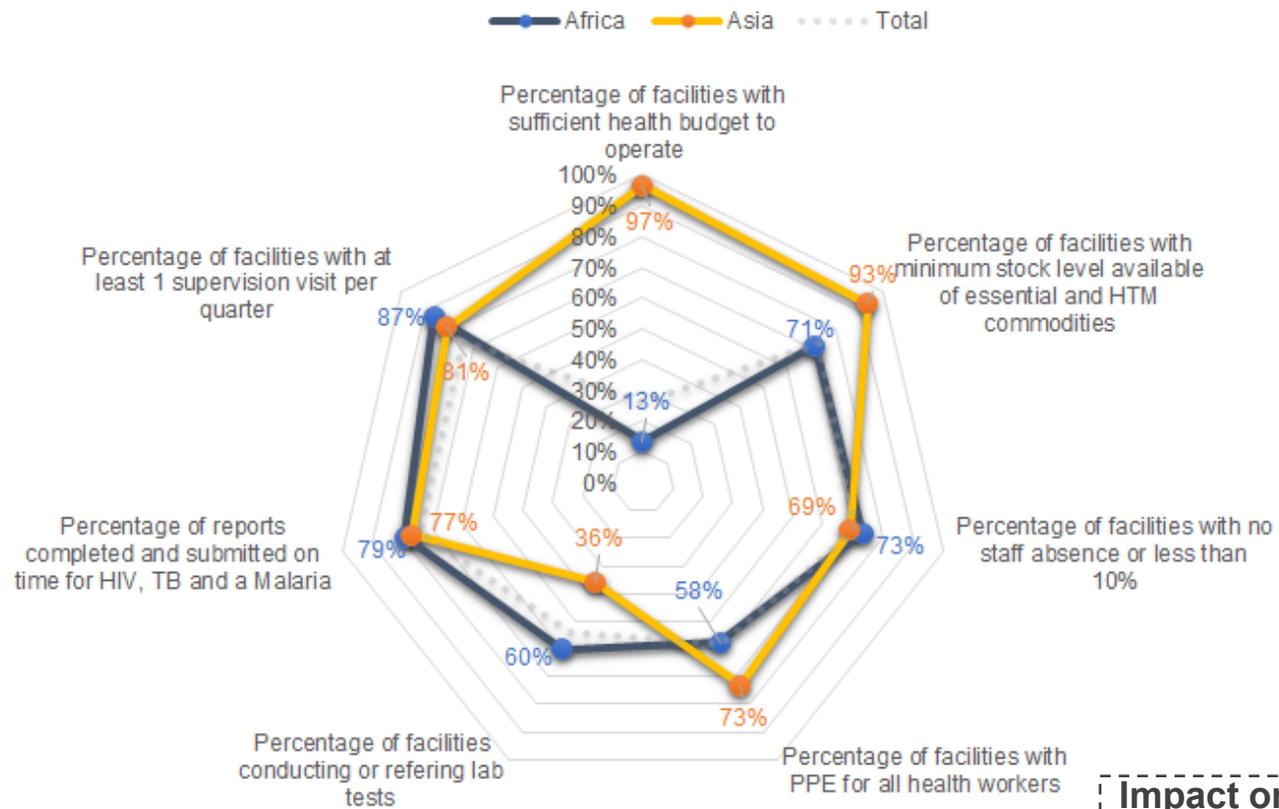
Number of COVID-19 cases diagnosed at the facility Comparison Q2/Q3 2019 vs 2020 (%)

- **99%** of facilities indicated a change in the levels of attendance during Q2-Q3 2020 relative to Q2-Q3 2019
- COVID-19 spike in July (Africa) appears to have caused disruption to certain services

### Impact on strategic performance

As a reminder – this report has not measured specific service delivery indicators this cycle as per the reporting schedule; HOWEVER, the suggested evidence for disruption to service attendance is likely to directly impact KPI 2 when reported in Fall 2021

# Health system resilience is also impacting service provision



*n= 28 countries, 395 facilities (Asia = 4 countries, Africa = 24 countries)*

- Overall, at least **¼ of facilities are facing difficulties** on readiness to provide services (N.B.: variations exist between countries & regions)
- **Lab capacity** is a critical need in the COVID-19 context, Asia shows a risk area
- **Insufficient health facility budget** in African countries, need to understand confounders
- **PPE availability** higher in Asian countries
- System areas benefitting from Global Fund investment appear to show **slightly better results**

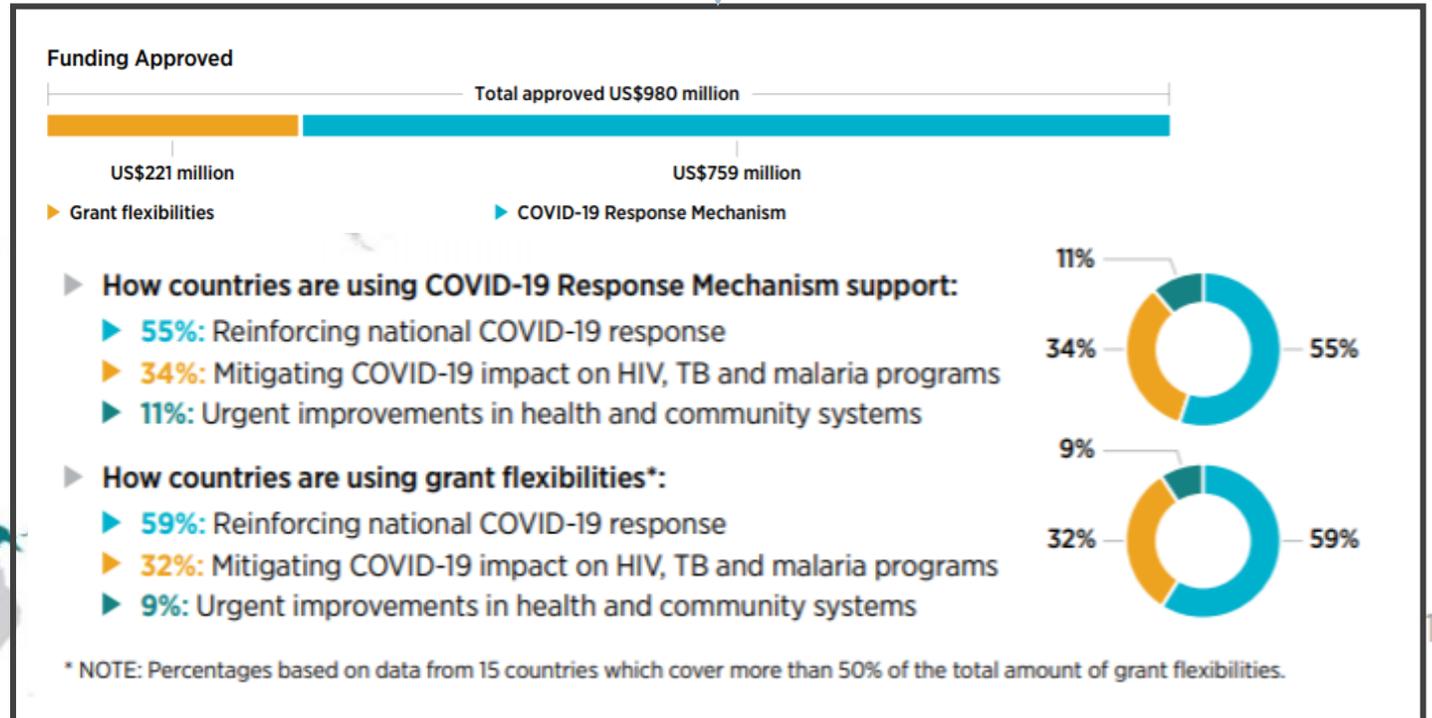
## Impact on strategic performance

- System capabilities will continue to be reflected in RSSH KPIs as they have been in some cases already
- These system effects will likely be felt in other KPI areas, especially service delivery in cases where results are poorly managed



# The Global Fund continues its response with a significant portion of funding being used to address C19RM directly

- ▶ Total funds approved to date: **US\$980 million**
- ▶ Countries receiving Global Fund support for COVID-19: **106** countries and **15** multicountry programs
- ▶ Total funds raised to date: **US\$259 million**
- ▶ Forecasted funding gap: **US\$313 million**
- ▶ Immediate fundraising target: a minimum of **US\$5 billion**



## Impact on strategic performance

- System capabilities will continue to be reflected in RSSH KPIs as they have been in some cases already
- These system effects will likely be felt in other KPI areas, especially service delivery in cases where results are poorly managed

# Glossary of acronyms used in this report

AGYW	Adolescent Girls and Young Women	MDR-TB	Multi drug resistant
ART	Antiretroviral therapy	MIC	Middle Income Country
ANTM	Antimalarial medicine	NFM	New funding model
BDB	Breaking Down Barriers	OIG	Office of the Inspector General
CCM	Country Coordination Mechanism	NSP	National strategic plan
CDR	Case detection rate	OTIF	On time and in full
COEs	Challenging Operating Environment	OSA	Off shelf availability
CPR	Country Portfolio Review	PBO	Piperonyl butoxide
CRG	Community, rights and gender	PAHO	Pan American Health Organization
EECA	Eastern Europe and Central Asia	PLHIV	People living with HIV
ERP	Expert Review Process	PF	Performance Framework
EPR	Enterprise Portfolio Review	PMTCT	Prevention of mother-to-child transmission
FLDs	First Line Drugs	PPM	Pooled Procurement Mechanism
GAC	Grant Approvals Committee	PQR	Price & Quality Reporting
GAM	Global AIDS Monitoring	RSSH	Resilient and sustainable systems for health
GF	Global Fund	SC	Strategy Committee
HI	High Impact (countries)	SO	Strategic Objective
HMIS	Health Management Information Systems	SI	Strategic Initiative
HRts	Human Rights	SEA	Southern and Eastern Africa
IPT	Isoniazid Preventive Therapy	ST	Strategy target
IPTp3	Intermittent preventive treatment in pregnancy	STC	Sustainability and transition & co-financing
IRS	Indoor residual spraying	TA	Technical Assistance
ITP	Impactful partnership	TRP	Technical Review Panel
KP	Key Populations	TSR	Treatment success rate
LAC	Latin America and the Caribbean	UMI	Upper Middle Income
LLIN	Long lasting insecticidal net	VMMC	Voluntary male medical circumcision
LMI	Lower Middle Income	WCA	West and Central Africa