



UNITE^{TO} FIGHT

COVID-19 RESPONSE MECHANISM

C19RM Monthly Update to the Board

Report for September - October 2022

Publication Date: 18 November 2022

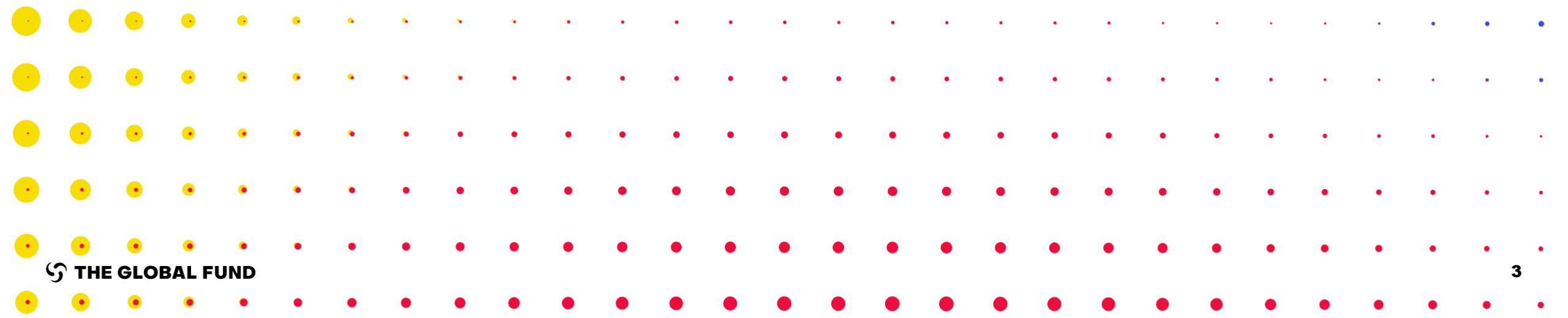
Geneva, Switzerland

Executive Summary for September / October Report

- 1 Development of C19RM Reporting:** C19RM reporting continues to evolve. Monthly reports provide updates on awards, progress in absorption/funds utilization and procurement pipeline. This edition exceptionally combines C19RM September and October's data due to the Secretariat's focus on C19RM extension and portfolio optimization. For previous Board reports, please visit [this page](#).
- 2 Update on COVID-19 Epidemiological Situation:** High Impact Asia remains the region with the highest confirmed cases followed by Southeast Asia. New cases have also been recorded in Eastern Europe and Central Asia with an increase of new registered cases in the latest two months. Overall new COVID-19 progression in the last month shows that cases are decreasing.
- 3 C19RM 2021 Awards:** The AFC increased total C19RM sources of funds from US\$4,817 million to US\$4,981 million, thanks to adjusted pledges from the United States (+US\$ 88.5 million) and Canada (+US\$ 75 million). As of 31 October 2022, C19RM has awarded or recommended for Board approval US\$4,217 million of C19RM 2020 and 2021 cumulative funding awarded to 125 applicants for a portfolio average of an amount equivalent to 33% of the 2020-2022 allocation. Since the launch of CMLI, US\$41 million (39% of total US\$106 million CMLI funds) has been awarded.
- 4 Finance Update:** 99% of C19RM 2021 awards are integrated into grants, 70% of the cumulative budget has been committed, and disbursements are at 55% of cumulative budget until 31 October 2022. In-country absorption based on September 2022 proximal financial data remains low at 31% due to lower-than-expected demand. Reinvestment and portfolio optimization process is expected to unlock the ability of implementers to gear investments towards emerging needs with higher impact and absorption potential.
- 5 Health Products:** Health Products represent 67% of C19RM 2021 awards. Orders for US\$855 million (US\$829 million as of September) of COVID-19-related health products have been placed through PPM/wambo.org since 2020, with US\$657 million delivered (US\$638 million as of September). Conversion of Non-PPM budget to purchase orders increased to 32% of the QTD (quarter to date) budget or 28% of the three-year total with some significant procurements in the pipeline. [Diagnostics](#) represent 23.1% of awarded C19RM 2021 funds (US\$799 million) and C19RM portfolio optimization requests contain substantive demand for bidirectional testing interventions and an increase in sequencing technologies. [Project STELLAR](#) is providing Technical Assistance (TA) across many diverse areas alongside C19RM activities. [Oxygen](#) represents 16.5% of C19RM 2021 funds (US\$566 million) including O2 production, storage and distribution and patient delivery and is one of the highest C19RM investment categories. [Project BOXER](#) addresses the need for technical capacity-building and support in the operation of PSA plants with complex TA support provided to 45 countries and upcoming transition from developing plant specifications to site readiness preparations. [IPC/PPE](#) represents 18% (US\$616 million) of awarded C19RM 2021 funds: shifting focus to IPC program strengthening (only 6% of IPC/PPE budget) will be crucial to maintain these gains as the pandemic shifts and emerging variants arise and are a key component for disease prevention in healthcare, including COVID-19, tuberculosis, and Ebola.
- 6 C19RM portfolio optimization and request for C19RM extension:** Since pandemic and funding needs have evolved from pure COVID-19 response to rebuilding and strengthening systems and countries' ability to fight new pandemics, longer timelines are required to develop, review, and approve quality preparedness and health system strengthening requests. To leverage C19RM reinvestment and portfolio optimization to ensure complementarity with next funding cycle, the Secretariat discussed the C19RM proposal with the Committees of the Board and submitted the decision on the extension to the Board for approval in November.

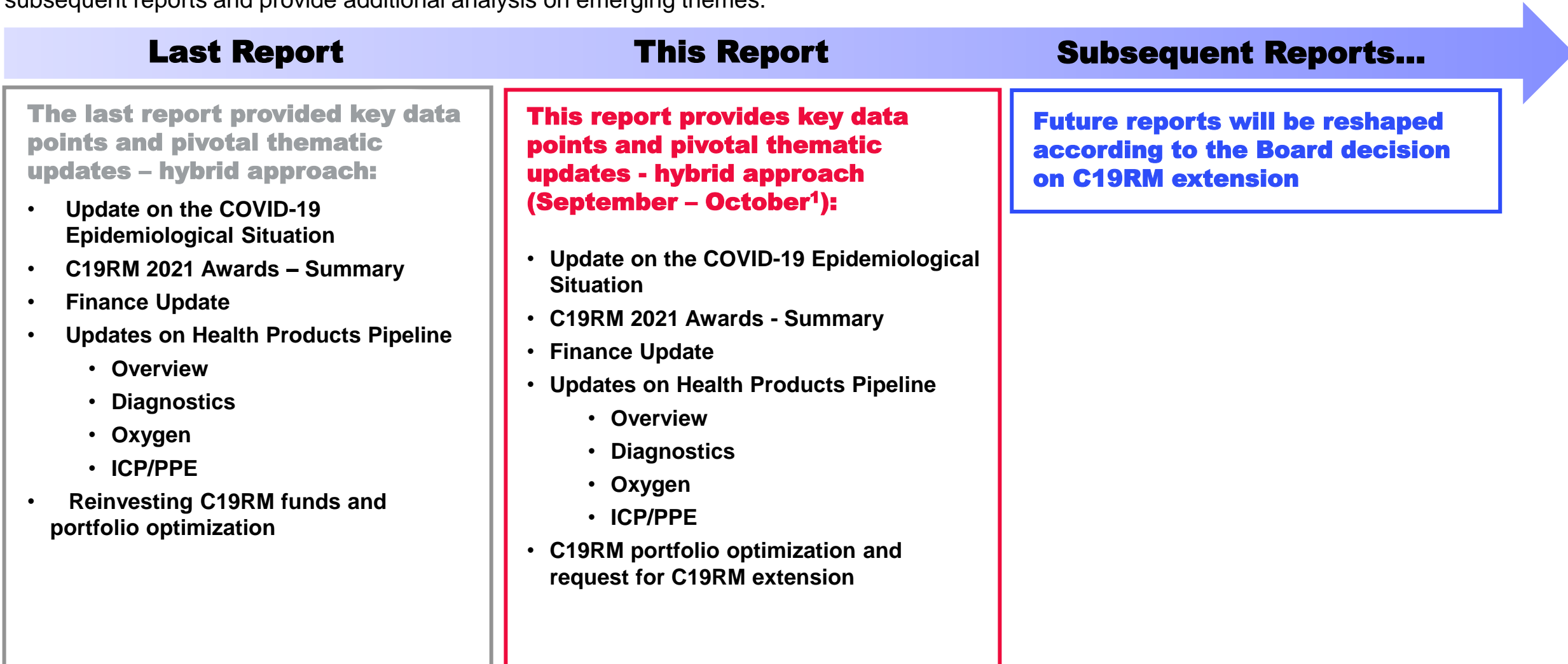


1 Progressive Development of C19RM Reporting



Development of C19RM Monthly Reporting

[Last month's report](#) covered key detailed updates from financial and programmatic performance, COVID-19 program disruption, award and pipeline summary updates, and reinvesting C19RM funds and C19RM portfolio optimization. These sections will continue to be updated in subsequent reports and provide additional analysis on emerging themes.

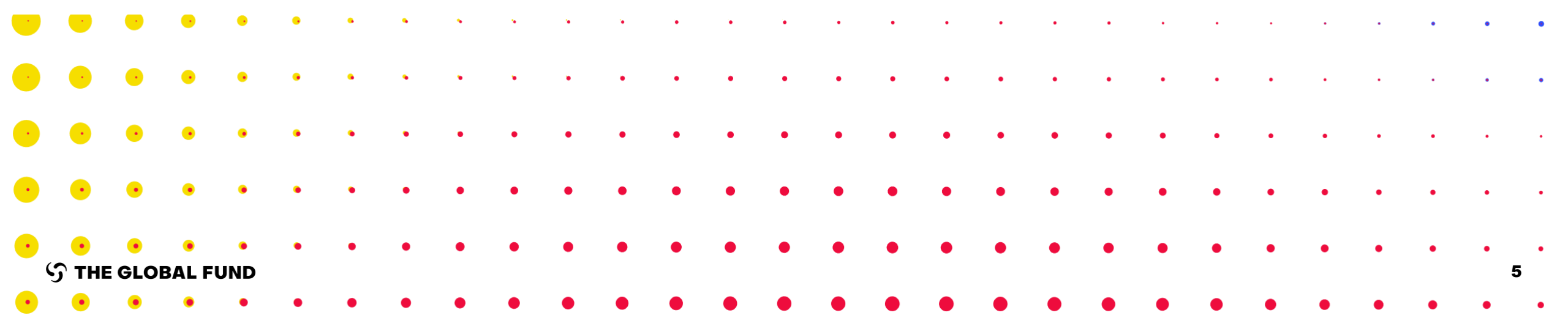


¹This report exceptionally combines C19RM September and October's updates due to the Secretariat's focus on C19RM extension and portfolio optimization.



2

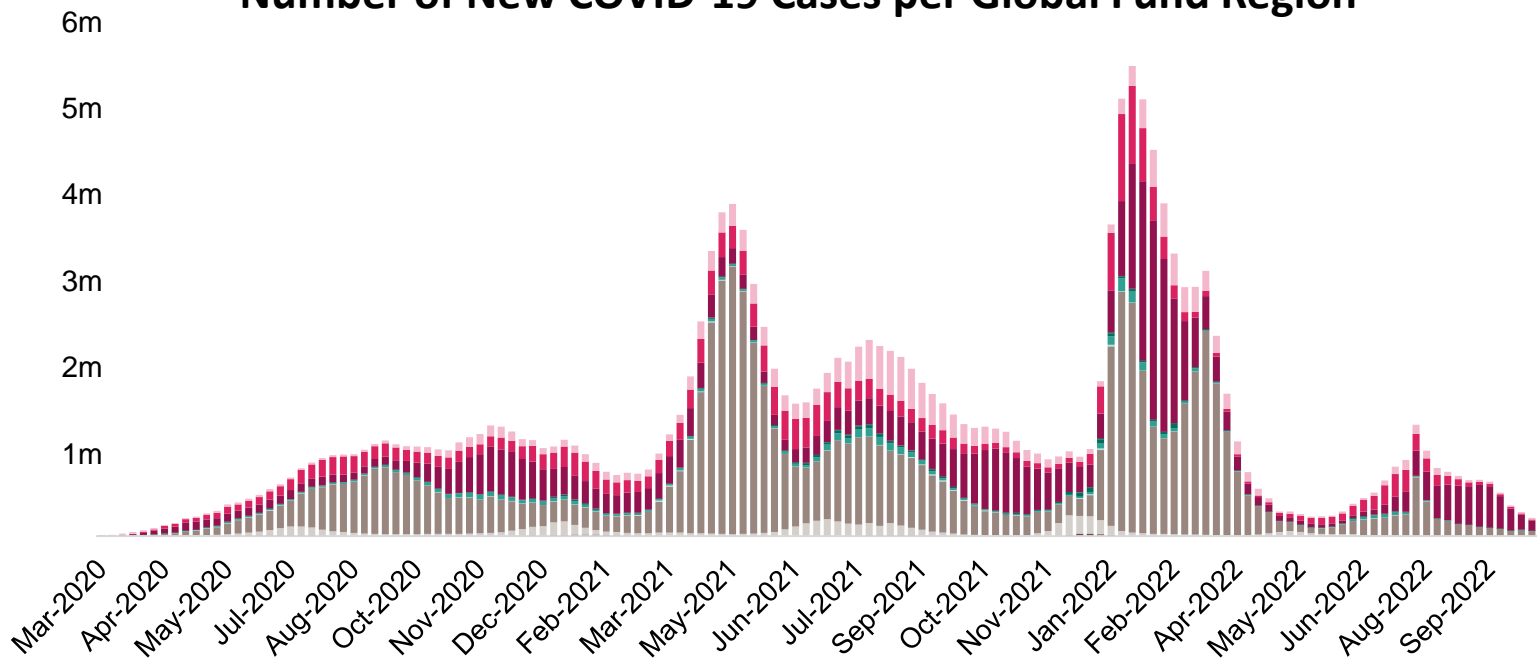
Update on COVID-19 Epidemiological Situation



COVID-19 Burden in Regions the Global Fund Supports

COVID-19 pandemic has evolved, and overall cases has lowered in September – October, even if new cases are registered, especially in Eastern Europe and Central Asia.

Number of New COVID-19 Cases per Global Fund Region



| Region | New cases since last Board report*** |
|------------|--------------------------------------|
| AELAC-SEA | 157,650 |
| AELAC-LAC | 182,698 |
| AELAC-EECA | 2,293,604 |
| AME-WA | 1,912 |
| AME-SEA | 11,820 |
| AME-MENA | 4,410 |
| AME-CA | 2,279 |
| HIAAsia | 613,415 |
| HIA-2 | 20,664 |
| HIA-1 | 7,648 |

True infections far outnumber confirmed cases in many countries. See <https://ourworldindata.org/covid-models>

***High Impact Africa 2:**

South Africa, Ethiopia, Kenya, Zambia, Mozambique, Zimbabwe, Uganda, Zanzibar

****MENA:** Morocco, Tunisia, Egypt, Algeria, Mauritania, Sudan.

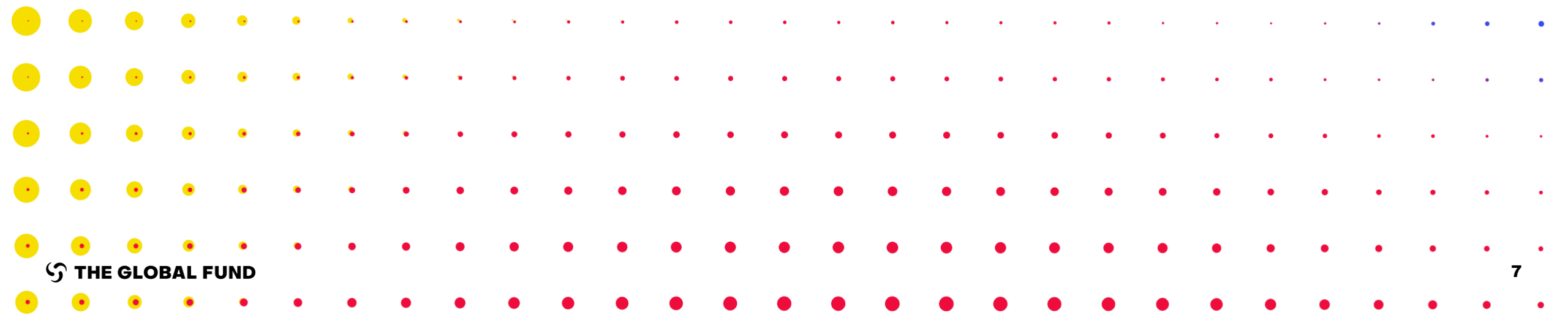
SUMMARY*

- According to WHO, as of **31 October 2022**, there have been 626.33 million confirmed cases of COVID-19, including 6.57 million deaths reported to WHO worldwide. Confirmed cases in the Global Fund portfolio are 166,46 million, while deaths are 2.20 million. **High Impact Asia remains the region with the highest confirmed cases followed by Southeast Asia. High Impact Asia has a total of 75.7 million confirmed cases, with 0.6 million new cases in the last two months.**
- New cases have also been recorded in **Eastern Europe and Central Asia with an increase of 2.3 million new cases in the last month.** Confirmed cases in Latin America and Caribbean rises to 19.9 million while those in *High Impact Africa 2 stays at over 5.9 million and the **MENA region is at over 3.3 million.
- Overall new COVID-19 progression in the last month shows that cases are decreasing.
- **Seven Global Fund implementing countries are also among the top 25 countries in the world with the highest cumulative cases.** These include India, Russian Federation, Vietnam, Iran, Indonesia, Colombia and Ukraine.

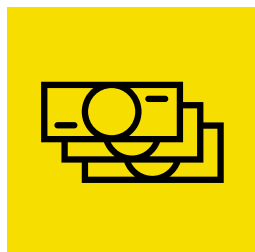
*New cases include data from last report (September – data as of 31 August 2022)



C19RM 2021: Awards



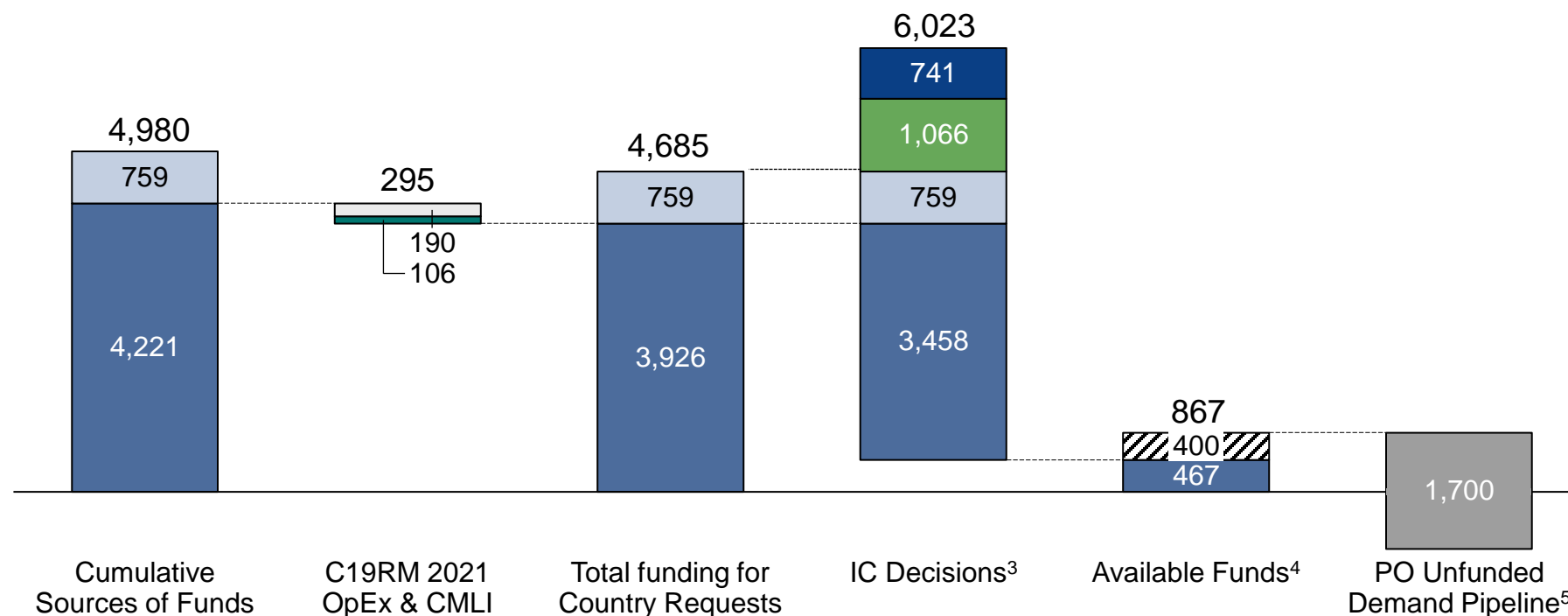
C19RM Available Funds



On 13 October 2022, the AFC increased total C19RM sources of funds from **US\$4,817 million** to **US\$4,980 million**, thanks to adjusted pledges from the **United States (+US\$ 88.5 million)** and **Canada (+US\$ 75 million)**.

US\$4,217 million of C19RM 2020 and 2021 cumulative funding awarded to **125 applicants** for a portfolio average of an amount equivalent to **33%** of the **2020-2022 allocation**.

C19RM 2020 & C19RM 2021 Awarded & Requested Amounts (US\$ million)



¹OpEx increase from 3.0% to 4.5%, approved by the Board on 16 November 2022.

²US\$1,066 million of Registered Unfunded Demand from initial C19RM 2021 funding requests (from 75 applicants). C19RM 2020 Contingent upon funding (US\$272 million) not considered.

³US\$232 million of COVID-19 grant flexibilities for urgent funding gaps were approved, **not included in the chart**.

⁴13 October 2022, AFC approved US\$400 million for C19RM 2021 Portfolio Optimization and US\$467 million remains available for Country requests (with US\$3,458 awarded out of US\$3,926)

⁵49 additional requests to finance unfunded demand for a total of US\$1,700 million.

OpEx (4.5%)¹ C19RM 2020 & 2021 Activities not approved Funds for Portfolio Optimization C19RM 2021
 CMLI (2.5%) C19RM 2021 pre-PO Registered Unfunded Demand² C19RM 2020 Unfunded Demand submissions

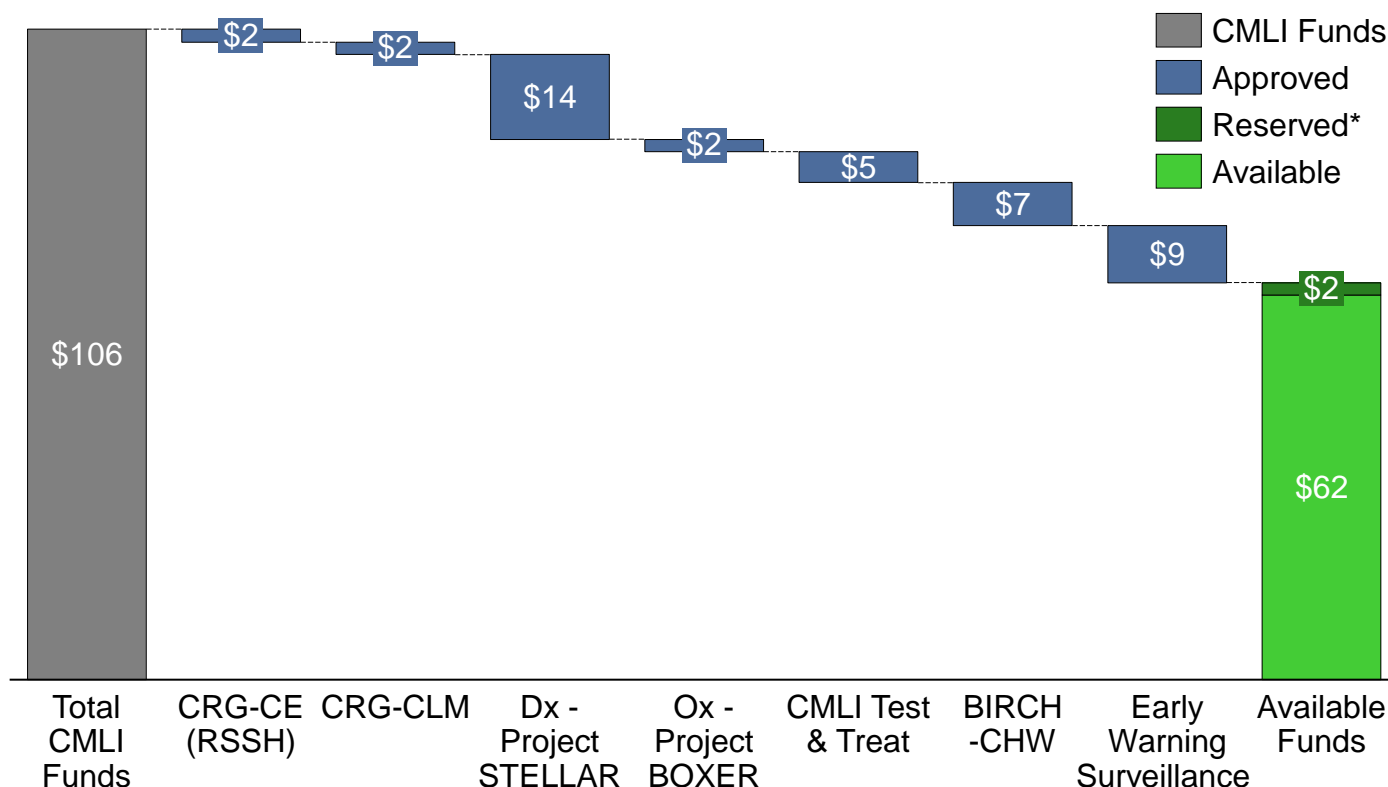
Overview of Centrally Managed Limited Investments Awards (CMLI)

- **US\$106 million (2.5% of total sources of funding)** has been earmarked for CMLI.
- Since the launch of CMLI, **US\$41 million (39% of total CMLI funds)** has been awarded.
- Project BOXER (oxygen) may potentially access an additional **\$2 million**.
- As part of a Test and Treat CMLI, the Global Fund is piloting an initiative in Bangladesh, Botswana, Côte d'Ivoire, El Salvador, Ghana, Lesotho, Malawi, Mozambique, Rwanda, and Senegal, in partnership with USAID.
- **Pipeline** includes additional funds for Civil Society & Community Engagement CMLI, as well as for Pandemic Preparedness workforce.

CMLIs approved (US\$41M) to support C19RM investments being implemented in 57 countries*

| CMLI | Technical Area and Priorities | Budget (US\$ m) | No. Countries |
|------------------------------|---|-----------------|---------------|
| CRG Community Engagement | Strengthening Civil Society and Community Engagement | 2.4 | 16 |
| CRG Community-led monitoring | Community-led monitoring | 2.0 | 7 |
| O2- BOXER | Building Oxygen capacity for the COVID-19 Emergency Response | 2.0 | 45 |
| Dx – STELLAR | Strengthening C19RM diagnostics & Laboratory systems | 13.8 | 23 |
| Test and Treat | Accelerating New Product Introduction and Scale-up of COVID-19 Test and Treat | 5.0 | 3 |
| BIRCH-CHW | Building Integrated Readiness for Community Health | 7.0 | 4 |
| E2ESR | Early Warning Surveillance | 9.3 | 14 |

C19RM CMLI Awards (US\$ million)

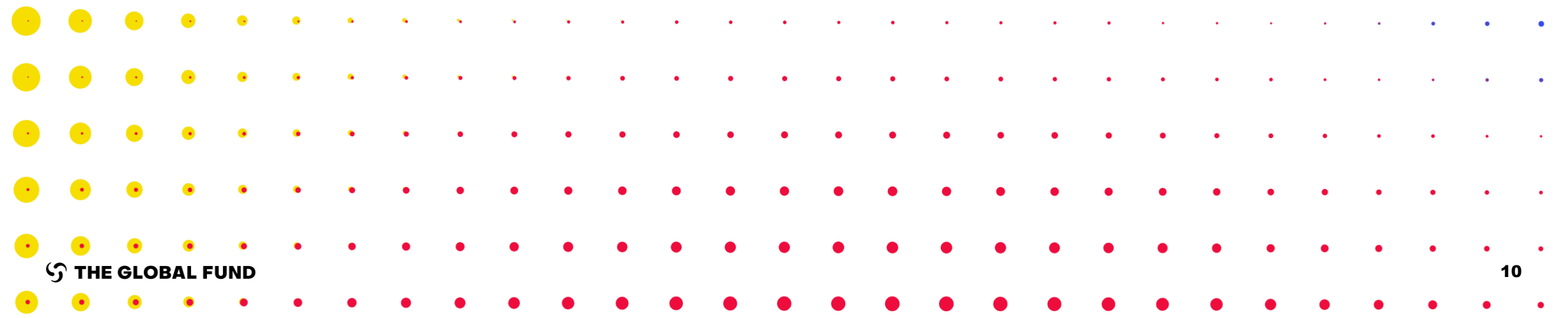


* The CDC and USAID C19RM set-asides also target the successful implementation of C19RM interventions, closely coordinating with the Global Fund Country Teams and other in-country partners and complementing the CMLIs



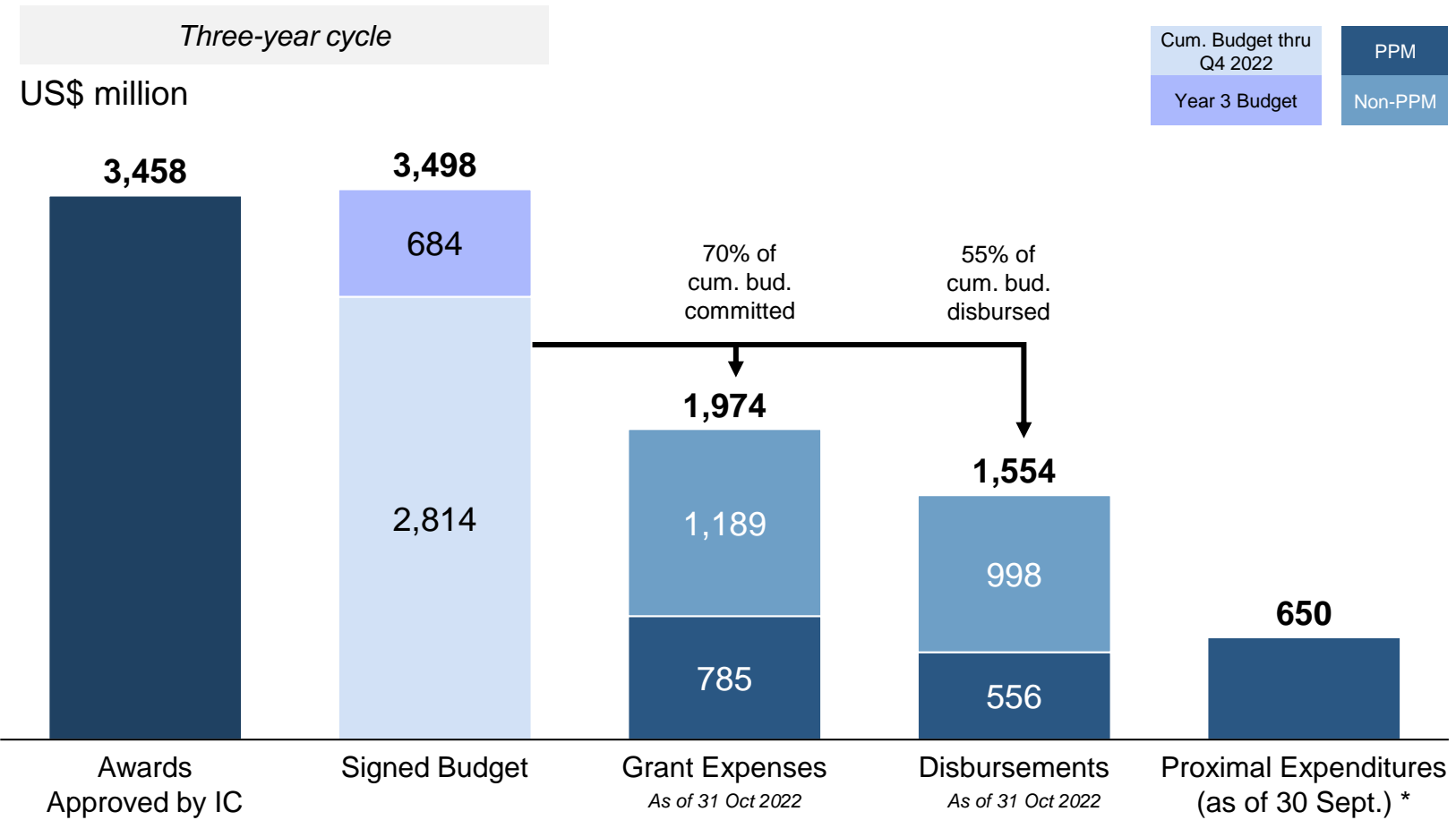
4

Finance Update



C19RM 2021 highlights implementation challenges adversely impacting absorption. This requires tactical reinvestment decisions geared towards funding an evolving investment landscape to improve absorption

As of 31 October 2022

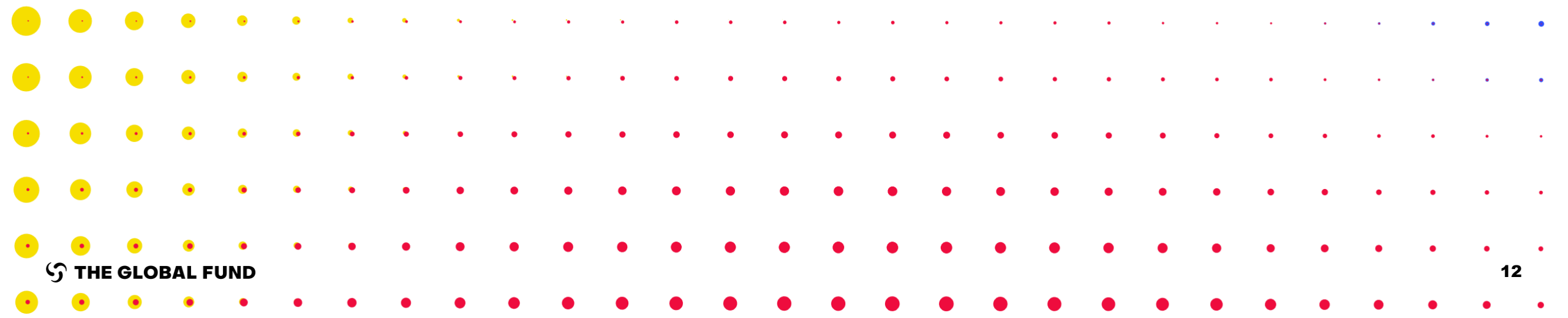


- 70% of the cumulative budget until 31 Dec 2022 has been committed, including orders placed in wambo.org, the Global Fund’s online procurement platform.
- Total cumulative disbursements of US\$1,554 million on 31 Oct 2022, representing 79% of commitments, and 55% of the cumulative budget until 31 Dec 2022
- In-Country Absorption based on September 2022 proximal financial data remains low at 31% due to lower-than-expected demand
- The Secretariat formally registered demand from countries of approximately US\$ 1.7b for potential portfolio optimization towards financing emerging needs.
- Reinvestment and portfolio optimization process is expected to unlock the ability of implementers to gear investments towards emerging needs with higher impact and absorption potential.



5

Health Products Overview



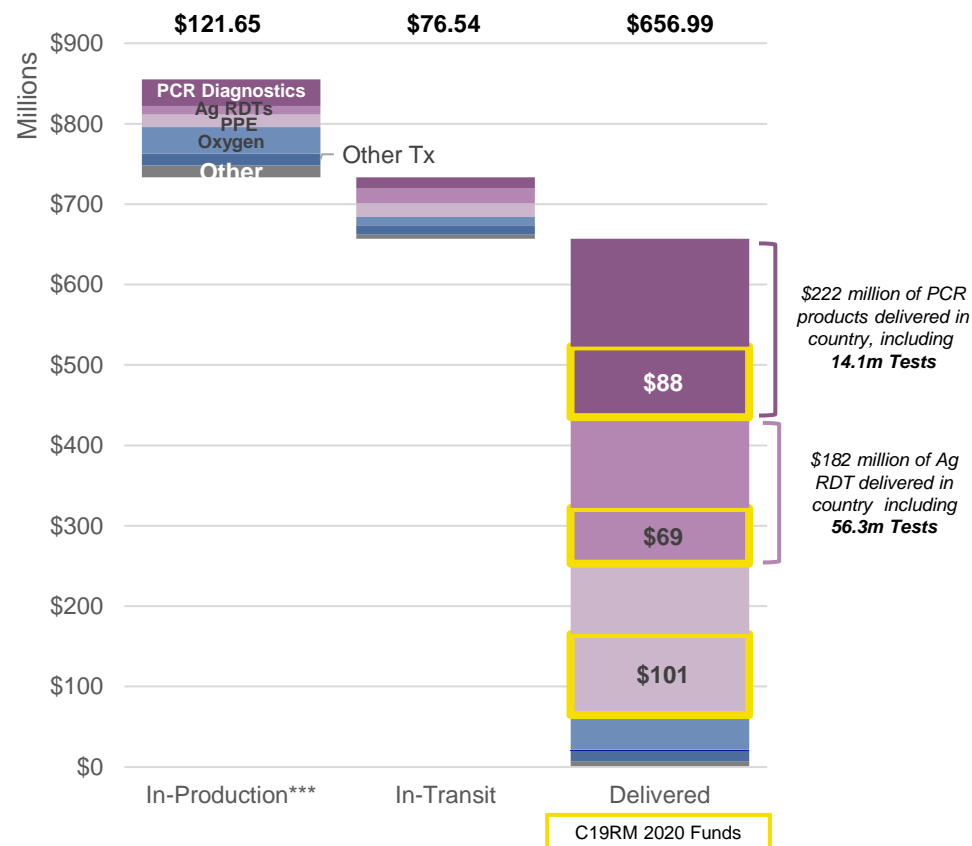
C19RM Demand and Supply: General Trends

| | Country Demand | Supply/Logistics |
|----------------------------------|---|--|
| Overall | <ul style="list-style-type: none"> • Low incremental demand in converting earlier awards into purchase orders with 54% PPM C19RM procurement conversion to purchase orders against pre-reinvestment baseline • New demand anticipated in the context of reinvestment and portfolio optimization. | <ul style="list-style-type: none"> • Limited manufacturing supply constraints. • Continued but lower current disruption to the global supply chain and logistics with improved freight reliability. • Uncertainties related to inflation, impact of Ukraine war, Covid-19 related restrictions and freight provider constraints remains. |
| Diagnostics | <ul style="list-style-type: none"> • Decreasing demand for RDTs and PCR tests for COVID-19 response • Country requests contain substantive demand for bidirectional testing interventions • Increasing demand for complex Diagnostic technologies including next generation sequencing technologies and X-ray systems. | <ul style="list-style-type: none"> • Suppliers report of significant manufacturing capacity and available stocks of Covid-19 diagnostic tests. Potential delays for TB tests are being proactively managed. • For complex technologies (sequencing, X-rays): supplier arrangements are in place to source and deliver the products. |
| Infection Prevention and Control | <ul style="list-style-type: none"> • Decreasing demand as COVID-19 control measures relaxed. | <ul style="list-style-type: none"> • Existing supply outpaces demand for PPE and other infection control products. • Decreasing manufacturing capacity resulting from manufacturer consolidations for future PPE needs. |
| Case Management/ Therapeutics | <p><u>Oxygen:</u></p> <ul style="list-style-type: none"> • Execution is taking longer than anticipated due to complexity of interventions and in-country capacity (ex. lengthy timeline of award to orders to delivery due to complex technical specifications of PSA plants.) • Increased need for Project BOXER technical assistance (45 countries total to-date), supported by and aligned with ACT-A & Oxygen Working Group. • Evolving focus of Project BOXER to include on-site preparedness and installation of PSA plants. <p><u>Therapeutics:</u></p> <ul style="list-style-type: none"> • CMLI Test & Treat started: CHAI providing TA to Zambia, South Africa and Nigeria, to support the introduction of the new COVID-19 oral antivirals (introduction in the guidelines, regulatory approval and registration), and the implementation of the Test & Treat strategy (i.e., training of health workforce, creation of job aids). | <p><u>Oxygen</u></p> <ul style="list-style-type: none"> • PSA plant manufacturing timings, global events, freight challenges and in-country site infrastructure requirements continue to impact supply to drive long lead-times for PSA plant orders. <p><u>Therapeutics</u></p> <ul style="list-style-type: none"> • Generic molnupiravir is now listed on Wambo.org through PPM PSA I+Solutions • First RFP window for Paxlovid has also been closed but currently no QA approved generic source, expected end 2022 • Countries to be advised to place demand in wambo according to the standard process, communication to be finalized. |

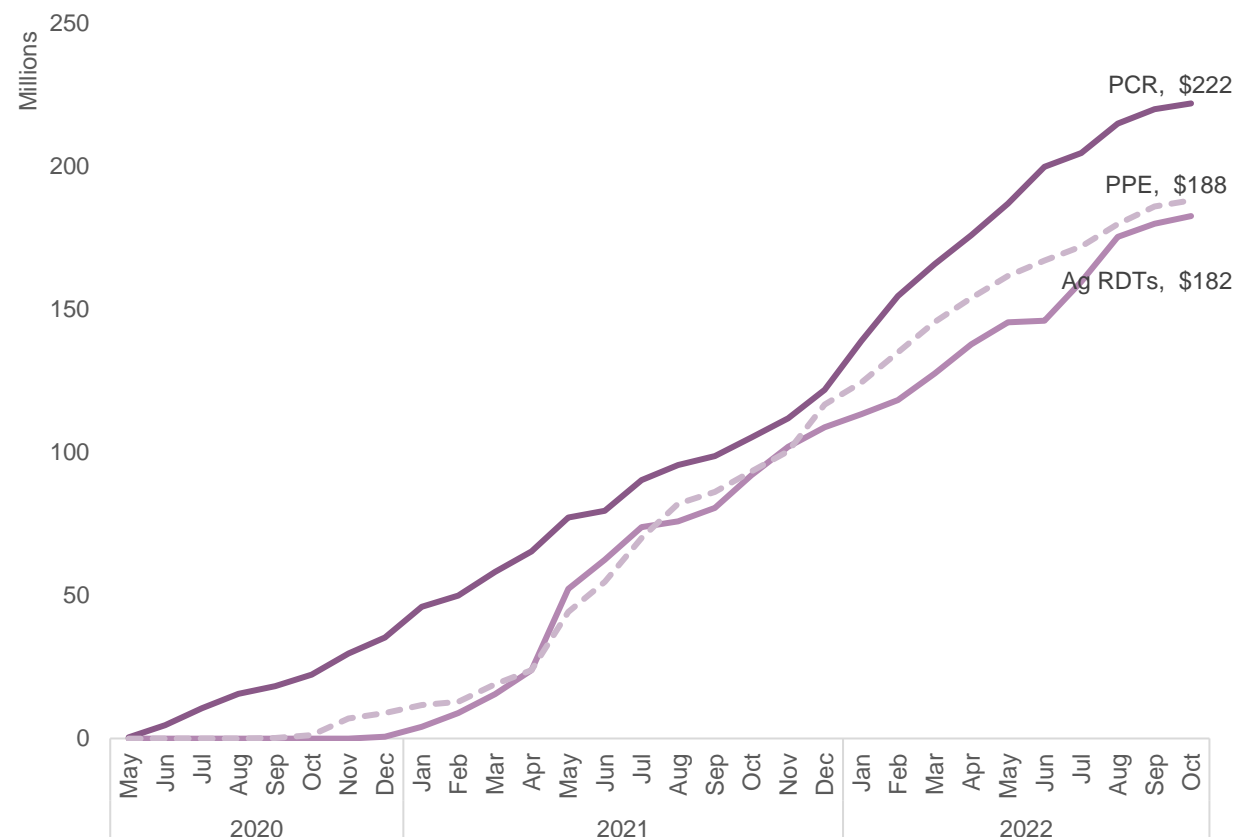
Orders for US\$855 million* (US\$829 million as of Sep) of COVID-19-related health products have been placed through PPM/wambo.org since 2020, with US\$657 million delivered (US\$638 million as of Sep).

- US\$2.8 billion awarded since 2020 for the procurement of COVID-19 health products. For both C19RM 2020 & 2021: Dx: US\$981m; PPE: US\$769m O2: US\$578m.
- US\$259 million products delivered through PPM with C19RM 2020 funds. US\$398 million (US\$379 million in Sep) products delivered through PPM with C19RM 2021 funds.
- Purchase Orders of US\$198 million (compared to US\$191 million in Sep) for products remaining to be delivered with ~90% expected by April 2023

Cumulative PPM Procurement Pipeline (US\$)**



Cumulative PPM Deliveries by Month (US\$)****



* Reporting on aggregate value of orders and split by category is being refined over time to reflect any savings achieved on completed orders and to exclude procurement of non-health products

** Based on Procurement Service Agent data as of 1 August 2022

*** Production includes process through to importation clearance and pick-up for transfer to flight/vessel

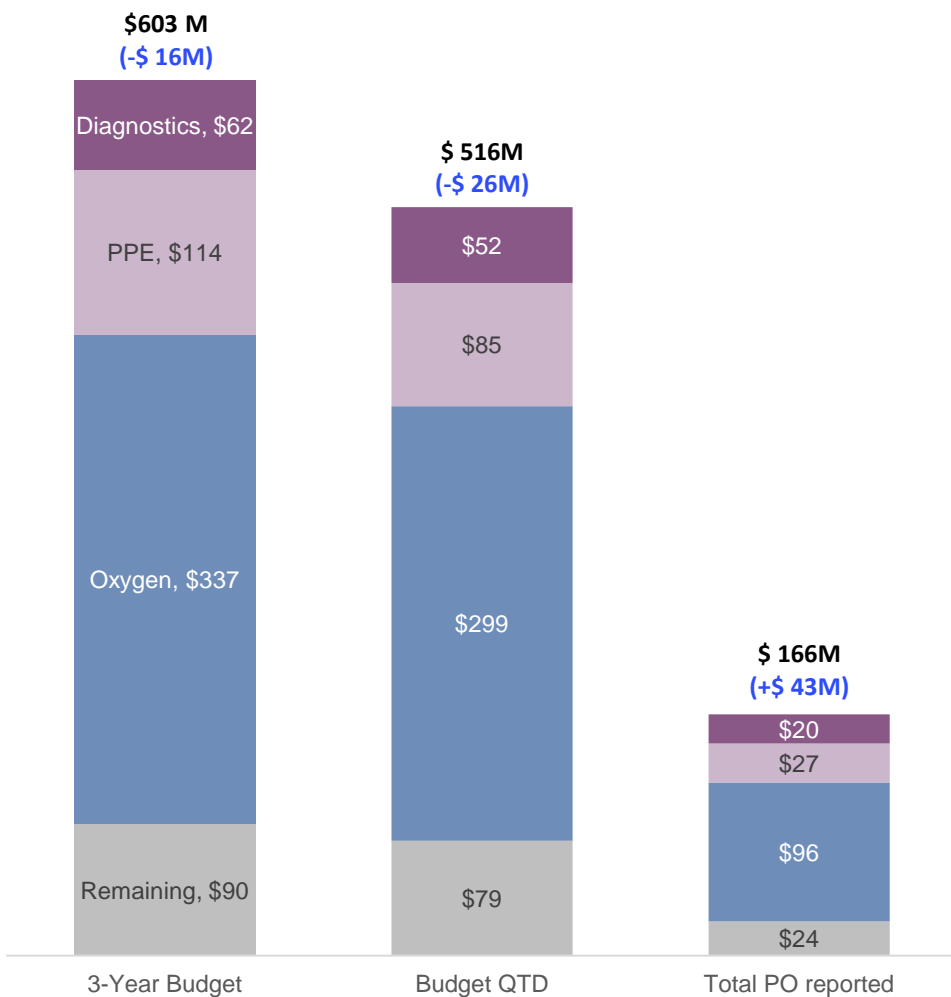
**** Dollar value of deliveries by month may change slightly over time due to potential reporting lags as well as revisions over time

Non-PPM procurement reporting¹: Oct 2022

Note: Countries/PR currently undergoing C19 reinvestment and portfolio optimization discussions - likely to result in budget shifts across product categories and procurement channels.

Top 45 countries only (in \$M)

(reflects implementation-focused HPMT where available)



At grant level

| By Region | Expected report | Report received | % Reporting |
|--------------|-----------------|-----------------|-------------|
| HIA1 | 8 | 8 | 100% |
| HIA2 | 10 | 9 | 90% |
| HIA | 17 | 16 | 94% |
| AME | 25 | 23 | 92% |
| AELAC | 5 | 5 | 100% |
| TOTAL | 65 | 61 | 94% |

| | Non-PPM Budget QTD | 3 years Non-PPM Budget ² | Reported PO Amount ² | Budget conversion rate QTD | 3 years budget conversion rate |
|----------------------------|--------------------|-------------------------------------|---------------------------------|----------------------------|--------------------------------|
| By Region | | | | | |
| HIA1 | 37 | 54 | 28 | 76% | 52% |
| HIA2 | 143 | 155 | 42 | 29% | 27% |
| HIA | 197 | 221 | 44 | 22% | 20% |
| AME | 116 | 147 | 45 | 39% | 30% |
| AELAC | 23 | 26 | 7 | 32% | 27% |
| By Product Category | | | | | |
| Diagnostics | 52 | 62 | 20 | 39% | 33% |
| PPE | 85 | 114 | 27 | 31% | 24% |
| Oxygen | 300 | 337 | 96 | 32% | 29% |
| Remaining ³ | 79 | 90 | 23 | 30% | 26% |
| By Type of PR | | | | | |
| National | 428 | 479 | 135 | 32% | 28% |
| UN Agencies ⁴ | 88 | 124 | 31 | 36% | 25% |
| Total | 516 | 603 | 166 | 32% | 28% |

¹ Non-PPM reporting excludes any investments or subsequent purchase orders related to 'non-reportable items'; this includes disinfectants, scrubs, and repurposed/existing medicines; accounts for an additional US\$99 million of current budgets

² Budgets as per aggregated C19RM 2021 HPMTs available and uploaded into the aggregate tool at 31 Oct 2022 reported PO Amount as per PR Procurement Progress Reporting templates submitted against 10 Oct deadline for procurement through end of Sept and beg of Oct

³ Remaining category includes two previously reported 'buckets' of products: C19Tx (novel C19 medicines and other supportive hospital equipment (e.g., x-ray, patient monitor, blood gas analyzer, etc.)) and Other (general lab equipment, waste management, and cold chain items)

⁴ UN agencies are UNDP + UNOPS+ UNICEF grants

Non-PPM Procurement Reporting: Oct 2022

Top 45 countries only (in US\$M)

Summary Points

- Conversion of **Non-PPM budget** to purchase orders is at **32% of the quarter-to date (QTD)** budget or 28% of the three-year total.
- The **total of purchase orders reported in Oct 2022** for **US\$166 million**. This is **US\$43 million more** than what was reported in Aug 2022. Further POs are expected to be issued from Nov 2022, as well as some procurement plan changes following reprogramming and portfolio optimization.
- Globally, oxygen procurement and implementation has been slow – given the technical and complex nature of the procurement as well as in-country coordination, site assessments and infrastructure needs. The portfolio optimization outcomes will reflect accordingly the country needs in terms of oxygen.
- On-going efforts to re-channel funds where procurement has not progressed – either from PPM to non-PPM channels (e.g., US\$8 million for PSA plants, US\$1 million for X-ray equipment for Ukraine) or non-PPM to PPM for Cambodia, Cameroon, Chad, Liberia, Namibia, Niger and Togo for PSA plants and other Health Products.
- On-going exercise to realign **C19RM investments** with the changing pandemic context, national priorities and lessons learnt.



Diagnostics

Current awards include:

- Awards for diagnostics amount to **US\$799 million**, representing **23.2%** of the **C19RM 2021** total funds awarded.
- These include **US\$323 million** for **Ag-RDTs** and **US\$477 million** for **PCR tests**.
- In the context of C19RM 2021, this is estimated to translate into a total number of **tests** between **165 and 200 million**, depending on the final procured mix of PCR tests and Ag-RDTs.
- Aligned to the allocation methodology, **> 80% of the diagnostics investment** awards were for low- and lower-middle income countries in **Africa** and sourced through the **Global Fund PPM**.
- Across the entire portfolio, 87% of all diagnostics procurement is planned through the PPM.

Impact of diagnostics funding on country testing

In most Global Fund-supported countries, **COVID-19 testing rates** substantially **increased over** successive **waves** of pandemic transmission. Although it is not possible to attribute the increase in testing to Global Fund awards directly, the **Global Fund** has **invested significantly** in **diagnostics**.

CMLI Project STELLAR – October 2022

Project STELLAR is providing Technical Assistance across many diverse areas alongside C19RM activities.

October Implementation status:

- **23** planned countries.
- **21** countries with priorities identified.
- **20** countries have active on-going work plan implementation
- **3** countries – DRC, Congo BZV, and Guinea are being considered for directed TA with on-going consultations with CT and MOH.

Early wins (out of 23 countries):

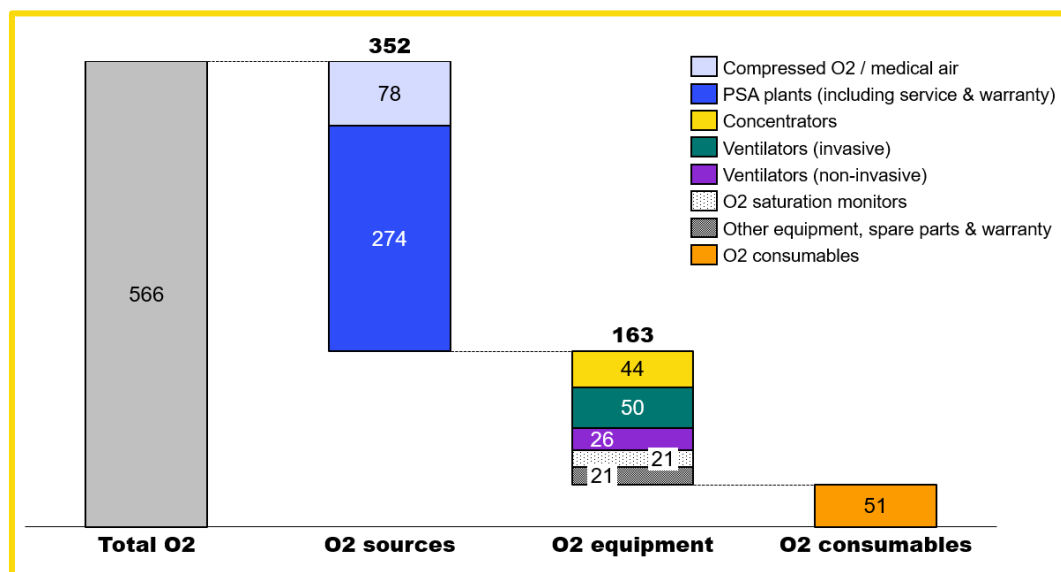
- **15 countries** | Emphasis on integration of services: countries engagement providing opportunities to think beyond COVID-19.
- **13 countries** | Reprogramming and reallocation of resources; actions plans are informing re-investment in lab system.
- **23 countries** | Improved positioning and visibility for Lab Directorate with PRs and Global Fund processes.
- **Building momentum** for **Wastewater Based Surveillance** (WWBS) and funding included in C19RM portfolio optimization funding requests.
- WWBS protocols for Kenya, Uganda, Mozambique and Ethiopia completed and submitted for IRB approvals



Oxygen

Current awards include:

- Awards for oxygen and clinical health products amount to US\$756 million representing 22% of the C19RM 2021 total funds awarded.
- Unprecedented investment in a neglected essential health service.
- **US\$566 million** requested for **oxygen products** and **US\$190 million** for **other therapeutics**.
- Single largest sub-category (**PSA plants**) accounts for **48% of oxygen category** drove O2 Working Group's focus for delivery.
- **Good budget conversion** of oxygen consumables & equipment, whilst oxygen sources continue to make steady conversion progress.



Source: HPMT as of October 2022

HPMT data is not completely up to date for recent O2 awards, showing slightly lower total amounts. Compressed O2/Medical air contains various therapeutic interventions & modest investments in liquid Oxygen (~US\$9.8 million in 5 countries), however with C19RM reinvestments these investments may shift.

Substantial country demand for O2

Over US\$560 million requested for O2 products, including O2 production, storage and distribution and patient delivery. One of the highest C19RM investment categories.

Looking Ahead

C19RM support will leave **historically unprecedented capabilities** that countries will be able to rely on for case management of respiratory infections and other life-threatening conditions, including **reinforce countries preparedness for future pandemics**.

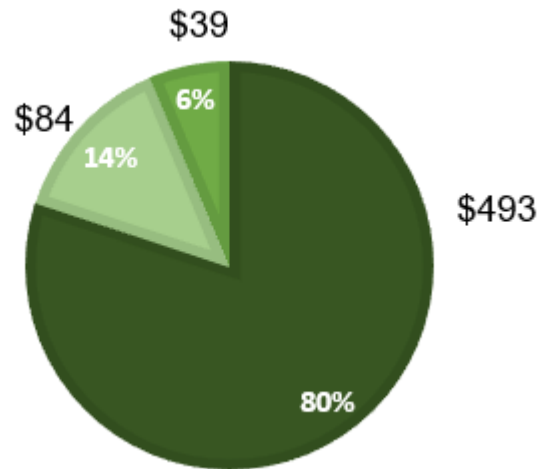
Project BOXER - October 2022

- Technical assistance for medical oxygen, provided through **Project BOXER**, addresses the need for technical capacity-building and support in the operation of PSA plants. **Technical assistance** is provided to **45 countries** (two new countries added in October), supported by and aligned with ACT-A and O2 Working Group.
- The project supports LMIC to address **technical challenges** of building medical oxygen capabilities.
- Oxygen is a **lifesaving intervention for COVID-19** but also maternal health. Ensuring greater access to medical oxygen is a big step forward to strengthen acute clinical care.

IPC/PPE



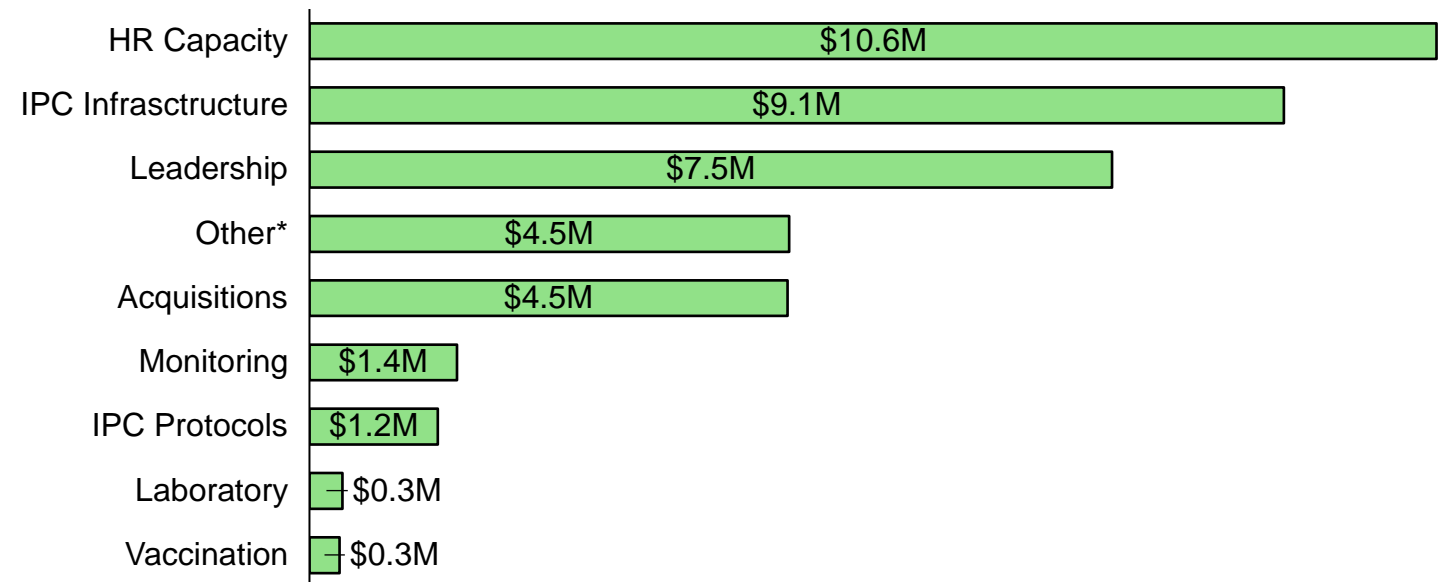
IPC Investment Breakdown (US\$ million)



■ PPE
 ■ Disinfectants and other consumables
 ■ Program strengthening

Source: HPMT & Detailed Budget data

IPC Program Strengthening Interventions (US\$ million)



*includes acquisitions, laboratory safety, HCW vaccination programs

Source: Detailed Budget data

Key Facts

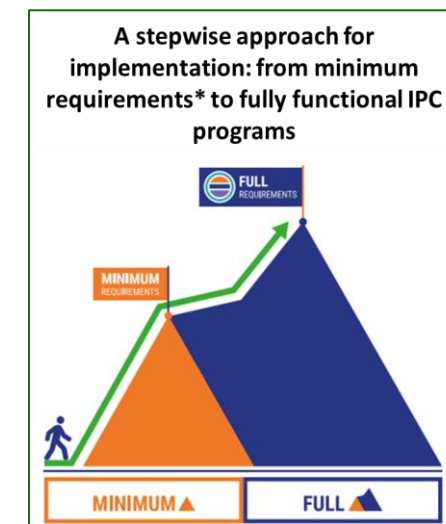
- A critical investment, **US\$616 million** has been awarded for **IPC/PPE**, representing about **17.8%** of the total **C19RM 2021** funds awarded.
- Rapid scale up of PPE helped to surge these vital commodities to protect health workers early in the pandemic, but orders have trailed off due to generally sufficient stocks and changing epidemiology of the pandemic.
- **Only 74 countries planned for IPC program strengthening; of these, median country budget was only \$146k**
- Shifting focus to IPC program strengthening (**only 6% of IPC/PPE budget**) will be crucial to maintain these gains as the pandemic shifts and emerging variants arise.

IPC/PPE

Why IPC Program Strengthening?

- IPC Programs are integrated across healthcare delivery and provide specialized oversight on safety protocols, including PPE.
- They are a key component for disease prevention in healthcare, including COVID-19, tuberculosis, and Ebola.

- IPC is critical for pandemic preparedness and emerging threats
- The Ebola outbreak in Uganda has resulted in 15 health worker infections as of 28 Oct
- GF investments in PPE have been leveraged for the outbreak



Core components for IPC programs

- Trained personnel with dedicated budget
- Ability and authority to develop guidelines, policies, and education
- Evidenced-based, updated guidelines for IPC
- Standard IPC education (pre-service and in-service)
- Surveillance system for healthcare-associated infections
- Multimodal interventions such as Supportive Supervision and Quality Improvement to improve IPC
- Development of an M&E system for IPC



IPC/PPE

- While high PPE availability and high levels of training are major accomplishments, there is an **opportunity to enhance the correct use of PPE through IPC program strengthening.**
- Consistent with global experience and published literature, **investments in IPC programs are evidence-based and cost-effective ways to bridge this gap.**

Case-study: Nigeria

- C19RM IPC program strengthening budget: \$42k
- PO Request: ~\$14M



| IPC category | Q4 2021 | Q1 2022 |
|--|-------------|---------------|
| PPE on-shelf availability (OSA) | n/a | 86% |
| Compliance with national PPE standards | 51/89 (57%) | 59/130 (45%) |
| Received training on IPC | 73/77 (95%) | 112/113 (99%) |
| >=1 Supportive supervision on IPC | 56/76 (75%) | 95/113 (84%) |
| Screening/ triage for illness (incl C19, TB) | 37/89 (42%) | 100/130 (77%) |
| Inpatient isolation | 29/89 (33%) | 94/130 (72%) |
| Source: TGF spot check data | | |

Case-study: Uganda

- C19RM IPC program strengthening budget: \$935k
- PO Request: \$5.9M for isolation facilities



| IPC category | Q4 2021 | Q1 2022 |
|--|-------------|--------------|
| PPE on-shelf availability (OSA) | n/a | 96% |
| Compliance with national PPE standards | 35/58 (60%) | 36/78 (46%) |
| Received training on IPC | 52/53 (98%) | 74/74 (100%) |
| >=1 Supportive supervision on IPC | 33/53 (62%) | 63/74 (85%) |
| Screening/ triage for illness (incl C19, TB) | 42/58 (72%) | 67/78 (86%) |
| Inpatient isolation | 29/58 (50%) | 57/78 (57%) |
| Source: TGF spot check data | | |



6

C19RM portfolio optimization and request for C19RM extension

COVID-19 Pandemic Context

Pandemic and funding needs have evolved from pure COVID-19 response to rebuilding and strengthening systems and countries' ability to fight new pandemics

Key Points

Extended timeline

Systems strengthening takes time, requiring **longer implementation timeline**.

Next funding cycle complementarity

Opportunity to leverage C19RM reinvestment and portfolio optimization to ensure **complementarity** with funding from the **next funding cycle**.

Risk of non-completion

Shorter timeframes increase likelihood of countries limiting activities to system support vs system strengthening, and **risk non-completion of systems strengthening interventions**.

What we have done to align with pandemic evolution and maximize impact and use of funds

Secretariat efforts and actions implemented in Q2 and Q3 2022 to address the needs of an evolving pandemic and transition from emergency response to system strengthening included:

Technical Support

- Introduced **technical expertise** and **support** to countries through [CMLIs](#).
- CMLI projects focused on oxygen (BOXER), diagnostics (STELLAR), community engagement & community-led monitoring.
- **Updated technical guidance** with **priority areas of investment** in evolved COVID-19 context.

Investment Flexibility

- **C19RM guidelines revised to increase flexibility** for Principal Recipients to adapt to evolving needs.
- **Simplified reinvestment process** (reprogramming) to facilitate country efforts to refocus investments.
- Coordinated reinvestment exercise to **align C19RM portfolio to epidemic transition**, projected needs and priorities.

Portfolio optimization

- **Launched C19RM portfolio optimization** to provide an **opportunity** for countries to step back and **re-evaluate needs** based on **shift in pandemic**, refocus investments in **system strengthening** and **pandemic preparedness**, request additional funds for **critical gaps**, invest in new ways to **adapt** to the evolving pandemic and build capacity against COVID-19 outbreaks/new variants and future pathogens.

Lessons Learned

Root cause analysis has shown that longer timelines are required to develop, review, and approve quality preparedness and health system strengthening requests.

Reinvestment

- The C19RM reinvestment exercise was set up so reinvestment decisions were done in a timely manner considering a 31 December 2023 use of funds deadline.
- C19RM current timelines too short for countries to encourage design and prioritization of complex RSSH / PP focused requests; and too short to execute and deliver results.

Risks and contextual factors

- Countries were reluctant to take risks on C19RM re-investments given epidemic uncertainty.
- PRs stretched with limited capacity to manage C19RM reinvestment efforts, submission of C19RM portfolio optimization requests, while executing C19RM and GC6 (NFM3) HTM grants - requiring resources to support.
- Supply chain uncertainties and risks remain with evolving global challenges.

C19RM portfolio optimization

- C19RM portfolio optimization requested streamlined submissions to facilitate rapid review and confirmation of investment – however, this resulted in insufficient information for GAC/CTAG to evaluate feasibility and effectiveness of RSSH/PP investments, and for IC to approve.
- Submission of C19RM portfolio optimization requests for UD were submitted to facilitate effective review and approval considering a 31 December 2023 use of funds deadline.

Extension of C19RM

Summary of Secretariat Recommendation

Current C19RM deadlines

- **C19RM awards** made by 31 March 2023.
- **C19RM funds** used by 31 December 2023.

Secretariat recommendation for C19RM extension

- **C19RM funds awarded by 30 June 2023**, changed from 30 March 2023, while **preserving the ability for portfolio optimization to occur after 30 June 2023**.
- **Extend deadline for implementation and use of C19RM funds**, changed from 31 December 2023 to **31 December 2025** based on programmatic needs and potential for impact balanced against need for rapid deployment of funds and operational trade-offs.
- **Additional C19RM OpEx needs.**
- Additional information available: [AFC/SC Joint Committees](#)

Strategic Committee's Discussion Outcomes

7 November 2022

- The **SC recommended the decision on the extension to the Board for approval - 48th Board meeting**, stating the importance of **advancing C19RM's systems-strengthening interventions**, especially considering the current status of the Seventh Replenishment.
- The SC acknowledged that the proposed extension would **better enable C19RM to support such interventions**.
- The SC acknowledged that the **proposed extension would enable complementarity and alignment between C19RM and Seventh Replenishment requests** by sequencing C19RM systems-strengthening requests before core grant requests.
- The SC also acknowledged the **importance of strengthening community systems and community participation through C19RM investments** and supported the proposed extension's advancement of these goals.