Quality and Timely Grant-making

23 March 2023
Agenda

1. Introduction
2. Translate the Global Fund Strategy (2023-2028) into effective grant design
3. Plan and ensure implementation readiness so activities can start on day one
4. Enable timely & quality grant-making
   i. Grant-making deliverables
   ii. Overview of key changes
   iii. Negotiations and PR submission
5. Next Steps & Resources
6. Q&A
Introduction
Two information sessions are planned, followed by Q&A sessions

<table>
<thead>
<tr>
<th>Suggested Audience</th>
<th>Purpose</th>
<th>March</th>
<th>April</th>
<th>May</th>
<th>June</th>
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<tbody>
<tr>
<td>PRs, LFAs, CCMs and any other interested stakeholders</td>
<td>High-level introduction to grant-making including key elements from the new Global Fund Strategy</td>
<td>21 Mar Information Session #1 (simultaneous interpretations)</td>
<td>[Dates TBD] Q&amp;As (EN, FR, ES)</td>
<td>[Dates TBD] System-specific Q&amp;As (EN, FR, ES)</td>
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<tr>
<td>PRs, LFAs, CCM Secretariats</td>
<td>Detailed session on how to complete grant-making on-time and with quality, for those directly participating in grant-making</td>
<td>23 Mar Information Session #2 (simultaneous interpretations)</td>
<td>[Dates TBD] Q&amp;As (EN, FR, ES)</td>
<td>[Dates TBD] System-specific Q&amp;As (EN, FR, ES)</td>
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For a complete list of relevant information sessions and materials for grant-making please refer to the Resources slide.

For those who have gone through grant-making in previous grant cycles: The information sessions capture the key changes for Grant Cycle 7 and are sufficient.

For those who have not already been through grant-making: Please attend the information sessions and complete the forthcoming eLearning module.

All: Read the new OPN and Operational Procedures for the full understanding of grant-making in Grant Cycle 7.
Quality grant design and timely grant making embeds the new Strategy while ensuring implementation readiness

1. Translate the Global Fund Strategy (2023-2028) into effective grant design
2. Plan and ensure implementation readiness so activities can start on day one
3. Ensure timely and quality grant-making
Grant-making timeline for TRP Window 1 submissions

Feb   Mar   Apr   May   Jun   Jul   Aug   Sep   Oct   Nov   Dec   Jan 2024

- Advance grant-making priorities during funding request
- GF shares grant-making forms with PR
- 20 Mar
  CCM submission deadline for Funding Request
- 24 Apr – 4 May TRP Meetings
- PR submits final grant-making documents through the Partner Portal
- GAC Decision
- Board Approval
- GF signs Grant Confirmation
- PR signs and CCM acknowledges Grant Confirmation (subject to GAC recommendation and decision on early release of GC)

Ensure Implementation Readiness (IR)
Grant-making timeline for TRP Window 2 submissions

**PLAN**
- Advance grant-making priorities during funding request
- GF shares grant-making forms with PR

**NEGOTIATE**
- 30 May CCM submission deadline for Funding Request
- 3 – 17 July TRP Meetings
- PR submits final grant-making documents through the Partner Portal
- GAC Decision
- Board Approval

**APPROVE**
- GF signs Grant Confirmation

**SIGN**
- PR signs and CCM acknowledges Grant Confirmation (subject to GAC recommendation and decision on early release of GC)

**GET READY**
- 1st AFD

Ensure Implementation Readiness (IR)

**IP Start**
1 Translate the Global Fund Strategy (2023-2028) into effective grant design
Translate the Global Fund Strategy (2023-2028) into effective grant design to end the three diseases

**END AIDS, TB AND MALARIA**

**WORKING WITH AND TO SERVE THE HEALTH NEEDS OF PEOPLE AND COMMUNITIES**

Maximizing People-centered Integrated Systems for Health to Deliver Impact, Resilience and Sustainability

Maximizing the Engagement and Leadership of Most Affected Communities to Leave No One Behind

Maximizing Health Equity, Gender Equality and Human Rights

**OUR PRIMARY GOAL**

**MUTUALLY REINFORCING CONTRIBUTORY OBJECTIVES**

**EVOLVING OBJECTIVE**

**DELIVERED THROUGH THE INCLUSIVE GLOBAL FUND PARTNERSHIP MODEL**

**Mobilizing Increased Resources**

Contribute to Pandemic Preparedness and Response

**Partnership Enablers**

Raising and effectively investing additional resources behind strong, country-owned plans, to maximize progress towards the 2030 SDG targets

Operationalized through the Global Fund Partnership, with clear roles & accountabilities, in support of country ownership

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Maximize community engagement during grant-making

Focus on program essentials and use of data

Strengthen investments in RSSH and Pandemic Preparedness

Enhance health equity, gender equality and human rights

Strengthen efforts to mobilize equitable, efficient additional domestic resources
Critical importance of communities in the new Global Fund Strategy demands increased opportunities for engagement throughout the grant life cycle

Maximizing the Engagement and Leadership of Most Affected Communities to Leave No One Behind
(one of three mutually reinforcing contributory objectives of the strategy)

Create opportunities for community and civil society engagement beyond the funding request stage

Codify expectations and opportunities for additional transparency, accountability and engagement in Global Fund policies and processes

Increase CCM visibility into grant-making process to facilitate engagement and oversight
Changes during funding request and grant-making stages increase transparency, accountability and opportunities for community engagement

Applicants engage PRs early (advanced grant-making)

Publish funding request documents externally earlier

PR and CT leverage funding request community priorities annex* as an input into grant-making

Copy CCM members on key automated grant-making milestone notifications

CCMs hold at least 2x CCM meetings during grant-making for PR to provide an update and receive feedback on GM progress **

CTs hold at least 1x meeting with community and civil society representatives to provide an update and receive feedback on grant-making progress

Leverage existing mechanisms to support direct community and civil society engagement in grant-making

Mutual expectations must be clearly defined for all stakeholders to ensure meaningful engagement

* Funding priorities of civil society and communities affected by the three diseases.
** Requirement for High Impact & Core portfolios; best practice for Focused portfolios.
Engaging community-based and community-led organizations (CBO/CLO) as implementing partners is key to the success of the new Global Fund Strategy

Why engage

- **Demonstrated ability** to deliver high-quality health services and programming
- **Unparalleled understanding of community** needs, preferences, challenges, and the acceptability of service delivery approaches
- Ideally positioned to:
  - Reach into communities to **find ‘missing’ beneficiaries**
  - **Provide differentiated services** to meet complex and diverse needs of different groups
  - **Foster understanding** of new interventions and mobilize demand
- More likely to be viewed as **trusted partners** by the communities they work with

When to engage

- **Ability to implement a wide range of activities** and in an equally **wide range of contexts**
- **Four specific contexts** where the Global Fund expects some level of engagement:
  - When **differentiated service delivery** approaches can enable greater impact.
  - When improving access and outcomes for **marginalized sub-populations** is an objective (including key populations).
  - When **introducing or scaling-up** new products or service-delivery approaches.
  - When seeking to safeguard **human rights** and reduce human rights-and gender related barriers to services.

How to engage

Which organizations are engaged, and specific contracting modalities are **guided by programmatic objectives, local context, the specific needs of the communities** the grant intends to support, and an **understanding of potential risks** and how they can be mitigated. The Global Fund encourages engagement with a range of CBO/CLO implementers in order to **ensure the most appropriate partner is contracted to deliver the most appropriate service.**
CBO/CLO implementers exist along a spectrum of organizational capacity, demanding different contracting approaches

In-country partners are encouraged to explore all contracting approaches that may be applicable to their country context and the capacity of relevant organizations, including the use of innovative approaches such as payment-for-results.

**Programmatic needs**
- Which organizations are best placed to deliver?
- What support do organizations need to ensure adequate implementation and oversight?

**Payment for Results**
- Can provide a means to for direct support of even the smallest organizations.
- May mitigate risks associated with contracting organizations with limited capacity.

**Community systems strengthening**
PRs are strongly encouraged to support the organizational capacity of well-performing CBOs/CLOs, including by leveraging:
- Grant investments in CSS
- Community Systems & Responses strategic initiative
## Maximizing health equity in Grant Cycle 7

### What is health equity?

- Health inequities are differences in health outcomes that are unnecessary, avoidable, unfair and unjust. Equity is achieved when these differences are eliminated, and everyone attains their full potential for health and well-being.

- A person’s health is shaped by their everyday living conditions – these are the social determinants of health and the drivers of inequity.

- **PROGRESS Plus** acronym sets out some of the most common dimensions of health inequity:  
  - Place of residence;  
  - Race/ethnicity/culture/language;  
  - Occupation;  
  - Gender/sex;  
  - Religion;  
  - Education;  
  - Socioeconomic status;  
  - Social capital;  
  - plus the important personal characteristics that impact on health equity, such as disability, sexual orientation and age.

### Why is equity a priority for the Global Fund?

- Global Fund Strategy 2023-2028 commits to maximizing health equity and taking intensified action to address inequities.

- Inequities are directly linked to disease outcomes.

- We will not end the epidemics without addressing inequities.

- The most marginalized are being left further and further behind.

### What’s new in Grant Cycle 7?

- New requirements for applicants to demonstrate how they will maximize health equity.

- Strengthened focus on equity within the Technical Review Panel’s review criteria.

- Design interventions which respond to health inequities identified in the analysis in the funding request.

- Progress will be measured through new grant indicators to track performance in reducing inequities in key HIV, TB and malaria grants.
Plan and ensure implementation readiness so activities can start on day one.
Implementation readiness (IR) enables PRs to start activities immediately upon IP start date and contributes to improved implementation in Y1

Key considerations for achieving implementation readiness:

1. Ensure IR throughout Funding Request (FR) and Grant-making (GM)
   - IR happens alongside FR development and GM negotiations, not after.
   - Advance IR activities to the extent possible at each phase of the FR and GM processes.

2. Consider advanced grant-making during FR development
   - Increase participation of PRs in funding request development, where appropriate.
   - Strongly recommended for Program Continuation approach and where PR is continuing

3. PR signs & CCM acknowledges after Grant Approvals Committee (GAC) recommendation
   - Earlier grant signing timelines, allowing additional time to finalize implementation readiness
   - Subject to GAC decision whether the GC can be released for PR signature before Board approval

4. Standardized IR assessment
   - LFA to conduct IR assessment within 1 month of IP start date and submit assessment report 2 weeks later, allowing issues to be identified and resolved soon after implementation begins
   - CT to communicate mitigating actions to PR within 2 months of IP start date.
Implementation readiness (IR) activities happen during funding request and grant-making, not after

**Funding Request**

**Grant-making**

<table>
<thead>
<tr>
<th>PLAN</th>
<th>NEGOTIATE</th>
<th>APPROVE</th>
<th>SIGN</th>
<th>GET READY</th>
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</thead>
<tbody>
<tr>
<td>• Determine PR human resource needs for grant-making</td>
<td>• PR staffing:</td>
<td>• Finalize implementation work plan</td>
<td>• Finalize implementation work plan</td>
<td>• Ensure:</td>
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<tr>
<td>• Consider advanced grant-making (see next slide)</td>
<td>• Define structure, TORs; or update* existing TORs &amp; extend contracts**</td>
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<td></td>
<td>- All HR, SR and supplier contracts are signed</td>
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<td><strong>SRs and suppliers:</strong></td>
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<td>- Implementation work plan agreed upon</td>
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<td></td>
<td>• Select as early as possible</td>
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<td></td>
<td>- PPM requisition approved by Global Fund (if applicable)</td>
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<tr>
<td></td>
<td>• Define and approve TORs</td>
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<td>• CT requests LFA to perform IR assessment</td>
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<td></td>
<td>• Negotiate contracts**</td>
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<td></td>
<td><strong>Implementation workplan:</strong></td>
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<td></td>
<td>• Discuss details for Yr1</td>
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**Implementation**

• LFA performs IR assessment & submits it to Global Fund

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* For existing, well-performing PRs only
** The Global Fund does not require a competitive re-selection of human resources, SRs, and Suppliers (for PRs procuring through their own processes) for each IP. Re-selection must comply with applicable Global Fund policies and regulations.
*** In some cases, it may be possible for the PR to sign contracts earlier if local laws and PR procedures allow.
Advance grant-making where appropriate and ensure implementation readiness

Implementation Period (IP)
Start Date

Funding Request | Grant-making | Implementation

Grant-making level of detail in key funding request documents

Early engagement of PRs to advance grant-making
Applicants engage selected PRs early* and develop the key funding request documents with grant-making level of detail.

Implementation-ready grants can start on day one
PRs that sign early can implement grant activities immediately from the IP start date.

Early signature can improve timely implementation
There is a correlation between grants signed early and timely implementation in Year 1.

Advanced grant-making strongly recommended for the Program Continuation application approach or where the applicant continues with the existing PR.

* CCMs must still follow an open and transparent process to select the PR (Eligibility Requirement 2). The CCM compliance statement has been updated to accommodate early PR selection.
Develop key funding request documents with a level of detail required during grant-making stage of the process

**Performance Framework**

- Include PR-specific* coverage indicators and targets, including disaggregation where applicable, with a six-month reporting frequency (for High Impact and Core portfolios).

**Detailed Budget**

Include:

- PR-specific* budget lines at the cost input level (for High Impact and Core portfolios).
- Detailed assumptions to support accurate unit costs.
- Ringfenced sub-recipient budgets**.

**Health Product Management Template**

Include:

- Detailed assumptions to support accurate quantifications and unit costs.
- Required supporting documents (e.g., quantification sheets, HPM plan, treatment and diagnostic protocols).

Applicants that advance grant-making can gain up to 30 days to ensure implementation readiness.

* While documents are prepared with PR-specific information, these are consolidated within a single file for final FR submission to TRP. For integrated funding requests, applicants must discuss specific considerations with the Country Team.

** Budget lines are assigned to sub-recipients to the extent possible, even if these implementers have not yet been identified or confirmed.
Ensure timely and quality grant-making
Grant-making deliverables
## Required deliverables are staggered throughout grant-making

<table>
<thead>
<tr>
<th>Finalize before TRP recommendation of FR</th>
<th>Finalize prior to grant submission to GAC</th>
<th>Finalize at Grant Confirmation signing</th>
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<tbody>
<tr>
<td><strong>Documents</strong></td>
<td><strong>Documents</strong></td>
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<tr>
<td>Updated FR/GM Project Plan (Best Practice)</td>
<td>Performance Framework (Excel &amp; PDF)</td>
<td>Monitoring &amp; Evaluation Plan (if applicable)</td>
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<tr>
<td>Grant Entity Data**</td>
<td>Detailed Budget (Excel &amp; Summary PDF)</td>
<td>Other</td>
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<tr>
<td>Capacity Assessment (if applicable)</td>
<td>Health Products Management Template</td>
<td>Agreed Audit Arrangements</td>
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<tr>
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<td>New/Updated Implementation Arrangements Map</td>
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<td>Programmatic Gap Table(s) (if updated)</td>
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<td>Funding Landscape Table (if updated)</td>
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<td>Grant Confirmation</td>
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<td>Co-Financing Commitment Letter</td>
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<td></td>
<td>Applicant Response Form for TRP issues</td>
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<td></td>
<td>List of Program Assets (from current IP)</td>
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<tr>
<td><strong>System Updates / Actions</strong></td>
<td><strong>Other</strong></td>
<td><strong>System Updates / Actions</strong></td>
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<tr>
<td>Submit to GAC for review.</td>
<td></td>
<td>Approved PPM purchase requisition (if applicable)</td>
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<td>PR to submit in Partner Portal</td>
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<tr>
<td><strong>Other</strong></td>
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<tr>
<td>Early identification and selection of PR staff</td>
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<tr>
<td>Early identification and selection of SRs</td>
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<tr>
<td>Early identification and selection of suppliers***</td>
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* Differentiated requirements per the Focused Portfolio Management Models are included in annex.

** Submitter (and Editor) data must be reviewed and updated as soon as possible to allow access to the Partner Portal. Signatories, Org. Reps for notices and banking Information must be updated prior to GAC submission.

*** For health products and critical services.
Focused Portfolio Management Models enable smart use of limited resources

For Focused Portfolios: Country stakeholders are encouraged to maximize the impact of their limited resources by tailoring the approach to the needs of the context.

The models are defined according to the grant life cycle requirements and the type of oversight by the Global Fund, as illustrated on the right.

**How does the Focused Portfolio Management Model impact grant-making?**

- Reduced number of GM deliverables for the Aligned and Targeted models
- Reduced level of detail in deliverables for the Aligned, Targeted and Light models
- Additional focus on programmatic impact

[Click here](#) for detailed grant-making requirements for the four models

**Delivery based**
The Global Fund:
- Does not verify activities or inputs
- Leaves accountability to countries to use funds flexibly, to ensure delivery per agreement
- Verifies results

**Input based**
The Global Fund:
- Confirms activities & inputs upfront with implementers
- Disburses against budget, and implementation progress
- Validates proposed implementation changes
Implementation arrangements enable quality grant design, implementation readiness and risk mitigation

**Implementation Arrangements Maps** are a key tool to ensure **quality grant design**, by allowing stakeholders to develop and maintain a comprehensive understanding of the implementation arrangements, and assess their quality.

**Key considerations in designing and assessing Implementation Arrangements Maps**

- Ensure alignment with grant objectives
- Ensure alignment with grant documents (PF, Budget, HPMT, M&E plan, etc.)
- Align scope and scale of responsibilities with capacity of identified entities
- Ensure all stakeholders have access to the quality and timely information they need
- Leverage existing entities and resources to address gaps, redundancies and achieve sustainability
- Mitigate risks by ensuring:
  - Segregation of duties
  - Conflict of interest
  - Limited concentration of funding / procurement in a single entity
  - Inter/national regulatory compliance

A high-quality implementation arrangements map facilitates **implementation readiness** by ensuring the implementing entities, and their roles and responsibilities, are clearly defined in advance of the IP start date.

Click here for a best practice example.

THE GLOBAL FUND
Performance Framework

What is the Performance Framework?
- Statement of expected performance over the implementation period.
- Reflects the ambition towards achieving program result and impact.

Summary:
- Links program goals and objectives to program areas (modules), interventions, related indicators.
- Focuses on impact, outcome and coverage indicators.
- Includes targets against which results are to be reported by the country.
- Includes work-plan tracking measures (WPTM) to monitor additional grant-related activities (i.e., RSSH, CRG) in cases where no coverage indicators are possible/sufficient.
- Developed during funding request submission and further refined during grant-making.
- Used for grant performance assessment and KPI monitoring.
- Results against targets in the Performance Framework are one of the inputs to determine disbursements to the Principal Recipient during grant implementation.
Performance Framework: Form enhanced to improve usability

Enhancements have been made based on the feedback received

- No structural changes have been made to the form, only changes made for user-friendliness.
- Data rows are now interchangeably colored for readability.
- Error alerts (rightmost column) has been added to the Impact, Outcome and Coverage Indicators.
- Default decimals and rounding are set for impact, outcomes and coverage indicators.
- The reverse indicator columns for standard and custom coverage indicators have been added with Yes/No values (read-only for standard and editable for custom coverage indicators).
- The single Print View sheet has been removed and replaced by 5 Print View sheets: Summary, Goals and Impact, Objectives and Outcome, Coverage, WPTM (since the structure has been significantly changed for printability and readability, please do report additional needed changes).
- The population column has been removed from the Overview (WPTM), the Coverage Indicators and the WPTM.
- New tab included to document target assumptions.
Detailed Budget: Summary of key changes

**Standardization of Budget Assumptions**
Reintroduced following standardized budget assumptions tabs:
- Budget Assumptions – Human Resources (HR) tab
- Budget Assumptions – Travel-related costs (TRC) tab

**Split of the Detailed Budget Tab**
- **Detailed Budget – Non-HP tab**: to be used for budgeting non-health product (non-HP) related budget (all cost grouping except 4, 5, 6 and 7).
- **Detailed Budget – HP tab**: to be used to copy and paste the output (relevant information) of the Health Product Management Template (HPMT), where applicable.

**Update and standardization of reference data**
- **Modules, Interventions and cost inputs** based on latest Modular Framework and Costing Dimensions
- **“Type of Implementing Entity”** as per Grant Entity Data
- **“Type of Third-Party Supplier”** to align with the requirement of direct payment to third-party supplier
- **“Geography”** and **“Source of Funds”** dimensions

**Tabs removed**
- Removed **Population tab** – no longer required.
- Removed **Additional summary tab** and replaced by a drop-down option in “Summary by source of funds” tab.

**Budget frequency**
- Introduction of yearly budgeting instead of quarterly budgeting
Detailed Budget: At a glance
The five types of tabs

Setup Tab
Includes general information about the program, organized in three sections: i) Grant information; ii) Reporting set-up; and iii) Budget set-up.

ICR and Investment Landscape Tabs
- ICR tab provides an estimate calculation of the Indirect Cost Recovery (ICR)
- Investment landscape tab provides an overview of the investment landscape by key categories:
  1. Health Commodities/Equipment and Supply Chain Costs.
  2. Program Management Related Costs.
  3. Program Activity Related Costs.

Detailed Budget Tabs
Two separate “Detailed Budget” tabs
- One tab for Health Products (HP) budget
- One tab for Non-Health Products budget

Summary Tabs
Four summary tabs which provide a snapshot of the budget grouped in pre-defined categories:
1. Budget Summary (by module, cost grouping and implementer);
2. Summary by Intervention.
4. Budget Summary by Source of Funds

Assumptions Tabs
Standardized budget assumptions tabs for human resources (HR) and travel-related costs (TRC) and free sheet for other assumptions.
Health Product Management Template (HPMT)
Summary of key changes and enhancements (1/2)

Updated Tabs

<table>
<thead>
<tr>
<th>Tab</th>
<th>Update</th>
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<tbody>
<tr>
<td>Fixed Cost (HPM) Tab</td>
<td>Added</td>
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<tr>
<td>Other Implementers (Tab)</td>
<td>Added</td>
</tr>
<tr>
<td>Documents tabs (EN, FR, SP)</td>
<td>Removed</td>
</tr>
<tr>
<td>Cost Input Summary Budget</td>
<td>Removed</td>
</tr>
<tr>
<td>Module/Interventions Summary Budget</td>
<td>Removed</td>
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<tr>
<td>Module/Interventions with HIV KP Summary Budget</td>
<td>Removed</td>
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<tr>
<td>HIV Aggregation Summary Budget</td>
<td>Removed</td>
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<tr>
<td>Populations Summary Budget</td>
<td>Removed</td>
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<tr>
<td>DB-pivot</td>
<td>Renamed</td>
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</table>

Renamed (formerly Blank Pivot)

HPMT and Finance Detailed Budget integration

- The HPMT is mandatory for all High Impact and Core countries, and optional for Focused countries (with some exceptions for Focused countries submitting a HPMT).

- For portfolios with health products (HP) budget but no HPMT, the Finance Detailed Budget allows entries for cost grouping 4 – 7 for HPs. PRs need to check “No HPMT” on the set-up tab of the Finance Detailed Budget, enabling them to manually input the budget for HPs into the “DB - non-HP worksheet” of the Finance DB.

Updates to Key Information Sheets

- Reflects changes in the GC7 Modular Framework and the enhanced list of product categories.

- Consolidates HIV lab and diagnostic data, focusing only on key information.

- Does not collect information on the number of type of Viral Load/Early Infant Diagnosis platforms and number of tests/sample type/equipment type per year. This can now be submitted with supporting documents.

Consolidation of HIV, TB, Malaria Input worksheets

- HIV, TB, malaria – input worksheets are now consolidated in two tabs:
  1. PHARMA
  2. NON-PHARMA

- The “Other-HPs” tab have been removed.
Health Product Management Template (HPMT)
Summary of key changes and enhancements (2/2)

**SETUP Tab**
- Re-designed SETUP worksheet (non-PR implementing organizations can be specified – e.g. sub-recipients.)
- Revised approach on HPMT version tracking with a table that lists up to seven HPMT revisions for funding request, grant-making and grant implementation.

**HIV, TB and malaria input worksheets**
- Users can now select between US$ and EUR for “payment currency”. This can differ from the grant currency.
- Reference prices for certain health products are pre-populated in the template and are adjustable by users +/- 30% with proper justification.
- Users can now select item level procurement channel.
- Summary tables are now available for users to input worksheets and show sub-total for each section.

**Fixed Cost and Other Implementers Tabs**
- **Fixed Cost**: Users can budget PSM/HPM costs at fixed rates.
- **Other Implementers**: Users can include in the HPMT Health Product budget for more than one implementer.

**Detailed Budget (DB)**
- The updated HPMT integrates better with the Finance DB. The HPMT output can now be copied and pasted into the DB, aligning two key Global Fund grant documents.
- Users can now split-up HP budget between modules/interventions.

**RSSH and HPM Cost Tabs**
- **RSSH**: Users can budget for HP for RSSH interventions.
- **HPM cost**: For percentage based PSM/HPM costs, users can define percentages individually for each year.

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**The HPMT User Guidelines** are available with an excel-based Annex that enables users to search tables.

**Checker Tab**
- Enhanced Checker Tab functionality to support users in generating component-based category-wise annual budget chart).

The HPMT presents an opportunity to develop a HPM Plan to provide a holistic overview of PSCM functions in-country.

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• Defines the **overarching terms of the collaboration** between the Grantee and the Global Fund.

• **Grantee:** an independent entity, who signs a Framework Agreement with the Global Fund

Covers all grants implemented by the Grantee or the Principal Recipients acting on its behalf.

Incorporates the Global Fund **Grant Regulations (2014),** which set forth general terms and conditions for use of grant funds and program implementation.

**Start negotiations early on ahead of signing a framework agreement.**

A new **grant confirmation** is signed each time a Principal Recipient is selected to implement activities during a grant life cycle.

Includes, among others:
- Implementation Period (IP) start and end dates.
- General and IP-specific legal requirements.
- Integrated grant description.
- Performance Framework.
- Summary budget.
Overview of key changes
### Key process and system changes to optimize grant-making and ensure end-to-end transparency

<table>
<thead>
<tr>
<th>Partner Portal</th>
<th>Grant Confirmation (GC) Signature</th>
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<tbody>
<tr>
<td>• PRs use the Global Fund Partner Portal to access and <strong>submit final grant-making documents</strong></td>
<td>• Early signing of the Grant Confirmation, with <strong>PR signature and CCM acknowledgement</strong> following the recommendation of the Grant Approvals Committee (GAC) as a standard approach*</td>
</tr>
<tr>
<td>• <strong>Grant-making status</strong> displayed to facilitate PR tracking of grant-making progress.</td>
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<tr>
<td>• <strong>Critical Grant Entity Data</strong> also managed through the Partner Portal (next slide).</td>
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<tr>
<td>• <strong>Revamped Portal notifications</strong> to increase end-to-end transparency for all stakeholders</td>
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</table>

* Early PR signature and CCM acknowledgement is decided by the GAC. Global Fund counter signature remains contingent upon Board approval.
Critical Grant Entity Data (GED) for grant-making and timelines to finalize

| Organization and contact information | Create or update PR, LFA, and CCM organization and contact details. |
| Editor and Submitter                | Assign PR editor and submitter roles to ensure PR can access and submit documents in the Partner Portal. |
| Organization representative for notices | Assign PR and CCM organization representative for legal notices. |
| Signatories                         | Assign PR and CCM signatories and select primary signatories in GOS before generating the Grant Confirmation. |
| Banking information                 | Add and update PR banking information before creating a Purchase Order. |

- During funding request if PR is known
- Following IP creation
- At least 30 days before GAC

Update GED early. Change requests can take up to 6 weeks.
Grant-making overview

In grant-making, the PR uses the Partner Portal to:

- Update GED
- Download grant-making forms
- Attach & submit final grant documents

An end-to-end grant-making status chevron is displayed in Partner Portal to increase transparency and accountability throughout each phase of grant-making.

*Global Fund counter signature remains contingent upon Board approval.
Negotiate, iterate and review of grant-making documents via email and meetings before PR submits final documents in the Partner Portal.
Grant-making through the Partner Portal

**Steps for Principal Recipients**

01. Access the Global Fund Partner Portal
   - **ROLE**
     - Editor
     - Submitter

02. Download grant-making forms
   - Editor
   - Submitter

03. Negotiate grant (Iterations of documents via email / meetings)
   - Editor
   - Submitter

04. Attach and select grant-making documents
   - Editor
   - Submitter

05. Submit final grant-making documents to Global Fund
   - Submitter

06. Fully signed Grant Confirmation available in Partner Portal *
   - Editor
   - Submitter

**RECAP**

- Editor and Submitter **rights are assigned in GED per grant.**
- At a minimum, each grant is required to have **one Submitter. We recommend having two Submitters per grant.**

**KEY**

- Steps completed through the Global Fund Partner Portal
- Steps completed outside of portal

* The Grant Confirmation will be exchanged via email during the Negotiate and Sign phases. Once the grant-making process has been fully closed, the signed Grant Confirmation will be available in the Partner Portal for future reference.
Notifications have been revamped to align with the Strategy and deliver a transparent end-to-end overview for CTs, PRs and CCMs.

**PLAN**
- Funding Request Submission
- TRP Decision

**NEGOTIATE**
- GAC date registered
- CT shared GM documents in Partner Portal
- CT requests PR resubmission

**APPROVE**
- PR submitted GM documents in Partner Portal
- Submitted for GAC review
- CT attached and submitted different version for GAC review

**SIGN**
- GAC Decision
- Board approval
- Grant signed

**GET READY**
- Grant fully signed and ready for implementation
- IP start date

External notification – To CCM and PR with CT in CC
External notification – To PR with CT in CC
Partner Portal Demos
Downloading grant-making documents from the Partner Portal

https://youtu.be/B9FWcyaw6f0

Attaching and submitting final grant-making documents

https://youtu.be/eulPamQja-8
Next Steps & Resources
Grant-making timeline for TRP Window 1 submissions

<table>
<thead>
<tr>
<th>Feb</th>
<th>Mar</th>
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<th>Aug</th>
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</tbody>
</table>

- **Plan**
  - 20 Mar: CCM submission deadline for Funding Request
  - 24 Apr – 4 May: TRP Meetings
  - GF shares grant-making forms with PR

- **Negotiate**
  - PR submits final grant-making documents through the Partner Portal
  - GAC Decision
  - Board Approval
  - GF signs Grant Confirmation
  - PR signs and CCM acknowledges Grant Confirmation (subject to GAC recommendation and decision on early release of GC)

- **Approve**
  - IP Start
  - 1st AFD

**Ensure Implementation Readiness (IR)**
## Grant-making Resources

### The Global Fund Website
- Grant-making page

### Resources and links

<table>
<thead>
<tr>
<th>Resources and links</th>
<th>Audience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grant-making external information session slides and recording</td>
<td>PRs, CCMs and LFAs</td>
</tr>
<tr>
<td>• Recording: link forthcoming</td>
<td></td>
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<tr>
<td>• Presentation: EN</td>
<td>FR</td>
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<tr>
<td>Operational Policy Note (OPN) and Operational Procedures on Make, Approve and Sign Grants (within the Operational Policy Manual)</td>
<td>PRs, CCMs, and LFAs</td>
</tr>
<tr>
<td>Grant-making Handbook for PRs (link forthcoming)</td>
<td>PRs</td>
</tr>
<tr>
<td>Partner Portal Guide with detailed guidance on PR system steps (link forthcoming)</td>
<td>PRs</td>
</tr>
<tr>
<td>GED external guidance: EN</td>
<td>ES</td>
</tr>
<tr>
<td>Grant-making eLearning (link forthcoming)</td>
<td>PRs, CCMs, and LFAs</td>
</tr>
</tbody>
</table>

### Demos:
- Downloading grant-making documents from the Partner Portal
- Attaching and submitting final grant making documents

PRs, CCMs, and LFAs
<table>
<thead>
<tr>
<th>Subject Area</th>
<th>Resource</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Request</td>
<td>Funding request forms and other materials</td>
</tr>
</tbody>
</table>
| Community-led and community-based organizations  | Relevant Technical Briefs:<br>  - Community Engagement: A Guide to Opportunities Throughout the Grant Life Cycle  
- Community Systems Strengthening (CSS) Technical Brief  
- Community Systems Strengthening Interventions in Global Fund Grants: Decision-making Guide |
| Health Equity                                    |  - The Global Fund’s technical briefs on Equity, Human Rights, Gender Equality, Key Populations and Community Engagement  
- World Health Organization’s Innov8 tool to identify and address in-country health inequities  
- World Health Organization and The Global Fund’s report on the State of Inequality in HIV, TB and malaria  
- The Global Fund’s Health Equity e-learning module (forthcoming) |
| Co-financing                                    |  - Operational Policy Note on Co-Financing  
- Updated Funding Landscape Table (FLT)  
- Sustainability, Transition, and Co-Financing Guidance Note (English)  
- Sustainability, Transition, and Co-Financing Policy ([English](#) | [Español](#) | [Français](#))  
- Co-financing Commitment Letter Template |
| Sexual exploitation, abuse and harassment (SEAH)|  - Guidance Note on SEAH ([English](#) | [Español](#) | [Français](#) | [Português](#)) |
| Performance Framework                           |  - Modular Framework and Indicator Guidance Sheets  
- Indicator prioritization (HIV, TB, malaria, RSSH) |
| Detailed Budget                                  |  - Guidelines for Grant Budgeting  
- Operational Guidance for Grant Budgeting  
- Detailed Budget Instructions |
| Health Product Management Template               |  - Health Product Management Template ([available in multiple languages](#))  
- Health Product Management Template User Guidelines for Allocation Period 2023-2025 ([English](#) | [Español](#) | [Français](#))  
- Health Product Management Template: Annex to the User Guidelines ([English](#)) |
Focused Portfolio Management Models
Focused portfolios: Maximize community engagement during grant-making

**Requirement**

- PR and CT consider community priorities funding request annex* as an input into grant-making.

**Best practice**

- CCM convenes at least two meetings for PR to provide an update and receive feedback on the progress of grant making.
- CT convenes at least one meeting with community and civil society representatives to provide an update and receive feedback on the progress of grant making.

* Funding priorities of civil society and communities affected by the three diseases.
<table>
<thead>
<tr>
<th>Focused portfolios: Aligned model requirements</th>
</tr>
</thead>
</table>

**Finalize before TRP Recommendation of FR**
- System Updates / Actions:
  - Grant Entity Data*
  - Capacity Assessment (if applicable)

- Submit to GAC for review.
- PR to submit in Partner Portal

* Submitter (and Editor) data must be reviewed and updated as soon as possible to allow access to the Partner Portal. Signatories, Org. Reps for notices and banking Information must be updated prior to GAC submission.

**Finalize prior to grant submission to GAC**
- Documents:
  - Programmatic Gap Table(s) (if updated)**
  - Funding Landscape Table (if updated)
  - Grant Confirmation
  - Co-Financing Commitment Letter
  - Applicant Response Form for TRP issues

**Finalize at Grant Confirmation signing**
- Documents:
  - Monitoring & Evaluation Plan (if applicable)
  - Agreed Audit Arrangements

- Other:
  - Selection of Auditors

**Finalize after IP start date**
- Documents
- Other
Focused portfolios: Targeted model requirements

**Finalize before TRP Recommendation of FR**

- Grant Entity Data*
- Capacity Assessment (if applicable)

- Submit to GAC for review.
- PR to submit in Partner Portal

* Submitter (and Editor) data must be reviewed and updated as soon as possible to allow access to the Partner Portal. Signatories, Org. Reps for notices and banking Information must be updated prior to GAC submission.

**Differentiated instructions.**

*** Only for input-based components of the grant.

**Finalize prior to grant submission to GAC**

- Performance Framework**
- Detailed Budget**
- New/Updated Implementation Arrangements Map***
- Programmatic Gap Table(s) (if updated)
- Funding Landscape Table (if updated)
- Grant Confirmation
- Co-Financing Commitment Letter
- Applicant Response Form for TRP issues

**Documents**

**Finalize at Grant Confirmation signing**

- Monitoring & Evaluation Plan (if applicable)
- Agreed Audit Arrangements

**Finalize before IP start date**

- Approved PPM purchase requisition (if applicable)***

**Finalize after IP start date**

- Selection of Auditors

Other
# Focused portfolios: Light model requirements

## Finalize before TRP

**Recommendation of FR**

- **System Updates / Actions**
  - Grant Entity Data*
  - Capacity Assessment (if applicable)

- Submit to GAC for review.
- PR to submit in Partner Portal

* Submitter (and Editor) data must be reviewed and updated as soon as possible to allow access to the Partner Portal. Signatories, Org. Reps for notices and banking Information must be updated prior to GAC submission.

## Finalize prior to grant submission to GAC

**Documents**

- Performance Framework**
- Detailed Budget**
- New/Updated Implementation Arrangements Map
- Programmatic Gap Table(s) (if updated)
- Funding Landscape Table (if updated)
- Grant Confirmation
- Co-Financing Commitment Letter
- Applicant Response Form for TRP issues

## Finalize at Grant Confirmation signing

**Documents**

- Monitoring & Evaluation Plan (if applicable)
- Agreed Audit Arrangements

**Other**

- Selection of Auditors

**Differentiated instructions.**

## Finalize before IP start date

**System Updates / Actions**

- Approved PPM purchase requisition (if applicable)

## Finalize after IP start date

**Other**

- System Updates / Actions
  - Approved PPM purchase requisition (if applicable)
# Focused portfolios: Legacy model requirements

**Finalize before TRP Recommendation of FR**

- System Updates / Actions
  - **Submit to GAC for review.**
  - PR to submit in Partner Portal

- Grant Entity Data*
- Capacity Assessment (if applicable)

**Finalize prior to grant submission to GAC**

- **Documents**
  - Performance Framework**
  - Detailed Budget**
  - New/Updated Implementation Arrangements Map
  - Programmatic Gap Table(s) (if updated)
  - Funding Landscape Table (if updated)
  - Grant Confirmation
  - Co-Financing Commitment Letter
  - Applicant Response Form for TRP issues

**Finalize at Grant Confirmation signing**

- **Documents**
  - Monitoring & Evaluation Plan (if applicable)

- **Other**
  - Agreed Audit Arrangements

**Finalize before IP start date**

- System Updates / Actions
  - Approved PPM purchase requisition (if applicable)

**Finalize after IP start date**

- Other
  - Selection of Auditors

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* Submitter (and Editor) data must be reviewed and updated as soon as possible to allow access to the Partner Portal. Signatories, Org. Reps for notices and banking Information must be updated prior to GAC submission.

** Differentiated instructions.