

TECHNICAL REVIEW PANEL TERMS OF REFERENCE

Updated 2016
Geneva, Switzerland

1. Background

- 1.1 The Technical Review Panel (TRP) is an independent, impartial team of experts appointed by the Strategy Committee¹ (in accordance with the delegated authority from the Board) with the responsibility of providing rigorous, independent technical assessment of funding requests made to the Global Fund.
- 1.2 The *Global Fund Strategy for 2017-2022: Investing to End Epidemics* provides the framework for more effective implementation of health programs, so that investments can reach more people and achieve greater impact. The objectives outlined in the 2017-2022 strategy include:
 - Maximize impact against HIV, TB and malaria
 - Build resilient and sustainable systems for health
 - Promote and protect human rights and gender equality
 - Mobilize increased resources
- 1.3 The Global Fund access to funding process will be implemented in accordance with the Core Guiding Principles for differentiation of the development of all funding requests and the application, review and approval process set forth in the GF/SCO1/DPO3, as approved by the Strategy Committee at its first meeting in June 2016. Operationalization of these principles are to be jointly agreed between the TRP and the Secretariat, in close collaboration with the Strategy Committee. In addition, the Secretariat and the TRP will provide regular updates to the Strategy Committee on progress and lessons learned in the operationalization of the Core Guiding Principles for differentiation.

2. Mandate

- 2.1 The Technical Review Panel performs the following key functions and fulfills its mandate under the oversight of the Strategy Committee of the Global Fund Board.

Reviewing funding requests for highest impact

- 2.2 The TRP is responsible for assessing the strategic focus, technical soundness and potential for impact of funding requests in accordance with the Global Fund strategy and any subsequent guidance from the Board. This includes new requests, as well as requests to materially reprogram existing grants.
 - a. The TRP is responsible for ensuring that Global Fund investments are positioned to achieve the highest impact and contribute to the targets set out in the Global Fund Strategy (in accordance with the criteria set forth in Annex 2 to these terms of reference).
 - b. The TRP will review each request for funding on its own merit and, to the extent possible, consider the overall programmatic mix of interventions and balance of priorities within a country's portfolio in line with the epidemiological context (e.g., the three diseases, resilient and sustainable systems for health, community systems strengthening, human rights and gender equality, and other cross-cutting factors), as well as the broader policy and financial context within a country.
 - c. Accordingly, the TRP may provide recommendations and guidance on the distribution of funding across the three diseases and other relevant cross-cutting interventions.
- 2.3 Subsequent to its review, the TRP provides recommendations to the Global Fund Board and to the Secretariat, in the following areas:
 - a. Financing programs or program elements through various categories of funding, as relevant and in accordance with the Global Fund's allocation methodology;²
 - b. Prioritizing between competing funding requests (or parts thereof) as appropriate; and
 - c. Providing recommendations and/or adjustments vis-à-vis the priorities and technical approach of a funding request, as needed in order to strengthen alignment with the Global Fund Strategy.
- 2.4 As part of its recommendation, the TRP may *inter alia*:
 - a. Identify issues and strategic actions that need to be addressed during the grant-making process and/or grant implementation to the satisfaction of the TRP and/or the Secretariat;
 - b. Recommend removal of specific elements, change in strategic focus, prioritization or financing, and/or reprogramming, should material change be needed in a set time frame, as appropriate;
 - c. Request clarifications or actions on specific technical recommendations requiring support from technical partners to align with normative guidance and best practice, with coordination from the Secretariat, as appropriate; or
 - d. Request further iteration for the applicant to resubmit the funding request.

¹ Charter of the Strategy Committee

² As set forth in Annex 1 to GF/B35/05 – Revision 1 and approved under Board decision point GF/B35/DP10.

- 2.5 The TRP will develop a mechanism to provide feedback to applicants regarding the quality of their funding request, a clear rationale on its assessment as well as indication of why funding requests have been recommended for further iteration. The outcomes of TRP review and its recommendations will be provided to the Grant Approvals Committee (GAC) and the applicant prior to grant-making, and to the Board as part of the recommendation to approve the grant and its funding.
- 2.6 Based on the TRP's recommendations, the Secretariat determines the upper ceiling for grant making, including maximum funding available, in order to achieve disbursement-ready grants. In the event of material changes from the TRP recommendations as determined by the GAC, the Secretariat will obtain further input from the TRP prior to seeking the Board's approval of funding. Remaining differences between TRP and Secretariat recommendations will be disclosed to the Board prior to its funding decision.

Advisory function

- 2.7 The TRP serves as an advisory body to the Global Fund Board, and fulfills its mandate under the oversight of its Strategy Committee. The TRP Chair is an ex-officio member of the Board's Strategy Committee and reports on TRP's work and membership matters while also supporting the Strategy Committee's deliberations.

Reporting on lessons learned to inform strategy, policy and operations

- 2.8 The TRP has the responsibility to share lessons learned, in particular those that may have broader policy and financial implications. These are to be submitted to the Board through the Strategy Committee, and coordinated with the Secretariat, as appropriate. As such, the TRP also contributes input to the Global Fund's strategy and policy development processes.
- 2.9 While conducting independent technical reviews of funding requests, the TRP engages closely with the Secretariat and technical partners to ensure lessons learned inform shaping of Global Fund investments and grant implementation, and its assessments factor in relevant input or guidance from key stakeholders, including communities and civil society.
- 2.10 The TRP may perform other functions that are consistent with the principles, mandate and provisions of these terms of reference, or as otherwise requested by the Board or the Strategy Committee.

3. Membership

- 3.1 The TRP is a pool of experts from which members are drawn to serve on a review panel. TRP members serve in their personal and professional capacities and do not represent their employer, government or any other entity.
- 3.2 Collectively, TRP members shall:
 - a. Have strong technical expertise (scientific, programmatic and operational) in all of the following: HIV, TB, malaria, building resilient and sustainable systems for health, community systems strengthening, human rights and gender, strategic investment for maximum impact, sustainable financing and transition, challenging operating environments, and program management, in addition to experience in developing, implementing, managing, evaluating and/or reviewing programs at the country level;
 - b. Have knowledge of latest scientific evidence, up-to-date international guidelines and normative guidance, including new developments/technologies for HIV, TB or malaria;
 - c. Have geographically diverse experiences and include persons who work or have worked with a broad range of organizations across multiple countries, and reflect geographic, ethnic and gender diversity;
 - d. Include a balance of expertise on appropriate programmatic and structural interventions for individuals and for key and vulnerable populations, as well as experience in the role and engagement of communities, civil society, the private sector, and people living with and/or affected by HIV/AIDS, TB and/or malaria;
 - e. Have expert knowledge of the following: international health issues; health and information systems; health financing; relevant national health and development policy development processes; costed and prioritized national strategy or investment case processes; strategic investment for highest impact and sustainability; and key challenges to achieving better health outcomes in developing countries and resource limited settings;
 - f. Have proven experience, in-depth understanding and ability to interpret programmatic results building on previous investments to inform strategic decision making including: strategic focus; appropriate mix of interventions and choices on prioritization for maximum impact; development

- of effective strategies to address health system and service delivery challenges; improve yield in programmatic results, program quality, effectiveness and efficiency; and
- g. Have proven experience and ability to articulate and communicate in writing review outcomes, complex results and lessons learned effectively to key stakeholders including government, technical and development partners, community and civil society at national, regional and global levels.

- 3.3 Once selected to serve on a review panel, these members are known as “Serving TRP Members” and they are eligible to serve for a maximum of four years from the date of the first in-person review in which they participate.
- 3.4 Once the four-year term of service has expired, Serving TRP Members become “Former TRP Members” and cannot be Serving TRP Members again until a minimum of three years has elapsed since their last participation, unless otherwise called upon by the TRP Chair. The four-year term of service may be extended up to a maximum of one year, to allow for staggered transition of Serving TRP members and effective carryover of institutional memory across allocation periods. All such extensions should be reported to the Strategy Committee through regular reporting by the TRP Chair.
- 3.5 Appointment of the TRP members is the responsibility of the Strategy Committee, with the Global Fund Secretariat providing support in administering an open and transparent process to recruit and present candidates to the Strategy Committee for appointment³ and the TRP Chair and Vice-Chair(s) providing input on the process and candidates.
- 3.6 Membership of the TRP will be replenished periodically as needed, and this interval may vary. Individuals, who have not yet been called to become Serving TRP Members after a four-year period in the TRP membership pool, will need to reapply in order to continue their membership in the TRP membership pool.
- 3.7 TRP members serve in a personal capacity. As such, they will not represent the positions of, or seek or accept instructions from, any other party. TRP members will recuse themselves from the review of any funding requests or other matters where they have an interest, affiliation or other factor that may create an actual or perceived conflict of interest, which cannot be mitigated in accordance with Conflict of Interest guidelines referenced in Section 5 of these Terms of Reference. In the same regard, members of the Global Fund Secretariat are ineligible to serve on the TRP. Board Members, Alternate Members, Communication Focal Points, members of the Board’s Standing Committees⁴ or individuals who participate in Board or Committee Meetings as part of constituency delegations and/or Country Coordinating Mechanism members⁵ shall stand down from these roles if selected to serve on the TRP.

4. Governance

- 4.1 The Serving TRP Members shall elect a Chair and one or two Vice-Chairs, as required, from among their membership and establish ways to maintain continuity of the TRP Leadership (e.g., gradual or staggered term expirations). The TRP Chair serves a term of two years or until the appointment of his/her successor. The maximum term of service of four years for Serving TRP Members may be extended for the TRP Chair to cover the period of his/her service as Chair.⁶
- 4.2 It is the responsibility of the TRP Chair and Vice-Chair(s) to ensure continuity through a gradual, staggered expiration of TRP membership. The TRP Chair and/or Vice Chair may invite Former TRP members to serve on the TRP if required in order to fill gaps.⁷ All such extensions should be reported to the Strategy Committee through regular reporting by the TRP Chair.
- 4.3 The TRP Chair and Vice-Chair(s) may designate TRP Members as key points of contact for specific topics or work-stream leaders (TRP Focal Points). TRP Focal Points are identified by the TRP leadership based on identified areas where attention and expertise are needed, such as priorities or objectives under the Global Fund Strategy and key areas of expertise and competency requirements outlined in paragraph 3.2 above.
- 4.4 The TRP may set internal operating rules and procedures in line with these terms of reference, building on achievements and lessons learned.

³ Typically, approximately 100 experts are appointed as a result of a recruitment process

⁴ As defined by the Global Fund’s By-laws, as amended from time to time.

⁵ The reference to Country Coordinating Mechanism includes Regional Coordinating Mechanisms and sub-Country Coordinating Mechanisms.

⁶ In exceptional circumstances, the maximum term of service could be extended for the TRP Vice-Chair(s) to cover his/her period of service as Vice-Chair.

⁷ In accordance with GF/B25/DP11.

5. Ethics and Conflict of Interest

- 5.1 Applicants to the TRP will be requested to submit a Declaration of Interest before being considered for selection onto the TRP membership by the Strategy Committee.
- 5.2 TRP members shall uphold the integrity of the TRP and its independence. TRP members must abide by the requirements of the Policy on Ethics and Conflicts of Interest for Global Fund Institutions, as amended and restated by the Board from time to time, as well as the additional requirements set out in Ethics and Conflict of Interest Guidelines for TRP Members as determined by the TRP.⁸ TRP members that have not complied with reporting requirements, as stipulated in these documents and signed confidentiality undertakings, shall not be eligible to participate in any reviews until such requirements have been fulfilled.
- 5.3 Prior to each TRP review meeting, Serving TRP members will be required to update the Declaration of Interest to disclose any new actual, potential or perceived conflicts of interest in relation to the funding requests and country programs under review, and submit a signed Declaration of Interest Form to the Global Fund Secretariat.
- 5.4 Throughout the period of membership on the TRP, Serving TRP members shall disclose all actual, potential or perceived conflicts of interest to the TRP Chair⁹ and recuse themselves, or may be required by the TRP Chair to recuse themselves, from review of particular funding requests or other TRP work. The matter will be referred to the Ethics Officer if the TRP Chair determines there is any ambiguity regarding actual, potential or perceived conflicts of interest.
- 5.5 If a Serving TRP member is asked to take on new activities that may create conflict of interest with the responsibilities on the TRP, they must disclose it to the TRP Chair; the TRP Chair may seek advice from the Ethics Officer in reaching their decision.
- 5.6 To ensure independence and avoid actual, potential or perceived conflicts of interest during their terms of service on the TRP, TRP members shall observe a “cooling off” period after they have completed their service to the TRP. Serving and Former TRP members are required to abstain from engaging in activities funded by Global Fund-supported programs resulting from funding requests they have reviewed while on the TRP for the lifecycle of that grant.

6. TRP Review Modalities

- 6.1 The technical review process by the TRP will be an independent, transparent process based on rigorous scientific and programmatic reviews of funding requests, to determine quality of investments positioned to achieve greatest impact in a wide variety of epidemiological and country contexts.
- 6.2 The TRP will conduct its reviews in line with the criteria set forth in Annex 1 to these terms of reference.
- 6.3 The Strategy Committee acknowledged that based on lessons learned highlighted by the TRP and the TERG, there is need for flexibility and differentiation on how the TRP engages with and reviews a particular funding request, or category of funding requests versus a standardized “one-size-fits-all” approach for example, for funding requests from programs in challenging operating environments and countries in transition. Differentiated application and review modalities to be used for each review include program continuation approach, tailored application and review approach, and full review as outlined below. In line with the basis for differentiation jointly agreed by the Secretariat and the TRP, operationalization of these review modalities will consider differentiated approaches such as application materials, weighting or relevance of all review criteria presented in Annex 2, as well as the level of information needed for effective review process¹⁰:
 - a. **Program continuation approach:** Based on criteria jointly agreed between the TRP and the Secretariat, certain country components may access their allocation through a streamlined process for program continuation. To maximize impact of investments, program continuation components may in addition reprogram at any time during the grant life-cycle.

⁸ These guidelines include, but are not limited to, the restriction of TRP members from participating in the development of funding requests to the Global Fund, otherwise advising applicants or beneficiaries of Global Fund financing (e.g., Country Coordinating Mechanisms and Principal Recipients) during their service as TRP members, and principles on separation and a “cooling off” period as specified in the TRP internal guidelines.

⁹ Or to TRP Vice-Chair (s) in case of the TRP Chair.

¹⁰ In line with the basis for differentiation and material change triggers jointly agreed by the Secretariat and the TRP, the GAC will assess and determine potential application and review modalities.

- b. **Tailored review:** Aimed at responding to the specific objective(s) and the applicant type(s).¹¹
 - c. **Full review:** Pertains to a comprehensive overall review of a country's investment approach and the strategic priorities for a component.
- 6.4 In accordance with the Core Guiding Principles, differentiated application and review modalities will be (i) evidence informed, building on challenges, results and impact of previous implementation periods; (ii) tailored to different contexts including epidemiology, operating environment, considerations regarding sustainability and transition, fiduciary and programmatic risks, etc., and (iii) take into consideration material changes to disease programs.¹²
- 6.5 The TRP Chair and Vice Chair(s) will, together, determine the size, composition and identity of the group of TRP members that will be the Serving TRP Members for each review process or other TRP work.
- 6.6 In general, the TRP will conduct its reviews via in-person meetings, up to four times a year, unless otherwise agreed by the TRP. However, review and other meetings may be conducted remotely, as appropriate. The TRP Chair and Vice Chair(s) may also call meetings to discuss TRP work or internal TRP matters.
- 6.7 The TRP will receive from the Secretariat relevant contextual, operational, and risk information concerning the funding requests under review. This may include policy guidance, analysis of lessons learned and the performance of existing programs, as well as feedback mechanism to set the basis for determining level and depth of review for the next period. The Secretariat is responsible for collecting this input internally and coordinating it with input from technical partners.
- 6.8 To the extent possible, following the assessment conducted by the Serving TRP Members participating in the relevant reviews, the TRP Chair and Vice Chair(s) will facilitate TRP outcomes and recommendations through Panel deliberations, providing objective, transparent, evidence-based decision making and reporting to the Board. TRP assessment outcomes and recommendations on the funding requests submitted to the Global Fund as well as lessons learned presented to the Secretariat, technical partners, Strategy Committee and the Board will be based on the latest scientific evidence, up-to date international guidelines and normative guidance, assessment of quality of investments, as well as programmatic, epidemiological and country contextual considerations.
- 6.9 If the TRP Chair determines that review outcomes and recommendations cannot be reached by the TRP Panel deliberations, then he/she may facilitate resolution through additional internal mechanisms, for example through a peer review approach or parallel independent assessment of the funding request. In addition, he/she may request additional information from the applicant, technical partners or the Secretariat, as appropriate. In such cases, the TRP Chair may also request additional support from the TRP Vice-Chair(s) or relevant TRP Focal Point to facilitate development of final TRP review outcomes and recommendations.

7. TRP engagement with the Strategy Committee and the Board

- 7.1 The TRP Chair will participate on the Strategy Committee in accordance with the Strategy Committee Charter. At the discretion of the Chairs of the Strategy Committee and Board, the TRP Chair shall have a standing invitation to SC and Board meetings to observe proceedings through an "all areas pass".
- 7.2 The TRP Chair and Vice Chair(s) will coordinate with the Chair and Vice Chair of the Strategy Committee to identify matters and methods to report to the Board directly. A summary of the TRP report to the Strategy Committee shall be included as part of the Strategy Committee report to the Board.
- 7.3 The TRP Chair may, at his or her request and on the recommendation of the Strategy Committee Chair, have a time slot available as part of the pre-Board briefings to present TRP-related matters to all delegates present at the Board Meeting.

¹¹ It applies to components with material change in limited and defined programmatic area(s), including in Challenging Operating Environment (COE) countries ([Challenging Operating Environments Policy, GF/B35/03](#)), components receiving Transition Funding ([Sustainability, Transition and Co-Financing Policy, GF/B35/04](#)) or otherwise using a transition work plan as the basis of their funding request¹¹; and components where innovative approaches, learning opportunities (like NSP funding) or results based financing modalities are applied.

¹² Changes to scope and scale resulting to material changes in the overall strategic focus, technical soundness and potential for impact of investments in a disease program.

7.4 In the exceptional event that the TRP Chair is unable to attend a governance meeting, he/she should designate a Vice-Chair to replace him/her, subject to prior approval of the Chair of the governance meeting (i.e., the Board Chair or the Strategy Committee Chair).

8. TRP engagement with other parties

8.1 The TRP Chair and/or Vice Chair(s) represent the TRP in dealing with other parties, unless they have specifically tasked another TRP member to serve as a TRP Focal Point on a particular matter.

8.2 The TRP will work with the Secretariat and agree on the process and the criteria to ensure effective TRP engagement throughout the grant lifecycle.

8.3 Technical partners can provide critical resources to inform the TRP review process including latest results reports, updates in scientific evidence, normative guidance and lessons learned on the best strategies and effectiveness of programmatic interventions for given epidemiological contexts, and can perform a supportive role subject to assurance in safeguarding the independence of the TRP.

8.4 The TRP will coordinate with technical partners to define entry points for constructive dialogue and effective engagement, building on stakeholder's comparative strengths and roles while balancing against the need to safeguard its independence.

8.5 The Secretariat shall facilitate the effective functioning of the TRP and its activities, coordinate communication with other parties and manage logistics in a manner that supports the TRP's independence, confidentiality of internal TRP deliberations and the anonymity of TRP members for specific funding requests.

9. Honoraria and operational costs

9.1 Serving TRP Members may receive an honorarium for actual services provided, in addition to travel expenses. The amount of honorarium and any additional remuneration will be determined in accordance with policies approved by the Board or committee with delegated authority.¹³

10. Oversight and accountability of the TRP

10.1 The TRP shall undertake and submit an annual assessment of its own performance to the Strategy Committee, which will review the assessment, evaluate the TRP's effectiveness in fulfilling its terms of reference, and respond accordingly.

10.2 Performance of individual TRP members is assessed by the TRP Chair and Vice-Chair(s) and taken into consideration in the identification of Serving TRP Members for each review process or other TRP work. The TRP will develop a systematic and structured assessment of individual TRP members to provide feedback and inform subsequent selection of TRP members to attend future TRP meetings and remote review processes.

10.3 The TRP will work with the Secretariat to develop a systematic feedback loop from applicants and partners on the quality of technical recommendations provided by the TRP, to be managed through the GAC to prevent undue influence on the TRP and safeguard its independence.

10.4 The TRP will solicit guidance from the Strategy Committee as needed to inform course correction and enhance performance and effectiveness of the TRP in delivering on its mandate.

¹³ Prior to approval of the framework by the Board, the current rules on honorariums for the Serving TRP members shall apply.

Annex 1: TRP REVIEW CRITERIA

As presented in the Global Fund Strategy 2017-2022, “Investing to End Epidemics”¹⁴, the Global Fund fully aligns with global partnership strategies¹⁵ and with the Sustainable Development Goals adopted by all member states of the United Nations in September 2015.¹⁶ In particular, financing provided through the Global Fund will be a major contributor to enabling countries, in line with national health policies and strategies, to meet Goal 3 and the associated target that seeks to end the epidemics of AIDS, TB, and malaria by 2030.¹⁷

In line with Access to Funding core guiding principles for differentiation and diverse country contexts (such as challenging operational contexts and transition) and multi-country approaches, the following technical criteria¹⁸ will be used to ensure that Global Fund investments are positioned to achieve the highest impact and contribute to the targets set out in the 2017-2022 Strategy.¹⁹

1. Maximizing impact against HIV, TB and malaria towards ending the epidemics

- i. **Strategic focus:** Builds on the challenges, results and impact of previous implementation periods to inform programmatic focus, approach and geographic coverage of interventions that will maximize impact towards ending the epidemics;
- ii. **Technical soundness:** Uses evidence-based interventions and normative guidance for prevention, control, treatment and care towards ending the epidemics and building resilient and sustainable systems for health;
- iii. **Prioritization:** Uses current age and sex-disaggregated data as appropriate to respond to the epidemiological priorities, highest transmission geographies and focusing on key and vulnerable populations in a country-specific context, relevant to reducing new infections and mitigating the impacts of existing ones;
- iv. **Evidence-based programs for key populations:** Invests in epidemiologically appropriate, rights- and evidence-based interventions to scale up programs that are needed to improve access to prevention, care, and treatment services among key and vulnerable populations that are disproportionately affected by the three diseases, and systematically documents their impact on the quality and reach of programs;
- v. **Scale-up and ambition:** Promotes the ambitious and sustainable scale up of high-impact interventions and acceleration of program implementation, and aligns with guidance provided in global strategies and plans;
- vi. **Leveraging partnerships:** Builds effective country-level partnerships to enhance coordination, efficiencies and synergies in delivering services, including partnerships with networks of people living with and affected by the three diseases, and networks of key and vulnerable populations being served;
- vii. **Monitoring and evaluation for impact:** Invests in epidemiological analysis and program evaluation to document impact of programs at the country level and promotes use of data for planning, program management and quality improvement.

2. Building resilient and sustainable systems for health

- i. **Leadership and governance:** Ensures that strategic policy frameworks exist, and are combined with effective oversight, coalition-building, appropriate regulations and incentives, attention to system design and accountability;²⁰

¹⁴ [2017-2022 Strategy, Investing to End Epidemics](#)

¹⁵ 2016-2021 On the Fast-Track to end AIDS; 2016-2020 Global Plan to END TB; WHO Global Technical Strategy for Malaria 2016-2030

¹⁶ Transforming Our World: the 2030 Agenda for Sustainable Development; A/RES/70/1; Resolution adopted by the General Assembly on 25 September 2015

¹⁷ GOAL 3: Ensure healthy lives and promote well-being for all ages – investments by the Global Fund will be used by countries to prevent, test, and treat the three diseases and build systems for health enabling healthier lives and greater well-being for their populations.

¹⁸ In line with access to funding principles of differentiation, COE, STC and other relevant access to funding policies.

¹⁹ The implementation feasibility and cost-efficiency of the funding requests is further reviewed by the Secretariat prior to submission of the investment request for the Board approval, as part of the grant making process.

²⁰ Monitoring the Building Blocks of Health Systems: A handbook of indicators and their measurement strategies, World Health Organization 2010

- ii. **Reproductive, maternal, neonatal and child health, and integrated service delivery systems:** Invests in the coordination, planning and building of integrated service delivery systems for women, children and adolescents, with a focus on antenatal care, integrated community case management, sexual and reproductive health and HIV and adolescent health, within a specific country context;
- iii. **Strengthen community systems and responses:** Incorporates appropriate community-led approaches to delivering disease specific and health systems interventions, and allocates sufficient funding to community led programming. Includes adequate investments in systems for community responses including planning, management, funding mechanisms, monitoring and evaluation, advocacy and accountability efforts;
- iv. **Health information systems:** Invests in building sustainable data systems for monitoring and evaluating programs at country level to enable evidence-based strategic investments. This includes building and improving community-level reporting systems to effectively monitor and advocate for health-related issues and address human rights, gender and other barriers that impact access to health services;
- v. **Procurement supply management systems:** Invests in building resilient and sustainable procurement and supply chain management systems, in ensuring the quality of drugs and health products and in measures to mitigate distribution risks, in addition to improving institutional capacity to conduct health product forecasting/quantification for effective risk management (e.g. mitigate stock-outs), increased accuracy and visibility of future demand;
- vi. **Human resources for health:** Responds to critical challenges in sustainable human resources for health through investments aimed at developing and improving the quality, performance, and retention of community health workers and health professionals;
- vii. **Financial management systems:** Strengthens public financial management systems for transparent and accountable use of national and donor resources and reduction of fiduciary risk.

3. Promotes and protects human rights and gender equality

- i. **Invests in programs to reduce human rights-related barriers to accessing services:** Ensures that human rights-related barriers to accessing services are identified, and invests in and scales up programs to reduce these barriers;
- ii. **Invests to understand and reduce gender-related barriers to accessing services, and advance gender equality:** Ensures that gender-related barriers to accessing services are adequately understood and addressed through evidence-based interventions to achieve the set targets and advance gender equality;
- iii. **Engages key and vulnerable populations in decision-making:** Ensures that key and vulnerable populations disproportionately affected by HIV, TB and/or malaria can meaningfully engage in decisions that affect their lives at all levels;
- iv. **Empowers and engages key and vulnerable communities:** Invests in critical community empowerment interventions to facilitate and finance community involvement in program design, in service delivery as well as advocacy and accountability.²¹

4. Invests in increasing the effectiveness and efficiency of program implementation through shared ownership and mutual accountability

- i. **Technical and implementation capacity:** Has the necessary implementation capacity, conditions and plans, including human resources and infrastructure to implement the proposed interventions in the most effective and cost-efficient manner for highest impact;
- ii. **Value for money:** Efficient distribution of investments in disease programs and health systems so as to maximize impact in a resource-constrained environment;

²¹ [2017-2022 Strategy, Investing to End Epidemics](#)

- iii. **Programmatic risk:** Identifies adequate risk mitigation and assurance measures to ensure program feasibility, quality of services and sustainability, including access to technical assistance as appropriate;
- iv. **Strategies to address bottlenecks:** Understands and responds to programmatic constraints and bottlenecks that could potentially prevent these activities from being conducted, including challenging operational contexts, by outlining specific actions and expected outcomes to ensure implementation readiness.

5. Sustainability and Co-financing²²

- i. **Co-financing:** In line with Global Fund policies, demonstrates a progressive shift from external to domestic expenditure on national disease and health sector strategies to meet national universal health coverage goals, and ensure the progressive uptake of key costs of national disease plans supported by the Global Fund; to access co-financing incentive, demonstrates compliance with focus of domestic investments requirements for the corresponding country income level;²³
- ii. **Application Focus:** Demonstrates compliance with the application focus requirements for the corresponding country income level;²⁴
- iii. **Sustainability:** Builds on robust, inclusive, evidence-based national disease and health financing strategies that will ensure sustained national ownership and outcomes, including scale-up where appropriate, for continued control or elimination of the disease(s), particularly related to addressing the specific needs of key and vulnerable populations.

²² Sustainability, Transition and Co-Financing Policy, GF/B35/04, Revision 1

²³ Ibid, Part 3: Co-financing

²⁴ Ibid, Part : Application Focus