

SIIC9/ER/01

**For SIIC Information**

**REPORT OF THE TECHNICAL REVIEW PANEL (TRP) ON THE SECOND WAVE  
OF EARLY APPLICANTS IN THE TRANSITION TO THE NEW FUNDING  
MODEL**

**Purpose:**

Building on the TRP's earlier findings (SIIC7/ER/01), the report summarizes the lessons learned from the TRP's review of the Second Wave of concept notes from early applicants in the transition to the new funding model.

## EXECUTIVE SUMMARY

The TRP reviewed four early applicant concept notes for strategic focus and technical merit during 3-6 October 2013 in Geneva, Switzerland. This was the second review under the new funding model and provided an opportunity to build on lessons learned from the previous wave of early applicants as well as continue engagement with some interim applicants. Some key observations follow:

1. It is important that the Secretariat continue to gather lessons throughout 2014 to modify and refine the new funding model moving forward. Lessons learned, as described in this report, are based on a limited sample of submissions. In addition, as a number of applicants slipped this review, the TRP was unable to recommend incentive funding (since only one applicant was eligible for this funding). The review did, however, provide a first opportunity to review regional applications under the new funding model.
2. The new approach to the TRP review, as designed to arrive at positive review outcomes through an iterative process with applicants and the Secretariat, was again embraced by the TRP as an important enhancement. Concept notes were reviewed for strategic focus and technical soundness, ensuring that the limited resources were positioned to achieve maximum impact on the disease. The TRP once again purposefully delegated more actions to the Secretariat in recognition of the rigorous scrutiny anticipated during the grant-making process.
3. Applicants had a longer timeline to develop concept notes than the previous wave of early applicants. They all received early feedback from the TRP on initial documentation, with quality assurance support from Country Teams to ensure that concept notes were ready for the technical review. The TRP shares lessons learned on early engagement and possible options for the full roll-out.
4. The TRP review of interim funding requests underscores the importance of a continual critical review of the current portfolio, so that active grants are reprogrammed as needed to ensure that Global Fund investments are strategic to achieve maximum impact in changing epidemiological contexts.
5. A number of important disease-specific issues were highlighted during the review, in particular, where countries are eager to roll-out new technical guidelines for HIV. Further programmatic guidance is needed to ensure countries do not lose the gains already achieved, and that there is an appropriate balance between primary prevention and treatment, taking into consideration the existing health system capabilities.
6. The TRP appreciates the merit of a regional approach to fighting the three diseases. It provides the Global Fund with the flexibility to invest in initiatives outside the “national allocations” and allows it to respond proactively to global threats of infection. The TRP also emphasized the importance of regional applications building on existing regional structures, where possible.

## PART 1: INTRODUCTION

1.1 The Technical Review Panel (TRP) met from 3-6 October 2013 to review the second wave of early applicant concept notes for technical merit, and to continue to test elements of the new funding model prior to the full roll out of the new funding model.

1.2 The meeting consisted of 16 TRP members and the TRP Chair, Mr. Shawn K. Baker. They reviewed four concept notes: one single-country application and three regional applications.

1.3 This report primarily focuses on the TRP's review of the second wave of early applicants. Where referenced, lessons learned, observations and recommendations are also taken from the TRP's review of the three interim funding requests that have been reviewed (at various stages of development) during this meeting.

1.4 Originally, the TRP was to review six concept notes (three single-country and three regional applications) and five interim funding requests<sup>1</sup>.

1.5 In line with the flexibilities granted by the Board for the transition,<sup>2</sup> the Review Panel consisted of both current permanent TRP members and former members to ensure necessary expertise and language skills were available. The Review Panel also included TRP members that had participated in the April review of funding requests, to ensure a level of consistency with the funding recommendations for the first wave. With a view to the volume of funding requests that is expected next year, the TRP purposefully invited more reviewers than was necessary for the review of the second wave of early applicants to ensure that a larger number of TRP members would be fully literate in all aspects of the new funding model, ready for 2014. A total of 30 TRP members have been involved in the new funding model processes during this year's learning phase.

1.6 The TRP reviewed concept notes for strategic focus and technical soundness to ensure the limited resources are positioned to achieve maximum impact on the disease<sup>3</sup>. The TRP reviewed (i) program elements to be funded within the indicative amount<sup>4</sup>; and (ii) program elements to be funded if additional money is available, which is the 'above indicative'<sup>5</sup> amount. The TRP also prioritized elements within the concept notes in order to facilitate the allocation of resources becoming available through efficiencies found during grant negotiations or through future, additional resource allocations to a country (through the register of unfunded quality demand).

1.7 This report does not provide the TRP funding recommendations for each concept note, which have been provided to the Grant Approvals Committee (GAC). Instead, this report provides observations, lessons learned and recommendations. Recommendations are highlighted in **bold** throughout the report.

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<sup>1</sup> This included the review of two full interim requests, and three interim requests in progress.

<sup>2</sup> Board decision point: GF/B28/DP5.

<sup>3</sup> In line with the Board decision (GF/B27/DP7) and the TRP Terms of Reference.

<sup>4</sup> The indicative funding is an amount of funding that has been derived from an allocation formula for each country and is communicated during country dialogue. This amount for early applicants has been calculated based on a country's disease burden and Gross National Income (GNI) *per capita*, and the total projected available funding by disease.

<sup>5</sup> The 'above indicative' request refers to the amount that is over and above the indicative amount communicated by the Secretariat. This request is reviewed by the TRP for strategic focus and technical soundness, which may be recommended for funding through any incentive funding available, and/or kept on a register of unfunded quality demand.

1.8 This report is structured as follows:

**Part 1:** Introduction

**Part 2:** Review of the second wave of early applicants

**Part 3:** Lessons learned, observations and recommendations

## **PART 2: REVIEW OF THE SECOND WAVE OF EARLY APPLICANTS**

2.1 The TRP recognized the high-quality of the four concept notes submitted in this second wave of early applicants. It was also clear that efforts had been taken to reflect feedback in the final concept note from applicants' early engagement with the TRP (issues on 'early engagement' are discussed in 2.12 - 2.17 of this report).

2.2 As an important feature of the new funding model, Secretariat Country Teams provide quality assurance support to countries to ensure that concept notes are ready for the technical review. This wave had envisioned a TRP review of six concept notes as well as five interim applications at various stages of development. The fact that a number of applications were not ready to be reviewed as originally planned demonstrates that the introduction of this Country Team quality assurance mechanism is working well and that countries are able to adopt timelines to suit their needs.

2.3 Nevertheless, as review panels will meet more frequently in the full roll-out of the new funding model (expected to be between three and four times per year), the issue of slippage does highlight the need for adequate lead time to allow for the structure of these panels, which are established based on the members' skills set required to review a particular mix of funding requests. Moreover, since the TRP only reviewed one applicant that was eligible for incentive funding (the Philippines, tuberculosis), unlike in the first wave when all five concept notes reviewed were competing for incentive funding, there was no further opportunity to apply methods for awarding this funding<sup>6</sup>.

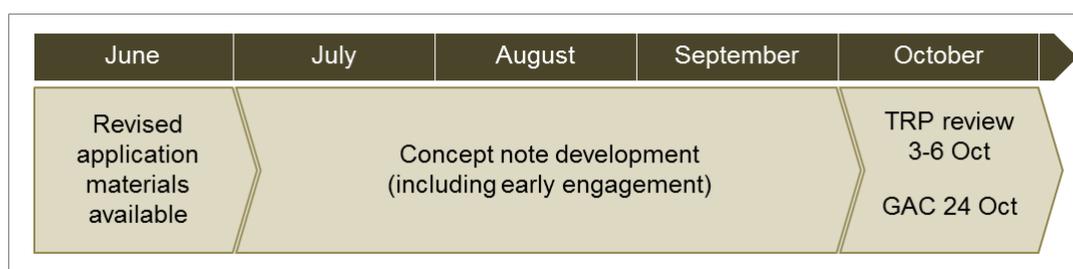


Figure 1. Timeline for second wave early applicants: from concept note development to review by the Grants Approval Committee.

## **Characteristics**

### *Early applicants*

2.1 As summarized in Table 1 below, a total of four concept notes were reviewed by the TRP.

<sup>6</sup> Previous lessons learned on incentive funding have been documented by the TRP in its report on the first wave of early applicants of the new funding model ([SIIC7/ER/01](#)), Part 3.

|   | Type of applicant |          | Disease component |    |         |
|---|-------------------|----------|-------------------|----|---------|
|   | Single Country    | Regional | HIV               | TB | Malaria |
| The Philippines   | ✓                 |          |                   | ○  |         |
| Eurasian Harm Reduction Network (EHRN)  |                   | ✓        | ○                 |    |         |
| Regional Artemisinin Resistance Initiative (RAI)                              |                   | ✓        |                   |    | ○       |
| Regional Malaria Elimination Initiative in Mesoamerica and Hispaniola (EMMIE) |                   | ✓        |                   |    | ○       |

Table 1: Second wave of early applicants

2.2 The timing of the Philippines’ submission of a concept note for tuberculosis was influenced by a Joint Program Review (JPR) of its National TB Program in mid-2013. As a useful step upon which to base the Global Fund request, the JPR prioritized NTP program strategies and key interventions to be included in the concept note.

2.3 The meeting also presented the first opportunity for the TRP to review funding requests from regional applicants under the new funding model. In recognition that regional efforts are often critical to achieve disease objectives that have a regional or multi-country dimension, the Secretariat had invited three new regional applicants to participate as early applicants in the transition to the new funding model. The total indicative amount allocated by the Global Fund to these initiatives was US\$ 116 million<sup>7</sup>. The regional applicants were:

- **The Eurasian Harm Reduction Network initiative (EHRN)**<sup>8</sup> (HIV) submitted a Regional Organization application: it aims to promote peer-to-peer technical support between harm reduction and allied civil society and community-based organizations in Eastern Europe and Central Asia (EECA).
- **The Regional Artemisinin Resistance Initiative (RAI)**<sup>9</sup> (malaria): aims to help catalyze a coordinated response to a major global threat to malaria artemisinin resistance in a Greater Mekong Sub-region and to enhance the impact of the Global Fund’s investments over the last decade. The funds represent the Global Fund’s contribution and commitment to a regional, multi-partner effort.
- **The Regional Malaria Elimination Initiative in Mesoamerica and Hispaniola (EMMIE)**<sup>10</sup> (malaria) submitted a Regional Coordinating Mechanism application: it aims to stimulate coordination efforts between countries in Mesoamerica and Hispaniola and, in cooperation with international partners, accelerate existing efforts to achieve elimination of malaria in the region by using an innovative funding approach – “Cash on delivery”.

<sup>7</sup> The total sum of the initial allocation to regional applicants was US\$ 116 million. However, this funding was adjusted for each regional applicant using qualitative factors during regional dialogue.

<sup>8</sup> Includes: Azerbaijan, Armenia, Belarus, Georgia, Kazakhstan, Kyrgyzstan, Latvia, Lithuania, Moldova, Tajikistan and Ukraine.

<sup>9</sup> Includes: Cambodia, Lao PDR, Myanmar, Thailand and Vietnam.

<sup>10</sup> Includes: Belize, Costa Rica, El Salvador, Guatemala, Haiti, Honduras, Nicaragua and Panama.

2.4 No stand-alone concept notes were submitted for health systems strengthening (HSS), neither did the four applicants include these cross-cutting interventions in their disease concept notes.

2.5 The Philippines presented a consolidated funding request which included existing grant funds<sup>11</sup>; the three regional applicants had no existing Global Fund grants for regional operations. In addition, while applicants were encouraged to include a ‘full expression of demand’ (e.g. the total amount of funding needed to finance an ambitious, technically appropriate response to the disease) within their concept notes, only the Philippines, EMMIE and EHRN included requests that went above the indicative amount. The fact that regional funding requests are not eligible for incentive funding may have been the reason why not all regional applicants included an estimate of ‘above indicative’ funding.

2.6 A total of US\$ 218.1 million<sup>12</sup> was requested across the four concept notes, US\$ 124.4 million of which was for regional initiatives. This amount included US\$ 32.8 million of existing grant funds (for the Philippines), US\$ 155.5 million of incremental indicative funding and US\$ 29.8 million of the total ‘above indicative’ request. The Philippines’ total ‘above indicative’ funding request represented 10% percent of its remaining funding gap<sup>13</sup>. Figure 2 provides a breakdown of each funding request.

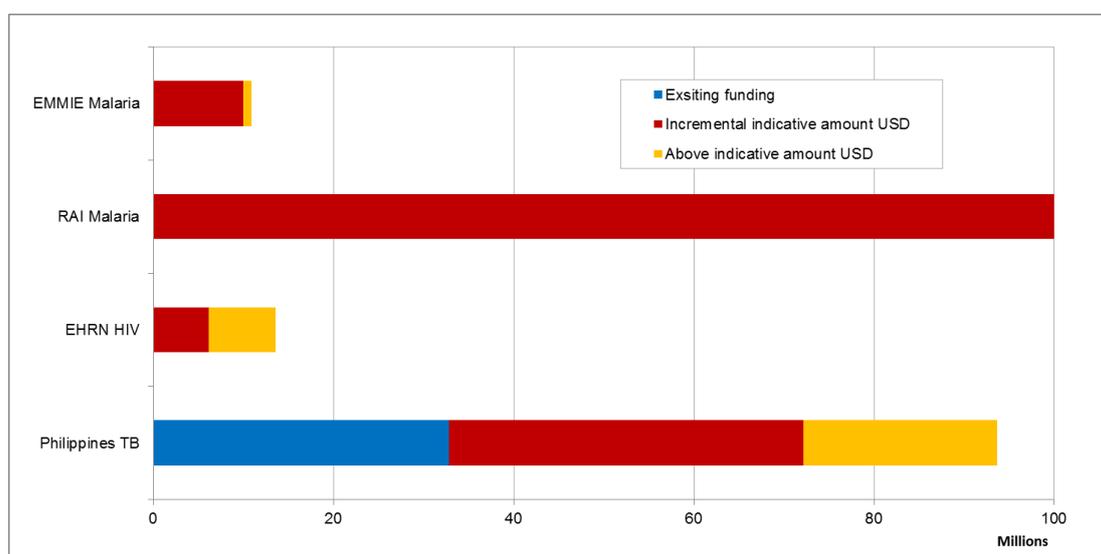


Figure 2. Breakdown of early applicants’ funding requests. Source: concept note.

### Interim applicants and material re-programming requests

2.7 In addition to the review of concept notes from early applicants during the transition, the TRP has engaged in eleven reviews of interim applicants’ requests, one of which was reviewed during this meeting (Tanzania, HIV), and three material reprogramming requests

<sup>11</sup> Existing Global Fund grants are defined as funds committed by the Board, as well as any unsigned Phase 2 grants or uncommitted Phase 2 amounts and any approved but unsigned proposal (e.g. Round 10 or Transitional Funding Mechanism (TFM) which is expected to approved/signed during the implementation period) that will be on-going through any part of the duration of the funding request.

<sup>12</sup> EHRN submitted a funding request in Euros. The Oanda exchange rate, effective at 1 October 2013, has been used to provide the US dollar equivalent: 1.00 EUR = 1.35081 USD.

<sup>13</sup> The total funding need for the TB Strategic National Plan (2014-2016) was provided by the applicant in the Financial Gap Analysis and Counterpart Financing table. The remaining funding gap was calculated based on funding from the government, external non-Global Fund donors and the Global Fund (including existing and requested incremental indicative funding). These numbers were not verified by the TRP.

outside of the interim review<sup>14</sup> Recognizing that interim applications are particular to the transition period, the TRP acknowledged the positive move to reprogram investments and appreciated the opportunity to provide input into this process for these applicants. **The TRP notes that as the Global Fund increases its focus on the strategic impact of its investments, applicants should be encouraged to make a critical review of their portfolio to ensure that previously approved funds are adequately responding to the disease(s) and are achieving maximum impact as they relate to the context of the countries' often changing epidemic(s).**

2.8 The TRP notes with concern certain cases where financial commitments made by national governments, in parallel with Global Fund funding, had not been honored. This places disease programs in peril and can result in sub-standard care, with detrimental effects on affected populations. Furthermore, the TRP is concerned that such situations could potentially affect the Global Fund's ability to enforce its counterpart financing policies, as well as to mobilize funding.

2.9 The TRP therefore welcomes the Secretariat's efforts to strengthen the tracking of counterpart financing commitments, which is a critical aspect of the Global Fund Strategy 2012-2016 and the new funding model, coupled with high-level engagement to address these cases.

### Concept Note Review Process

2.10 The October TRP Panel consisted of two HIV experts, two tuberculosis experts, four malaria experts, eight cross-cutters, and the TRP Chair. Of the 17 members, 15 were current TRP members and two were former TRP members, called upon based on their regional expertise and other skills. Language skills in particular are becoming more important as the TRP is required to review national strategic plans and other relevant documentation that are submitted in the original language.

2.11 Similar to April's review meeting, the key features of the TRP review included:

- Early engagement with applicants through Secretariat Country Teams (see 2.12 - 2.17 for more information);
- Work in small review groups (with at least two disease experts and two cross-cutters) to review each concept note. TRP members received documents prior to the meeting, and had individually reviewed these remotely;
- Engagement with Secretariat Country Teams – through structured written analysis (Program Scorecard), in-person presentation and followed by a discussion. Where required, further discussions managed through the Access to Funding team;
- Small TRP review group meetings to discuss the review of the individual concept notes;
- TRP funding recommendations finalized through a TRP plenary session, during which the TRP as a group agreed on the assessments, recommendations and content of the Review and Recommendation Forms;

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<sup>14</sup> During the transition, a total of 47 interim applicants were to receive additional (indicative) funds in 2013 and 2014 through the grant renewals process, grant extensions and the re-programming of existing grants. There were a number of entry points for the TRP's review of interim applicants' funding requests. The TRP is expected to review US\$ 1.1 billion of indicative funding from 12 interim applicants, which represents 70 percent of the total interim funding during the transition. The TRP is also required to review any reprogramming requests that contain material changes to the original proposal that was approved.

- A final plenary, for TRP discussion of the overall review process, consistency between findings, and to capture lessons learned and make further recommendations on the new funding model moving forward;
- General debrief with the Secretariat and technical partners;
- Debrief session with Secretariat Country Teams on individual recommendations;
- Debrief session with the Secretariat's Disease Advisors and the Critical Enablers Department;
- Update on the TRP review and lessons learned to the Strategy, Investment and Impact Committee at its Ninth meeting; and
- Funding recommendations to the Global Fund Board that are routed through the Grants Approval Committee in the form of the individual Review and Recommendation Forms.

### Early engagement

2.12 As with the first wave of early applicants, the TRP was involved in early engagement with applicants prior to concept note submission. The objective of this optional step was to provide applicants an early, high-level technical steer and flag major and strategic programmatic and technical issues, based on initial drafts of concept notes and additional documentation. This process also allowed the TRP to become familiar with the general focus of the funding request. It was clearly noted to applicants that early TRP feedback did not substitute for the subsequent TRP review of the concept note and supporting documents, nor did it in any way constitute a promise of funding. Engagement was facilitated through the Secretariat, and there was no direct contact with applicants.

2.13 Overall, the TRP felt that early engagement was useful during this learning period of the new funding model, positively contributing to the quality of applicants' funding requests. However, given that this practice emerged in recognition of the extremely tight timeframes and for a specific learning purpose during this transition period, the TRP noted the following to inform possible future processes:

- i. The nature of early engagement was quite variable, due to the absence of a standardized process to engage TRP early feedback. This resulted in different types of documentation being available, which depended on the stage of development of the concept note. This underlined the need for a streamlined process with clear guidance as to the information required by the TRP in order for it to provide a strategic steer prior to concept note submission.
- ii. As early engagement was a remote process conducted in small review groups, the TRP emphasizes the importance of the full TRP panel deliberations, which can only be undertaken in the form of an in-person review exercise.
- iii. Early engagement may create multiple, divergent views during concept note preparation that could potentially confuse applicants. In light of this, the TRP emphasizes that early engagement should not be seen as a substitute for input from technical partners and Country Teams, but as complementary to these.

2.14 The TRP notes that early engagement *de facto* evolved into the two-step review process that was an approach earlier debated, but ultimately not adopted, in the development of the new funding model. In light of this and the above observations, the TRP discussed the need for and format of early engagement as there was noted improvement to the quality of final concept notes. The TRP proposed the following options in an attempt to address concerns of scalability for the Secretariat and the TRP in the full roll-out:

- i. **Early engagement is discontinued:** the increased frequency of TRP meetings under the new funding model, expected to occur between three and four times a year, would obviate the need for early engagement. An application that is not recommended for funding could be amended and reviewed remotely at a later date, or, be resubmitted for TRP review at the next full Panel meeting a few months later;
- ii. **Universal access to a two-step process:** all applicants would have **the option** to request this engagement, with a standardized format of relatively light information required, which would be structured to occur during the more regular TRP meetings ; or
- iii. **Triggers established for early engagement:** a select number of applicants would be eligible for early engagement. However, the TRP noted that the perception of favoring certain applicants over others would need to be mitigated. Eligible countries would be encouraged to make use of the voluntary early engagement process, which would occur during the TRP cycles.

2.15 The TRP noted that any option chosen should be assessed on an ongoing basis during the roll-out of the new funding model, and modified as needed. However, the TRP did have a preference for a streamlined, two-step process that is available to all applicants (option ii). This should be aligned to the TRP meetings to avoid remote reviews, and be a lighter, standardized review, with clear expectations from the TRP to applicants. If countries were to choose to engage with the TRP prior to final concept note submission, they would need to re-align their planning to the two-step process to account for this extra step.

2.16 Independent of the options mentioned above, the TRP notes that early engagement could be particularly useful during the introduction of a new approach to funding, such as the “cash-on-delivery” approach currently being piloted by the Secretariat, in order for the TRP to learn alongside the Secretariat.

2.17 The TRP will continue to discuss these options with the Secretariat and will inform the Strategy, Investment and Impact Committee on the approach agreed for the roll-out of the new funding model<sup>15</sup>.

### **Technical Partner Briefings**

2.18 As per prior review meetings, technical partners from HIV, tuberculosis and malaria were invited to provide briefings to the TRP and engage in discussions<sup>16</sup>. These sessions are an opportunity for technical partners to provide updates on the latest developments in the global policies and strategies for the three diseases. Technical partners were available to provide briefings for HIV and tuberculosis. Malaria partners, while unable to provide a briefing, were available remotely to provide support to the TRP during the review process.

2.19 The TRP noted that the technical briefings continue to provide valuable input to its review of concept notes. The TRP particularly appreciated the opportunity to have a dialogue with technical partners and found it useful to know the advice that had been provided to countries during concept note development. Moving forward and noting the increased volume of applications expected per review window in the full roll-out, the TRP will request more focused information as input from the technical partners, based on issues that the TRP identifies as requiring clarification.

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<sup>15</sup> The approach may be adjusted, as needed.

<sup>16</sup> Roll Back Malaria, Stop TB, WHO and UNAIDS.

**As the TRP and the GAC are to make funding recommendations on the same funding requests, the TRP stresses the importance of ensuring that the same information is presented by technical partners to both the TRP and the GAC.**

2.20 In order to give the earliest possible feedback, technical partners were invited to attend the debriefing session (that included Secretariat staff) on 7 October, held immediately after the TRP review meeting, in which the TRP Leadership presented the key findings, recommendations and lessons learned contained in this report. In order to ensure that the information is available more broadly, this report was produced within 15 days for wider dissemination.

### **Secretariat country contextual information**

2.21 Building on the experiences and lessons learned from the first wave of early applicants, the Secretariat continued to provide specific Country Team input through the Program Scorecard. This included the Country Team's own analysis of the concept note and, where relevant, supplementary information providing additional context not available in the applicants' documentation. This information was complemented by in-person Country Team presentations.

2.22 The TRP appreciates the written input and interaction with the Country Teams, a process which provided valuable inputs to the review of the concept note. The clear vested interest of Country Teams in their portfolio was considered to be very positive by the TRP, demonstrating that the Secretariat has become increasingly engaged during country dialogue to support the development of high-quality concept notes for submission to the TRP. On the other hand, the closeness of Country Teams to the application process underlines the importance of the TRP's independent assessment.

**Moving forward, and recognizing the increased volume of funding requests expected in the full roll-out, the TRP requests that Country Teams' analytical note to the TRP includes a commentary on important issues that may not be adequately reflected in the concept note, but are important for a full understanding of the context of the funding request.**

2.23 Immediately after the review meeting, the TRP presented the final outcomes to each Country Team with a particular focus on reviewing the technical weaknesses and request for clarifications. The aim of the process was not to change or negotiate clarifications, nor was it to modify the TRP review outcome, but rather to ensure that the clarifications delegated to the Secretariat were clearly understood and could be effectively communicated to countries.

2.24 Based on the systematic engagement of Country Teams and their role to advance concept notes through grant-making and grant implementation, the TRP purposefully delegated the majority of actions to the Secretariat for follow-up.

### **Funding Recommendations**

2.25 In the Rounds-based system, applications not recommended for funding by the TRP would need to wait for a full year or more before being reviewed again as a resubmission in the next Round. A fundamental change in the new funding model process ensures opportunities for iterations to ensure timely and successful outcomes for concept note review.

2.26 The TRP made recommendations on the technical quality of the indicative and the 'above indicative' funding requests, including its recommendations on prioritization. These outcomes are captured in the individual Review and Recommendation Forms. As noted above, the TRP was unable to provide recommendations on awarding incentive funding as

there was only one eligible applicant. The TRP's recommendation on incentive funding is expected to be finalized when the funding requests from the two remaining early applicants have been reviewed.

2.27 In the case where the TRP was unable to recommend a concept note in its current state, the TRP emphasized its readiness to review a revised concept note remotely at the applicant's earliest convenience.

### **Support to the TRP and Advanced Planning for Review Groups**

2.28 The TRP has continued to receive highly professional and impartial (i.e. not involved in, nor influenced by, the concept note development process) support from the Access to Funding Team. The experience during this transition period has underscored the importance of the high caliber and independence of this support. It is essential that the Secretariat continue to provide this type of support, and be resourced at a level to meet the demands of the full roll-out of the new funding model.

2.29 The TRP has noted many cases of slippage from the originally planned dates of submission for both concept notes and interim applications. As discussed above, this slippage reflects applicants taking the time necessary to prepare a quality request for funding and illustrates the improvements of the business model. However, given that TRP members serve in their individual capacity, and that it is important to constitute TRP review groups that match the needs of individual concept notes, it will be important to provide adequate lead time in order to plan for the availability of TRP members.

## **PART 3: LESSONS LEARNED, OBSERVATIONS AND RECOMMENDATIONS**

3.1 This section documents the lessons learned by the TRP during its review and provides recommendations to the Global Fund Board, the Secretariat and applicants. These build on lessons from the first wave of early applicants that were reviewed in April 2013<sup>17</sup>, but are limited by the small sample size<sup>18</sup>.

3.2 Of particular note for this wave is that it provided the TRP with the opportunity to review the first regional applications submitted under the new funding model. It also highlighted a number of issues emerging from the review of applications that may have significant implications on maximizing Global Fund investments across the portfolio, as well as informing the TRP's approach to review in the future. The TRP therefore believes that there are important messages in the recommendations presented below, which can be taken into consideration for the full implementation of the new funding model in 2014.

3.3 As current lessons learned for the transition are based on a small number of reviews, **the TRP strongly recommends that the Secretariat continue to gather lessons throughout 2014, which can be used to modify and refine the new funding model in order to streamline processes and maximize effective investments.**

3.4 Within the framework of the revised Terms of Reference of the TRP<sup>19</sup>, the TRP will continue to recommend any adjustments to its working modalities during the roll-out of the

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<sup>17</sup> [SIIC7/ER/01](#), Part 3.

<sup>18</sup> The TRP notes that the selection of PRs was also limited with one International Non-Governmental Organization (NGO) (EMMIE) being selected; one NGO (Philippines), one UN Agency (RAI), and a not-for-profit public legal entity (EHRN).

<sup>19</sup> Approved by SIIC at its Ninth Meeting on 8-10 October 2013 (GF/SIIC09/DP4): <http://www.theglobalfund.org/en/trp/>.

new funding model to optimize its contribution to the implementation of the Global Fund strategy.

### **Feedback from the Grants Approval Committee**

3.5 The TRP appreciated the Secretariat's feedback from the GAC on the Secretariat decisions and subsequent grant-making steps. The discussion highlighted the need for a routine mechanism that provides constructive feedback to countries after the GAC's strategic discussions, which should include thematic lesson learned and policy guidance. The TRP also stresses the need to identify clear triggers for when a second TRP review is required post-grant-making (e.g. material changes to the originally TRP-recommended concept note).

3.6 In cases where the TRP has requested "check-ins" or updates during grant implementation, clarity is needed on how such a process will be managed to ensure that real actions are taken by applicants, and whether the TRP's recommendations should be specific as to when such updates are expected. The TRP will continue to provide support to strengthen the role of the Secretariat in order to monitor and give feedback on the implementation of TRP recommendations.

**The TRP has worked with the Secretariat during this transition phase to formulate the best approach on how the TRP recommendations are presented to the GAC and to the Board. Flexibility and learning must be maintained during the full roll-out to ensure that the mechanism leads to TRP recommendations being adequately addressed.**

### **HIV/AIDS**

3.7 The TRP welcomes the updated anti-retroviral (ARV) therapy guidelines issued by the World Health Organization (WHO), which bring together updated, normative advice and recommendations on the strategic use of ARV drugs for treating and preventing HIV infection.

3.8 The TRP recognizes the eagerness of countries to implement the new ARV therapy guidelines, which include initiating treatment at a 500 CD4 count instead of the previous recommendation of 350 CD4 count. However, the TRP is concerned that several funding requests failed to match their commitment to the adoption of the new treatment thresholds with an equal focus on primary prevention, despite evidence of continuing large numbers of new cases. Countries planning to roll-out the new guidelines need to fully analyze the constraints and the overall costs and burdens on the health system, as well as the related issues of long-term sustainability. Emphasis on expansion of treatment must be accompanied by renewed efforts on primary prevention to stem the sources of new infection or the expanding cost of ART will consume more and more of future national health budgets. The TRP therefore sees a need for consistent and pragmatic guidance on how to invest Global Fund resources for this highly desirable change.

**It is expected that an increasing number of countries will choose to adopt the new treatment guidelines issued by WHO. The TRP underlines the urgent need for programmatic guidance on how countries should manage the scale-up of new treatment guidance while ensuring an appropriate balance of treatment and primary prevention, taking into full consideration the existing health system capabilities in dealing with increased workloads.**

3.9 In the same context, the TRP recognizes the need for countries to make the right choices when prioritizing interventions within their allocations, which should reflect the most strategic use of funds to combat HIV (and the other diseases), having the greatest impact with the resources available to them.

3.10 In its review of interim funding requests, the TRP was particularly disturbed to see reports of pooling of anti-retroviral therapy (ART) resources and the spreading of existing pharmaceutical resources to provide care to more individuals than available ART supplies (and financial resources) allow.

**Treatment supported by the Global Fund needs to adhere to international guidelines and standards of care, and where pooling is suspected, the Secretariat and the partners should work together to determine the extent of this practice and work with country programs to raise the quality of care to international standards.**

### **Tuberculosis**

3.11 In its review of the concept note focused on MDR-TB, the TRP identified a number of different kinds of enablers for MDR-TB, representing a significant amount of the concept note budget. The TRP recognizes that enablers for MDR-TB have a potential to enhance treatment completion; however, despite investment in these enablers, the TRP is concerned at the continued high default rate among MDR patients. Context-specific evidence of the effectiveness of these enablers is therefore necessary, if the program is to have greatest impact.

**The TRP recommends that programs that include enhanced enabler packages undertake operational research of enabler support for MDR-TB patients to establish context-specific evidence to support this component of programming for MDR-TB.**

### **Malaria**

3.12 The TRP strongly supports the regional initiative to contribute to containing the global health threat of artemisinin resistance in the Greater Mekong area and prevent its spread to other regions. This is a threat that has been identified during other TRP reviews of funding requests from countries in this region. The TRP acknowledges that the resource requirement to effectively fund this initiative extends well beyond what the Global Fund is proposing to invest, and stresses the urgency of mobilizing the additional resources required from national governments, regional institutions and donors.

3.13 The TRP was concerned that some countries within one of the regional applications are still using chloroquine for the treatment of falciparum malaria and had not moved to artemisinin-based combination therapies (ACT).<sup>20</sup>

**The TRP strongly recommends that the Global Fund only fund ACTs as first-line treatment for uncomplicated falciparum malaria in line with the latest WHO Guidelines for the Treatment of Malaria, Second edition (2010), and that countries that are still using other therapies quickly transition to this policy.**

### **Regional applications**

3.14 The TRP reviewed three very different types of regional applications, all of which demonstrated the value of a regional approach to fight HIV/AIDS and malaria. The TRP also appreciates the merit of the flexibility that this type of application provides to the Global Fund to invest in initiatives outside the “national allocations” and respond proactively to global threats of infection.

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<sup>20</sup> The countries in question were not requesting funding from the Global Fund for anti-malarial medications.

**The TRP recommends the Global Fund keep the flexibility of the regional application to proactively fund these initiatives.**

3.15 The strongest funding requests were built on existing governance structures, with substantial engagement of countries from the region and international partners. The TRP's review revealed that clearer institutional leverage is gained when a regional initiative builds on such regional structures, which can also positively affect how Principal Recipients liaise with the regional grant.

**The TRP recommends that, where possible, regional applications build on existing regional structures or governing bodies to ensure that operations are well linked to the regional political and economic structures and to provide assurances of legitimacy and accountability to be effective in stewarding a regional response to the three diseases.**

3.16 The TRP also noted that in one concept note there was the risk of potential overlap between regional activities and already-approved national activities. **In order to facilitate the TRP's review, applicants must clearly articulate how national and regional investments link to each other in the respective concept notes.**

3.17 The TRP notes that one of the regional applicants did not include a funding request for the 'above indicative' amount, despite an evident resource gap. While the inclusion of above indicative remains optional, the TRP recognizes the limitations to only applying for the indicative funding.

## **Other matters for TRP input**

### *Community systems strengthening and health systems strengthening*

3.18 The TRP's reviews of the first and second wave of early applicants have focused on disease-specific funding requests, and not on community systems strengthening (CSS) or cross-cutting health systems strengthening (HSS). The TRP therefore highlights the importance of optimizing learning on CSS and HSS as Global Fund guidance is issued for the full roll-out in 2014.

### *Approach to allocations*

3.19 The review of both single-country and regional concept notes for the first two waves of early applicants underlines the fact that the formulaic approach to country allocations, driven by disease burden, may not provide the flexibility for the Global Fund to address emerging issues, such as artemisinin resistance in the Mekong Delta.

**The TRP recommends that the Global Fund maintain flexibility beyond the allocation model to respond to emerging issues, including regional initiatives.**

### *Differentiation of application processes*

3.20 The TRP was invited to provide input to the Secretariat's work on differentiating applicants to allow for a more streamlined process to access Global Fund support. The TRP welcomed this opportunity, particularly as decisions on differentiation will have an impact on the review of funding requests. The TRP stresses its willingness to provide input to further thinking on this issue.

**The TRP recommends that any attempt to differentiate application processes should optimize learning from past experiences. Differentiation should be based on a review of the lessons learned from the first and second wave of National Application Strategies (NSA), the Health Systems Funding Platform (HSFP), based on the Joint Assessment of National Strategies (JANS), and the**

**Rolling Continuation Channel (RCC) and the reasons for RCC being discontinued.**

*Results-based financing*

The TRP was also happy to be engaged in the process of results-based financing, currently being piloted, in order to be able to carry out the reviews of these funding requests. **The TRP encourages the Global Fund to reach out to other organizations that make use of results-based financing in the health sector in order to learn from their experiences.**