

FUNDING REQUEST INSTRUCTIONS: Tailored to Transition

This funding request is for country-components that are eligible for transition funding under the Global Fund's Sustainability, Transition, and Co-Financing (STC) Policy¹, and country components, which are projected to become High Income Category during the 2017-2019 allocation period, and/or otherwise using a transition work-plan as the basis for their application. Given that these disease components are moving towards fully funding and implementing their national disease responses programs independent of Global Fund support, the transition funding request places a specific focus on how a disease component will sustain the gains achieved in the fight against the disease and maintain programs essential to achieving epidemic control and service provision for key and vulnerable populations. This form may also be used by any country component which may decide to opt-in to the transition tailored review for specific reasons related to country context.

The funding request tailored to transition should describe the country's sustainability and transition-related priority programmatic and financial gaps identified through a transition readiness assessment and/or equivalent analysis of transition and sustainability at the country level. Guided by and based upon a Transition Work-Plan, the funding request should align with the prioritized country needs, as reflected in the National Health Strategy/Plan and should be supported by in-country data and technical guidance that provides a strong rationale for the approach. This request should also describe how the implementation of the resulting grant will be able to maintain and improve the services essential to achieving long-term impact against the diseases after Global Fund support has ended.

These instructions guide the applicant through the funding request narrative and supporting documents for the 2017-19 allocation cycle, for which grants will be implemented during the 2018-2020 period. They should be read by all stakeholders engaged in the development of the request.

¹ [Global Fund Sustainability, Transition and Co-financing policy](#).

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For questions, please contact: accesstofunding@theglobalfund.org

PART I: GETTING STARTED

Use of Existing Country Documentation

The application form is designed to encourage the use of existing country documentation and to avoid unnecessary duplication of information found in source documents. To keep the funding request concise, applicants are required to refer to relevant country-specific documents rather than repeat this information in the narrative. For more information, see detailed guidance under the relevant section in Part II of these Instructions (*Completing the funding request application form*).

The relevant country specific documents need to be clearly referenced and submitted as part of the package. Please do not attach documents that are not referenced in the funding request, and reference only those that provide a basis for the choice of interventions.

Page Limitations

Each question provides a maximum page limit for the response. One page corresponds to approximately 500 words. Please respect the page limitation per question and use standard Arial Font in size 11, and single line spacing. Applicants may make use of visual representations (i.e. graphs or tables) to portray key information or trends. These visuals can exceed the page limit.

The application form aims to ensure that applicants are as concise and focused as possible in their response. The Global Fund may return applications exceeding page limits for revision and resubmission.

Timing of the Submission and Implementation Period Dates

The start date of any grant implementation period must come immediately after the end date of that country component's existing grant implementation period from the preceding allocation period. For example, for a grant ending in December 2017, the implementation start date of the next grant using the allocation for the 2017-2019 cycle would be January 2018. Funding from two different allocation periods must be consecutive and cannot overlap. The allocation for eligible components can be accessed, either jointly or individually, once per allocation period for each component, and must be approved by the Board prior to the end of the allocation period (e.g., by 31 December 2019). The planning and implementation of grants should be aligned with country planning cycles. The standard grant duration for Global Fund financing is three years, unless otherwise approved by the Board.

Submitting the Application

The country allocation amount and eligible application approach are communicated to applicants in their allocation letters.

Applicants will receive the appropriate application form and attachments from the Global Fund depending on their approved review approach. After completing, the funding request (including the narrative and mandatory attachments), submit via email to your Fund Portfolio Manager and copy the Access to Funding Department accesstofunding@theglobalfund.org.

Translation of Documents

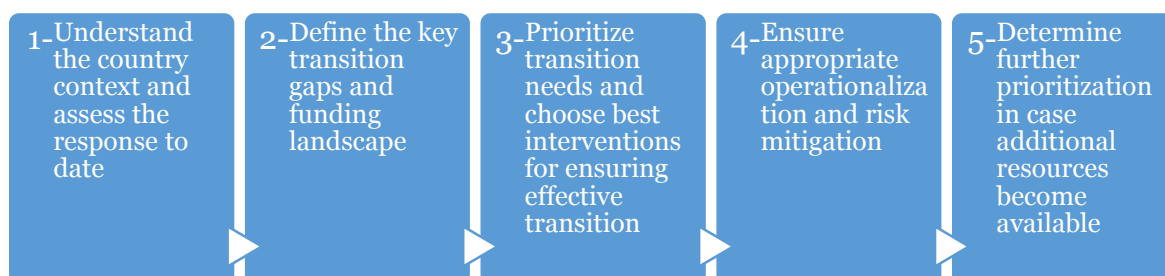
The Global Fund accepts application documents in English, French, Spanish or Russian. The working language of the Secretariat and the Technical Review Panel (TRP) is English.

The Global Fund will translate only **the narrative and core application documents** (for example, the funding request narrative and mandatory tables) submitted in French, Spanish or Russian. Supplementary attachments can be submitted in the documents' original language but translation by the Global Fund will be limited to specific sections that have been referenced in the funding request. Therefore, it is important for applicants to specify relevant sections, using page numbers to indicate pertinent information. As the Secretariat cannot ensure translations of all supplementary documents, **applicants are additionally encouraged to submit the most critical attachments in English**. Whenever possible, applicants are **encouraged** to translate all required documents into English before submission. Please contact your FPM if needed.

PART II: COMPLETING THE FUNDING REQUEST APPLICATION FORM

The development of the funding request forms an integral part of an on-going country dialogue process, in which a broad range of stakeholders are engaged. For an application to be successful, existing national strategy documents that accurately reflect the context, including other available up-to-date sources of information should serve as the basis for the funding request along with the Transition Work-Plan.

The funding request is designed to follow the logical flow outlined below:



SUMMARY INFORMATION

The summary information section of the application template seeks information important for data purposes. Under “applicant”, identify the appropriate country or multi-country entity. Under “component”, list the component of the funding request (for joint disease applications, please include all relevant components). Under the “allocation funding request” and “prioritized above allocation request” indicate the respective amounts and whether they are given in US dollars or Euros (Please refer to your Fund Portfolio Manager, if you are changing the currency compared to the previous implementation period grant). Ensure that the respective amounts entered are consistent across all application documents.

SECTION 1: CONTEXT

For transition grants to be positioned and allow for full integration into domestically funded responses, their design must be grounded in the epidemiological, operational, social, political and economic realities of the country or regional context and draw on lessons learned from previous implementation periods. The first section of the funding request asks applicants to identify key sources of information on the context, and provide a brief analysis of the main considerations that informed the choice of interventions in the request. The strategic information and analyses that guide the development of the funding request should draw from the most recent and up-to-date national strategy documents, assessments, program reviews, etc.

1.1 Summary of country context



It is mandatory to attachment National Strategic Plan(s).

Applicants should present an overview of the health system and disease situation, including differences across socio-economic status and social groupings (with emphasis on gender and age) with a focus on key and vulnerable populations, and key behavioral, and structural barriers of the epidemic. The purpose of this high-level summary is to point to pertinent context of the country component information by highlighting what the National Strategic Plan (NSP) is aiming to achieve in response to the epidemiological context, including aspects of the NSP that relate to sustainability and transition.

- a) **Epidemiological context** (this should include): i) trends in incidence and prevalence, including ii) differences across socio-economic status and social groupings (with emphasis on gender and age) with a focus on key and vulnerable populations, and; iii) key behavioural, and structural barriers of the epidemic;
- b) **Program context:** This should include a brief description of what the National Strategic Plan (NSP) is aiming to achieve in response to the epidemiological context and progress made, as well any specific aspects of the NSP and/or national strategy that relate to sustainability and transition.
- c) **Key transition gaps and challenges** identified through the transition readiness assessment or equivalent. Specifically, but not limited to, highlight those gaps and challenges that relate to programs and service delivery for key and vulnerable populations, and specific health systems-related transition challenges.
- d) **Engagement of stakeholders**, in particular the Ministry of Health, the Ministry of Finance, the Ministry of Planning, technical experts, representatives of key and vulnerable populations, civil society and/or other key stakeholders (in addition to CCM members) in the process of identifying and prioritizing the transition gaps/challenges described above resulting from the readiness assessment or equivalent.

See the Guidance Note on Global Fund Country Dialogue (*forthcoming*) for additional information.

1.2 Past implementation and lessons-learned from Global Fund and other donor investments

Applicants should demonstrate that this funding request takes into account the experience of the most recent funding cycle. This includes a reflection on key findings, challenges and successes that relate to sustainability of the national disease response in the past implementation. In addition, applicants are to include other findings and recommendations of program reviews and evaluations with particular focus on those related to sustainability, transition, such as procurement systems, continued service provision to key and vulnerable populations through national funding without external donor support, government capacity to directly fund community and civil society organizations, previous financial commitments made by the government, and/or issues with services provided to key and vulnerable populations. In particular, attention should be paid to any inequalities in access to services, as well as key and vulnerable population considerations.

If the information is available and referenced in the summary of context section, please do not repeat here.

Applicants are encouraged to take advantage of technical assistance provided by partners to assist them in their reflection on lessons learned.



Useful documents for completing this section:

- [Global Fund Information Notes on: HIV; TB; Malaria; and Building Resilient and Sustainable Systems for Health through Global Fund Investments](#)
- [Global Fund Technical Briefs](#)
- [Global Fund Key Populations Action Plan](#)
- [Global Fund Gender Equality Strategy and Strategy in Relation to Sexual Orientation and Gender Identities](#)

SECTION 2: FUNDING REQUEST



Prior to completing this section applicants are encouraged to read the [‘Guidance Note: Sustainability, Transition and Co-financing of programs support by the Global Fund’](#).

It is helpful for applicants to complete the Transition Work-Plan, Funding Landscape Table(s), Budget, Work Plan Tracking Measures section of the Performance Framework, and, as applicable, Programmatic Gap Table(s) prior to filling in questions under this Section.

This section details the applicant’s request within the allocation amount and how the investment is strategically focused and technically sound to address priority transition challenges and to maintain resilient health systems and sustainable disease responses. It should also describe how the interventions proposed would ensure that key populations continue to be reached. It also describes the interventions, as outlined below, for which funding is requested and describe how these interventions will ensure effective transition from Global Fund financing, the sustainability of the national program, and the gains achieved with the support of the Global Fund at the end of the grant period.

Applicants should ensure that the prioritized transition needs are included in the allocation funding request and should clearly explain the rationale for prioritization.

Interventions from the Transition Work-Plan

The transition funding request should focus on the described interventions determined to be essential to maintain or continue scaling up key interventions, with the aim of the country fully funding and implementing these activities by the end of the grant.

The transition funding request **should ideally include:**

- 1) Activities that enhance the sustainability and support the transition of effective and evidence-informed services for key and vulnerable populations;
- 2) Activities needed to ensure solid linkages between civil society or community organizations and the government;
- 3) Activities to enable or scale up government funding of non-state actors, specifically civil society and community organizations (e.g.: social contracting mechanisms);
- 4) Activities to secure the availability of robust programmatic and financial data for program planning and monitoring (e.g.: building capacity for data collection and analysis, strengthening national HMIS and surveillance systems);
- 5) Activities to ensure adequate procurement processes;
- 6) Activities to ensure the financial sustainability of supported programs (e.g. integrating service provision into national health insurance schemes).

While country context should ultimately determine prioritization and while there are no specific restrictions on activities to be financed, the following types of activities in the final grants are not encouraged:

- 1) **Service delivery:** At the time of the final transition grant, regardless of the type of implementing entity, most service delivery activities should be domestically funded. In exceptional cases, where funding for delivering key interventions has not yet been secured, the inclusion of these activities should be subject to a clear plan to absorb them into domestic sources of funding and implementation over the life of the grant.
- 2) **Procurement of health products:** At the time of the final transition grant, regardless of the type of implementing entity, most procurement of medicines or other health products and supplies for treatment, diagnostic and prevention activities should be funded domestically. Where funding for the procurement of health products has not yet been secured, the inclusion of health product procurement should be subject to a clear plan to transition them over the life of the grant to national authorities. Specific, costed, time-bound government commitments to take over the procurement activities may be required (depending on country context).
- 3) **Human resources, program management and other recurrent operational costs:** At the time of the final transition grant, regardless of the type of implementing entity, most running costs for the management of essential programs of all implementing entities involved (including travel related costs for supervision visits, office costs, fuel, maintenance and insurance of vehicles, etc.) should be funded domestically. The applicant may, however, include non-recurrent program management activities that effectively enable transition in the final transition grant.

Applicants, in discussion with the Fund Portfolio Manager, should evaluate how best to use transition funding, and agree on a reasonable performance framework for the transition grant with the adequate choice of indicators vs. work-plan tracking measures.

Application Focus

As per the Sustainability, Transition, and Co-financing (STC) policy, transition funding should be used to fund activities included in the country's transition work-plan. When developing the funding request in question applicants must clearly demonstrate how the selected interventions meet the focus of application requirements.² As an Upper Middle Income country, the requirement is that this focus should be 100% on interventions that maintain or scale up evidence based activities for key and vulnerable populations. In addition, as per the STC policy, UMI can include investments for RSSH interventions that are critical for ensuring transition readiness as identified through a transition readiness assessment or equivalent analysis. UMI countries may also, as appropriate introduce technologies that represent global practice and are critical for sustaining gains and moving towards control and/or elimination. The focus of application requirement aims to ensure that the allocation is strategically invested towards key and vulnerable populations and towards addressing human rights and gender-related barriers, to maintain coverage and sustain the gains achieved, as well as to specifically address transition and sustainability challenges. All funding requests, irrespective of the income category of the applicant, must include, as appropriate, interventions that respond to human rights and gender-related barriers and vulnerabilities in accessing services.

Please refer to the relevant Global Fund Information Note(s) and Technical Briefing Notes for further technical guidance in developing the funding request.

SECTION 3: OPERATIONALIZATION AND RISK MITIGATION

After defining the interventions included in the proposed funding request, applicants must ensure sufficient implementation capacity and risk mitigation measures are in place. Section 3 requests information on the proposed implementation arrangements for this funding request, as well as the identified operational risks and mitigating measures.



Useful documents for completing this section:

- [Global Fund 2017 Eligibility List](#)
- [The Global Fund Sustainability, Transition and Co-Financing Policy](#)
- [Guidance Note: Sustainability, Transition and Co-financing of programs support by the Global Fund](#)
- [Global Fund Information Notes on: HIV; TB; Malaria; and Building Resilient and Sustainable Systems for Health through Global Fund Investments](#)
- [Global Fund Modular Framework Handbook](#)
- [Global Fund Technical Briefs](#)
- [Global Fund E-learning](#)

² [Global Fund Sustainability, Transition and Co-financing policy](#).

3.1 Implementation Arrangements Summary



It is recommended that applicants update their existing implementation arrangements map.

In preparing for successful transitions, the Global Fund encourages applicants to consider the selection of local entities and government entities as Principal Recipients (PRs). This helps ensure national ownership of the key interventions financed by external donors while building national capacity for implementation of specific donor-financed activities. Where and when it is not possible to select either a local entity and/or a government entity to implement Global Fund grants, CCMs are encouraged to include in their funding requests specific details as to how international NGOs or other entities will ensure that capacities are transferred to local institutions. It is not recommended that CCM wait until the transition funding grant to shift essential functions of the disease response to local institutions.

The application should explain how the key Principal Recipient functions (programmatic and procurement mainly) will be incorporated into national TORs and structures by the end of the grant.

Changes from past implementation arrangements should be clearly described and how they will support the transition process described in the funding request.

3.2 Key Implementation risks

The applicant should describe the identified *key risks* identified through the Transition Readiness Assessment or equivalent analysis and as part of the Country Dialogue process. It should also highlight any key risks that affect the ability of the country to maintain key services beyond Global Fund financing, as well as any other additional key risks (if applicable) foreseen during the implementation of the transition activities described in this funding request. Applicants should specify the mitigating action(s) they intend to put in place to address each risk, to ensure effective program performance. Applicants can refer to investment proposed in Section 2 of the funding request that aim at addressing risks.

Important risk areas, whether programmatic or pertaining to implementation, may include, but are not limited to:

- Programmatic/monitoring and evaluation risks -- investing in surveillance, surveys, and population size estimates at national and subnational levels on a routine basis is necessary to ensure that the disease program is structured in a way that ensures that the right populations are being targeted and that the program can achieve impact and will represent value for money,
- Procurement and supply management risks -- supply chain services and procurement activities should be transitioned in a step-wise fashion well before a country stops receiving Global Fund support. Careful planning and contribution to key enablers that facilitate the establishment of sustainable supply chain systems should be established to ensure that there is sufficient time to provide needed technical support and to ensure continued access to good pricing for drugs and commodities needed to fight the three diseases after transition,
- Capacity and Role of Non-State Actors in Service Provision and Contracting of non-state actors,
- Financial risks (e.g. risk of fraud, corruption or theft, financial inefficiency, etc.),

- Governance and program management risks (e.g. CCM coordination and oversight of programs, PR coordination with national entities and partners, PR performance and/or oversight of sub-recipients, etc.).

Applicants should include external risks that may have negative or unintended consequences on program implementation and performance. These could include, but are not limited to:

- Macroeconomic factors, including unexpected rises in commodity prices, inflation and average exchange rate in relation to local market currencies;
- Instability of the country in terms of significant political changes or social unrest, ongoing conflicts, humanitarian crises, poor physical infrastructure, natural disasters, corruption; and
- Upcoming country elections or significant changes in national leadership likely to impact program implementation.

Applicants need to take key risks into account at the funding request stage to ensure adequate funding is included to cover the cost of mitigating measures. This earmarked funding could come from the allocation or from domestic or other sources. Funding for technical assistance that is being requested to strengthen implementation capacity should also be mentioned in this section.

SECTION 4: FUNDING LANDSCAPE, CO-FINANCING AND SUSTAINABILITY



The Funding Landscape Table(s) should be completed prior to filling in this section of the application form.

To achieve lasting impact and long-term sustainability of national responses in the fight against the three diseases, financial commitments from domestic sources must play a key role in national strategies. While the Global Fund allocates funding to all eligible countries, these resources are far from sufficient to address the full cost of a technically sound program that scales service provision to the level needed to control and eliminate the epidemic. It is therefore critical to assess how the requested funding fits within the overall funding landscape, including domestic and other donor funding, and how the national government plans to commit increased resources to the national disease program and health system each year during the transition grant.

The following provides an outline of the key review objectives for applicants to assess in this section:

Key Review Objectives	Elements to assess
Assess trends and actions for increasing government expenditure on health to meet universal health coverage goals and objectives	Trends in government health expenditure
	Planned actions/reforms to increase domestic resources for health, as well as to enable greater efficiency and effectiveness of health spending
	Global Fund support for health financing strategy and/or for implementing health financing reforms
Assessment of realization of co-financing (Willingness to	Assess evidence of realization of commitments

Pay) commitments of the previous allocation cycle (previously referred to as willingness to pay)	Provide justification, if commitments are not met
Assess the funding landscape	Assess funding needs and key cost drivers
	Assess available funding and gaps for key program areas
	Assess planned actions for addressing funding gaps
Ensure domestic commitments in the next allocation cycle meet the minimum requirement to access the co-financing incentive	Assess if co-financing is increasingly taking up key costs of national disease plans and/or supporting health system interventions
	Assess interventions or activities that are expected to be co-financed and how realization of these commitments will be tracked and reported.
	Provide justification if co-financing commitments do not meet minimum requirements to access the co-financing incentive
Assess longer term sustainability	Assess key sustainability challenges and actions to address them
	Assess how the funding request supports the transition from Global Fund financing and the long term sustainability of the program

4.1 Funding Landscape and Co-Financing

Applicants need to include an explanation and/or justification linked to their assessment of the funding landscape and co-financing. For instance:

- a. If government commitments for the 2014-16 allocation cycle have not been fully realized, applicants should provide reasons for the lower levels of government spending.
- b. Applicants should provide justification if co-financing commitments for the 2017-19 allocation cycle are not in line with policy requirements and/or do not meet minimum requirements to fully access the co-financing incentive.
- c. Applicants should specify the mechanism by which co-financing commitments will be tracked and reported over the next implementation period. Actions that have been identified to improve disease and health spending data should be aligned with methodologies and guidelines prescribed by technical partners. Applicants are encouraged to include targeted investments in their funding request to support these actions. If necessary, applicants should designate up to US\$ 50,000 (per disease supported by the Global Fund) for institutionalization of mechanisms for routine health and disease expenditure tracking. The Global Fund is collaborating with the World Health Organization to make available technical assistance for institutionalization of National Health Accounts supported by its grants.

4.2 Transition and Sustainability

As a starting point for responding to this question, applicants should evaluate the overall costs of their national strategy, the availability of funds and the funding gap for major program areas over the implementation period covered by the funding request. Filling in the ‘detailed financial gap’ worksheet for each disease component in the Funding Landscape Table, as relevant to the funding request, will assist applicants in understanding these costs and gaps.

Applicants should reflect upon key sustainability and transition challenges of the program(s) for which funding is requested. The response to this question should include a description of the key actions to facilitate from Global Fund financing taking into consideration ongoing and/or planned strategies and reforms related to health financing, resilient and sustainable systems for health, and the legal environment, as applicable.



Useful documents for completing this section:

- [The Global Fund Sustainability, Transition and Co-Financing Policy](#)
- [Global Fund 2017 Eligibility List](#)
- [Applicant’s Handbook: A practical guide to preparing a funding request](#)

SECTION 5: PRIORITIZED ABOVE ALLOCATION REQUEST (PAAR)

In section 5, applicants are requested to complete a prioritized above allocation request (PAAR). The PAAR should represent key additional, evidence-based and costed modules/interventions for investment, organized in order of importance for the program.

The table format in this section is intended to help applicants present a clear rationale for each module/intervention proposed in the above allocation. In addition to completing the table provided, applicants are given the option to detail additional information that may be relevant to the PAAR.

If deemed technically sound, strategically focused and positioned to achieve the highest impact by the TRP, the above allocation request will be put on a register of unfunded quality demand (UQD) maintained by the Global Fund to facilitate funding, should additional resources become available. For example, the registered above allocation request could be funded through efficiencies found within the allocation amount during grant-making, or through additional resources from other donors.

Before completing the above allocation request, **applicants should ensure that the most critical modules and interventions for their program are appropriately covered within the allocation amount.** In their review, the TRP may recommend that modules or interventions be shifted from the above allocation into the allocation request, if they assess that key modules or interventions (e.g. for key and vulnerable populations) were not appropriately accommodated within the available country allocation.

In cases where the above allocation modules are a scale-up of modules described in the within allocation request, the applicant’s rationale may be limited to an explanation of how the additional investment will contribute to increase in outcomes and/or impact. In cases where new interventions are being proposed in the above allocation, applicants are encouraged to briefly describe the activities that will be implemented in addition to explaining how the

interventions will improve outcomes/impacts on disease programs and contribute to building resilient and sustainable systems for health.

For joint funding requests that include two or more component, applicant should replicate and complete the above allocation table for each component.

MATCHING FUNDS REQUEST (if applicable)

The Global Fund Board has approved an additional funding stream – designated as matching funds – to incentivize eligible countries to align their allocations towards strategic priorities that are critical to driving impact and achieving the Global Fund Strategy 2017-2022.

Eligible countries have been informed of the specific strategic priorities for which they can access matching funds in their allocation letters, as well as the additional funding amount potentially available as matching funds.

If you are eligible to apply for matching funds, please refer to the Global Fund website³ for the application form, instructions and relevant guidance on matching funds.

PART III: ADDITIONAL DOCUMENTS TO INCLUDE IN THE FUNDING REQUEST

In addition to the application form, applicants are required to submit a Transition Work-Plan, which will be basis for the funding request. In addition, the following core documents are also required to be submitted as part of their funding request: Funding Landscape Table(s), Budget, Work Plan Tracking Measures section of the Performance Framework. Applicants are asked to complete Programmatic Gap Table(s) and Modules sections of Performance Framework if there are any modules which have coverage indicators.

Under the current cycle, applicants are no longer requested to submit a modular template. While the modular template is no longer used, the modular approach, encompassing a framework of standardized programmatic categories called modules, is still used. This framework helps to structure the programmatic and financial gap analyses, and also links main goals, objectives, interventions, indicators, targets, and costs across the core documents. For more information about the modular framework, refer to the Global Fund [Modular Framework Handbook](#).

In addition to the core documents, applicants are also required to submit: a List of abbreviations and annexes, CCM eligibility documents, CCM endorsement of the funding request and other mandatory attachments (e.g. NSP/NHP and Implementation Arrangements Map). Although it is not encouraged that the procurement of health products is included in your funding request, if this is the case, applicants are asked to attach a List of Health Products.

A checklist is included as an Annex to these Instructions. Applicants are encouraged to use this tool to evaluate the completeness of their application prior to submission.

³ Refer to the following link for guidance on how to apply for matching funds:
<http://www.theglobalfund.org/en/applying/funding/materials/>

Transition Work-Plan

The transition funding request should describe the country's transition-related priority programmatic and financial gaps. Guided by a Transition Work-Plan, the funding request should outline the prioritized interventions which will support the necessary actions to address the transition challenges previously described.

The transition work-plan would ideally be derived from the program's transition or sustainability strategy and transition readiness assessment (or equivalent analysis). In all cases, the work-plan must be aligned with the NSP.

While there is no prescribed format, the transition work-plan should be practical, measurable, costed and include a detailed outline of the steps that the country will take to transition to fully funding programs from domestic resources over the three-year period. In addition, the work-plan will need to provide the following:

- A detailed list of activities financed in the current Global Fund request with:
 - Description and budget for carrying out these activities over the period of the transition grant,
 - Roadmap for implementation of these activities beyond grant end date.
 - For activities that will continue beyond grant end date, a phased financing plan towards full government uptake by the end of the final grant.
- Where applicable, options and strategies for reprogramming existing funds and/or sourcing additional funds to fill the gaps identified in the corresponding PAAR.
- Description and budget of any activities essential for enabling a successful transition that are not financed in the current grant.

The funding request application should be oriented to fund activities determined to be essential to maintain or continue scaling up key interventions, with the aim of the country fully funding and implementing these activities by the end of the grant.

Funding landscape Table(s)



Please complete the 'health system' and 'gap overview' tabs for the disease components relevant to the funding request.

Information in the Funding Landscape Table(s) complement the applicant's response under sections 2 and 4 of the application form. In the form, applicants should make reference to the Table as needed and avoid repeating information.

Applicants must use the Funding Landscape Table(s) to provide financial information pertaining to the national disease strategy.

The Funding Landscape Overview Table identifies:

- (i) Funding needed to address the overall response to the disease;
- (ii) Current and anticipated funding from **domestic** and **external** sources; and
- (iii) Remaining financial gap (the gap between the funding need and available funding).

The Health Sector tab requires information on Government Health Sector Spending and is applicable to all applicants.

Additional detailed tabs in the Excel file seek information on the financial gap by module for each relevant disease component. Applicants can opt to either use Global Fund modules or

their own NSP cost categories as the basis for assessing gaps. High Impact and Upper-Middle Income countries are required to complete the “detailed financial gap” worksheet for disease component(s) as relevant to the funding request. Although not required, other applicants are also encouraged to complete the worksheet.

Detailed instructions on how to complete the tables are provided in the Excel file.

Budget and Performance Framework



Applicants are asked to complete the Budget and the Work Plan Tracking Measures section of the Performance Framework.

Budget

At the funding request stage only a summary-level budget is required, which includes information by module, intervention, cost grouping and implementer. The summary budget is automatically calculated when this high level information is entered in the ‘detailed budget’ tab of the Excel file. A detailed budget including the associated activity description is not necessary at this stage but will be required at the grant-making stage. Similarly, at the funding request stage, applicants are required to provide an annual budget for three years, while a quarterly breakdown is required at the grant-making stage only. However, it is understood that some applicants might find it more convenient (especially when the time between the funding request approval and anticipated Board approval is intended to be short, applicants could gain efficiency in starting with a detailed budget) to prepare a more detailed budget at the funding request stage. The detailed budget option if desired, is entirely discretionary and based on country preference.

Cost assumptions and key information for the budget should be available at this stage and applicants are recommended to provide this information with the budget. Please refer to the budgeting guidelines for more information.

Performance Framework

As previously stated, if there are no service provisions, then the applicant is required only complete the Work Plan Tracking Measure (WPTM) section of the Performance Framework Template.

In the case there are still service provision activities:

- The applicant will need to complete the Performance Framework template, filling out the specific interventions/coverage indicators on service provisions which are still meant to be funded by the Global Fund.
- For the transition related activities, these will be tracked using the Work Plan Tracking Measures (WPTM) sections.
- Annual targets for coverage indicators are required at the funding request stage. Bi-annual targets are optional at this time and required at the grant-making stage. Information on progress update reporting dates are required at the grant-making stage only.

All of the transition related activities should be tracked under Work Plan Tracking Measures section.

One Performance Framework and one Budget are to be completed per funding request, respectively. At the grant-making stage, this will be broken down by grant. Refer to the

respective Excel files for more detailed instructions on how to fill out the Performance Framework and Budget.

Programmatic Gap Table(s)

Programmatic gap tables are not required for Transition Funding Requests.

Filling in the Programmatic Gap Table(s) is not required for Transition Funding Requests. However, in the event that the funding request includes service provision activities or recurrent costs associated to these, then the applicant is required to complete the programmatic gap tables.

If there are **no service provisions**, then the applicant is **not required** to fill out the programmatic gap table, and go straight to the Performance Framework Template and only complete the Work Plan Tracking Measure (WPTM) section.

It is important to ensure consistency across these documents; for example, coverage levels in the programmatic gap table should be linked with the coverage targets suggested in the Performance Framework.

In the case where the applicant is requesting service provisions with the transition application, it must include a clear roadmap of how the interventions will be taken over by the government or financed by other domestic funds. As mentioned before, the purpose of the transition application is to ensure a smooth and successful transitions for those disease components that are moving towards fully funding and implementing their national disease responses programs independent of Global Fund support.

Please note that the purpose of the programmatic gap analysis is to identify the key coverage gaps in the country, per module/intervention, and to estimate how they can be filled by the Global Fund and other support.

Detailed guidance on how to fill in the table(s) can be found in the Excel file. For the disease components HIV and malaria it is important to note that the Excel file includes both standard and customized gap tables for specific modules, to accommodate for variations in the way gaps are quantified across modules.

List of Health Products and related assumptions and quantifications information

Procurement of health products are not encouraged for country components applying through the transition funding request.

Filling in the List of Health Products template is only relevant where Global Fund funding is requested to cover Health Products and/or associated management costs. The List of Health Products (LoHP) is an outline of the health products and associated costs that will be financed through the funding request. The list includes for each product, the estimated quantities to be procured for each year of implementation period, their estimated unit cost and costs related to their management. Assumptions and quantifications related to the procurement of health products, as well as their management costs, are underlying considerations that need to be taken into account when developing the LoHP.

For more information on how to fill in the List of Health Products, please refer to the excel template.

List of abbreviation and attachments

Applicants should use the list of abbreviations and attachments to:

- list uncommon or country-specific abbreviations and acronyms used in the application;
- list all supporting documentation relevant to the funding request that are not included in question 1.1.

In the list of annexes, the additional supporting documents should be clearly named and numbered, and the exact page reference (if applicable) should be noted. In case documents are publicly available online, applicants are recommended to provide corresponding web links, so as to limit the number of documents attached to the funding request.

Similar to the guidance provided under question 1.1, applicants should only attach documents that are relevant to the funding request, and should avoid listing a multitude of miscellaneous annexes that may obscure rather than clarify.

CCM Eligibility Requirements

The Global Fund requires CCMs to meet six requirements to be eligible for funding, as per the [CCM eligibility requirements](#). Applicants are required to ensure that all six requirements are met. The review of applicant compliance with the six requirements will be based on two separate assessments:

1. **Assessment of compliance with eligibility requirements 1 and 2:** CCM compliance with these application-specific requirements will be assessed by the Global Fund Secretariat at the time of submission of the funding request.
2. **Assessment of compliance with eligibility requirements 3, 4, 5 and 6:** CCM compliance with these requirements will be conducted on an annual basis using the Eligibility Performance Assessment (EPA) tool.

The CCM Eligibility assessment of requirements 1 and 2 will be based on a differentiated review (i.e. “standard” vs “light” review). The type of review is determined based on the Secretariat’s overall assessment of the CCM Eligibility and performance. This assessment is determined by the outcome of the annual EPA tool as well as additional contextual information from the Global Fund’s Community Right and Gender Department.

The type of review is communicated to the CCM in the allocation letter, with the documentation required at the time of funding request submission. All CCMs should submit a CCM Eligibility Narrative. “Light” review will require from the CCM a “Statement of Compliance”; “Standard” review will require the CCM to submit supporting documents showing evidence.

The CCM Eligibility Narrative and attached documentation can be submitted either **before** or **together** with the funding request, to be submitted via email to your Fund Portfolio Manager and copying the Access to Funding Department (acesstofunding@theglobalfund.org).

Requirement 1: Funding Request Development Process

The development of the funding request needs to be an open, transparent and inclusive

process which engages a broad range of stakeholders, in particular key populations. The Global Fund requires all CCMs to:

- a. Coordinate the development of all funding requests through transparent and documented processes that engage a broad range of stakeholders—including CCM members and non-members⁴ representing disease-specific and cross-cutting perspectives (e.g. HSS, human rights, M&E, Procurement and Supply Chain Management (PSM), RMNCH)—in the solicitation and the review of activities to be included in the application.
- b. Clearly document efforts to engage key affected populations in the development of funding requests.

For this requirement, CCMs need to clearly demonstrate that there has been meaningful engagement of key populations during the funding request development process and be able to provide documentation supporting their response.

Requirement 2: PR Nomination and Selection Process

The Global Fund requires all CCMs to:

- a. Nominate one or more PR(s) at the time of submission of their application for funding⁵,
- b. Document a transparent process for the nomination of all new and continuing PRs based on clearly defined and objective criteria.
- c. Document the management of any potential conflicts of interest that may affect the PR nomination process

For this requirement, CCMs must be able to demonstrate that PR nomination was undertaken through a transparent decision making process for each PR (including cases where an existing PR has been re-selected) and show evidence how any actual or potential conflict of interest was managed.

Please refer to the [CCM Guidelines](#) and the Annex 1 attached to the CCM Eligibility Narrative form for an illustrative list of supporting documents as well as to the [CCM self-assessment tool](#). For questions, contact the Fund Portfolio Manager.

CCM Endorsement of the funding request

The Global Fund requires evidence of endorsement of the final funding request by all CCM members (or their designated alternates). A representative of each PR must sign off on the funding request at the bottom of the endorsement sheet confirming that they endorse the funding request and are ready to begin grant-making and implementation.

CCM members unable to sign the endorsement of the funding request need to send an endorsement email to their CCM Secretariat to be submitted to the Global Fund as an attachment.

In cases where a CCM member is unwilling to endorse the funding request, that member should inform the Global Fund in writing (AccessToFunding@theglobalfund.org) stating the

⁴ Non-CCM members refer to all relevant stakeholders who may not be represented on the CCM but are part of the national disease or overall health sector response.

⁵ In exceptional circumstances, the Global Fund will directly select PRs for the CCM. These circumstances include those countries which are under the Additional Safeguard Policy (ASP) or undergoing an investigation by the Office of the Inspector General.

reason for not endorsing the funding request, to ensure that the Global Fund understands the member's position.

Implementation Arrangements Map

An implementation arrangements map is a visual depiction of a grant (or a set of grants), detailing: (i) all entities receiving grant funds and/or playing a role in program implementation, (ii) the reporting and coordination relationships between them, (iii) each entity's role in program implementation, and (iv) the flow of funds and commodities, and reporting data.

The CCM and principal recipients are encouraged to develop and submit a diagram of the implementation arrangement as an annex to their application. The implementation arrangement map should be updated at the end of grant-making to reflect any updated changes and clarify any unknowns.

The diagram should depict every entity (organization, not person) that plays a role in or receives Global Fund money in the path from input of funds to the implementation of activities at the beneficiary level. It is critical not to skip entities (e.g. regional and district level offices of the National Health System), group entities into generic groups (e.g. health facilities), ignore certain types of entities (e.g. key repeat vendors), or stop short of the beneficiary level (e.g. only PR and sub-recipient level). **Rather, all unknowns should be clearly recorded in the map.** This is critical to track what further information-gathering is needed to obtain an accurate understanding of the reality.

The [Guidance on Implementation Arrangement Mapping](#) provides further details on this exercise.

ANNEX 1: Checklist for ensuring completeness of application package

Applicants are encouraged to use the checklist below to evaluate the completeness of their application prior to submission.

<input type="checkbox"/>	Funding Request Application form
<input type="checkbox"/>	Performance Framework
<input type="checkbox"/>	Budget
<input type="checkbox"/>	Programmatic Gap Table
<input type="checkbox"/>	Funding Landscape Table
<input type="checkbox"/>	Transition Work-Plan
<input type="checkbox"/>	Transition Readiness assessment or equivalent
<input type="checkbox"/>	Implementation Arrangements Map (optional)
<input type="checkbox"/>	List of Health Products (if applicable)
<input type="checkbox"/>	List of Abbreviations and Annexes
<input type="checkbox"/>	CCM Eligibility Requirements
<input type="checkbox"/>	CCM Endorsement of Funding request
<input type="checkbox"/>	National Strategic Plan