38th Board Meeting

Strategy Implementation Update #2
For Board Information

GF/B38/11
Geneva, Switzerland
14-15 November 2017

TheGlobalFund
Executive Summary (1/2)

Context

• Earlier this year, Secretariat developed an internal Strategy Implementation Plan (SIP) to document and guide Secretariat’s operationalization of Global Fund Strategy 2017-2022. SIP details Secretariat implementation plans at input- and output-level (deliverables), and is closely linked to the KPI Framework.

• Secretariat committed to providing Board with an update on progress against SIP two times per year. This is second update of 2017 (the first update to Board was in May). “Strategy Implementation Update” and complementary “Strategy Implementation Deep Dives” are two of several ways that Secretariat aims to facilitate Board and Strategy Committee oversight of Strategy implementation.

Questions addressed in this slide deck

• What is current implementation status of each Strategic Sub-objective of Global Fund Strategy 2017-2022?
• What are key implementation challenges encountered thus far and what mitigation measures taken?
• What are key lessons learned?
Conclusions

• Significant progress on implementation during busy year of grant-making. Delays manifesting in several areas and are multi-causal: overly ambitious planning, internal coordination issues, staffing constraints, and Board approval timelines (specifically for Catalytic Funding), among others. Remediation actions underway and lessons to be incorporated into 2018 planning.

Input received from Strategy Committee (SC)

• Format of and information contained in both overview report and Deep Dive reports continues to be useful for oversight by SC. In 2017, 6 Deep Dive sessions covering majority of Strategic Framework presented to SC.
• Working with SC Leadership, 2018 topics for Strategy Implementation “Deep Dives” to be finalized shortly

Input requested from Board

• Numerous delays relate to late 2016 approval of catalytic funds and allocations, resulting in highly compressed timelines for Strategy operationalization and implementation. How can we accelerate allocation-related decision-making to enable improved implementation?
Content Overview

What is the current status?
- Progress made
- Oversight by Strategy Committee and Board
- Implementation highlights

What are the lessons for the future and next steps?

Additional Resources

Detailed reporting by Strategic Sub-objective
What is the current status: Progress made

Significant progress on strategy implementation during busy year of grant-making. Nine months into operationalization:

• Strategy Implementation Plan (SIP) monitoring and reporting tool developed and process embedded
  • Centralized monitoring promotes transparency and accountability
  • Use of IT (Salesforce) has enabled efficiencies in monitoring
• Budgeting process linked to SIP, although limited budget flexibility for 2018
• Greater alignment of human resources and strategic priorities
• Performance management system links objectives at individual level to Strategic Objectives of Strategy
• SIP reporting in place to enable SC and Board oversight
What is the current status: Oversight by SC and Board

- 2 comprehensive updates on strategy implementation progress
- 6 Deep Dive sessions in 2017 covering majority of Strategic Framework

2017 Deep Dives

- STC
- ITP
- RSSH
- Market-shaping/PPM
- COEs
- Human Rights and Gender
What is the current status: Implementation highlights

Points of progress:

• Increased proposed investments in AGYW and human rights vs. 2014-16
• Supply Chain Implementation Plan developed and diagnostics underway
• Risk reviews embedded at funding request stage to inform grant-making
• 5 disease components using transition application reviewed/under review by TRP
• UQD prioritization framework approved and being operationalized
• Data Use for Action and Improvement Framework finalized
• Three releases of AIM completed
• Resource Mobilization Action Plan developed and implementation underway

Key challenges:

• Funding for Human Rights Baseline Studies
• Operationalization of Strategic Initiatives
What are the lessons for the future and next steps?

Implementation challenges experienced thus far highlight need for:

• Tighter link between work plan and budget through multi-year planning
• Further integration of and alignment to KPI Framework
• Further development of project management capabilities
  • Better alignment of ambition, timelines and resources available
  • Consideration of needs up front for key initiatives – e.g. Catalytic Funding
  • Greater consideration of cyclical nature of Global Fund operations – e.g. scale-back volume of non-critical initiatives in year of heavy grant-making
  • More emphasis on joint planning between teams up-front to avoid delays later
• Consolidation and streamlining of reporting streams to reduce duplication
Additional Resources (2017)

Directly related to Board session:
1. Human Rights and Gender Deep Dive (SC, Oct)
2. Update on Country Funding (SC, Oct)
3. Resource Mobilization Action Plan (Board, May)
4. Resource Mobilization Update (AFC, Oct)

Other Deep Dive presentations:
2. RSSH (SC, Jun)
3. Market-shaping Strategy (SC, Jun)
4. Impact through Partnership (SC, Mar)
5. Sustainability, Transition and Co-financing Policy (SC, Mar)
Detailed Reporting by Strategic Sub-objective
How to interpret the “Status” bar

- Status bar on each slide reflects aggregate implementation progress for that Strategic Sub-objective based on the implementation of SIP deliverables relating to that Sub-objective. It *does not* reflect quality or scope of implementation, rather it indicates how implementation is progressing in relation to implementation plans.
- In determining status, and for rigorous monitoring and to promote improved planning, any change from original target completion date considered as a delay (even if delay is only one quarter without larger impact)
  - **Green:** Work progressing as planned
  - **Amber:** Work progressing slower than expected due to minor issues/delays
  - **Red:** Work may not be completed or will be completed with significant delays due to major issues
SO1: Maximize Impact Against HIV, TB and Malaria
Global Fund 38th Board Meeting, 14-15 November 2017, Geneva, Switzerland

Progress

1. **Impact through Partnership (ITP):** Testing of key components of ITP approach and Partner Support Platform (PSP) underway. Examples include closer linkage between disease-focused situation rooms and cross-cutting issues, in-country review and dialogue approach (including joint partner missions to review progress and identify opportunities for improving measurable outcomes such as that conducted in Cote D’Ivoire) and integration of partner feedback into PSP.

2. **Allocative Efficiency Modelling:** Through 2014-2016 Special Initiative, model applied in Bangladesh (HIV), Zimbabwe (TB, malaria) and Philippines (malaria). Results informed funding requests and grant negotiation. Support on NSP development, program review and grant implementation to continue through 2017-2019. Sustainability, Transition and Efficiency Strategic Initiative (RFP launched). Interested countries include DRC, Malawi, Cote D’Ivoire and Tanzania.

3. **Projection of program impact:** Reliable projection of impact can be done once majority of grants signed in 2018. Due to similar nature of work with KPI 4, reporting is aligned with KPI 4 timeline. GF continues working with technical partners for institutionalizing impact and efficiency modeling within national programs to inform NSP and Funding Request development through in-country or regional workshops.

**Strategic Objective**

1) Maximize impact against HIV, TB and Malaria

**Sub-objective**

a) Scale-up evidence-based interventions with a focus on the highest burden countries with the lowest economic capacity and on key and vulnerable populations disproportionately affected by the 3 diseases.

**Strategic KPI (s)**

KPI 1: Performance against impact targets; KPI 2: Performance against service delivery targets; KPI 3: Alignment of investment and need; KPI 4: Investment efficiency; KPI 5: Service coverage for Key Populations; KPI 8: Gender and age equality; KPI 9b: Investment in KP programs

**Key Challenges and Mitigating Actions**

1. Heavy grant-making and approval workload on Country Teams has meant limited time for engagement in other activities not immediately related to signing grants. To mitigate, processes have been streamlined and some activities deprioritized for 2017.

2. Country capacity to routinely produce projection of program impact and efficiency using reliable models and quality data as part of NSP and Funding Request development. On-going work with technical partners to address barriers and to institutionalize impact and efficiency modelling within national programs and key processes.
Strategic Objective
1) Maximize impact against HIV, TB and Malaria

Sub-objective
a) Scale-up evidence-based interventions with a focus on the highest burden countries with the lowest economic capacity and on key and vulnerable populations disproportionately affected by the 3 diseases.

Strategic KPI (s)
KPI 1: Performance against impact targets; KPI 2: Performance against service delivery targets; KPI 5: Service coverage for Key Populations; KPI 8: Gender and age equality

Progress
4. Tracking Strategy Targets vs. Performance Framework (PF) Targets: Window 1 and 2 initial submissions show good alignment between projected ranges underlying strategy targets and Performance Framework (PF) targets for KPI2. Analysis to be repeated based on final PFs and further window submissions. Once majority of grants are signed, a comprehensive report and analysis will be submitted to Board on comparison of strategy targets and grant targets.

5. Individual Objective Setting: SMART objectives enabled in Workday, new Human Resources information system for implementation Q1 2018. Review of 2017 individual staff objectives revealed that 63% were linked to SOs, 31% were unclear and 6% were unrelated.

Latest KPI Data
In aggregate, after two application windows, good alignment of grant targets and strategy projections

Key Challenges and Mitigating Actions
4. Not all indicators are systematically included in PFs or, if included, have specified national targets. In these cases alternative data sources will be used.
5. PF targets are still subject to change as part of grant-making process.
Progress

1. **Allocation Model lessons learned**: Initial gathering of lessons learned from 2017-2019 allocation underway.

2. **Calibration of models assessing potential allocation scenarios**: GF is working closely with technical partners to guide choice of model for country and portfolio level uses including scenarios for allocation model.

3. **Catalytic Funding Approach**:
   - **Multi-country (MC) grants**: Regional TOR consultation process ongoing for all MC. 2 proposals: TB in Mining (HIV Africa) and Malaria Elimination Initiative (LAC) reviewed by TRP in Sept.
   - **Matching Funds**: 29 proposals recommended for GAC for US$163m represent 47% of available funds.
   - **Strategic Initiatives**: Under development as planned. GAC approved implementation plan.

Key Challenges and Mitigating Actions

1. Unlikely to have partner-endorsed country-owned models ready in time to inform allocation scenarios mainly due to limitation in country capacity. As mitigating action, GF will establish modeling site by Q1 2018 run by academia and guided by technical partners to agree on modelling approach and tools building on available country-owned models to inform allocation scenarios.

2. For Strategic Initiatives, agreeing with partners on audit and access rights has been difficult and risks delaying work if it continues to remain an issue. Secretariat and OIG working on way forward.
1. **Project AIM (Accelerated Integration Management):** Four releases of integrated solution for efficient portfolio management successfully delivered year-to-date. Solution supports streamlined processes for critical stages of grant lifecycle, including allocation, funding request, grant-making, grant implementation monitoring and revisions, master data. Can leverage aligned cross-functional processes, streamlined templates, enhanced review/approval processes, end-to-end capabilities, timely and robust portfolio data.

2. **Integrated Portfolio Review:** Approach in final stages of design phase including proposals for strengthening in-country review and dialogue and for Partner Support Platform.

3. **Prioritized list of solutions to portfolio challenges:** Given interdependency with work on integrated portfolio reviews, deliverable postponed to 2018.

4. **Financial risk management:** Financial risk management guidelines with Executive Grant Management Committee for validation and Anti-fraud guidelines in progress. Regional audit initiative in execution phase. Agreement with World Vision, Catholic Relief Services and Population Services International to use their internal audit function for assurance.

**Latest KPI Data**

- As reported to Committees June 2016, hybrid reporting for previous KPI framework and 2017-2022 KPI framework will take place mid-2017. Full reporting on 2017-2022 KPI framework will be available in early 2018, following a full year of implementation.

**Key Challenges and Mitigating Actions**

1. Data alignment and quality of different data sets used in portfolio management. Mitigating actions include stabilizing and enhancing data ownership, and escalating and launching process for data quality review as part of Funding Request and Grant-making stages of grant lifecycle.

2. Stability and maturity of business requirements and ongoing policy and business changes such as differentiation, allocation model, catalytic funding etc. Offline process established to ensure maturity of changes before assigning them to project roadmap.
5. **Risk and assurance planning:** Risk and Assurance planning increasingly leveraging expansion of assurance options for Supply Chain and Data Quality risks. Operational Risk Committee, in addition to focusing on High Impact (HI) countries, has prioritized review of Challenging Operating Environments (COE) countries and their requests for flexibilities. Risk and assurance plans finalized for Cameroon, South Sudan, Uganda, Zimbabwe, Mozambique, DRC, Ghana and Tanzania. Thirteen additional countries to be completed in 2017. During first 2 windows, independent risk views provided for all Funding Requests from HI portfolios and over 80% of core portfolios.

6. **Integrated Risk Tool (IRT):** IRT due to be completed by Dec 2017.

7. **Insurance policy:** Phase I of Insurance Coverage Framework in progress: insurance database implemented, insurance guidelines nearly finalized, assistance provided to grant implementers and Country Teams, Framework aligned with Grant-making process and Supply Chain Implementation Plan. Detailed update provided to AFC for Oct. 2017 meeting.

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**Key Challenges and Mitigating Actions**

3. IRT was to be developed under Project AIM and launched as part of Release 4 at end of Mar 2017. Following some delays, options to fast track tool design and roll-out explored and underway. New solutions provider recently hired and tool expected to be launched by Dec 2017.

4. Ensuring continued alignment of insurance policy work with Supply Chain Department work in terms of top 23 countries. Achieved through alignment of visits and ensuring that warehouse inspections and review of insurance policies form part of each country’s ToR.
8. **Grant-making**: Training and guidance developed and rolled-out for Country Teams on new grant-making approach. Secretariat currently focused on signing grants reviewed by TRP in Windows 1 and 2 (15 grants were approved by GAC in Jul., and 31 approved in Sept.), and with Grant end dates in 2017, to ensure continuity of funding.

9. **Differentiated Applications**: Differentiated application approach successfully implemented. 164 country funding applications submitted in 2017 (Windows 1, 2, 3). 72 Program Continuation, 51 Tailored, 41 Full applications. 136 applications from Windows 1 and 2 approved for grant-making, representing $8.2 billion and 80% of allocation funding.

1. **Challenging Operating Environment (COE) knowledge management:** 8 of 17 non-high impact COE Countries reviewed in depth. Flexibility tool created to track types of flexibilities that Country Teams are requesting, their rationale, potential risks associated with these flexibilities and mitigation measures.

2. **Portfolio Analysis of COE Countries:** Fully established COE portfolio review process in place. Process revised after a first-year COE policy implementation review. Portfolio analyses underway by Country Teams in majority of COE countries to understand key needs and flexibilities required in these portfolios.

3. **COE Crisis Room:** Discussions with partners ongoing to establish a protocol for GF crisis room to better manage acute emergencies. Consultation with humanitarian partners planned for Q4 to streamline communication during emergencies between GF and humanitarian partners at country and HQ level. Review and revision of Emergency Fund guidelines ongoing and development of new pre-qualification process underway. Modification of indicators for acute and chronic emergency settings in order to tailor verification according to data available in progress.

### Progress

**Sub-objective**

- d) Improve effectiveness in challenging operating environments through innovation, increased flexibility and partnerships

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<tr>
<th>Strategic Objective</th>
<th>Status</th>
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<td>1) Maximize impact against HIV, TB and Malaria</td>
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<tr>
<th>Strategic KPI (s)</th>
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<tr>
<td>KPI 2: Performance against service delivery targets; KPI 7: Fund utilization; Additional KPIs attached to SO1a</td>
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### Latest KPI Data

- As reported to Committees June 2016, hybrid reporting for previous KPI framework and 2017-2022 KPI framework will take place mid-2017. Full reporting on 2017-2022 KPI framework will be available in early 2018, following a full year of implementation.

### Key Challenges and Mitigating Actions

1. Portfolio analysis may not be perceived as adding value given heavy grant-making and approval workload on Country Teams. COE Team providing support to Country Teams in preparation of review materials and introduced a differentiated review process.

2. Internal communication and knowledge management must integrate existing platforms. New knowledge management strategy to consider existing platforms.

3. Shifting COE Country Team focus from processes to leveraging COE flexibilities for innovation. COE Working Group to continue engagement with Country Teams on this.
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**Progress**

1. **Transition Planning:** Transition Readiness Assessments (TRA) implementation continues, with focus on AELAC:
   - **LAC TRAs Completed:** Jamaica (UNAIDS funded); Cuba (HIV self-assessment); Paraguay (HIV/TB), Panama (HIV/TB), Dominican Republic (HIV/TB); **In Progress 2017:** Suriname (HIV, TB and malaria) Belize (HIV/TB), Bolivia in Q4; **Social Contracting Diagnosis completed:** Paraguay (HIV/TB), Panama (HIV/TB), Dominican Republic (HIV/TB). Guyana (with PEPFAR/HP+)
   - **EECA TRAs Completed:** Armenia, Belarus, Bulgaria, Georgia, Ukraine, Moldova, Kosovo, Kyrgyzstan, Turkmenistan, Uzbekistan. In addition, Albania, Bulgaria, Macedonia, Montenegro and Romania have conducted EHRN case study for harm reduction programs; **In progress and planned:** Romania (Q3 2017), Azerbaijan, Kazakhstan, Tajikistan
   - **OTHER Completed:** Philippines (UNAIDS funded); Morocco, in cooperation with UNAIDS; Botswana (Malaria); **In Progress:** Malaria Elimination Pilot in Sri-Lanka.
2. **Development of new TRA tool** based on implementation lessons learned.
3. **Continued development of transition work-plans and sustainability plans** in EECA and LAC to complement readiness analysis.
4. **CCM funding requests:** 100% CCMs of Sustainability, Transition and Co-financing priority countries included transition-related activities in their CCM funding requests.

**Sub-objective**

- e) Support sustainable responses for epidemic control and successful transitions

**Strategic Objective**

1) Maximize impact against HIV, TB and Malaria

**Strategic KPI (s)**

- KPI 9: Human rights and gender equality (c: key populations and human rights in transition countries); KPI 11: Domestic investments

**Latest KPI Data**

- As reported to Committees June 2016, hybrid reporting for previous KPI framework and 2017-2022 KPI framework will take place mid-2017. Full reporting on 2017-2022 KPI framework will be available in early 2018, following a full year of implementation.

**Key Challenges and Mitigating Actions**

1. Delay in release of Special Initiative Funds for Sustainability, Transition and Efficiency. Indefinite Quantity Contract for STE in process of being completed to expedite procurement processes for STE financed activities.
Progress

5. **Sustainability, Transition and Co-financing (STC) Training**: Sustainability and Transition Course developed to strengthen capacity of Secretariat staff to manage transitions and embed sustainability considerations into national programs and GF grants. Course will be rolled out to approximately 70 staff in 2017, resulting in training of approximately 80% of fund portfolio managers working with “transition preparedness countries”.

6. **National Health Accounts**: Draft proposal for continued technical support to identified countries over 2018-2020. Targeted grant-making negotiations with countries who have requested financial support for development of NHAs.

7. **Co-financing**: Vast majority of programs having completed Access to Funding processes have provided sufficient commitments in line with STC policy. Update on implementation progress will be provided to SC. Support for country efforts for domestic resource mobilization and sustainability leveraged through grants, Strategic Initiative on Sustainability, Transition, and Efficiency, and collaboration with partners.

8. **Health Financing Strategies (HFS)**: Methodology developed on classifying priority countries (50). Ongoing process of starting new work on HFS and its components, defining catalytic role for GF and mapping what already done by GF and Partners.

Latest KPI Data

- As reported to Committees June 2016, hybrid reporting for previous KPI framework and 2017-2022 KPI framework will take place mid-2017. Full reporting on 2017-2022 KPI framework will be available in early 2018, following a full year of implementation.

Key Challenges and Mitigating Actions

2. Heavy grant-making and approval workload on Country Teams has decelerated STC planning.
SO2: Build Resilient and Sustainable Systems for Health
Key Challenges and Mitigating Actions

1. Increase to number of countries in which CBM research will be conducted allows broader scope and more practically oriented support but additional funds needed. Internal consensus building on revised scope underway; identification of possible additional funding (Secretariat budget limited).

2. Given current focus on grant making, delivery on defining mechanism for CBO funding will be delayed until Q1 2018. Grant Management Division focal point agreed as co-lead to facilitate progress.

Latest KPI Data

- As reported to Committees June 2016, hybrid reporting for previous KPI framework and 2017-2022 KPI framework will take place mid-2017. Full reporting on 2017-2022 KPI framework will be available in early 2018, following a full year of implementation.

Progress

1. Technical Assistance (TA): Requests for TA to Community, Rights and Gender Strategic Initiative (CRG SI) have included request for support to more systematic, strategic community response, in both service delivery and accountability domains. TA deployed by CRG TA program to Kenya, Indonesia, Mozambique, Cambodia, Lao, Vietnam, Thailand, Myanmar and Southern Africa (regional TB) and TA in process of being deployed to another three (Sierra Leone, Nepal, Cambodia).

2. Community-based Monitoring Research (CBM): Community-based monitoring research expanded to document and provide TA to community based monitoring in 5-10 countries. Agreement with CBM implementers in DRC and Sierra Leone to deploy combined operations research/TA in order to refine and scale up current CBM programming. Research/TA to be conducted in Q4 2017. Providers for operations research selected.

3. Funding Mechanisms for Community-based Organizations (CBOs): Work to define mechanism for efficient channeling of funding to CBOs affected by delayed recruitment of new Advisor on Community Systems and Responses. Advisor now in place and work to commence.

Strategic Objective

2) Build resilient and sustainable systems for health

Sub-objective

a) Strengthen community responses and systems

Strategic KPI (s)
Key Challenges and Mitigating Actions

1. Some countries having challenges to allocate funding during upcoming 2018-2020 grant cycle to support Phase 2 activities due to diminished grant allocations. Every effort is being made to find budget efficiencies, lower the unit cost of delivering high quality services and leverage existing initiatives and resources.

Progress

1. Program Quality Improvement of the three diseases integrated into ante-natal and post-natal care (ANC/PNC): Liverpool School of Tropical Medicine commissioned to lead 3-year studies on program quality improvement of integration of three diseases into ANC/PNC in at least 6 countries:
   • Togo: MoU's with PRs and University of Lome have been finalized, core program tools have been translated and adapted into National QI Standards, ANC and PNC demonstration workshops have been completed, and data collection for baseline assessment has started.
   • Niger: Service contract being finalized.
   • Ghana: Allocated full budget for Phase 1 activities targeted for completion by end 2017, and remaining budget is requested in PAAR for HIV grant. Quality improvement standards, ANC/PNC demonstration workshop and facility assessments underway.
   • Afghanistan: Inception visit completed, and Phase 1 budget and implementation package currently being negotiated.

Latest KPI Data

• As reported to Committees June 2016, hybrid reporting for previous KPI framework and 2017-2022 KPI framework will take place mid-2017. Full reporting on 2017-2022 KPI framework will be available in early 2018, following a full year of implementation.
Key Challenges and Mitigating Actions

1. Political will of countries to undertake SC diagnostics and transformation. Inclusion of key stakeholders and partners during development of Terms of Reference to encourage ownership and responsibility for successful implementation of SC Diagnostics.

2. Limited progress on developing WHO EMP strategic plan. This impacts timeline to finalize and implement 3-year contribution agreement to support pre-qualification. Consultant support proposed to WHO to expedite development of EMP strategic plan.

Latest KPI Data

- As reported to Committees June 2016, hybrid reporting for previous KPI framework and 2017-2022 KPI framework will take place mid-2017. Full reporting on 2017-2022 KPI framework will be available in early 2018, following a full year of implementation.

Progress

1. **GF Supply Chain Implementation Plan**: Plan developed and approved in June. Phase 4 underway, which is start of implementing 26 different initiatives to deliver desired results. Implementation to last 2 years.

2. **Supply Chain (SC) Diagnostics and Transformation**: 2 Diagnostics (Cameroon and Burkina Faso) near completion. Work in Liberia started. Additional 9 diagnostics at various stages of implementation. As Transformations require completed diagnostics and high level of partner collaboration, transformations will start in 2018.

3. **WHO-GF Contribution Agreement to support WHO Prequalification Programme for pharmaceuticals and other health technologies**: Donors to WHO Essential Medicines and Health Products (EMP) program coordinating efforts to support EMP strategic plan for increased access to quality assured health products. When strategic plan ready, will guide further support provided by catalytic funding (PSM 1-4). Two donor meetings organized to agree and make progress towards completion of WHO EMP strategic plan. WHO submitted a partial proposal to support Expert Review Panel process for both diagnostics and pharmaceuticals.
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Progress

1. **Matching Funding Requests for HRH:** Three countries successfully applied for HRH matching funds to date - Sierra Leone, Guinea and Afghanistan. All three countries currently in grant making. Ethiopia applied in Window 3, and Liberia will apply in Q4. Benin will apply in Jan 2018 together with its RSSH grant. Requests have included piloting support for more integrated community health services, including integrated training packages, as well as capacity building and retention of health workers, and improving workforce management systems.

Latest KPI Data

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Key Challenges and Mitigating Actions

1. Need to ensure continued technical support during development of grant applications, and that matching funding from grants is strategically allocated during grant making. Also need to ensure that right technical support will be available during implementation to help countries deliver as planned.
Progress

1. **Programmatic Assurance**: Of 20 Health Facility Assessments (HFA) and Data Quality (DQ) Reviews in high impact and core countries, 6 completed with another 8 to be completed by end 2017. Six countries to finalize implementation in Q1 2018.

2. **Data Use for Action and Improvement Framework**: Framework completed and presented to MEC, TERG and SC in Q1/Q2, with good feedback. High level framework is now being translated into more detailed guidance, in alignment with work undertaken in context of Impact Through Partnership to use strengthened in-country review and dialogue to help drive program improvements.

3. **Standardized Terms of Reference (including options for customization)**: 12 of 15 planned TORs for country level support under Strategic Initiatives finalized. Three need to be further developed and expected be ready by Q4.

4. **Differentiated Measurement Framework**: Human rights, gender and TB key populations M&E framework finalized. UNICEF initiated work on community service delivery portion, which should be completed by Q1 2018.

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**Latest KPI Data**

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**Key Challenges and Mitigating Actions**

1. New approach to program and data quality assurance requiring change management, internal process solutions, and decisions among various GF teams caused delays, but issues have now largely been resolved with more streamlined process put in place.

2. Knowledge management and implementation research unit at UNICEF was undergoing reorganization with appointment of new head. Resulted in delays in commencing work on measurement frameworks but work on track now.
Progress

1. **Impact Through Partnership (ITP)** – In-country review and dialogue component is being designed to help strengthen in-country program reviews which inform development of national strategies and program and grant management.

2. **Strategic Initiative RSSH 1.3**: Includes funds for technical partners to support peer exchange and south-to-south learning on integrated planning for three diseases.

### Strategic Objective

2) Build resilient and sustainable systems for health

### Sub-objective

1) Strengthen and align to robust national health strategies and national disease-specific strategic plans

### Strategic KPI (s)

KPI 6: Strengthen systems for health (f. percent funding requests rated by TRP to be aligned with national priorities as expressed in NSPs)

### Latest KPI Data

#### 2017 Target: 90% Very good/Good

#### Mid-2017 Result: 94% of members Strongly Agree or Agree on alignment with national priorities

![Graph showing TRP Assessment results]

- Windows 1 and 2 TRP Assessment (n=72)
- Strongly Agree: 35
- Agree: 25
- Disagree: 4
- Strongly disagree: 0
- NA (Excluded): 8

### Key Challenges and Mitigating Actions

1. Potentially, in-country support for NSP developments will need to be balanced against country perceptions that GF will overly influence outcomes of process.
1. **Use of Country or Donor Harmonized Systems:** Development of comprehensive action plans for alignment and use of country or donor harmonized systems for financial management of GF grants progressing:
   - **India:** GF costing dimensions integrated into MOH’s Integrated Financial Management Information System (IFMIS). Supports alignment with country system to undertake GF budgeting, accounting and reporting. Two states targeted for piloting at outset, but initiative now rolled out in 16 states. In districts in 10 of 16 states, GF expenditures accounted for in IFMIS.
   - **Sierra Leone:** Full operationalization of shared service/donor-harmonized unit (use of a single information system, finance manual, personnel etc.) in MOH & Sanitation for financially managing donor investments.
   - **Liberia:** Work in early stages as part of IHP+ for UHC Partnership.

2. **Routine Financial Management Capacity Building:**
   - Tailored approach for francophone countries through use of standardized accounting software progressing well. Guinea Bissau and Mali initiated following closure of 2 country projects with 2 now at advanced closure phase.
   - Implementation of other capacity strengthening initiatives ongoing in 9 countries, following undertaking of capacity assessments.

**Latest KPI Data**

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**Key Challenges and Mitigating Actions**

1. Partner alignment on use of country/donor-harmonized systems. Continued GF engagement with partners through IHP+ 4UHC.
2. Resource constraints at PR level (both financial and human resources). Technical support to PRs from GF pre-qualified service providers and continued use of dedicated Secretariat Team for FMS strengthening.
3. Ownership and support from in-country actors. Addressed through leveraging of existing grant CT-in-country partner engagement mechanisms.
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Progress

1. **RSSH Dashboard**: Based on requests from CTs and regional managers and in collaboration with partners, 82 country profiles created and disseminated. Working to move instrument to a more sustainable IT system. Linkages with other initiatives defined, including strengthened in-country review and dialogue and enhanced programmatic assurance.

2. **Impact through Partnership**: Aiming to help address cross-cutting and systems issues on critical path to improved disease specific outcomes, in line with GF KPIs.

Latest KPI Data

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Key Challenges and Mitigating Actions

1. Continued development and maintenance of Dashboard currently dependent on external funding.
SO3: Promote and Protect Human Rights and Gender Equality
1. 13 Priority Countries Adolescent Girls and Young Women (AGYW) Scale-up: MOUs negotiated with UNICEF and WHO, whereby each organization has priority countries amongst 13 AGYW focus countries. Coordination with UN partners ongoing. In October CRG SI will launch meaningful engagement fund for organizations led by and for women and girls in AGYW focus countries. Fund to be managed by Southern African AIDS Trust and Eastern Africa National Networks of AIDS Service Organizations. Two AGYW Advisors in Grant Management Division recruited, supported by BMGF.

2. Resource Mobilization for AGYW Programs: Private Sector engagement campaign around HIV programs for AGYW has now evolved into HER (HIV Epidemic Response) campaign, being designed and developed by Communications, CRG and Private Sector Engagement Departments. Campaign to be supported by communication plan including a number of events culminating in official launch at WEF'18 in Davos.

3. Adapted Modelling Tool: New models developed and improvement of existing model (Goals) to address limitations identified during target setting. Models tested for 13 KPI 8 selected countries and options to be discussed with key technical partners including UNAIDS and Imperial College during Q3 to select most suitable option.

1. 4 of 13 priority AGYW countries applying in first funding window, therefore limited time/capacity to mobilize TA to civil society in those countries given CRG Strategic Initiative approved only in Nov 2016 and GF Strategy commenced Jan 2017. AGYW learning group established in to coordinate on bottlenecks and TA needed in country. Monthly webinars with civil society partners through Women 4 GF, and TA mobilized as possible.

2. Development of modelling tool dependent on partner timelines. Partner consultation and validation to happen in Q4 to Q1 2018.

Latest KPI Data

- As reported to Committees June 2016, hybrid reporting for previous KPI framework and 2017-2022 KPI framework will take place mid-2017. Full reporting on 2017-2022 KPI framework will be available in early 2018, following a full year of implementation.

Progress

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Global Fund 38th Board Meeting, 14-15 November 2017, Geneva, Switzerland

Progress

1. **Gender Assessments**: GF has developed a framework for global analysis of gender-related barriers and risks to TB and TB services. Stop TB has mobilized funds to support at least 7 additional (to 4 completed) gender assessments by year end. Aim is to collectively complete global review of surveys to identify trends and programmatic responses by first quarter 2018.

2. **Gender Accountability Framework**: Draft accountability framework on gender developed, but needs further internal consultation before finalization. Aim for first report to be shared in Q1 2018.

3. **Gender at Secretariat**: Gender initiatives embedded in HR portfolio of projects and tracked bi-weekly. Gender content included within staff onboarding, training programs and HR reporting. Learning and development activities include gender awareness session during GF wellness week, Women in Leadership training and travel security sessions for women. Gender audit to be conducted in 2018.

4. **Model for Gender Responsive Programming**: Avenir Health proposing new model that includes age and sex disaggregation. Country-level meeting to support incidence recalibration planned.


Key Challenges and Mitigating Actions

1. Consultant could not be engaged to develop gender accountability framework. Framework developed internally but with delay. Annual report based on framework therefore also delayed.

2. GF relying largely on technical partners and their capacity to carry out gender assessments. GF has integrated work into MOU for Finding the Missing Cases.

3. For Gender model, comprehensive review of evidence and potentially filling of evidence gap required. GF to continue close collaboration with technical partners to collect critical evidence/information and develop conceptual framework as prerequisites for model development.

Latest KPI Data

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1. **Baseline Studies in 20 Human Rights Priority Countries:** Tools for baseline studies finalized. 19 baseline studies to be completed by end of year (14 baseline underway and 5 more to start shortly). Due to elections, Kenya to be completed in 2018. Funding for all assessments has been secured.

2. **Human Rights and Sustainability:** Work initiated in Q3 with majority to be undertaken in Q4. Contribution to development of flagship course on sustainability and transition. Initial identification of challenges and opportunities for scaling up and sustaining programs to reduce human rights-related barriers to services specific to countries nearing transition.

3. **Increased investment in programs to reduce human rights barriers to services:** Revised all country profiles for countries applying in W3 and work on profiles for W4 underway. Three technical briefs finalized and made available on applicant resources webpage. HIV, gender equality and human rights technical brief launched jointly with UNAIDS. Joint UNAIDS/GF webinars conducted. Plans for broader dissemination under development.

### Key Challenges and Mitigating Actions

1. Due to delays in securing funding for baseline studies and delayed recruitment, development of many 5-year plans and related multi-stakeholder meetings delayed and will, in most cases, happen in Q1 2018. Prioritization of work on baseline studies pushed back start of work on human rights and sustainability as well.

2. Knowledge and ownership of human rights remains limited at Secretariat, particularly on programmatic elements needed to reduce barriers to impact. Activities to engage Country Teams and increase capacity and understanding of importance of removing human rights-related barriers to services (and related KPIs) planned.

### Latest KPI Data

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### Strategic Objective

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<tr>
<th>3) Promote and protect human rights and gender equality</th>
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<th>Sub-objective</th>
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### Strategic KPI (s)

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### Progress

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Progress

1. **Comprehensive HR review of GF policies and processes**: Development of TORs underway.

2. **Human Rights Complaints Procedure**: Review completed and report under finalization. Based on findings, OIG and CRG will undertake follow-up activities in 2018.

### Strategic Objective

3) Promote and protect human rights and gender equality

### Sub-objective

d) Integrate human rights considerations throughout the grant cycle and in policies and policy-making processes

### Strategic KPI (s)

KPI 9: Human rights

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**Latest KPI Data**

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**Key Challenges and Mitigating Actions**

1. Ongoing effort to resource undertaking of policy and process review and implementation of follow-up actions.
1. **Use of HIV Key Populations (KP) Implementation Tools**: 4 in-country consultations organized by global constituency-led key population networks: Network of Sex Worker Projects, MSM Global Forum, International Network of People who Use Drugs, and Global Network of Trans Women and HIV/Action for Trans Equality. Consultations enabled local key population groups to discuss quality of existing programs using KP Implementation as a benchmark and to develop action plans to advocate for scaling-up comprehensive, rights-based services in line with tools.

2. **TB and Malaria Affected Communities**: Focus on strengthening governance of Global Coalition of TB Activists (GCTA), supporting GCTA to establish relationships with existing networks or enabling it to support establishment of regional network of people affected by TB. Capacity development activities conducted to enable affected communities to advocate for improved TB response in GF processes and nationally. For Malaria, 4 organizations receiving awards under CRG Strategic Initiative (CRG SI) pilot program for malaria completed work, including delivery of Malaria Matchbox. External project review conducted and recommendations provided, which will inform future support plans for malaria communities via CRG SI.

**Key Challenges and Mitigating Actions**

1. Need to ensure outcomes from in-country consultations inform grant-making processes. PRs and CCM reps invited to participate in workshops, in coordination with Country Teams.

2. Limited grantee capacity to move focus from strengthening governance to supporting GF program implementation and Community engagement. Secretariat to directly engage with Global Coalition of TB activists and regional networks to develop 2 year work plan. For Malaria, challenge is to sustainably scale-up pilot programs for Malaria Affected Communities.

**Latest KPI Data**

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Progress

3. Strengthening Engagement of Key and Vulnerable Populations during Grant-making and Implementation: Actions target 29 CCMs with lowest performance in area of CCM engagement. This takes into account all CCMs from High Impact and Core countries (but not COEs). Thus far, 43% improvement in aggregate among CCMs having reported progress to date.

4. CRG Strategic Initiative: Consultants engaged to support implementation of CRG SI. New suppliers selected for all 3 components of CRG SI and CRG SI work to start imminently. Simultaneously, CRG SI continues to support deployment of TA for eligible requests. Three-year expenditure forecast completed.

Latest KPI Data

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Key Challenges and Mitigating Actions
Progress

1. Training and Capacity Building:
   - In-country: On-line modules on CRG in multiple languages available on public IT portal. Online modules on CRG included in induction for several countries (e.g. Malawi, Sierra Leone). Feedback from consultants received.
   - Secretariat: Focus in Q3 has been development and integration of human rights, gender, community systems and key populations within Secretariat training program on sustainability and transition. Specific modules on importance of these areas for sustainability and in transition planning.
   - TRP: Roll-out of CRG modules within CCM orientation programs has commenced with number of in-country workshops finalized.


Key Challenges and Mitigating Actions

1. Due to lack of resources, countries prioritizing grant-making processes, and modules being optional for completion, CRG Department has been unable to conduct full pilot-testing of CRG modules in-country.
2. Uptake of online modules slow. Joint work plan to be developed in Q4 to promote uptake.

Latest KPI Data

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SO4: Mobilize Increased Resources
Progress

1. **Donor Contribution Agreements**: As of end 2016, 10 bilateral and 1 tripartite agreements signed, 8 bilateral agreements on track to be signed during Q1 2017, 11 more (10 multi-year contribution agreements and 1 annual agreement) on track to be signed by mid-2017. Further 6 agreements in negotiation with signature timing to be determined.

2. **Mobilization of Additional Resources**: Additional public and private sector pledges post-replenishment total $33.1M.

3. **Resource Mobilization Action Plan**: Year-to-date 35 out of 37 agreements from public donors expected to shift from tripartite to bilateral for current replenishment period. Of 37 agreements, 23 signed to date, 12 expected to be signed by end-2017 and 3 in negotiations to shift to bilateral agreements (including 1 signed tripartite agreement).

4. **Audit/Review/Report Completion**: Netherlands Scorecard (donor review undertaken every 2 years) results released and outcome very positive for GF.

### Latest KPI Data

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### Key Challenges and Mitigating Actions

1. Increasingly challenging political landscape in key donor countries requiring close monitoring of political transitions and building strong cross-party support for Global in key donor countries.
Progress

1. Debt to Health Agreements: From shortlist of prospected countries, Netherlands, Italy and Belgium sent negative response. Debt2Health proposal currently being reviewed at highest level for additional creditor country with go/no-go decision date currently estimated by year-end. Innovative financing team also working on potential application of Debt2Health scheme for external commercial sovereign debt that could apply for non-Government holders of such claims.


3. Innovative Financing: Operationalization of blended finance arrangements currently being explored for small number of cases within framework presented to AFC.

Key Challenges and Mitigating Actions

1. Governments prefer channelling debt swap proceeds to national development agencies or approved mechanisms. Debt relief is no longer a priority for most governments. GF viewed as slow, complex and difficult fit to banks’ deal generation cycle.

2. Health financing activities currently supported by BGMF grant ending 2018. Some funding for domestic financing advocacy activities secured through Strategic Initiative.

3. Operational challenges with embedding blended finance transactions within our current business model. Framework developed to guide operationalization/approvals process of blended finance transactions.
4) Mobilize increased resources

1. WAMBO:
   - Pilots: Board approved Pilot in May 2017. Since then, list of interested countries discussed internally in series of meetings in June (plus follow up during summer); direct engagement with interested governments happening now. Process and system requirements approved by Design Authority, such that negotiations with procurement service agents (PSA) on mechanism and related legal agreements can begin. Once list of countries and required products finalized, negotiations with relevant manufacturers for inclusion in Framework Agreement Annex.
   - Onboarding of GF-financed health products: All Pooled Procurement Mechanism health products present on wambo.org: LLINs; ARVs; anti-malarials; Rapid Diagnostics Tests for malaria, HIV and others; condoms and lubricants, leveraging partnership with UNFPA; viral load; “non-core” pharmaceuticals, incl. drugs against opportunistic infections of HIV and other essential medicines often procured via grants; other diagnostics and lab equipment and supplies. Catalogue continues to be refined in collaboration with Procurement Service Agents and in light of PR demand and of sourcing strategies as they evolve.

Latest KPI Data

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Key Challenges and Mitigating Actions
2. **Health Product Categories Covered under Framework Agreements:** Progress on-track for all categories, with exception of two: 1. Rapid Diagnostic Test tender to be launched in Q2 2018 due to reprioritization based on current resources. 2. Launch of Procurement Portal to be delayed until financial and human resources are made available.

3. **Product Category Strategies:** Updated product category strategies (1-pagers) to identify new products and efficiencies that maximize value of product procurement strategies nearly complete. This helped inform the October Strategic Review Meeting discussions.

### Latest KPI Data

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### Key Challenges and Mitigating Actions

1. Following delays on recruitment of diagnostic specialist in first half of 2017, Sourcing Department Work Plan reprioritized based on current resources. Plans to recruit technical expert consultant to bridge gap.
Private-public Partnerships: On-going work to establish private-public partnership mechanisms that could support health financing in Uganda and Liberia.

- Liberia: National dialogue on options to increase domestic financing for health now planned for Nov 2017 during joint health sector review meeting
- Uganda: One Dollar Initiative (ODI), private sector-led innovative financing mechanism, launched in Jun 2017 in presence of UNAIDS Executive Director and other national dignitaries. Secretariat continues dialogue and work with partners to support structuring and set up of ODI.

Product Scale-up Roadmaps: Incorporated products in scope of multi-agency coordinated procurement that GF convenes. Engagement with USAID/UNITAID/CHAI and others ongoing.

Latest KPI Data

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Key Challenges and Mitigating Actions

1. Liberia private public partnership work on hold given competing country priorities. May start in 2018. Continued close engagement between Political and Civil Society Advocacy Department, Country Teams and CCM.
Cross-Cutting
Progress

1. Ethics:
   - Ethics and Integrity Communications and Training: 72 people managers at Secretariat, approximately 90 LFA representatives, 65 CCM members, 40 representatives of PRs and SRs in Kenya and 28 Board, Committee and/or constituency members trained. Staff Code of Conduct (CoC) certification, including training to all staff, to be launched in November. Speak Up survey delayed until Q1 2018 to not overlap with CoC certification exercise.
   - CCM Code of Conduct: CCM Code of Conduct draft to be presented to Board in May 2018 for approval. Timeline extended to ensure alignment with CCM Evolution initiative.
   - Risk-based Integrity Due Diligence: Revised processes to be completed in several Secretariat-level categories by end Oct. On grant side, work ongoing in connection with CCM evolution and Code of Conduct consultations, but other grant-facing integrity due diligence work delayed to 2018.

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Global Fund 38th Board Meeting, 14-15 November 2017, Geneva, Switzerland

Progress

2. **Results Release**: Successful release in July of end-2016 programmatic results. Ongoing transition between old and new data management systems.


4. **Library of Board and Committee Policies**: Facility for Board decision points operational on public website. Preliminary categorization of Committee decision points completed for current and predecessor Committees to 2012; review of Committee decisions pre-dating SIIC, FOPC and AEC ongoing.

5. **Quarterly KPI Reporting**: End-2016 KPI reporting delivered to Spring Committees and Board, Mid-2017 hybrid KPI reporting on track to be delivered to Fall Committees and Board.

6. **Annual Corporate Work Plan**: Work Plan was shared with AFC at October meeting.

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Key Challenges and Mitigating Actions

2. Limited resources and need to address competing corporate priorities (e.g. grant making/signing, Health Campus, ED selection, other governance matters) has delayed implementation of Policy Library.