Strategy Implementation Update #3

For Board Information

The Global Fund

Executive Summary (1/2)

Context

- In early 2017, Strategy Implementation Plan (SIP) developed as internal tool to document and guide Secretariat's operationalization of GF Strategy 2017-2022. SIP details Secretariat implementation plans at input- and output-level (deliverables), and is closely linked to GF KPI Framework

- For Strategy Committee (SC) and Board, "Strategy Implementation Update," provides comprehensive tracking of all Strategic Objectives and more holistic snapshot of implementation than in past. Report provided twice per year.

- "Deep Dives" on critical topics further facilitate Board and SC oversight of strategy implementation

- For Secretariat, increasing utility of SIP to monitor performance, course correct and define appropriate budgets Consolidated reporting reduces reporting burden, integration of PAP and other reporting eliminates duplicative reporting

Questions addressed in this slide deck

- What implementation progress has been made on each Strategic Sub-objective and what are the related KPI results?

- What are key implementation challenges encountered and what actions have been taken to mitigate these?

Executive Summary (2/2)

Conclusions

- Significant progress on implementation during busy year of grant-making. Delays manifesting in several areas are multi-causal: overly ambitious planning, internal coordination issues, staffing constraints, and Board approval timelines, among others. Remediation actions underway and lessons incorporated into 2018 planning and implementation approach
- Major opportunity to better link SIP (which describes planned GF actions) with new KPI reporting framework (which describes GF performance). This is planned for Fall Board reporting.

Input received from Strategy Committee

- 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.
- SIP reporting is too granular for effective Board oversight. SC will use the new KPI/performance management reporting to evaluate progress and results, with SIP information included where most useful.

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

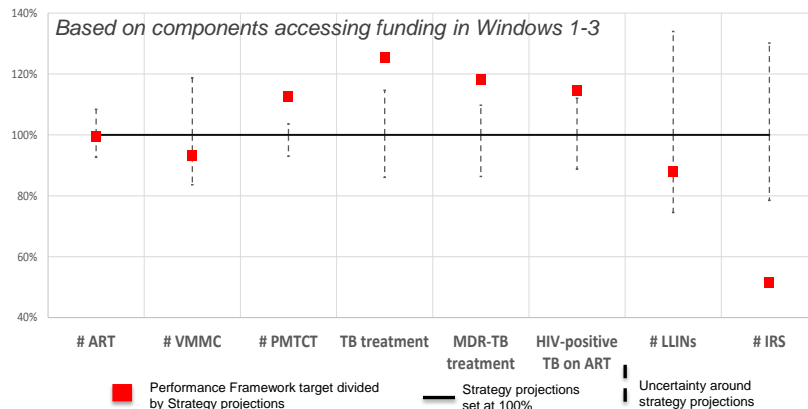| Strategic Objective	1) Maximize impact against HIV, TB and Malaria
Sub-objective	a) Scale-up evidence-based interventions with a focus on the highest burden countries with the lowest economic capacity and on key and vulnerable populations disproportionately affected by the 3 diseases.
Strategic KPI (s)	KPI 1: Performance against impact targets; KPI 2: Performance against service delivery targets; KPI 4: Investment efficiency; KPI 5: Service coverage for Key Populations; KPI 8: Gender and age equality; KPI 9b: Investment in KP programs

Progress

Status

1. **Impact through Partnership (ITP):** ITP-T design, including processes, finalized. Partner Support Platform (PSP) design endorsed by partners. PSP IT tool to streamline communication about unmet TA needs between Country Teams, TAP teams and partners finalized. Through Platform, Country Teams can submit requests for support not addressed at country level or using existing resources. Following internal triage, partners able to access requests and propose support directly to Country Teams. Based on partners' commitments and dialogue with in-country stakeholders, Country Team can confirm selection of partner's proposal and enter into action planning for response. In addition, tool can generate various reports for analysis and strategic planning.

2. **Allocative Efficiency Modelling:** Modelling application of 20 disease components in 15 countries, informing NSP updates, Funding Request development and transition planning. Coordinated with key partners (e.g. UNAIDS, Challenge TB and Gates Foundation) on country level modeling work plans to maximize synergies. Consulted with Country Teams and received expressed interest for modeling support between 2018 and 2019 in 20 high impact countries and over 10 transition countries to inform NSP updates and Funding Request development for next allocation cycle. Regional workshops on costing and impact modeling being planned.

Latest KPI Data

7 of 8 KPI 2 output indicators have aggregate grant target aligned to strategy projections; gap in remaining indicator driven by one High Impact Asia country

Based on components accessing funding in Windows 1-3

■ Performance Framework target divided by Strategy projections	▬ Strategy projections set at 100%	┆ Uncertainty around strategy projections

Key Challenges and Mitigating Actions

1. Varying levels of interest in using allocative efficiency models to improve program design in some high impact country programs. Also, data availability and quality may have prevented countries from being able to apply models to inform investment decisions. To mitigate: (1) continued awareness raising among countries about allocative efficiency models; (2) continued support on building countries' capacity in model application; and (3) strengthened collaboration with partners (e.g. WHO, UNAIDS, WB, PEPFAR, BMGF) to promote application of allocative efficiency models in high impact countries.

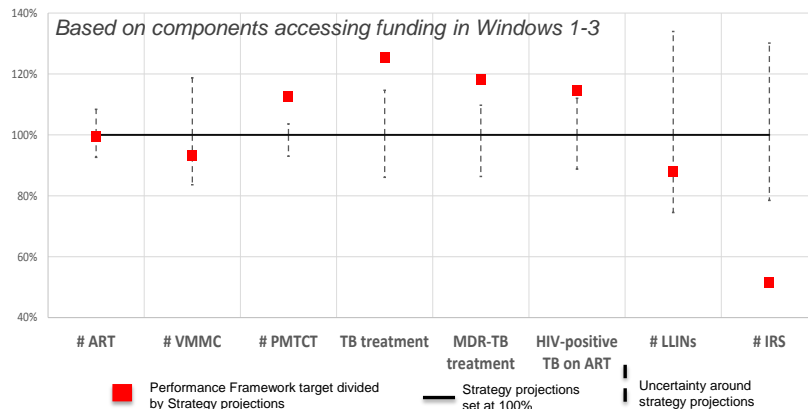| **Strategic Objective**	1) Maximize impact against HIV, TB and Malaria
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Progress   **Status** ⚪🟡⚪

3. **Projection of Program Impact:** Reliable projection of impact can be done during 2018 when majority of grants signed. Due to similar nature of work with KPI4, reporting is aligned with KPI4 timeline. Secretariat continues working with technical partners for institutionalizing impact and efficiency modeling within national programs to inform National Strategic Plan (NSP) and Funding Request development in form of in-country or regional workshops.

4. **Tracking Strategy Targets vs. Performance Framework (PF) Targets:** Based on data available as of 13 February 2018, by and large, good alignment between strategy targets and PF targets. Report on comparison between strategy and PF targets for KPI1 and KPI2 to be submitted to Fall Board Meeting once data on signed grants / PFs for majority of countries available.

Latest KPI Data

7 of 8 KPI 2 output indicators have aggregate grant target aligned to strategy projections; gap in remaining indicator driven by one High Impact Asia country

Based on components accessing funding in Windows 1-3

Legend:
- 🟥 Performance Framework target divided by Strategy projections
- ▬ Strategy projections set at 100%
- ┊ Uncertainty around strategy projections

X-axis categories: # ART, # VMMC, # PMTCT, TB treatment, MDR-TB treatment, HIV-positive TB on ART, # LLINs, # IRS

Key Challenges and Mitigating Actions

2. Due to challenges in modeling resource constrained scenario at country-level with sufficient ownership, as interim measure, desk modeling work to be done based on PF service coverage/outcome targets and/or PF targets in reduction in incidence and deaths. Viability of approach to be assessed in Q1 2018.

3. Not all indicators systematically included in PFs or, if included, have specified national targets. For missing targets, selected Country Teams which account for large share of targets to provide national targets from other sources such as NSP. Targets will be triangulated by recent trends, past performance and Country Teams projection.

| Strategic Objective	1) Maximize impact against HIV, TB and Malaria
Sub-objective	b) Evolve the allocation model and processes for greater impact, including innovative approaches differentiated to country needs
Strategic KPI (s)	KPI 3: Alignment of investment and need; Additional KPIs attached to SO1a

Progress

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1. **Allocation Model Lessons Learned:** Lessons learned from 2017-2019 to be reported to SC in March to guide development of allocation model for 2020-2022 cycle.
2. **Calibration of Models Assessing Potential Allocation Scenarios:** Ongoing work with technical partners to strengthen use of models for allocation and other portfolio-wide exercises. Request for Proposals launched to select GF modeling secretariat to ensure implementation of recommendations of GF Modeling Guidance Group, which will convene in Q1 2018. These are alternative solutions to having certain set of models endorsed by partners.
3. **Catalytic Funding Approach:** Catalytic Funding fully operationalized with operational policy, forms and guidance in place and used by applicants and partners to access funding under three modalities: Multi-country; Matching Funds; and Strategic Initiatives. See Funding Model Update for more details.

Latest KPI Data

Alignment of investment & need declined in most recent reporting period - there is **0.51** total absolute difference between country share of need & share of grant expenses. Largely driven by pattern of grant expenses related to transition between allocation periods   KPI 3
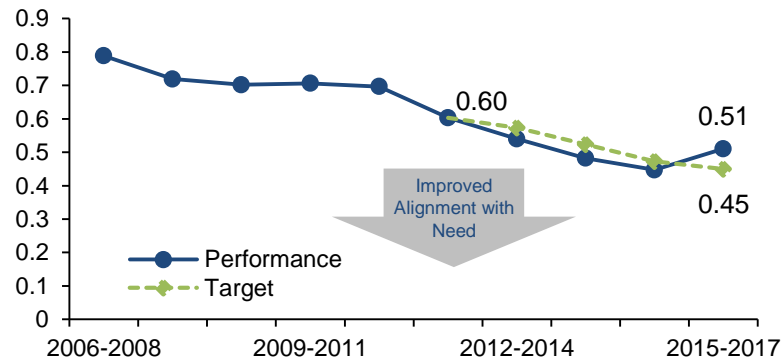
Key Challenges and Mitigating Actions

1. Unlikely any particular model will be endorsed by partners. Two alternative approaches to explore: 1) establishing GF Modeling Guidance Group consisting of representatives from technical partners to recommend models meeting minimum criteria for country and portfolio level needs; and 2) supporting technical partners to develop guidance for countries in which detailed comparative assessment of various models and their potential use described.

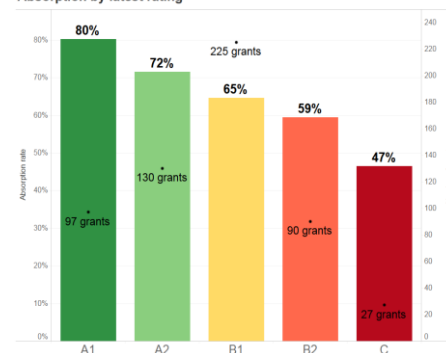| Strategic Objective	1) Maximize impact against HIV, TB and Malaria
Sub-objective	c) Support grant implementation success based on impact, effectiveness, risk analysis and value-for-money
Strategic KPI (s)	KPI 4: Investment efficiency; KPI 7: Fund utilization; Additional KPIs attached to SO1a

Progress

Status

1. **Project AIM (Accelerated Integration Management):** GF can now leverage streamlined cross-functional processes, aligned and standardized templates, enhanced review and approval processes, end-to-end capabilities, strengthened controls and more timely and robust portfolio data. Includes critical stages of grant lifecycle, including allocation, funding request, grant making, grant implementation monitoring, grant revisions, master data, annual performance reviews, and disbursements.
2. **Integrated Portfolio Review:** Design completed for country portfolio reviews and enterprise reviews. Pilots conducted. Provisional 2018 schedule for internal reviews agreed, with roll-out in March. IT platform for matching prioritized support needs with partner support launched in January 2018.
3. **Prioritized List of Solutions to Portfolio Challenges:** Roll out of solutions to address identified programmatic and technical gaps in implementation of GF grants in 2018. Includes new technologies and approaches and strategies for scale-up.
4. **Financial Risk Management:** Financial risk management guidelines approved by Executive Grant Management Committee and Regional Audit Initiative and Fiscal Agent process finalized. Agreement with World Vision, Catholic Relief Services and Population Services International to rely on their internal audit function for assurance. Anti-fraud guidelines at consultation stage.

Latest KPI Data

In 2014-2016, **66%** of grant budgets reported as spent. During period, Secretariat disbursed 75% of grant budgets. Of disbursed funds, 88% were spent in-country. Despite higher in-country expenditures in 2016, when compared to budget, 2016 absorption levels are lower than baseline.

Absorption by latest rating

Key Challenges and Mitigating Actions

1. Ongoing technical support services for Grant Operating System are not yet functioning at expected level. To address this, Joint management review, oversight and problem solving for dealing with backlog in support service provision.
2. Project AIM affected by rotation of scarce resources and continuous need for training and knowledge transfer. Mainstreaming of project team knowledge and methodology in Grant Management Division (GMD) in progress.

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Strategic Objective	1) Maximize impact against HIV, TB and Malaria
Sub-objective	c) Support grant implementation success based on impact, effectiveness, risk analysis and value-for-money
Strategic KPI (s)	KPI 4: Investment efficiency; KPI 7: Fund utilization; Additional KPIs attached to SO1a

Latest KPI Data

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KPI 7b

Absorption by latest rating

Progress

Status 🟢 ⚪ ⚪

5. **Risk and Assurance Planning:** Assurance Planning increasingly leveraging expansion of assurance options for Supply Chain and Data Quality risks and being rolled out, despite delay due to competing priorities and tight timelines in this funding renewal year. Risk and Assurance Handbook developed in December 2017 to improve operationalization and consistency of assurance activities across four thematic risk areas. Operation Risk Committee, focusing on HI countries, has also prioritized review of COEs and their requests for flexibilities. In first 3 windows, independent risk views provided for over 70% of High Impact and Core portfolios.

6. **Integrated Risk Management (IRM) Module:** IRM was to be developed under Project AIM and launched as part of Release 4 by end March 2017. Following initial delays, process to fast track module design and roll out implemented, and module deployed in February to six selected Country Teams through phased approach. In mid-March, IRM module will be open for use by all Country Teams.

7. **Insurance Policy:** Phase I of Insurance Coverage Framework near complete: insurance database implemented; Insurance Guidelines developed and pending final internal approvals; support function created and assisting implementers and Country Teams; and Framework aligned with grant-making process and SC Implementation Plan. Phase II underway: algorithm developed; market study launched; and independent warehouse inspector sourced to assist with supply chain diagnostics.
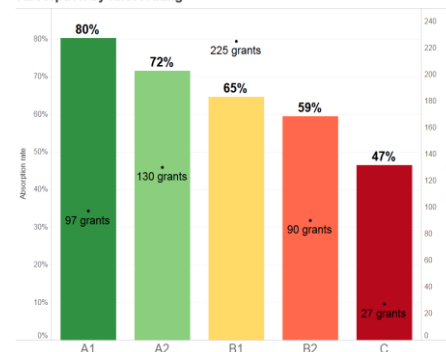
Key Challenges and Mitigating Actions

3. Delays and changing scope of AIM affected planned release date of IRT. New solutions provider selected for development of IRT and contracted independently from other provider under AIM.

4. On Insurance Policy, continued alignment with Supply Chain Department on top 23 countries to address and visit, and ensuring warehouse inspections and review of insurance policies form part of each country's ToR. Warehouse inspection(s) and review of in-force policies now part of diagnostic ToRs.

Strategic Objective	1) Maximize impact against HIV, TB and Malaria
Sub-objective	c) Support grant implementation success based on impact, effectiveness, risk analysis and value-for-money
Strategic KPI (s)	KPI 3: Alignment of investment and need; KPI 4: Investment efficiency; KPI 7: Fund utilization; Additional KPIs attached to SO1a

Progress

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8. **Grant-making:** As of 23 January, of 158 components for 2017-2019: 108 (68%) components approved by Board in 2017 and signed in 2017 and first 3 weeks of January 2018. Thirteen (8%) components approved by Board in 2017 and are in countries for signing (25 grants). Secretariat currently focused on signing grants reviewed by TRP in Windows 1 and 2, and with grant end dates in 2017, to ensure continuity of funding.

9. **Differentiated Applications:** Differentiated application approach successfully implemented integrating lessons learned from past cycle and throughout 2017. Success of this activity evidenced by exceptionally high number of application already processed in first year of 3-year cycle, representing $8.7 billion and 84% of allocation funding.

10. **Unfunded Quality Demand (UQD):** SC approved prioritization framework in June 2017. UQD register updated quarterly. Secretariat operationalizing prioritization framework. First award expected by end 2018 based on AFC approved available resources.

Latest KPI Data

- For new allocation, takes on average **7.3 months** from funding request submission to Board approval
- Of the **$8.7 billion** in Board-approved grants in new allocation cycle, total of **$2.5 billion** already committed as grant expenses as of mid-Feb 2018, and **$380 million** already disbursed

Key Challenges and Mitigating Actions

5. AFC approved resources are up to US$50 million so far, against $2.7 billion in Registered UQD. Operationalization will entail rigorous and strict prioritization, requiring robust data and validation from Country Teams. Will conduct full analysis, develop tool to filter UQD to manageable number for decision making, and operationalize prioritization process for portfolio optimization.

Strategic Objective	1) Maximize impact against HIV, TB and Malaria
Sub-objective	d) Improve effectiveness in challenging operating environments through innovation, increased flexibility and partnerships
Strategic KPI (s)	KPI 2: Performance against service delivery targets; KPI 7: Fund utilization; Additional KPIs attached to SO1a

Progress | Status ● ○ ○

1. **Challenging Operating Environment (COE) knowledge management:** COE efforts to strengthen knowledge management ongoing through enhancement of COE SharePoint site and regular sessions to share best practices and lessons learned on COE Policy implementation. Review of 2017 policy implementation conducted, including lessons learned on portfolio analysis and operational strategy, partnership engagement and response to emergencies.
2. **Portfolio Analysis of COE Countries:** Fully established COE portfolio review process in place and revised after first mid-year COE policy implementation review. 14 of 17 non-high impact COE Country Teams reviewed in depth. Tool created to track types of flexibilities that Country Teams are requesting, their rationale, associated risks with these flexibilities and mitigation measures. Process will be aligned with Portfolio Review developed as part of ITP-T.
3. **COE Crisis Room:** COE Support Team and Working Group have worked through ad-hoc meetings to discuss solutions to acute emergencies in 2017, including: South Sudanese refugee crisis, Middle East Response and food security situation in Africa. Protocol for a crisis room being developed in 2018 to align GF response with existing internal disease related situation rooms and partners' emergency rooms.

Latest KPI Data

• Disaggregated KPI results for COEs will be available in future reporting periods

Key Challenges and Mitigating Actions

1. Challenge is to ensure Portfolio Analysis process is adaptive and integrated into existing mechanisms. COE Support Team working closer with ITP-T team and Risk Department to streamline processes and discussions.
2. Key challenges to COE crisis room include adapting GF processes to emergencies requirements to fast-track decisions and responses. To mitigate this challenge, discussions with partners ongoing to establish protocol for GF crisis room.

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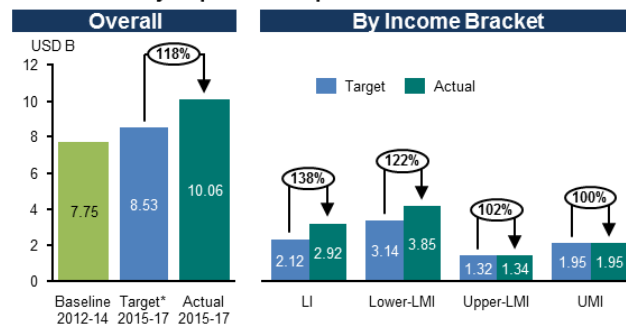| Strategic Objective	1) Maximize impact against HIV, TB and Malaria
Sub-objective	e) Support sustainable responses for epidemic control and successful transitions
Strategic KPI (s)	KPI 9c: Key populations and human rights in transition countries; KPI 11: Domestic investments

Progress

Status 🟢 ⚪ ⚪

1. **Transition Planning & Analysis:** Continued focus on this, particularly in AELAC, including (but not limited to) Transition Readiness Assessment (TRA) implementation, development of transition work-plans / sustainability plans, country specific transition planning, and systematic review of transition preparedness during grant review and approval.
2. **TRA Implementation:** Completion of ~25 total transition readiness assessments (not including EHRN Harm Reduction TRAs) covering ~40 disease components, primarily in (but not limited to) EECA and LAC, with more planned in 2018-2019. New Malaria-specific TRA tool developed, piloted in Sri-Lanka, and will be completed before end Q1 2018 for use across portfolio.
3. **Transition Work-Plans and Sustainability Plans:** To support planning, ~11 countries in EECA/LAC developed transition work-plans/sustainability plans, and ~12 additional EECA/LAC countries finalizing/developing them in 2018.
4. **Country Specific Transition Planning:** Wide variety of country- and context-specific transition planning (some of which financed by Sustainability, Transition and Efficiency Strategic Initiative) being undertaken or planned in transition preparedness portfolios, including (but not limited to) development of social contracting mechanisms, implementation of efficiency analyses, updating of national strategic plans to incorporate STC considerations, negotiated uptake of key interventions, etc.

Latest KPI Data

For 2014-2016 allocation period, actual domestic investment[1] was **118%** of minimum policy prescribed co-financing, exceeding minimum requirements across all income brackets. Further, **94%** of eligible countries assessed to-date have met/exceeded policy prescribed co-financing requirements.

KPI 11

Results vs. Policy Stipulated Requirements

1. All figures are based on partial cohort assessed to-date

Key Challenges and Mitigating Actions

1. Indefinite Quantity Contract for STE Strategic Initiative now completed, which should speed up procurement processes for many STE financed activities in early 2018. Focus on accelerated roll-out of STE Strategic Initiative activities included in STC work-plan in 2018.

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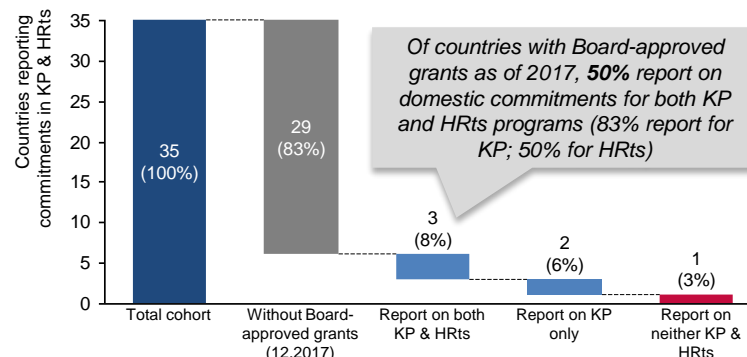| Strategic Objective	1) Maximize impact against HIV, TB and Malaria
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Strategic KPI (s)	KPI 9c: Key populations and human rights in transition countries; KPI 11: Domestic investments

Progress

Status 🟢 ⚪ ⚪

5. **Sustainability, Transition and Co-financing Training:** Sustainability and Transition Course is significant effort to strengthen capacity of Secretariat staff to manage transitions and embed sustainability considerations into national programs and GF grants. Based in part on the World Bank's flagship course for health financing and health systems (but modified for Secretariat), course was rolled out to approximately 70 Country Team members in 2017, including ~80% of FPMs working with "Transition Preparedness" countries. Next training in May 2018.

6. **CCMs and STC:** 2017 cohort is list of 10 priority countries for transition. For this cohort, all funded CCMs (9 of 10) have funded activities to support transition. All 10 CCMs have nominated either CCM Member or CCM Executive Secretariat to lead transitioning activities. For 2018, cohort will grow with second priority group (~20 more countries).

7. **National Health Accounts:** Framework Agreement with WHO for technical support on institutionalization of health and disease accounts in GF recipient countries signed February 2018. Inception Report identifying priority countries to receive technical support during 2018-2020 to be provided by end March 2018. Coordination with other donors to ensure sufficient funds available for TA and in country data collection activities. Sixty-five percent of HI and Core countries have financial support from GF (28% from GF) or other sources (USG, GAVI, and BMGF).

Latest KPI Data

All but one of six UMICs assessed report on domestic investments in KP programs, while only three (**50%**) report on investments in human rights; lower performance likely driven by lack of policy levers to stimulate domestic investment (and reporting investments) in human rights `KPI 9c`

*Of countries with Board-approved grants as of 2017, **50%** report on domestic commitments for both KP and HRts programs (83% report for KP; 50% for HRts)*

Chart values — Countries reporting commitments in KP & HRts:
- Total cohort: 35 (100%)
- Without Board-approved grants (12.2017): 29 (83%)
- Report on both KP & HRts: 3 (8%)
- Report on KP only: 2 (6%)
- Report on neither KP & HRts: 1 (3%)

Key Challenges and Mitigating Actions

2. Delay in agreement of technical proposal on National Health Accounts, particularly in relation to deliverables/outputs and country selection. Delay in final routing and clearance of amendment to Framework Agreement. Inception report to be submitted detailing country selection ensuring further alignment with GF Priority list. Meeting of funding partners scheduled for end March 2018 to discuss pooling of resources to increase efficiency.

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| Strategic Objective	1) Maximize impact against HIV, TB and Malaria
Sub-objective	e) Support sustainable responses for epidemic control and successful transitions
Strategic KPI (s)	KPI 9c: Key populations and human rights in transition countries; KPI 11: Domestic investments

Progress

Status 🟢 ⚪ ⚪

8. **Co-financing:** Of 162 disease components from 67 countries that had co-financing requirements and accessed funding in 2017, 94% demonstrated sufficient domestic financing commitments to be eligible for full co-financing incentive. Four countries that accessed funding are still to finalize their co-financing commitments. Grant agreements of these countries have incorporated specific requirements for formalization of commitments during grant implementation.

9. **Health Financing Strategies (HFS):** Methodology to define priority countries finalized and approved. 41 out of 50 priority countries (83%) that went to GAC in 2017 were mapped as: a) having a HFS (16 countries, 39%); b) being in process of developing HFS (18 countries, 44%); or c) not having current plans to develop HFS (7 countries, 17%). Mapping also included understanding if support came from GF and/or partners. Catalytic funds approved. Contract with WHO completed, Sustainability, Transition and Efficiency Indefinite Quantity Contract finalized so process in place to contract pre-qualified suppliers.

Latest KPI Data

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KPI 11

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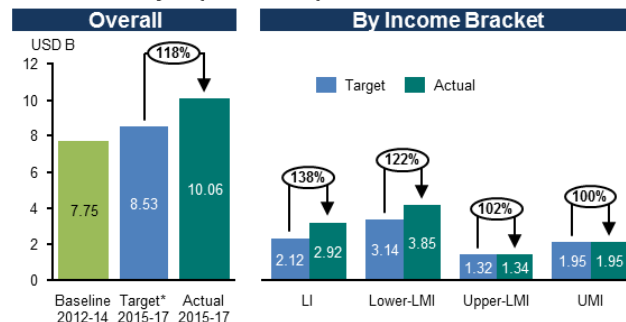
Key Challenges and Mitigating Actions

3. On Health Financing Strategies, timely release of funds and in country engagement and ownership is critical. Strategic Information team has started to engage partners formally and strategically on joint collaboration and Country Teams to coordinate collaboration.

SO2: Build Resilient and Sustainable Systems for Health

Strategic Objective	2) Build resilient and sustainable systems for health
Sub-objective	a) Strengthen community responses and systems
Strategic KPI (s)	

Progress

Status 🟢 ⚪ ⚪

1. **Technical Assistance (TA):** TA requests to end Q4 2017 have had strong focus on Funding Request development and grant-making. Number of completed and planned TA requests related to HIV (7); HIV/TB (11); TB (2); Malaria (2) and all (5) To date, 12 countries benefited from TA to strengthen strategic community responses in grants from Communities, Rights and Gender (CRG) TA program, and TA to another 9 countries being planned.
2. **Community-based Monitoring Research (CBM):** Operations research/TA with CBM implementers in Cote d'Ivoire, DRC, Ghana, Indonesia, Sierra Leone successfully implemented/delivered in Q4 2017 in order to document, evaluate and scale-up CBM programming in order to improve quality and efficiency of GF programs.
3. **Funding Mechanisms for Community-based Organizations (CBOs):** Co-leadership with GMD will be important to successful delivery. Given 2017 GMD focus on grant-making, delivery will be delayed until Q1 2018.

Latest KPI Data

- Outcome of operations research will inform future metrics with which to monitor community systems

Key Challenges and Mitigating Actions

1. Limited funding in grants requires further advocacy to demonstrate how CBM and feedback increases local accountability and improves responsiveness of disease specific services and overall health systems. Ongoing internal engagement to build consensus on value-add of community based monitoring and feedback mechanisms.
2. Long delay and staff changes require "re-boot" in relation to engaging in and scheduling work on funding mechanisms for CBOs. Re-engagement with GMD ongoing in order to facilitate progress

Strategic Objective	2) Build resilient and sustainable systems for health
Sub-objective	b) Support reproductive women's, children's and adolescent health and platforms for integrated service delivery
Strategic KPI (s)	KPI 8: Gender and age equality

Latest KPI Data

• First reporting on KPI 8 scheduled for Q2 2019

Progress   Status

1. **Program Quality Improvement of the Three Diseases Integrated into Ante-natal and Post-natal care (ANC/PNC)**: Liverpool School of Tropical Medicine (LSTM) commissioned to lead 3-year studies on program quality improvement of integrated ANC and PNC in at least 6 countries. MoU and service contracts with PRs and local implementing partners finalized in Togo, Ghana, Afghanistan and Niger. Tools adapted, and training cascade, demonstration workshops and baseline assessments completed in Togo, Ghana and Afghanistan. Inception visits undertaken to prepare for baseline assessment phase in Chad and Pakistan.

Key Challenges and Mitigating Actions

1. Potential for delay in implementation phase at country-level due to discontinuity of funding across different grant cycles. Discussions on continuity of funding for implementation phase carried out with Regional Managers, Fund Portfolio Managers and respective Principal Recipients (PRs). Discussions also ongoing with bilateral partners, funding agencies and other donors for co-funding of project in certain countries.

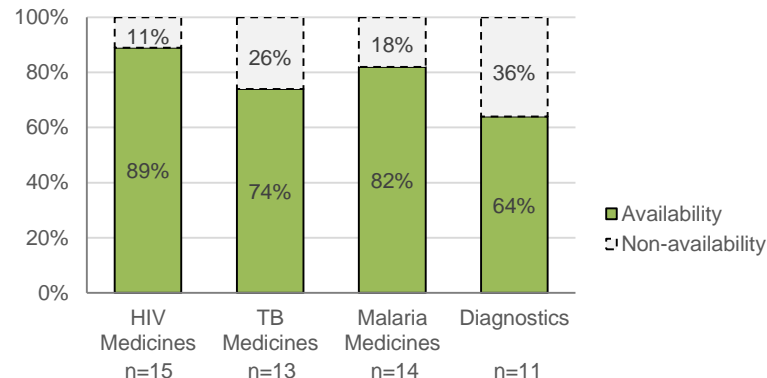| Strategic Objective	2) Build resilient and sustainable systems for health
Sub-objective	c) Strengthen global and in-country procurement and supply chain systems
Strategic KPI (s)	KPI 6: Strengthen systems for health (a. procurement, b. supply chains)

Progress

Status ⚪🟡⚪

1. **Supply Chain (SC) Diagnostics and Transformations:** Data, operations and diagnostics/transformation team largely established. Diagnostics completed in 3 countries (Cameroon, Burkina Faso & Liberia) by end 2017 and development of transformation plans underway. Vendor chosen to conduct diagnostics in another 5 countries (DRC, India, Chad, Ivory Coast and Mali). Diagnostics typically followed by SC transformations. These look to transform SC end-to-end and consider a high level of partner collaboration, so started in 2018. Target is to have started diagnostic activities with a vendor in 20 countries by end 2018.
2. **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. Further work needed to finalize plan. Plan shared with Secretariat for comments and should guide further support provided by catalytic funding. Agreement on use of Strategic Initiative funds to support Expert Review Panel process for both diagnostics and Pharmaceutical signed. Another proposal on strengthening QA for countries transitioning their procurement out of GF grants was presented to WHO by Secretariat in early March.

Latest KPI Data

- On day of visit, **64%** of health facilities have diagnostic services with tracer items and **89%**, **74%**, and **82%** of health facilities have HIV, TB, Malaria tracer medicines KPI 6b

Baseline data for medicine and diagnostic availability

	HIV Medicines n=15	TB Medicines n=13	Malaria Medicines n=14	Diagnostics n=11
Non-availability	11%	26%	18%	36%
Availability	89%	74%	82%	64%

Key Challenges and Mitigating Actions

1. Varying political will of countries to undertake SC diagnostics and insufficient funding for transformation projects. Inclusion of key stakeholders and partners during development of TORs to encourage ownership and responsibility for successful implementation of SC diagnostics.

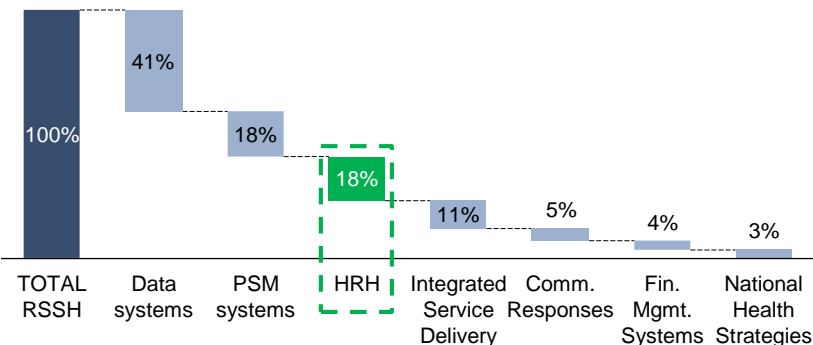| Strategic Objective	2) Build resilient and sustainable systems for health
Sub-objective	d) Leverage critical investments in human resources for health (HRH)
Strategic KPI (s)	

Progress

Status 🟢 ⚪ ⚪

1. **Matching Funding Requests for Human Resources for Health (HRH):** Four countries successfully applied for HRH and integrated service delivery matching funding to date (Afghanistan, Guinea, Sierra Leone and Zambia, totaling 10.5 million out of 18 million total). Requests focused on integrated training and service delivery, support for community health workers, improved management of HRH, and integrated screening for TB, HIV and cervical cancer. Ethiopia applied in window 3, but TRP requested iteration, so will likely reapply in Window 6 (tbc). Benin and Liberia are being supported to apply for Window 5 and Window 6 (tbc) respectively.

Latest KPI Data

- Of budget going to RSSH modules within new allocation*, **18%** is for HRH

100%	41%	18%	18%	11%	5%	4%	3%
TOTAL RSSH	Data systems	PSM systems	HRH	Integrated Service Delivery	Comm. Responses	Fin. Mgmt. Systems	National Health Strategies

For Board approved grants, data as of mid Feb 2018

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 right technical support will be available during implementation to help countries deliver as planned. TAP/RSSH team will continue to work with Country Teams and CCMs to ensure that remaining countries understand how matching funding works, and put in place inclusive process to develop their requests which meet matching funding criteria.

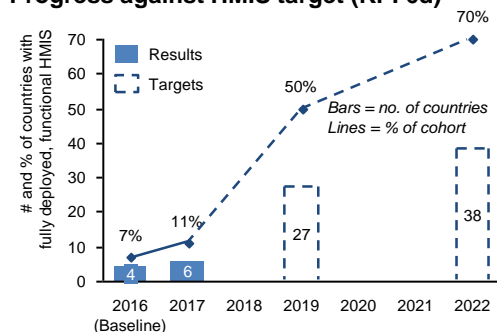| Strategic Objective	2) Build resilient and sustainable systems for health
Sub-objective	e) Strengthen data systems for health and countries' capacities for analysis and use
Strategic KPI (s)	KPI 6: Strengthen systems for health (d. HMIS coverage, e. results disaggregation)

Progress

Status 🟢 ⚪ ⚪

1. **Programmatic Assurance:** 10 national Health Facility Assessments /Data Quality Reviews (HFA/DQR) completed. 14 national HFA/DQRs commenced in 2017, of which five expected to finish in Q1 2018, and 9 are expected to finish in Q2-Q4 2018. Support for national HFA/DQRs routinized, with external quality assurance, as critical component of monitoring and improving program and data quality, as well as providing programmatic risk assurance. Therefore, new national HFA/DQRs expected to commence each year moving forward.
2. **Data Use for Action and Improvement Framework:** Framework (2018-2022) finalized and shared internally. Framework will be used to support work on Adolescent Girls and Young Women (AGYW) and Data and will be presented to TERG in February 2018.
3. **Standardized Terms of Reference (including options for customization):** 12 TORs for evaluations (3 program review & epi analysis-related, and 9 on specific thematic areas) peer-reviews and finalized.
4. **Differentiated Measurement Framework:** M&E framework for gender/AGYW, and human rights evaluation developed. M&E framework/data for action on TB key, vulnerable and underserved populations developed and being implemented in 6 countries. Agreement with UNICEF for developing M&E framework on community service delivery finalized. Framework for COE due to be completed Q1 2018.

Latest KPI Data

- **11%** of countries have fully deployed, functional HMIS; 43% have two or three (out of four) components required to meet definition KPI 6d

- **26%** of the High Impact/Core countries are providing results fully disaggregated by age and gender for relevant indicators KPI 6e

Progress against HMIS target (KPI 6d)

Key Challenges and Mitigating Actions

1. Interdependencies of timely implementation of grant funded HFA/DQR by PRs/local implementers in-country and need for sufficient TA planned for and procured by PR/local implementers and funded in grant/by other donors. Creation of pool of experts in M&E TA through Data Systems Strategic Funding to help increase availability and expertise of M&E TA consultants (including for national HFA/DQR).

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| Strategic Objective	2) Build resilient and sustainable systems for health
Sub-objective	f) 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)

Progress

Status 🟢 ⚪ ⚪

1. **Strategic Initiative RSSH 1.1&1.3:** Strategic Initiative 1.3 includes funds for technical partners to support peer exchange and south-to-south learning on integrated planning for three diseases. Contract with WHO signed and work is about to start. Strategic Initiative 1.1 includes funding for joint planning and governance. Request for Proposals finalized and work to start in 5 countries.

Latest KPI Data

- **96%** of funding requests in this cycle rated by TRP to be aligned with National Strategic Plans KPI 6f

TRP Response to "*The funding request aligns with national priorities as expressed in the National Strategic Plan (or an investment case for HIV)*"

2014-2016 Baseline (n=249)*
2017 (n=83)

Strongly Agree: 52%, 59%
Agree: 46%, 37%
Disagree: 2%, 4%
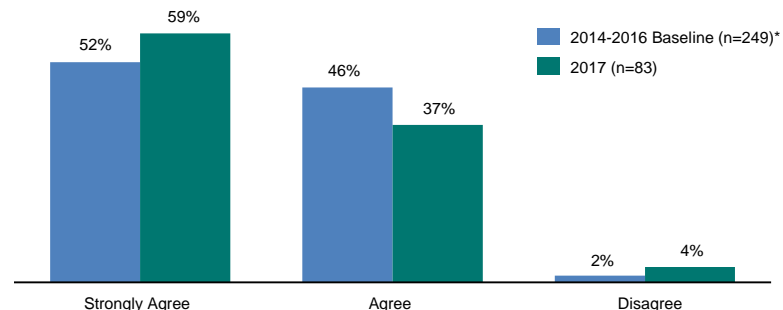
*For Baseline, question & answers were slightly different from current question & answers. 2014-2016 question: "The funding request aligns with national priorities as expressed in the National Strategic Plan (or an investment case for HIV)" with responses "Very Good", "Good", "Poor", "Very Poor". For comparison purposes, "Very Good" has been mapped to "Strongly Agree" in current survey; "Good" to "Agree"; "Poor" to "Disagree", etc. Excludes "N/A" responses. Difference between size of cohorts due to fact all funding requests (concept notes) were assessed in last cycle, and in current cycle, only tailored and full funding requests are being assessed.

Key Challenges and Mitigating Actions

1. Potentially, in-country support for National Strategic Plan development will need to be balanced against country perceptions that GF will overly influence outcomes of process.

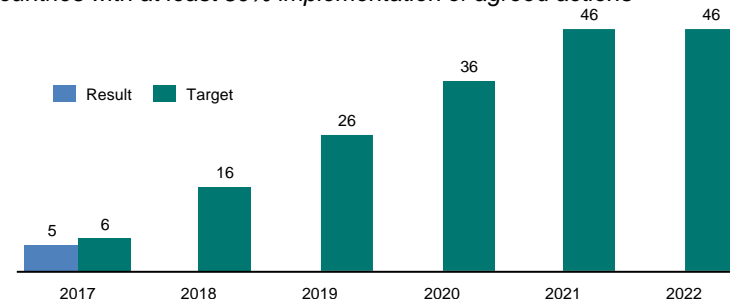| Strategic Objective	2) Build resilient and sustainable systems for health
Sub-objective	g) Strengthen financial management and oversight
Strategic KPI (s)	KPI 6: Strengthen systems for health (c. financial management)

Progress

Status 🟢 🟡 🔴

1. **Use of Country or Donor Harmonized Systems:** Action plan formulation in progress in Sudan & Liberia. Action plans in place and being implemented in:
   - **India:** GF costing dimensions integrated into Ministry of Health's (MOH) Integrated Financial Management Information System (IFMIS) in 16 states.
   - **Sierra Leone**: Shared service/donor-harmonized unit established in MOH for financially managing donor investments including from GF. Capacity strengthening underway at National AIDS Secretariat with country system use component involving embedding GF's costing dimension into information system and leveraging use of government's chart of accounts for accounting and reporting.
   - **Senegal:** Department of Administration and Equipment (DAGE) of MOH manages participating development partner funds' via shared service unit with common administrative and financial management procedures manual. Goal is to scale up from HSS to TB & malaria grants using this unit for financial management.
2. **Routine Financial Management Capacity Building:** Engagement in 21 countries (including 15 under Francophone tailored approach: pre-packaged accounting software installed & operational). "Financial Management Impact Review Tool" developed to establish baseline for all high impact and core countries along 6 key outcome areas. Financial Management Handbook for Grant Implementers published and service providers pre-qualified to support implementers in strengthening systems

Latest KPI Data

- As of end of 2017, **5 countries** implemented actions to meet defined financial management systems standards for optimal absorption & portfolio management. However, as of most recent data in Feb 2018, **6 countries** have now met defined standards   KPI 6c

Overall Progress Against Target
Countries with at least 80% implementation of agreed actions

Result ▉ Target ▉

2017	2018	2019	2020	2021	2022
5 / 6	16	26	36	46	46

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 Financial Management Systems strengthening.
3. Ownership and support from in-country actors. Addressed through leveraging of existing grant Country Team-in-country partner engagement mechanisms.

Strategic Objective	2) Build resilient and sustainable systems for health
Sub-objective	Cross-cutting
Strategic KPI (s)	KPI 6: Strengthen systems for health

Progress

Status

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1. **RSSH Dashboard:** Based on discussions with Country Teams, regional managers and collaborative work with partners, 86 RSSH country profiles created and disseminated. Team also worked with IT to move dashboard to more sustainable IT system, and enable more automated data flow from partners (for example from health facility assessments). Dashboard integrated into Impact Through Partnership initiative in order to facilitate use of data for action.

Latest KPI Data

- On day of visit, **64%** of health facilities have diagnostic services with tracer items and **89%**, **74%**, and **82%** of health facilities have HIV, TB, Malaria tracer medicines KPI 6b

- **5** countries (6, as of Feb 2018) implemented actions to meet defined financial management systems standards for optimal absorption & portfolio management KPI 6c

- **11%** of countries have fully deployed, functional HMIS; 43% have two or three (out of four) components required to meet definition KPI 6d

- **26%** of the High Impact/Core countries are providing results fully disaggregated by age and gender for relevant indicators KPI 6e

- **96%** of funding requests in this cycle rated by TRP to be aligned with National Strategic Plans KPI 6f

Key Challenges and Mitigating Actions

1. Final version of dashboard, and its integration into IT platforms depends on M&E and Health Products Management team capacity to provide data. To avoid delays, certain actions proposed e.g. automation of health facility assessments and data quality reviews. To avoid IT delays, created phased development plan identifying specific activities to be carried out in parallel to other data collection efforts. e.g. alliances will be formed with other institutions on automation of data collection.

SO3: Promote and Protect Human Rights and Gender Equality

Strategic Objective	3) Promote and protect human rights and gender equality
Sub-objective	a) Scale-up programs to support women and girls, including programs to advance sexual and reproductive health and rights
Strategic KPI (s)	KPI 8: Gender and age equality

Latest KPI Data

- First reporting on KPI 8 scheduled for Q2 2019

Progress

Status

1. **13 Priority Countries Adolescent Girls and Young Women (AGYW) Scale-up:** Contract with AGYW support component signed with WHO and negotiated with UNICEF. Ongoing coordination with UN partners. CRG Strategic Initiative (CRG SI) launched HER Voice, a meaningful engagement fund for organizations led by and for women and girls in 3 focus countries, being managed by Southern African AIDS Trust and EANNASO. Secretariat has recruited 2 AGYW Advisors in GMD, supported by BMGF, and a full-time gender M&E advisor.
2. **Resource Mobilization for AGYW Programs:** Outreach started. HER campaign launched, first during private event at UNGA in September 2017 and then during Global Goals event in Davos. First agreements in process of being signed with private sector partners. Outreach and mobilization of financial and in-kind contributions will continue.
3. **Adapted Modelling Tool:** Work underway to address limitations of model used to set strategy target as well as development and validation of an alternative model Technical partners will guide Secretariat in selection of final model and approach.

Key Challenges and Mitigating Actions

1. 6 of 13 priority AGYW countries applied in first funding window, therefore limited time/capacity to mobilize TA to civil society in those countries given short time between CRG SI approval and start of GF Strategy. AGYW learning group established with key stakeholders to coordinate on bottlenecks and TA needed in country. Comprehensive TA plan for civil society developed as part of CRG SI.
2. Limited quality data available for robust assessment of incidence in this age group in short/medium term. Given absence of impact target in PF and NSP in most of 13 selected countries for reduction of HIV incidence in young women and girls, working with technical partners where possible to update NSP and country investment cases. Organizing dedicated workshop for 13 selected countries for KPI8 to set impact targets and measurement plan.

Strategic Objective	3) Promote and protect human rights and gender equality
Sub-objective	b) Invest to reduce health inequities including gender- and age-related disparities
Strategic KPI (s)	KPI 8: Gender and age equality

Latest KPI Data

• First reporting on KPI 8 scheduled for Q2 2019

Progress   Status

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 complete global review of surveys to identify trends and programmatic responses by Q1 2018.
2. **Gender Accountability Framework:** Draft accountability framework under development.
3. **Gender at Secretariat:** New Human Resources induction to go live from March 2018, with section on SO3-Gender Equity and Human Rights, covering importance of scaling-up programs that remove human rights and gender equity barriers, and in particular, programs targeted to AGYW. Process to gain certification from Equal Salary Foundation underway. Gender component within Culture and Values initiative to be determined. Review of HR policies and approach planned, as part of Office of the Executive Director-led initiative on sexual harassment.
4. **Annual Report on GF Commitments to Gender and Gender Equality:** Comprehensive M&E plan developed for SO3a (AGYW in 13 countries). Gender priorities in TB and malaria under discussion.

Key Challenges and Mitigating Actions

1. Competing priorities delayed work to develop gender accountability framework. Staff time dedicated to develop and manage the process.
2. Low demand from countries for TB and gender assessments. Once CRG SI Regional Platforms are re-contracted (in process), strategy will be developed for demand creation. Session with Stop TB for Secretariat staff on TB and gender assessment to be conducted.
3. Data availability for annual report on GF commitments an issue. More active support to be provided to Public Health and Monitoring and Evaluation staff on M&E plan for AGYW, including additional TA resources for countries on data bottlenecks.

Strategic Objective	3) Promote and protect human rights and gender equality
Sub-objective	c) Introduce and scale-up programs that remove human rights barriers to accessing HIV, TB and malaria services
Strategic KPI (s)	KPI 9: Human rights

Latest KPI Data

- Significant progress made with Human Rights baseline assessments despite slight delays **KPI 9a**
- For new allocation, **19%** of HIV grant budget in MICs is invested in activities targeting Key Populations and **2%** is invested in removing Human Rights barriers (based on partial cohort reporting) **KPI 9b**
- All but one of six UMICs assessed report on domestic investments in KP programs, while only three (**50%**) report on investments in human rights; lower performance likely driven by lack of policy levers to stimulate domestic investment (and reporting investments) in human rights **KPI 9c**

Progress   Status ⬤🟡⬤

1. **Baseline Studies in 20 Human Rights Priority Countries:** 18 of 20 baseline assessments underway, with many nearing completion. Two assessments scheduled for coming months. Due to capacity and resource constraints in 2018, development of 5-year action plans and related multi-stakeholder meetings is delayed.
2. **Human Rights and Sustainability:** Work started in Q3. In Q3 & Q4 of 2017 and Q1 2018, sustainability and transition training delivered to Country Teams, including identifying challenges and opportunities for sustaining programs to reduce HR-related barriers to services specific to countries nearing transition. This work will be integrated with core grant activities in 20 target countries, where possible.
3. **Increased Investment in Programs to Reduce Human Rights Barriers to Services:** Tools and guidance created and disseminated (technical briefs and country profiles), and efforts to increase collaboration with technical partners starting to show results. Delivered two successful learning events for Country Teams working in 20 target countries. However, capacity at Secretariat remains low, hindering efforts to deliver on new programmatic approach to human rights.

Key Challenges and Mitigating Actions

1. Development of 5-year plans for scale-up of programs could not start due to resource constraints in 2018, limited capacity of Country Teams and countries delaying submission of matching fund requests. Working to secure funds for this work while also identifying ways to increase capacity of Human Rights team (e.g., through secondment to GMD or CRG) and Country Teams of where baseline assessments have been undertaken.
2. Insufficient time to work on sustainability and transition. Collaboration with STC team to continue and for efficiency, work on sustainability will be integrated into work in 20 human rights priority countries.
3. 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.

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

Latest KPI Data

- Significant progress made with Human Rights baseline assessments despite slight delays **KPI 9a**
- For new allocation, **19%** of HIV grant budget in MICs is invested in activities targeting Key Populations and **2%** is invested in removing Human Rights barriers (based on partial cohort reporting) **KPI 9b**
- All but one of six UMICs assessed report on domestic investments in KP programs, while only three (**50%**) report on investments in human rights; lower performance likely driven by lack of policy levers to stimulate domestic investment (and reporting investments) in human rights **KPI 9c**

Progress   Status ⚪ 🟡 ⚪

1. **Comprehensive Human Rights Review of GF Policies and Processes:** Terms of reference developed and some resources secured to conduct review. Expectation is that review will be completed in Q2 2018.
2. **Human Rights Complaints Procedure:** Due to competing priorities, this work started in Q4 2017 and expected to be completed by end of Q2 2018.
3. **Addressing Human Rights Crises:** Development of revised approach to human rights crises underway and expected to be completed in Q2 2018. Internal working group established, including OIG.

Key Challenges and Mitigating Actions

1. Securing funding for, and managing baseline assessments more challenging than anticipated, resulting in other work delayed. New CRG staff member on board to support work on SO3d.

Strategic Objective	3) Promote and protect human rights and gender equality
Sub-objective	e) Support meaningful engagement of Key and Vulnerable Populations and networks in GF-related processes
Strategic KPI (s)	KPI 5: Service coverage for key populations; KPI 9b: Investment in Key Populations programs

Latest KPI Data

- For new allocation, **19%** of HIV grant budget in MICs is invested in activities targeting Key Populations and **2%** is invested in removing Human Rights barriers (based on partial cohort reporting) KPI 9b

Progress

Status ● ○ ○

1. **Use of HIV Key Populations (KP) Implementation Tools:** Following global stakeholder convening in January to promote uptake of Key Population 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 the existing programs using Key Population 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:** Activities continuing under CRG Strategic Initiative. Focus on strengthening regional TB networks and on supporting TB advocates to influence GF-related processes at country level. Malaria Matchbox toolkit developed and piloted in 2017 and will be rolled out in 3 countries.
3. **Civil Society Engagement in CCMs:** 2017 cohort includes 23 CCMs for high impact or core countries that had at least 1 of 2 Civil Society engagement indicators not "fully compliant" in January 2017. Of this cohort, all have relevant activities in their improvement plans (100%) and 13 CCMs have improved on indicators (56%). In first half of 2018, given CCM Evolution project, CCM Hub will follow up with outstanding 10 CCMs.

Key Challenges and Mitigating Actions

1. All implementers have requested additional resources for work with TB and Malaria affected communities based on identified needs. CRG has had limited ability to provide this support. Review commissioned. Intensive support provided by CRG and TAP.

Strategic Objective	3) Promote and protect human rights and gender equality
Sub-objective	e) Support meaningful engagement of Key and Vulnerable Populations and networks in GF-related processes
Strategic KPI (s)	KPI 5: Service coverage for key populations; KPI 9b: Investment in Key Populations programs

Latest KPI Data

- For new allocation, **19%** of HIV grant budget in MICs invested in activities targeting Key Populations and **2%** invested in removing Human Rights barriers (based on partial cohort reporting)   `KPI 9b`

Progress   Status 🟢 ⚪ ⚪

4. **Strengthening Engagement of Key and Vulnerable Populations during Grant-making and Implementation:** From May - August 2017, consultations held with Internal Working Group and relevant GF departments (e.g. CCM Hub, Operational Support Team). As a result, CCM funding guidelines revised and trainings on OPN provided to GMD. From August 2017 - December 2017, recommendations integrated into CCM-related work (e.g. CCM evolution process, implementation of 15% CCM budget requirement). Demands for technical assistance promoted through CRG Strategic Initiative.

5. **CRG Strategic Initiative (CRG SI)**: Completed work planning and contracting with all 40 selected suppliers through Requests for Proposals released throughout 2017. Two remaining Requests for Proposals to select suppliers under component 2 of CRG SI to be released by end Q1 2018, and new suppliers selected by end of Q2 2018. 10 TA requests fulfilled in Q4 of 2017. Received 10 additional requests in Q4 of 2017, with 9 TAs being fulfilled in Q1 2018. Convened first joint calls with global HIV KP networks and the regional platforms to discuss implementation of SI in 2018. Planning and convening learning event in Bangkok in Feb 2018, to bring together participants from all newly selected suppliers to discuss lessons learned from SI and implementation plans.

Key Challenges and Mitigating Actions

Strategic Objective	3) Promote and protect human rights and gender equality
Sub-objective	Cross-cutting to SO3
Strategic KPI (s)	KPI 5: Service coverage for key populations; KPI 8: Gender and age equality; KPI 9: Human rights

Latest KPI Data

- Significant progress made with Human Rights baseline assessments despite slight delays KPI 9a

- For new allocation, **19%** of HIV grant budget in MICs invested in activities targeting Key Populations and **2%** invested in removing Human Rights barriers (based on partial cohort reporting) KPI 9b

- All but one of six UMICs assessed report on domestic investments in KP programs, while only three (**50%**) report on investments in human rights; lower performance likely driven by lack of policy levers to stimulate domestic investment (and reporting investments) in human rights KPI 9c

Progress   Status 🟢 ⚪ ⚪

1. **Training and Capacity Building:** Given volume of funding requests under approval in Q4 2017, alongside intense number of process and system related trainings for GMD staff, no training activities with GMD implemented in Q4 2017. During this period, CRG developed a workshop for those Country Teams, Fund Portfolio Managers and Public Health and Monitoring and Evaluation staff who work on 20 priority countries for scale up of programs to remove human rights barriers to service. Workshops delivered in January 2018. Range of trainings will be rolled out over 2018.
2. **Inclusive Engagement:** AGYW Meaningful Engagement Fund (Her Voice) launched in November 2017 and currently receiving applications from and disbursing small grants to AGYW groups in 13 countries. Fund managed by partnerships of Southern African AIDS Trust and EANNASO.
3. **Model for Gender and Human Rights Responsive Programming:** Comprehensive report on incorporating structural interventions in country HIV programme planning and their application in HIV investment models finalized from an expert consultation convened by technical partners with support from GF. Technical partners will guide GF on most efficient way of implementing recommendations of report in filling evidence gap and potential use of models.

Key Challenges and Mitigating Actions

1. For gender and human rights 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.

SO4: Mobilize Increased Resources

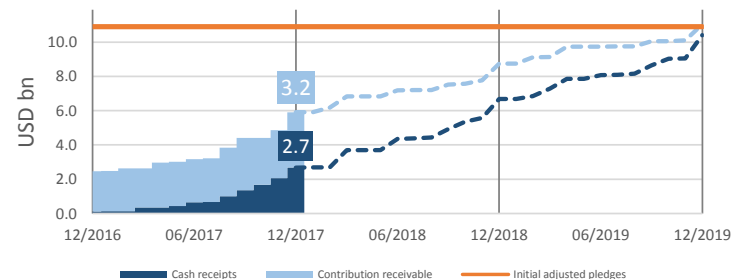| Strategic Objective	4) Mobilize increased resources
Sub-objective	a) Attract additional financial and programmatic resources for health from current, new public and private sources
Strategic KPI (s)	KPI 10: Resource mobilization

Latest KPI Data

- So far, **USD 12.9b** pledged in this replenishment cycle (**99%** of the target) KPI 10a
- Out of this**, USD 850m (6.6%)** pledged by Private Sector
- Conversion rate of pledges to actual contributions is currently forecasted to be **100%** of initial forecasted amount KPI 10b

Planned transformation of adjusted pledges

Progress

Status 🟢 ⚪ ⚪

1. **Donor Contribution Agreements:** As of end Feb 2018, 36 contribution agreements out of 38 from public donors expected to shift from tripartite to bilateral for the current replenishment period; of these 31 bilateral and 1 tripartite agreements signed.
2. **Mobilization of Additional Resources:** Additional public and private sector pledges post-replenishment total $35.1M. Board approval for creation of new transitional non-voting Board seat for public donors pledging $10 million or more in current replenishment to expand public donor base. Strategic Partnership between GF and Lombard Odier, Heineken, Unilever launched at WEF-Davos. (RED) partnering with Africans for Africa platform to expand (RED) business model.
3. **Resource Mobilization Action Plan:** Action Plan for ongoing resource mobilization presented to AFC and Board in 2017.
4. **Audit/Review/Report Completion:** Netherlands Scorecard (donor review undertaken every 2 years) ranks GF 3rd of 31 organizations reviewed. Compared to the last Scorecard in 2015, GF has either maintained or increased its score on each of the review categories/topics.

Key Challenges and Mitigating Actions

1. Increasingly challenging political landscape in key donor countries. Closely monitoring political transitions and building strong cross-party support for GF in key donor countries.

| Strategic Objective	4) Mobilize increased resources
Sub-objective	b) Support countries to use existing resources more efficiently and to increase domestic resource mobilization
Strategic KPI (s)	KPI 11: Domestic investments

Progress

Status ⚪ 🟡 ⚪

1. **Debt to Health Agreements:** From shortlist of prospected countries, Netherlands, Italy and Belgium have sent negative response. Debt2Health proposal currently being reviewed at highest level for additional creditor country with go/no-go decision. Two new debt swaps in discussion.
2. **Health Financing Strategies and Sustainability Plans:** Progress on development and implementation of health financing strategies in priority countries, including:
   - **Kenya:** Health financing strategy developed. Sustainability Plan for AIDS, TB & Malaria finalized in September 2017.
   - **Tanzania:** Health financing strategy developed. Sustainability Plan for AIDS, TB & Malaria finalized in September 2017.
   - **Ethiopia:** National Healthcare Financing Strategy developed and under review.
   - **National Health Financing Dialogues:** National Dialogues on health financing with Heads of States presiding took place in Togo, Benin, and Senegal.
3. **Innovative Financing (IF):** Operationalization of blended finance continues to be explored in line with Framework for Joint investments in Blended Finance, namely for regional malaria elimination initiative in Central America, financed by multi-country catalytic investments. Update on development of GF vision for IF to be presented to March 2018 SC/AFC.

Latest KPI Data

For 2014-2016 allocation period, actual domestic investment[1] was **118%** of minimum policy prescribed co-financing, exceeding minimum requirements across all income brackets. Further, **94%** of eligible countries assessed to-date have met/exceeded policy prescribed co-financing requirements. KPI 11

Results vs. Policy Stipulated Requirements

1. All figures are based on partial cohort assessed to-date
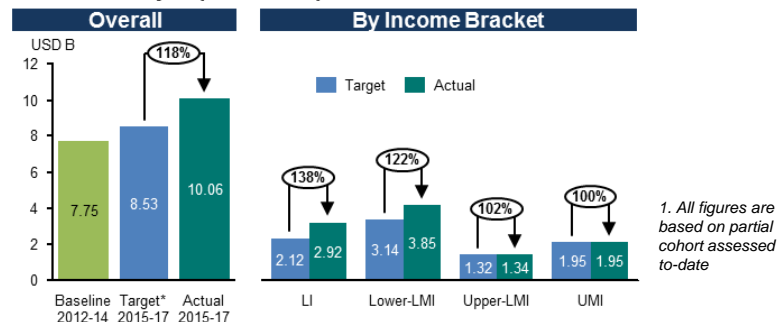
Key Challenges and Mitigating Actions

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. Political transitions (Kenya presidential elections). Activities currently supported by BMGF grant ending in 2018. Some funding for domestic financing advocacy work secured through Strategic Initiative.

Strategic Objective	4) Mobilize increased resources
Sub-objective	c) Implement and partner on market shaping efforts that increase access to affordable, quality-assured key medicines and technologies
Strategic KPI (s)	KPI 6: Strengthen systems for health (a. procurement) KPI 12: Availability of affordable health technologies

Progress

Status ⚪ 🟡 ⚪

1. **WAMBO:**
   • **Pilots:** Design and implementation of extra features in wambo.org to support domestically funded transactions completed. Legal stack (terms of use, framework agreements, special terms and conditions) updated to provide appropriate legal framework to transactions. Five transactions expected to go through before end of Q2, remaining transactions before end of 2018.
   • **Onboarding of GF-financed Health Products:** All PPM health products present on wambo.org: LLINs; ARVs; antimalarials; Rapid Diagnostics Tests for malaria, HIV and others; condoms and lubricants, leveraging partnership with UNFPA; viral load; so-called non-core pharmaceuticals, incl. drugs against opportunistic infections of HIV & other essential medicines often procured via grants; other diagnostics and lab equipment & supplies. Catalogue continues to be refined in collaboration w/ Procurement Service Agents and in light of PR demand and of sourcing strategies as they evolve.

Latest KPI Data

- **67%** of defined products have more than three suppliers that meet Quality Assurance requirements `KPI 12a`
    - Taking action to accelerate approval of suppliers for new products (TLD, ped. ARV); >3 suppliers may not be commercially feasible for low-volume products
- **USD 205m** of savings were achieved in 2017 through direct `KPI 12b` procurement mechanisms, exceeding the annual savings target
- **84%** of pooled procurement orders were delivered on time and in full, exceeding PPM target

Key Challenges and Mitigating Actions

1. Countries participating in pilot required to pre-pay for orders placed on wambo.org, which in some cases not permitted by local regulations. Waivers or 3rd party guaranteeing of liabilities being explored as potential solutions.

Strategic Objective	4) Mobilize increased resources
Sub-objective	c) Implement and partner on market shaping efforts that increase access to affordable, quality-assured key medicines and technologies
Strategic KPI (s)	KPI 6: Strengthen systems for health (a. procurement) KPI 12: Availability of affordable health technologies

Progress

Status ○ ● ○

2. **Health Product Categories Covered under Framework Agreements:** Progress is on-track for all categories with exceptions of two: (1) Rapid Diagnostics Tests tender will be launched in Q3 2018 due to reprioritization based on current resources and current market dynamics; and (2) Procurement capacity building will be reviewed and updated as part of Market Shaping road-map.

3. **Product Category Strategies:** In Q4 2017, Sourcing Strategic Review meeting held with key partners and stakeholders to review progress on implementing the Market Shaping Strategy to date and to inform Phase 2 implementation. Roadmap identifying additional opportunities developed with inputs from meeting. Key activities being incorporated into work planning for 2018-2021. Procurement strategies for antimalarial medicines and ARVs updated, including expanded scope (with respect to products) and for antimalarial medicines, inclusion of responsible procurement requirements for sourcing of artemisinin.

Latest KPI Data

- **67%** of defined products have more than three suppliers that meet Quality Assurance requirements KPI 12a
    - Taking action to accelerate approval of suppliers for new products (TLD, ped. ARV); >3 suppliers may not be commercially feasible for low-volume products
- **USD 205m** of savings achieved in 2017 through direct procurement mechanisms, exceeding the annual savings target KPI 12b
- **84%** of pooled procurement orders were delivered on time and in full, exceeding the PPM target

Key Challenges and Mitigating Actions

2. 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.

Strategic Objective	4) Mobilize increased resources
Sub-objective	d) Support efforts to stimulate innovation and facilitate the rapid introduction and scale-up of cost-effective health technologies and implementation models
Strategic KPI (s)	KPI 12: Availability of affordable health technologies

Progress

Status ⚪🟡⚪

1. **Private-public Partnerships**
   - **Liberia:** August 2017 review of health financing strategy helped identify key issues and areas for improvement. Key stakeholders will be reconvened once new President and Cabinet officials have been appointed.
   - **Uganda:** Continued engagement with Federation of Uganda Employers (FUE) and CCM-Uganda on development of private sector-led One Dollar Initiative to mobilize contributions to HIV programs. Next milestone is One Dollar Initiative's first board retreat in March.
2. **Product Scale-up Roadmaps:** Partnering to support transition to new, improved ARV regimen (TLD from TLE) has been major focus of engagement with two other large buyers (PEPFAR and the Republic of South Africa) and suppliers, in addition to facilitating supply/demand information exchange and dialogue with the multiagency ARV Procurement Working Group. By end Dec 2017, orders placed for limited number of countries in support of transition from TLE. In ARV Global tender (launched Q1 2018), TLD included as strategic product, alongside collaborative work with suppliers to assure supply and maximize value opportunities. On LLINs with potential to address resistance, suppliers of innovative products retained as panel suppliers in last tender.

Latest KPI Data

- **67%** of defined products have more than three suppliers that meet Quality Assurance requirements KPI 12a
    - Taking action to accelerate approval of suppliers for new products (TLD, ped. ARV); >3 suppliers may not be commercially feasible for low-volume products
- **USD 205m** of savings were achieved in 2017 through direct KPI 12b procurement mechanisms, exceeding the annual savings target
- **84%** of pooled procurement orders were delivered on time and in full, exceeding the PPM target

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 to maintain relationship.

Cross-Cutting

Strategic Objective	Cross-cutting to Strategy
Sub-objective	Cross-cutting to Strategy
Strategic KPI (s)	All

Progress

Status ⚪🟡⚪

1. **Ethics:**
   - **Ethics and Integrity Communications and Training:** Secretariat Ethics training plan developed, with training modules for different audiences. Two teams (MENA and EECA), 107 Secretariat staff, 90 LFA experts, 173 CCM members, 40 PR/SR representatives and 28 Board, committee and constituency members participated in Ethics awareness and training activities in 2017. Code of Conduct certification and training to all staff underway in Q1 2018, and Speak Up survey planned for Q2/Q3.
   - **Anti-corruption Program and Policy:** Combatting Fraud and Corruption Policy implementation planning under way – main focus is on CCM Code of Conduct and Integrity Due Diligence, below:
     - **CCM Code of Conduct:** CCM Code of Conduct and enforcement mechanisms integrated into CCM Evolution project. Committee review in March 2018, planned for Board presentation in May 2018.
     - **Risk-based Integrity Due Diligence (IDD):** Extensive piloting and deployment of IDD in some key processes during 2017 (Board Leadership, Committee Leadership and Executive Director appointments.) Revised processes to be completed in several Secretariat-level categories by October 2018.

Latest KPI Data

- Cross-cutting

Key Challenges and Mitigating Actions

1. Significant delays on Integrity Due Diligence project due to competing business priorities in 2017. Stronger focus on this in 2018 with additional resources to be acquired for second half of 2018.
2. Limited financing on CCMs may mean CCM Code enforcement may be spotty, extensive interests across stakeholders may delay CCM Code approval at Board level even further. To mitigate, ongoing coordination with CCM Strategy project and development of differentiated approach.

Strategic Objective	Cross-cutting to Strategy
Sub-objective	Cross-cutting to Strategy
Strategic KPI (s)	All

Latest KPI Data

• Cross-cutting

Progress

Status

2. **Results Release:** Successful transition between old and new data management systems for programmatic results reporting. On-going preparation for release of 2017 programmatic results by mid-2018.
3. **Annual Results Report:** Results Report 2017 published mid-September in English and French. Spanish and Russian versions followed shortly thereafter.
4. **Library of Board and Committee Policies:** Board Decisions database and selected key policies pages operational and accessible to all Secretariat staff. Integration of Committee policies, and tracking/reporting of status and follow up actions, pending IT implementation of enabling tools.
5. **Quarterly KPI Reporting:** End-2016 and mid-2017 KPI reporting delivered to Committees and Board. End-2017 reporting on track to be delivered to Spring Committees and Board. Scope of additional internal deliverables was adjusted due to team staffing to provide resources needed for external deliverables.
6. **Annual Corporate Work Plan:** Work Plan shared with AFC at October 2017 meeting and with Board in November.

Key Challenges and Mitigating Actions

3. Limited resources and need to address competing corporate priorities (e.g. grant making/signing, Health Campus, Executive Director selection, other governance matters) has delayed implementation of Policy Library. Efforts to increase team capacity to further implement the Policy Library are in progress.
4. KPI team staffing limitations. Team prioritized activities to ensure Committee and Board strategic-KPI delivery of deliverables, but delayed implementation KPI targets and reporting.