

# 28<sup>th</sup>CCM Meeting Minutes

INPUT FIELDS INDICATED BY YELLOW BOXES



MEETING DETAILS									
COUNTRY (CCM)		Bhutan			TOTAL NUMBER OF <u>VOTING</u> MEMBERS PRESENT (INCLUDING ALTERNATES)				18
MEETING NUMBER (if applicable)		28th CCM meeting			TOTAL NUMBER OF <u>NON-CCM</u> MEMBERS / OBSERVERS PRESENT (INCLUDING CCM SECRETARIAT STAFF)				19
DATE (dd.mm.yy)		8 August 2014			QUORUM FOR MEETING WAS ACHIEVED (yes or no)				Yes
DETAILS OF PERSON WHO CHAIRED THE MEETING					DURATION OF THE MEETING (in hours)				8.5
HIS / HER NAME & ORGANISATION	First name	Nima			VENUE / LOCATION				Main Conference Hall, Ministry of Health, Thimphu
	Family name	Wangdi			MEETING TYPE (Place 'X' in the relevant box)				Regular CCM meeting
	Organization	Government constituency			Extraordinary meeting				
HIS / HER ROLE ON CCM (Place 'X' in the relevant box)	Chair				Committee meeting				
	Vice-Chair				GLOBAL FUND SECRETARIAT / LFA ATTENDANCE AT THE MEETING (Place 'X' in the relevant box)				LFA
	CCM member				FPM / PO				
	Alternate				OTHER				
HIS / HER SECTOR* (Place 'X' in the relevant box)					NONE				
GOV	MLBL	NGO	EDU	PLWD	KAP	FBO	PS		
X									

## LEGEND FOR SECTOR\*

GOV	Government	PLWD	People Living with and/or Affected by the Three Diseases
MLBL	Multilateral and Bilateral Development Partners in Country	KAP	People Representing 'Key Affected Populations'
NGO	Non-Governmental & Community-Based Organizations	FBO	Religious / Faith-based Organizations
EDU	Academic / Educational Sector	PS	Private Sector / Professional Associations / Business Coalitions

## SELECT A SUITABLE CATEGORY FOR EACH AGENDA ITEM (Place 'X' in the relevant box)

### GOVERNANCE OF THE CCM, PROPOSALS & GRANT MANAGEMENT RELATED TOPICS

## AGENDA SUMMARY

AGENDA ITEM No.	WRITE THE TITLE OF EACH AGENDA ITEM / TOPIC BELOW	Review progress, decision points of last meeting – Summary Decisions	Review CCM annual work plans / budget	Conflict of Interest / Mitigation	CCM member renewals/appointments	Constituencies engagement	CCM Communications /consultations with in-country stakeholders	Gender issues	Proposal development	PR / SR selection / assessment / issues	Grant Consolidation	Grant Negotiations / Agreement	Oversight (PUDRs, management actions, LFA debrief, audits)	Request for continued funding / periodic review / phase II / grant consolidation / closures	TA solicitation / progress	Other
AGENDA ITEM #1	<b>Introduction</b> <ul style="list-style-type: none"> <li>Objectives and Agenda</li> </ul> <b>Declaration of conflict of interest (COI)</b> Endorsement – Draft Agenda															
AGENDA ITEM #2	<b>CCM assessment on minimum eligibility – Report</b> <ul style="list-style-type: none"> <li>CCM assessment on the minimum requirement;</li> <li>Improvement plan</li> </ul>															



In the opening remark, CCM Chair thanked all members and implementing partners for their strong participation and commitment to fight against three diseases. He briefly covered on the concept development process.

The CCM secretariat briefly presented on the meeting agenda and conflict of interest with agenda

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**SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM**  
*Please summarize the respective constituencies' contributions to the discussion in the spaces provided.*

GOV	The Chair sought feedback on agenda from the members if agenda needs any changes.
MLBL	
NGO	
EDU	
PLWD	
FBO	
KAP	
PVT	

**DECISION(S)** *Summarize the decision in the section below*

- The agenda was endorsed.
- It was agreed that Dr DORJI Wangchuk, Director General, Department of Public Health, Ministry of Health and Mr Nima Wangdi, Health Secretary will mitigate the COI on the agenda item 3 and 4.

ACTION(S)	KEY PERSON RESPONSIBLE	DUE DATE
<i>Summarize below any actions to be undertaken indicating who is responsible for the action and by when the action should be completed.</i>		

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**DECISION MAKING**

MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*	<input checked="" type="checkbox"/>	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS		
	VOTING	<input type="checkbox"/>	VOTING METHOD (Place 'X' in the relevant box)	SHOW OF HANDS	<input type="checkbox"/>
				SECRET BALLOT	<input type="checkbox"/>
	ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF</u> THE DECISION >				18
	ENTER THE NUMBER OF MEMBERS <u>AGAINST</u> THE DECISION >				0
	ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u> >				0

\*Consensus is general or widespread agreement by all members of a group.

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**AGENDA ITEM #2** **CCM assessment on minimum eligibility – Report**

**CONFLICT OF INTEREST.** (List below the names of members / alternates who must abstain from discussions and decisions)

Non

**WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>** Yes

**SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED**

**Performance Assessment**

*"CCMs will be required to carry out a CCM Eligibility and Performance Assessment and produce a complete diagnostic to determine the level of functionality of the CCM"*

**Eligibility Requirement**

Oversight planning and implementation	
1. Transparent and inclusive concept note development process	Concept note Submission
2. Open and transparent PR selection process	
3. CCM membership of affected communities, including and representing PLWD and KAP	Annually:
4. Processes for electing non-government CCM member	Performance Assessment tool,
5. Management of conflict of interest on CCMs	

**Minimum Standards**

3. Oversight planning and implementation

- The oversight body conducts oversight activities
- The CCM takes decisions and corrective action whenever problems and challenges are identified.
- The CCM shares oversight results with the Global Fund Secretariat and in-country stakeholders quarterly

4. CCM membership of affected communities, including and representing PLWD and KAP.

- The CCM has balanced representation of men and women (the Global Fund Gender Equality Strategy clarifies how women and

girls are key affected groups in the context of the 3 diseases).

#### 5. Processes for electing non-government CCM member

- CCM membership comprises a minimum of 40% representation from national civil society sectors.
- CCM has clearly defined processes of soliciting inputs from and providing feedback to their constituencies.
- The CCM elects its Chair and Vice-Chair(s) from different sectors and also follows good governance principles of periodic change and rotation of leadership

#### 6. Management of conflict of interest on CCMs

- To guarantee effective decision making, the CCM ensures that the number of members in the CCM with Col does not exceed **1 person per constituency** (excluding Ex-Officio Members with no voting rights).

### Objective of the EPA

To facilitate CCM self-assessment to ensure that the CCM is fully compliant with the Eligibility Requirements at the time of submission of the Concept Note or has a clear improvement plan with corrective actions and a detailed timeline to achieve it.

### EPA Process - Three Key Components:

- Phase I: Self-assessment by the CCM
- Phase II: The stakeholder interviews by the TA provider
- Phase III: Improvement plan (for certain CCMs) for which the CCM and the TA provider have joint responsibility

### EPA: Phase I- Assessment

Eligibility Requirement	Indicator Ref.		Performance rating
Req. 3	A	The CCM has an o responsibilities, tim	3
	B	The CCM has esta ensure periodic ove	2
	C	The oversight body living with and/or at	1
Req. 4	G	The CCM ensures socio-epidemiology of the three diseases.	3
	H	The CCM the three	3
Req. 5	J	All non-gt own, thro	3
Req. 6	N	The CCM and CCM	3
	O	CCM meeting minutes demonstrate that CCMs follow the procedures to prevent, manage and mitigate Col.	2

Procurement Expert missing from list of required skills in OB

nor obtained feedback from non-CCM members, PLWD or/ and KAP.

the review of the past 12 months meeting minutes indicates that less than 90% of the total meeting minutes did not apply procedure to prevent, handle and mitigate COI as per the policy.

### EPA: Phase I- Assessment

#### Minimum Standards

- Of the 8 minimum standards, Bhutan CCM is fully compliant with 4 minimum standards (50%) and 2 indeterminate and 2 non-compliant

### EPA – Findings/ Observations

Eligibility Requirement	Indicator Ref.	Minimum standard	Performance rating
Req. 3	D	The oversight body conducts oversight activities to discuss challenges with each PR and identifies problems, potential reprogramming and corresponding reallocation of funds between program activities, if necessary.	1
	E	The CCM takes decisions and corrective action whenever problems and challenges are identified	2
	F	The CCM shares oversight results with the Global Fund Secretariat and in-country stakeholders quarterly through the process defined in its Oversight Plan.	2
Req. 4	I	The CCM has balanced representation of men and women (the Global Fund Gender Equality Strategy clarifies how women and girls are key affected groups in the context of the 3 diseases).	3
Req. 5	K	CCM membership comprises a minimum of 40% representation from national civil society sectors. <sup>4</sup>	3
	L	CCM has clearly defined processes of soliciting inputs from and providing feedback to their constituencies that selected them to represent their interests in the CCM	1
	M	The CCM elects its Chair and Vice-Chair(s) from different sectors (government, national civil society and development partners ) and also follows good governance principles of periodic change and rotation of leadership according to CCM by-laws.	3
Req. 6	P	To guarantee effective decision making, the CCM ensures that the number of members in the CCM with Col does not exceed 1 person per constituency (excluding Ex-Officio Members with no voting rights).	3

#### EPA: Phase I- Assessment

- Req 3-D: Beside the presentation of performance during the routine CCM meetings by the PR, till date the OB or the CCM has not conducted meetings with the PR to discuss issues or bottlenecks to strengthen grant performance and oversight
- Req 5 L: None of constituencies on the CCM has clearly defined processes for soliciting inputs from and feedback mechanism to their respective constituencies.
- Although the dashboard was introduced in 2012 with TA from the GF secretariat, it is yet to be operationalized due to capacity limitation within the PR and CCM secretariat. In the absence of Dashboard, the issues discussed during the CCM are documented in the meeting minutes, but the follow-up in the subsequent minutes is limited.
- Of the total stakeholders four were current CCM members, one alternate and the remaining seven were non-members.
- Majority of the CCM members acknowledged the presence of the oversight plan, but raised concerns on the limited routine oversight visit/activities as part of the routine oversight plan.
- The discussion with the current CCM members highlighted the lack of platform for disseminating information back to the respective constituencies.
- There was a unanimous agreement that beside the CCM there are oversight mechanism instituted within the PR's system such as the stringent financial procedures, Programme accountability and monitoring and Annual Audit requirements of the government.
- Although the need to communicate information and solicit input from the respective constituencies came across as a cross-cutting concern, compared to NGOs, the Government and multilateral stakeholders were relatively better informed due to the Annual Round Donor discussion.

#### EPA: Phase III-Improvement Plan

##### **Oversight**

- Capacity building of the OB including training on Dashboard analysis and PUDR review to be able to identify early warning and to be able to adequately address the bottlenecks.
- Strengthen the current oversight tool by incorporating major areas of grant oversight: program, finance and procurement of services and commodities.
- Establish working collaboration through MOU with non-CCM organizations for feedback and backstopping technical assistance.
- Establish coordination mechanism to routinely collaborate with and actively seek feedback from disease specific TWGs.
- Coordinate and implement oversight activities on a routine bases including PR coordination meetings, field visit and consultation with KAP and PLWD in the country.

##### **COI**

- Institutionalize COI as an agenda item in all CCM meetings, including annual COI declaration.
- Annually debrief CCM members, alternates, TWGs, OB, PDC and secretariat on the COI policy and mitigation plan.

##### **Engagement**

- Development of engagement plan including platform (web-based) for disseminating and soliciting inputs from the NGO constituencies.
- Secretariat to facilitate / maintain and update the web-based platform.
- Conduct outreach by the CCM members / OB to KAP and PLWD on a routine bases to enhance engagement and meaningful participation.

##### **Communication**

- Development of communication action plan action for wider and transparent dissemination of grant performance and information.
- Routine update of the CCM website with adequate technical and financial resources allocation.
- Coordinate and conduct CCM-PR, TWG and OB meetings annually.

##### **Structures**

- Strengthen secretariat's capacity to efficiently and effectively coordinate amongst the structures (CCM, TWG, OB, The GF and LFA).

- Explore the possibilities of delinking including finances from Ministry of Health to prevent potential / perceived COI in future.

## SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM

Please summarize the respective constituencies' contributions to the discussion in the spaces provided.

GOV	<ul style="list-style-type: none"> <li>• The member informed that CCM account is managed by Ministry of Health with different PLC account.</li> <li>• Chair requested CCM member from GNHC, to discuss the matter with the head of the GNHC to see the possibility of housing and manage the CCM account by GNHC.</li> </ul>
MLBL	<ul style="list-style-type: none"> <li>• The member informed that the TWG should not be considered as structure as it is constituted only for the proposal development.</li> <li>• How and where technical assistance can be availed to address the bottleneck to CCM performance</li> </ul>
NGO	<ul style="list-style-type: none"> <li>• The member informed that with the constituency funds available, the constituency meetings will be held to take the discussions to other CSOs.</li> <li>• Due to lack of same CSO working for same purpose, the constituency meeting or visit was not considered significant. However, they will consider including constituency meeting together with annual CSO general meeting.</li> </ul>
EDU	
PLWD	<ul style="list-style-type: none"> <li>• The member informed that they have been engaging the PLWD communities and have been conducting meetings.</li> </ul>
FBO	
KAP	
PVT	

### DECISION(S) Summarize the decision in the section below

- It was decided that CCM will write to GNHC to manage the CCM account if Global Fund feels of potential conflict of interest.
- CCM member from GNHC, agreed to discuss with Director on managing CCM account.
- Decided that TWG is not a structure instead it will formed whenever CCM decides to submit proposal
- As recommended, CCM agreed to look for procurement expert in oversight committee.
- Decided that CSO constituency meeting will held together with annual CSO meeting.
- The members unanimously agreed to adopt the improvement plan.

ACTION(S)	KEY PERSON RESPONSIBLE	DUE DATE
<i>Summarize below any actions to be undertaken indicating who is responsible for the action and by when the action should be completed.</i>		
<ul style="list-style-type: none"> <li>• CCM Secretariat will write to MoF, for procurement expert in oversight committee.</li> <li>• CCM Secretariat will write GNHC, pertain to management CCM account.</li> </ul>	CCM secretariat	3 <sup>rd</sup> week of August 2014  3 <sup>rd</sup> week of August 2014

### DECISION MAKING

MODE OF DECISION MAKING (Place‘X’ in the relevant box)	CONSENSUS*	X	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS		
	VOTING		VOTING METHOD (Place‘X’ in the relevant box)	SHOW OF HANDS	
				SECRET BALLOT	
			ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF THE DECISION</u> > 18		
			ENTER THE NUMBER OF MEMBERS <u>AGAINST</u> THE DECISION > 0		
			ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u> > 0		
	*Consensusisgeneral or widespread agreement by all members of a group.				

### AGENDA ITEM #3

### Final draft concept note (2<sup>nd</sup> review full CCM) - HIV

CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)

Mr. Nima Wangdi, Health Secretary, MoH	
Dr. Dorji Wangchuk, Director General, DoPH, MOH	
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>	
Yes	
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED	
<p>The 2nd draft concept note of HIV component was presented for review and endorsement :</p> <ul style="list-style-type: none"> <li>- HIVNFM Concept Note development process</li> <li>- Goal</li> <li>- Objectives</li> <li>- Prioritized Modules</li> <li>- Grant Recipients (intervention and budget)</li> <li>- Modular approach</li> <li>- PMTCT.</li> <li>- Coverage/measurement framework</li> <li>- Impact and outcome indicator</li> <li>- Budget summary</li> <li>- Budget by cost category</li> <li>- Budget allocation by recipient</li> </ul>	
SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM	
Please summarize the respective constituencies' contributions to the discussion in the spaces provided.	
GOV	<ul style="list-style-type: none"> <li>• The members enquired how the program plans to work on the legal barriers to the vulnerable groups.</li> <li>• The member suggested if there can be compulsory testing for ANC, this would reduce the risks.</li> <li>• Have to be mindful of proposing master's program, for second time TGF have suggest it won't fly through TRP.</li> </ul>
MLBL	<ul style="list-style-type: none"> <li>• Utilization of allocated fund for other activities if master's degree is not approved</li> </ul>
NGO	<ul style="list-style-type: none"> <li>• The member enquired how the program intends to work on the data for vulnerable groups.</li> <li>• Given the current capacity of program, master program is felt necessary to ensure smooth running of the programs in future.</li> </ul>
EDU	<ul style="list-style-type: none"> <li>• Feasibility and sustainability of giving incentives to village health works in long run.</li> </ul>
PLWD	<ul style="list-style-type: none"> <li>• The member suggested that the program's proposal needs to be stronger to achieve better results and hence the extended time is necessary.</li> </ul>
FBO	
KAP	<ul style="list-style-type: none"> <li>• Verify with TGF the possibilities of supporting master program.</li> </ul>
PVT	<ul style="list-style-type: none"> <li>• Going by current trend and difficulties faced by program, KAP supported to proposed master's degree in the concept note.</li> </ul>
DECISION(S) Summarize the decision in the section below	

<ul style="list-style-type: none"> <li>It was agreed that program would address and incorporate all the comments made by the Global Fund on the 2<sup>nd</sup> draft concept note.</li> <li>Considering the country needs, the CCM endorsed to keep the masters degree program activity as proposed by the PR.</li> <li>The concept note of HIV program has been again differed for submission by 15 October 2014, for not being able to adequately address the comments of the Global Fund, based on the recommendation from the WHO country office and the fact that there will not be any funding gap due to the deferment.</li> <li>The program is suggested to discuss with FPM, during their visit to Bhutan scheduled on September 2014.</li> <li>Decided to again view the CN in later week of September 2014, together with Malaria concept note.</li> </ul>				
ACTION(S)			KEY PERSON RESPONSIBLE	DUE DATE
Summarize below any actions to be undertaken indicating who is responsible for the action and by when the action should be completed.				
Review of revised concept note.			HIV program	September 2014
DECISION MAKING				
MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*		IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS	
	VOTING	X	VOTING METHOD (Place 'X' in the relevant box)	SHOW OF HANDS
			SECRET BALLOT	X
	ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF THE DECISION</u> >			16
	ENTER THE NUMBER OF MEMBERS <u>AGAINST THE DECISION</u> >			0
*Consensus is general or widespread agreement by all members of a group.			ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u> >	
AGENDA ITEM #4		Final draft concept note (2 <sup>nd</sup> review by full CCM) – TB		
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)				
<ul style="list-style-type: none"> <li>Mr. Nima Wangdi, Health Secretary, MoH</li> <li>Dr. Dorji Wangchuk, Director, General, DoPH</li> </ul>				
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>				Yes
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED				
<p>The 2nd draft concept note of TB component was presented for review and endorsement</p> <ul style="list-style-type: none"> <li>- Goal</li> <li>- Objectives</li> <li>- Grant Recipients</li> <li>- Modules Selected</li> <li>- Measurement Framework</li> <li>- Impact and outcome indicators</li> <li>- Budget by modules</li> <li>- Budget summary by cost category</li> <li>- Budget for Health Sector &amp; TB Control</li> <li>- Budget by recipient</li> <li>- Global Fund Comments (2nd Round)</li> </ul>				
SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM				
Please summarize the respective constituencies' contributions to the discussion in the spaces provided.				
GOV	<ul style="list-style-type: none"> <li>Serious concern about master's program- despite repeated comments, still proposed in concept note</li> </ul>			
MLBL	<ul style="list-style-type: none"> <li>Suggested to clarify global fund comments in tabular format</li> </ul>			
NGO	<ul style="list-style-type: none"> <li>Proposal has to justify, how additional implementing partners (SR) can improve to fight against the disease.</li> </ul>			



	<ul style="list-style-type: none"> <li>To start uploading CN into online grant management system, thus to avoid technical complication.</li> </ul>
EDU	<ul style="list-style-type: none"> <li>Utilization of allocated fund for other activities if master's degree is not approved.</li> </ul>
PLWD	<ul style="list-style-type: none"> <li>Mechanism to direct observation of the DOT</li> </ul>
FBO	
KAP	<ul style="list-style-type: none"> <li>Verify with TGF the possibilities of supporting master program</li> <li>Going by current trend of difficulties faced by program, KAP supported to proposed master's degree in the concept note.</li> </ul>
PVT	

**DECISION(S)** *Summarize the decision in the section below*

Considering the country needs, the CCM endorsed to keep the master's degree program, provided, if fund can be used for other purpose if not approved.

Decided that admin focal point should complete uploading the concept note in the system at the earliest possible and inform to CCM members prior to submission.

CCM endorsed to submit the TB concept note on 15 August 2014, and be extra cautious, while uploading office CN into online system.

ACTION(S)	KEY PERSON RESPONSIBLE	DUE DATE
<i>Summarize below any actions to be undertaken indicating who is responsible for the action and by when the action should be completed.</i>		
Submission of concept note – TB component	TB program	15 August 2014

**DECISION MAKING**

MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*	X	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS		
	VOTING		VOTING METHOD (Place 'X' in the relevant box)	SHOW OF HANDS	
				SECRET BALLOT	
			ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF THE DECISION</u> >		18
			ENTER THE NUMBER OF MEMBERS <u>AGAINST</u> THE DECISION >		0
			ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u> >		0

\*Consensus is general or widespread agreement by all members of a group.

AGENDA ITEM #5	Update – draft concept note (first review by full CCM) – Malaria
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)	
Non	
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>	
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED	
<p>The 1st draft concept note of Malaria, pertain to new funding model was updated to members, focusing on:</p> <ul style="list-style-type: none"> <li>- Goal</li> <li>- Expected outcome Objectives</li> <li>- Strategic Objectives</li> <li>- Key areas proposed for Concept Note</li> <li>- Performance/ Measurement Framework</li> <li>- Sub Recipients for Malaria</li> <li>- Financial Gap Analysis (Malaria)</li> </ul>	
SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM	
<i>Please summarize the respective constituencies' contributions to the discussion in the spaces provided.</i>	
GOV	

	<ul style="list-style-type: none"> <li>To avoid deferment of Malaria CN like two other components, program should closely consider to address the comments of TGF and disease portfolio</li> </ul>		
MLBL	<ul style="list-style-type: none"> <li>Proposal has to justify, how additional implementing partners (SR) can improve to fight against the disease or change disease pattern.</li> </ul>		
NGO			
EDU			
PLWD			
FBO			
KAP			
PVT			
DECISION(S) <i>Summarize the decision in the section below</i>			
It was decided that 2nd draft concept of Malaria component will be again review in last week September .			
ACTION(S)		KEY PERSON RESPONSIBLE	DUE DATE
<i>Summarize below any actions to be undertaken indicating who is responsible for the action and by when the action should be completed.</i>			
Update of 2nd draft concept note		Malaria program	Last week of September 2014
DECISION MAKING			
MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*	X	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS
	VOTING		VOTING METHOD (Place 'X' in the relevant box)
			SHOW OF HANDS
			SECRET BALLOT
			ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF</u> THE DECISION >
			ENTER THE NUMBER OF MEMBERS <u>AGAINST</u> THE DECISION >
*Consensus is general or widespread agreement by all members of a group.			0
ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u> >			0

<b>NEXT MEETING</b> (INCLUDES OUTSTANDING AGENDA ITEMS NOT COMPLETED DURING CURRENT MEETING)	
TIME, DATE, VENUE OF NEXT MEETING (dd.mm.yy)	Will be held by last week of September 2014
PROPOSED AGENDA FOR NEXT MEETING	WRITE THE PROPOSED AGENDA ITEMS IN THE SPACES PROVIDED
AGENDA ITEM #1	Follow up - 28th CCM meeting
AGENDA ITEM #2	Review and endorse the draft concept note HIV and Malaria component
AGENDA ITEM #3	Progress update of TFM grants implementation- HIV, TB and Malaria
AGENDA ITEM #4	

To add another 'Agenda Item' highlight the entire row corresponding to the last 'Agenda Item #' in the table. Right click on the mouse and select the 'Insert' menu item, then select the 'Insert Rows Below' option. Repeat as necessary to add additional rows.

<b>SUPPORTING DOCUMENTATION</b>	Place an 'X' in the appropriate box	
ANNEXES ATTACHED TO THE MEETING MINUTES	Yes	No
ATTENDANCE LIST	X	
AGENDA	X	
OTHER SUPPORTING DOCUMENTS	X	
IF 'OTHER', PLEASE LIST BELOW:		
Presentations files of TB, HIV and Malaria programs.		

**CHECKLIST** (Place 'X' in the relevant box)

	YES	NO	
AGENDA CIRCULATED ON TIME BEFORE MEETING DATE	X		The agenda of the meeting was circulated to all CCM members, Alternates and Non-CCM members <u>2 weeks</u> before the meeting took place.
ATTENDANCE SHEET COMPLETED	X		An attendance sheet was completed by all CCM members, Alternates, and Non-CCM members present at the meeting.
DISTRIBUTION OF MINUTES WITHIN ONE WEEK OF MEETING	X		Meeting minutes should be circulated to all CCM members, Alternates and non-members within <u>1 week</u> of the meeting for their comments, feedback.
FEEDBACK INCORPORATED INTO MINUTES, REVISED MINUTES ENDORSED BY CCM MEMBERS*		X	Feedback incorporated into revised CCM minutes, minutes electronically endorsed by CCM members, Alternates and non-members who attended the meeting.
MINUTES DISTRIBUTED TO CCM MEMBERS, ALTERNATES AND NON-MEMBERS	X		Final version of the CCM minutes distributed to CCM members, Alternates and Non-members and posted on the CCM's website where applicable within <u>15 days</u> of endorsement.


\* Often CCM minutes are approved at the next meeting. Since many months can pass before the next scheduled meeting, electronic endorsement of the CCM minutes is considered to be a more efficient method for effective meeting management.

**GLOSSARY FOR ACRONYMS USED IN THE MINUTES:**

ACRONYM	MEANING
GFATM	Global Fund to fight against HIV, TB and Malaria.
CCM	Country Coordinating Mechanism
PR	Principal Recipient
NFM	New Funding Model
PDC	Proposal Development Committee
OSC	Oversight Committee
WtP	Willingness to pay
GMP	Grant Management Platform

To add an additional 'Acronym', highlight the entire row corresponding to the last 'Acronym' in the table. Right click on the mouse and select the 'Insert' menu item, then select the 'Insert Rows Below' option. Repeat as necessary to add additional rows

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