

Proceedings of the Fifteenth Meeting of CCM
held at 10:30 am on 27th May 2005

The Fifteenth meeting of the Country Coordinating Mechanism of Global Fund was held on the 27th May 2005 under the chairmanship of Secretary (Health). A list of CCM members present at the meeting is enclosed.

In his opening remarks, Secretary (H) welcomed all the members and took up the agenda items thereafter.

Agenda Item No. 1

Confirmation of the Proceedings of 14th meeting of the CCM

The proceedings of 14th meeting of the CCM were confirmed.

Agenda Item No. 2

Status of ongoing GFATM Projects – Presentation by concerned Program Officers of HIV/AIDS, TB and Malaria disease control programs regarding progress achieved in respect of Round 1, 2, 3 and 4 including status of disbursement and expenditure

The National Program Officers of HIV/AIDS, Tuberculosis and Malaria disease control programs circulated the status notes of ongoing GFATM projects of Round 1, 2, 3 and 4 to the all the members present. Similarly the representative of Population Foundation of India also circulated its status note on the progress achieved in respect of their project funded by the Global Fund in their Round 4 funding assistance. The comments on the notes, if any, were invited from the members, which would be taken for discussion as last agenda item of the meeting. No comments were received till the close of the meeting and progress reported is considered as noted.

Agenda Item No.3

Action Taken Note on the decision of the 14th CCM Meeting in regard to strategy for inviting 5th Round proposals;

Joint Secretary (RT) briefly explained the members in respect of the strategy adopted by CCM – India for inviting proposals for the Round Five. As decided in the 14th Meeting, a small Sub-Committee comprising of representatives from UNICEF, WHO, UNAIDS and an independent public health expert namely Dr. C.N. Deivanyagam was constituted. The Sub-Committee met on 28/2/2005, which decided as under:

- 1) That each Disease Programme Organizations/ Divisions would prepare concept papers and issue guidelines to the State Societies for inviting proposals for inclusion in the national proposal and also for stand-alone pilot project proposals by 10/3/2005. The States would also carry out consultative process to ensure information and technical support to applicants.

- 2) To request the bilateral and international agencies for providing necessary personnel/ technical support for preparing and screening of the proposals to the States or the Disease Programme Organizations/ Divisions;
- 3) To advertise in the leading newspapers and also to place on Central and State websites by 14th March 2005 requesting for furnishing the proposals through the consultative process of the State Societies to CCM or directly to Government of India by 25th April 2005;

This matter was for information of the members, which was noted by all.

Agenda Item No.4

Process followed for development of Country Proposal for GFATM Round 5

Joint Secretary (RT) informed about the process followed for development of Country Comprehensive Proposal for Round Five. A meeting had been convened by AS&DG, NACO to discuss the broad parameters of the national proposals for Round 5 for HIV/AIDS, TB and Malaria. These were shared with State Disease Control Societies for wider dissemination. Following the advertisement issued in the leading newspapers across the country during the last week of March 2005, 44 proposals were received by the stipulated date i.e. 25th April 2005 and 24 proposals were received late thereafter. Technical experts drawn from, WHO, UNICEF, USAID and FHI examined the proposals and made recommendations. A screening Committee was also constituted, which met on five occasions to consider the eligible proposals for inclusion in the National Proposal. Chairman CCM thanked the bilateral and international agencies that gave their technical support for examining the proposals and the members of the Sub-Committee for the work done.

Agenda Item No. 5

Consideration of Country Comprehensive Proposal for Fifth Round of Funding by the Global Fund

A Country proposal with the following components was put up for consideration.

1. TB Component: US \$ 25.020 million
2. Malaria Component: US \$ 26.525 million
3. HIV/AIDS Component: US \$ 231.860 million

Tuberculosis:

Dr. L.S. Chauhan, DDG (TB) presented a proposal for strengthening the RNTCP programme in three States namely Chhatisgarh, Jharkhand and Uttaranchal. The programme aims to sustain and strengthen services in these three states covering a population of 60.6 million from 2006-2011. The proposal aims to improve accessibility of programme and case finding in these states by inter-sectoral collaboration with other sectors outside of public health facilities such as private sector, NGO sector etc. The proposal also envisages the involvement of private practitioners in 139 districts of 11 States in the country in RNTCP – DOTS by the network of India Medical Association

(IMA). The total fund requested from the Global Fund for the period of five years is US \$ 25.02 million.

Malaria:

Dr. P.L. Joshi, Director, National Vector Borne Disease Control Program presented the proposal concerning the Malaria project targeting 131 towns in 19 highly malaria endemic states. The aim of the project is to reduce malaria morbidity and mortality in 96.7 million populations in these towns. The total fund required from the Global Fund was projected as US \$ 26.525 million. The proposal aims to reduce malaria morbidity and mortality in the 53.6-million project population by 50% by the year 2010; to increase access to diagnosis and treatment in high endemic areas with particular focus on construction sites, slum dwellers/ industrial estates and market areas with floating population, to manage the Malaria Transmission Risk Reduction through Integrated Vector Management mode (IVM), enhance awareness about malaria control and promote community, NGO and private sector participation in the programme and to frame and introduce model civic by-laws and building by-laws for prevention and control of vector breeding in project areas.

HIV/AIDS:

Dr. N. S. Dharamshaktu, APD, NACO presented the national proposal on HIV/AIDS on behalf of NACO. The proposal has two goals namely:

1. To expand HIV/AIDS prevention, care & support and treatment to Delhi and nineteen low- and moderate-prevalence states
2. To scale-up comprehensive HIV/AIDS care and support in Karnataka using a district-based continuum of care model based on a public-private partnership

The total budget for the proposal was projected as US \$ 231.860 million for five years. This includes US \$ 155.10 million and US \$ 68.80 million for goal 1 and goal 2 activities respectively.

The matter relating to financial parameters of the proposals was discussed. Most of the members suggested that the financial parameters should be in consonance with the national scheme.

From the HIV/AIDS proposal, members observed that apart from NACO, Karnataka Health Promotion Trust, CMAI and NISHTA (a consortium consisting of 7 Northern State AIDS Control Societies, VHAI and HLL), are suggested as principal recipients for HIV/AIDS proposal. Many members wanted clarifications from NACO with reference to their selection as Principal Recipients. Most of the members expressed reservations about the legal and organizational structure of these institutions. Members, therefore, suggested that NACO should have carried out an institutional assessment of the proposed Principal Recipients. In the absence of a formal institutional assessment it was decided to nominate NACO as Principal Recipient and CMAI, NISHTA, KHPT as Sub-Recipients. However, NACO should develop adequate protocols to ensure early and efficient transfer of funds to the proposed Principal Recipients.

In respect of unsuccessful proposals, which could not be included in the Comprehensive Country Proposal, members desired that a letter from the CCM Secretariat should go to all the unsuccessful applicants citing the reasons for rejection of their proposals.

Members also desired that a summary in respect of each of the HIV/AIDS, TB and Malaria proposals for Round 5 should be placed on the website of the Ministry of Health and Family Welfare

With the above observations, the CCM approved the proposals for inclusion in the comprehensive country proposal to be forwarded to the Global Fund for the Fifth Round of funding.

Agenda Item No. 6

Discussion on the CCM Assessment Report submitted by Future Group International on behalf of the Global Fund

Joint Secretary (RT) informed that on behalf of the Global Fund, a team of Future Group International carried out a comprehensive assessment of the CCM – India. Based on the responses received from the CCM members, the following issues were raised by the team in their assessment report.

- 1) Non-Representation of Religious/ Faith Based Organizations in the CCM
- 2) Development of documentation of consultation process by all the constituencies in CCM with their members
- 3) Written TOR (terms of reference)/ bylaws/ operating procedures of the CCM
- 4) Documented transparent process to:
 - a) Solicit and review submissions for possible integration into the proposal;
 - b) Nominate the Principal Recipient;
 - c) Oversee program implementation

On the issue of representation of Religious/ Faith Based Organizations in the CCM, members reiterated that in view of the secular and multi faith culture of India and with 6 major religions and different organizations representing each faith, it had not been felt necessary to have their representation in the CCM. However, it was agreed that the outcome of the meeting of Inter-Faith World Religious Council For Peace to be held on 18 – 19th June 2005 would be examined in this context.

As regards documentation of consultation process by the members in their constituencies, it was decided that members should to the extent possible attempt to formalize the consultation process in their constituencies.

In respect of items 3 and 4 above, it was observed that once the CCM Secretariat becomes fully operational the task of formalizing by-laws/ operating procedures etc. would be intimated to them and thereafter put to CCM for approval.

Agenda Item No. 7

Consideration of Regional Proposal for Fifth Round of Funding by the Global Fund

RCM proposal with the following components was put up for consideration.

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| 1. | Malaria Component: | US \$ 9.281 million |
| 2. | HIV/AIDS Component: | US \$ 44.080 million |

Dr. P.L. Joshi, Director, National Vector Borne Disease Control Program made a presentation on a comprehensive Regional proposal on malaria covering the South Asia region (including the countries of Bangladesh, India, Indonesia, Sri Lanka and Thailand). The goal of the proposal is promote a sub-regional mechanism in the development of evidence, based on standardized data collection techniques, to support the development of drug treatment policies that will result in diminished malaria morbidity and mortality in areas of high falciparum resistance. The total budget for the programme is US \$ 9.281million. The primary recipient is South East Asia Ministers Education Organization – Tropical Medicine and Public Health (SEAMEO-TROPMED) Network, Bangkok.

The UNDP then made a presentation on a comprehensive Regional Proposal on AIDS covering the South Asia region (including the countries of Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka). The overall goal of the project is to reduce HIV vulnerability and facilitate access to care among inter-country migrant populations, their families and communities in South Asia through strengthened regional capacity and collaboration. The time frame for the proposal is five years (2006-2010). About 10 million people, mainly inter-country migrant workers and their communities in South Asia will benefit directly, and indirectly, from the proposed initiatives. At the end of five years, the efforts will lead to strengthened regional systems, protocols, mechanisms and capacity as well as networks of governments, civil society organizations and others to provide HIV related services to inter-country migrant populations, their families and communities at source, transit and destination with a special focus on the undocumented and irregular migrants, many of whom are women. The services will include prevention, care and treatment. The total budget for the programme for five years is US \$ 44.08 million. The Principal Recipient is UNDP Regional Office, New Delhi and sub-recipients would be the national AIDS control organizations of participating countries.

Members of the CCM appreciated the initiatives and approved the recommendation of the proposals forwarding to the Global Fund to Fight AIDS, TB and Malaria.

The meeting ended with a Vote of Thanks to the Chair.

List of Members present in the CCM meeting

1. Shri P.K. Hota, Secretary (Health) – In Chair
2. Dr. S. Y. Quraishi, AS&DG, NACO
3. Shri Sanjiv Misra, AS&FA, Ministry of Health & F.W.
4. Dr. S.P. Agarwal, DGHS, Ministry of Health.
5. Smt. Rita Teatota, Joint Secretary, Ministry of Health & F.W.
6. Dr. S. P Aggarwal, Principal Secretary (Health), Govt. of NCT of Delhi
7. Shri I. V. Subba Rao, Principal Secretary (Health), Government of Andhra Pradesh
8. Fr. Tomy Kariyilkulam, Administrator, Bel-Air Hospital, Panchgani
9. Ms. Jacqueline Fuller, Advocacy Manager, Bill & Melinda Gates Foundation, New Delhi
10. Dr. P. Krishnamurthy, Director, APAC, Chennai
11. Mr. Harry Sethi, Director, FICCI - SEDF
12. Dr. Ramnik Ahuja, Consultant - Health, CII
13. Dr. Ruben Fdel Praco Deputy Country Coordinator UNAIDS.
14. Dr. Paramita Sudharto, WHO Representative
15. Ms. Merri Sinnitt, Deputy Director Health, USAID
16. Ms. Vidhya R. Ganesh, Chief HIV/AIDS Section, UNICEF.
17. Dr. Suneeta Singh, Senior Public Health Specialist, World Bank
18. Dr. S.C. Goyal, Secretary General, TB Association of India, New Delhi
19. Mr. Rayan Fernandes, Program Manager, SAHARA
20. Dr. Debjani Banerjee, Durbar Mahila Samanwaya Samiti, Kolkata
21. Dr. V. L. Muana, Director, SHALOM, Manipur
22. Dr. C.N. Deivanyagam, Chennai
23. Major General J Jayaram, Addl. DGAFMS (Medical Research),

List of Members not present in the CCM meeting

1. Joint Secretary (FB), MOF, DEA, New Delhi
2. Shri K. K. Abraham, President INP+
3. Health Commissioner and Chairman, Bureau of Public Enterprises, Government of Bihar,
4. Commission & Secretary (Health), Government of Assam
5. Principal Secretary (Health & Family Welfare), Government of Gujarat
6. Country Representative, UNFPA,
7. Sr. Health Adviser, DFID - India
8. DG, ICMR, New Delhi
9. Director, AIIMS, New Delhi,
10. President, ASSOCHAM, New Delhi

List of Invitees

1. Dr. P.L. Joshi, Director, NVDCP.
2. Dr. L.S. Chauhan, DDG (TB), DGHS
3. Dr. N.S. Dharamshaktu, Additional Project Director, NACO
4. Ms. Maxine Olson, UN Resident Coordinator
5. Shri Ramesh Chandra, Country Director, UNOPS & LFA
6. Dr. N. L. Kalra, Consultant & Expert (Malaria), NMEP
7. Dr. Krongthong Thimasarn, Acting Regional Adviser, Malaria, WHO SEARO

8. Ms. Anita Abhayankar, LFA to Global Fund
9. Dr. G. Pramod Kumar, UNDP Regional HIV Prevention Program Specialist
10. Dr. R. P. Shrestha, Consultant, UNDP Regional Office
11. Dr. R. S. Sharma, Joint Director, NVBDCP
12. Dr. Prabha Aroa, Assistant Director, NVBDCP
13. Dr. Kumudha Amaldas, Joint Director (Programme), Population Foundation of India
14. Dr. Marry Verghese, Project Director (HIV/AIDS: GF), Population Foundation of India
15. Mr. K.K. Gupta, Assistant Director (Finance)/ NACO