

Draft Minutes

1st Communicable Diseases Executive Working Group Meeting

19th of December 2019

Office No. 47, Ministry of Health and Sports

1) Opening

Dr Sid Naing of MSI opened the meeting on behalf of Dr Thar Tun Kyaw, Director General, Office of the Union Minister, Ministry of Health and Sports. All 15 members were represented in the meeting, noting that Daw Nu, the EHO representative is a temporary member until a decision is made by the EHO constituency on representation. Hence quorum was reached. Dr Sid Naing welcomed all members and asked for endorsement of the agenda that had been shared in advance of the meeting. After the approval of the agenda, he asked all members to declare any potential conflict of interest with regards to the agenda items.

The following declared a conflict of interest due to their role of SR of the Global Fund grants with regards to discussion of Global Fund reports from PRs under agenda item 8: Dr Sid Naing of MSI; Dr Stephan Paul Jost of WHO, Daw Nwe Zin Win of PGK, Dr Thandar Lwin of MoHS, Daw Htwe Htwe Myint of Myanmar Positive Women Network (MPWN). The members with a declared Col committed to recuse themselves in case discussions during the meeting would touch on issues directly related to their funding or other key interests of their organization or person and that they would not vote or try to influence the decisions in such cases.

2) Review of ToR of CD ExWG

Mr Ole Hansen of the Secretariat presented the draft ToR that had been shared with members 24 days in advance for their perusal. Part of the draft ToR outlined the CD ExWG oversight responsibilities in case it takes on the role of Myanmar CCM. Members' responsibilities with regard to contribution to the work of the CD ExWG; the selection of Global Fund PRs; approval and submission of Global Concept Notes; and coordination, consultations and feedback within their respective constituencies were emphasised. Please see the draft ToR here:

https://drive.google.com/open?id=1LBSDDrA2qH2SIpunCkZkOePs0O-8_fNV.

Discussion

- Members gave the following comments on the ToR:
 - The members agreed that the full CD ExWG including all members take on the role of Myanmar CCM and Global Fund oversight body.
 - The ToR should be organised in tasks related specifically to Global Fund activities including task related to the CD ExWG in its role of Myanmar CCM and Global Fund oversight body in one part and all other more general communicable diseases tasks including coordination in another part.
 - The ToR should outline in more specific terms the links to the HSS ExWG.

- Observers beyond the LFA and the PCE including alternates should only be allowed to attend the meetings in very special cases and will require special approval of the Chair. However, to secure some level of continuity Skype or other type of audio links should be set up for meetings so that alternates and members unable to attend can listen in on the meetings. The streaming should at times where confidential issues are discussed be put on pause.
- It should be emphasised in the ToR that the CD ExWG Secretariat should be based in Nay Pyi Taw.

Following the discussion of the ToR and the acceptance of the CD ExWG as Myanmar CCM and Global Fund oversight body, Mr Hansen presented the draft CD ExWG Oversight Plan for discussion and eventual endorsement. Please see the draft CD ExWG Oversight Plan here: https://drive.google.com/open?id=1Ox0m_mTFShJWq9yWQdjU1WZ8QftWPhL.

Discussion

- The oversight responsibilities and the oversight plan were endorsed with the caveat that the following changes were made:
 - It should be clarified that the CD ExWG would not replace non-Global Fund grants' governance and oversight mechanisms, but that the CD ExWG would still include review of non-Global Fund funded communicable diseases activities during oversight visits. In such cases the boards and/or other governance mechanisms of those programmes would be informed in advance by the CD ExWG chair.
 - Dissemination of oversight visit findings and recommendations should be included in the plan.
- Members committed to assist with follow-up on oversight action points and recommendations.
- Members agreed to fill in and sign the document outlining their specific skills that can contribute to the Global Fund oversight responsibilities of the CD ExWG.

Members were also asked to endorse the membership, Dr Thar Tun Kyaw as Chair, Dr Sid Naing as Vice Chair and Dr Thandar Lwin as Secretary of the CD ExWG. In addition, the Secretariat work tasks and the suggested WHO technical support to the CD ExWG and to the MHSCC and related bodies were presented for comments. Please see more information here: https://drive.google.com/open?id=1muvwZpynAoBnGY9PK5otULxLRA_Phirj.

Discussion

- Members endorsed the membership, the suggested Chair, Vice Chair and Secretary.
- The Secretariat work tasks were accepted with a proposal to review the job descriptions of the UNAIDS based national positions.
- Dr Stephan Jost, WHO stressed that a key function of WHO TA for 2020 should be to build capacity in MoHS to prepare MoHS to take on in full all secretariat tasks. WHO would be fully committed to deliver on the tasks proposed should Global Fund funding be approved to support the TA. Mr Ben Zinner of USAID agreed with the proposed TA and asked to add to the phased handover steps the development of a proposal on what human resources and positions are needed for the MHSCC Secretariat and who would potentially be able to fund the secretariat. Dr Thar Tun Kyaw, DG MoHS, guided that for now the current secretariat should function as secretariat for both CD ExWG and MHSCC and future set-up of an MHSCC secretariat will then depend on the proposal mentioned by Mr Ben Zinner.

Action Point

- Mr Ole Hansen to:
 - Revise the draft CD ExWG ToR as per the comments and share with members prior to 25 December for their final review and approval.
 - Update the oversight plan as per comments received, finalise and file.
 - Reshape Secretariat tasks into a ToR for the Secretariat including that the Secretariat would be based in Nay Pyi Taw.
 - Add to the phased handover steps in the WHO TA proposal, the development of a proposal on what human resources and positions are needed for the MHSCC Secretariat and who would potentially be able to fund the secretariat.
- UNAIDS to review and possibly revise the job descriptions of the national secretariat staff that are supported by Global Fund through UNAIDS.
- The WHO technical support to the CD ExWG will be needed, and steps to secure this should be taken.
- The proposed WHO technical support to the larger MHSCC structure as well as the details of an MHSCC Secretariat ToR were referred to the MHSCC/MHSCC Chair for decision.

3) Upcoming selection of PRs

Mr Hansen explained the responsibility of the CD ExWG to select the PRs for the next Global Fund cycle for upcoming Global Fund grant application. This is the second of six eligibility requirements. Given the short time line before the grant application deadline, there are certain limitations to the process of selection.

Discussion Points

- Members asked that the current PRs submit a concept note/application explaining to the CD ExWG how they will fulfil the PR role in the next Global Fund cycle and argue why they believe that would be the best selection on the market in Myanmar.

Action Points

- UNAIDS are to find previous PR concept notes/applications in their Secretariat records. The request to PRs to prepare and submit concept notes/applications including what sections must be included should be based on these previous documents. The PRs are consequently requested to submit to the CD ExWG within a timeline and in advance of the next CD ExWG meeting for the CD ExWG to decide on continuing with the current PRs or not.

4) CD ExWG generic work plan and budget for next 3 years

Dr Tun Tun Naing presented the generic work plan and the budget for the next 3 years. For more information kindly see here:

<https://drive.google.com/open?id=1MuLiYOeBkC28OefBXqbeiotzkOm2aET0>

Discussion Points

- The work plan including the planned RAI2E meeting on 24 January was approved.
- The budget was approved with the caveat that the rent currently budgeted for payment to UNAIDS for the next 3 years is revised as per plans for moving the Secretariat to Nay Pyi Taw.

Action Points

- Dr Tun Tun Naing to revise the budget as per the comments and submit to the Global Fund for their review.

5) Eligibility and Performance Assessment

Mr Ole Hansen presented the Secretariat's plan for and status of the Global Fund Eligibility and Performance Assessment (EPA). With the CD ExWG meeting organised 19 December, the plan is slightly delayed, but otherwise on-track and expected to be submitted in time for Myanmar to be eligible to submit the Global Fund Concept Notes on 23 March. It was noted that the Secretariat held a meeting with representatives of civil society constituencies on 5 November to explain the EPA process and the requirements for civil society representation. It was stressed that some of the civil society constituencies still needed to submit their workplans for internal consultations and feedback. For more information kindly see here: https://drive.google.com/open?id=1ZMrNLmGAOGOLYCOZPwq14_BmrvlsMuQO

Discussion Points

- Members agreed to the plan including the submission of signed Col forms from members and civil society constituencies were encouraged to support the process by submitting the needed workplans to the Secretariat.

Action Points

- Civil society constituencies to submit needed workplans.
- Secretariat to continue collecting needed documentation and submit the EPA once all documentation is received including all needed signatures on Col forms from members and civil society workplans.

6) Code of Ethical Conduct and Col Policy

The Code of Ethical Conduct and Col Policy was noted by the members and they committed to fill in and sign the Conflict of Interest and Code of Ethical Conduct forms and submit to the Secretariat. For more information kindly see here: <https://drive.google.com/open?id=12u1KnltbwvvcqnUUo0vzxi07sAGyuDEm>.

Action Points

- Members to fill in and sign the Conflict of Interest and Code of Ethical Conduct forms and submit to the Secretariat if not already done.

7) Oversight Visit to Bago

The oversight visit plan and budget for a visit to Bago in January 2020 was discussed.

For more information kindly see here: <https://drive.google.com/open?id=1qE8qZQhMljgg4u-UNwHPn1S8lbgxE-pX>

Discussion Points

- Members agreed to doing the oversight visit on 20-21 January 2020. It was suggested to review and possibly adjust the route for time saving purposes if appropriate accommodation, lunch and dinner options allow.

Action Points

- Secretariat to revise the route if possible and convenient and contact partners in Bago and organise the oversight visit on 20-21 January 2020.

8) PR Implementation Reports

UNOPS PR reported on financial issues for the period January till September 2019 and on programme issues for January till June 2019. Among key tasks and achievements were:

- ATM List of Health Products (LOHP) 2020 procurement plan prepared and approved.
- All 2019 key health product and commodities for 3 programme have been delivered completely.
- All the 3 programme reviews have been completed.
- National Strategic Plans for three diseases (2020-2025) are in the stage of finalization.
- IBBS for FSW and MSM are ongoing.
- Subnational planning for Sagaing in HIV program is completed and Yangon, Ayeyarwaddy, Mandalay and Bago for TB program is ongoing.
- TB Screening algorithm for Yangon 5 townships is revised to capture missing cases.
- RSC and CSO meetings were conducted successfully.

The estimated grant absorption is:

Disease Grant	Approved Budget	Estimated Expenditure	Absorption Rate
HIV	27,364,369	17,925,043	66%
TB	24,754,403	16,980,194	69%
RAI2E- MM	38,628,415	31,912,361	83%
RAI2E Regional-MM	9,016,271	7,365,777	82%
Regional TB - MM	366,481	193,503	53%
TOTAL	100,129,939	74,376,878	74%

Among the reasons for the variance are sudden reprogramming to address the closure of PEPFAR and Challenge TB activities and the long delays in approval of these changes as well as approval of expansion of TB sites for SRs.

UNOPS in consultation with the national programmes have suggested the following potential reinvestment areas for HIV and TB:

- Buffer for Health commodities.
- Improvement of ART centres and decentralized sites that need more resources.
- Automatic Dispenser machine for 70 MMT sites beyond the current 3-4 sites.
- Community Based Screening training to volunteers.
- HIV Sub National Planning can be expanded to Mandalay.
- Awareness raising activities.
- Additional Xpert cartridges requirement to follow updated diagnosis algorithm.
- TOT and multiplier for dissemination of new DS TB guideline.
- Laboratory additional requirement for NDRS survey.
- Additional digital X-rays and GeneXpert machines according to revised DSTB guideline, especially for Yangon region.
- Share cost for warehouse extension.
- TB Sub National Planning development for Sagaing and Kachin.
- Buffer for Anti-TB first line drugs if there is gap in support from government.
- Expansion of mSupply, Asset software.
- DQA Dashboard.

The following potential reinvestment areas were suggested for malaria:

- ICVM refresher training for increasing trainings up to two-thirds of total volunteers. Currently, this training is planned to cover one-third of total volunteers in 2020 because of budget constraint in last reprogramming.
- Volunteer evaluation meetings at the township in every quarter. Currently the meeting is planned six-monthly in 2020 because of budget constraint in last reprogramming.
- Increased malaria elimination townships from 211 to 261 townships in 2020 and malaria elimination training will be provided to additional 50 townships.
- Refresher malaria elimination trainings for townships where BHS are trained in 2018.
- Refresher training for the new MCBR/MCBS application for the volunteers.
- Expansion of hotspot management activities to townships with malaria cases between 1,000 and 500.
- Expand volunteer coverage and private GP trainings.
- WHO to hire 12 project coordinators for hotspot areas.
- Expansion of mSupply.
- DQA Dashboard.
- Asset software.

Almost all indicators for HIV and TB are on track and close to the targets with the exception of IPT. The poor performance in TB prevention pulls the grant rating down to B1. However, the indicator will be modified so that the denominator will only include eligible people living with HIV. It was noted specifically for TB that the community referral has improved significantly. Unfortunately, the performance on MDR is still not satisfactory with notification and treatment enrollments not doing sufficiently well.

In Malaria there are problems with four indicators. The indicator Continuous LLIN is at less than half of the target due to lack of staff knowledge in selection of target population at the

sub-centre level. The indicator for testing in the public sector is not doing well, but this is partly caused by late reporting and the fact that targets were doubled in 2019. Finally, it was pointed out that the indicators for case and foci investigation are low due to staff's limited understanding of the processes involved in case and foci investigations.

Due to the above-mentioned issues with select indicators the grant rating for all three diseases for January till June 2019 were at B1.

UNOPS PR provided in addition some key issues for the CD ExWG consideration and information:

- As can be seen from the budget absorption, maximum savings are coming from the National Programmes, who are requested to ensure optimum budget absorption. Otherwise, the funds will be lost.
- The 600k MoHS capacity building plan has been submitted to the GF for their approval.
- ICMV activities under MHAA reprogramming expansion township (Shwe Kyin) is reallocated to NMCP.
- The progress of TB regional grant is not optimal and requires guidance and close monitoring for implementation of planned activities by NTP.
- NTP and WHO need to complete DRS survey at the earliest.
- Potential delays in procurement of 2020 commodities due to late submission and approval of HIV LOHP and lead times for delivery and buffer.
- Limited space at some of the ART sites expected to receive more patients from I/NGOs (ART Transition Plan).
- The chronic issue of HR gap continues to hamper the accelerated expansion plans of the 3 programmes.
- eHealth architecture blueprint version 3 is still under process due to the limited availability of expertises (OIG AMA no. 4).
- Final release of Community Health Worker policy by MOHS is awaited (OIG AMA no. 2).

Save the Children PR (StC) provided a presentation that complemented the presentation on programme achievements and financial analysis given at the last MHSCC ExWG meeting in August 2019. StC focused on the grant ratings and a comparison of the performances of SRs in 2nd half of 2018 and 2019. The grant rating for HIV for the first half of 2019 was A2. The main issues here were that there was some underachievement on prevention indicators on PWID and MSM. It should however be noted that the number of individuals reached were actually more or less the same but that the targets have been doubled. For TB the grant rating is B1. The reason for this is primarily that the target for the indicator on community-based care was not reached.

StC then showed graphs of SRs comparing the absorption rates with the average achievement for January till December 2018 and January till June 2019 for the three diseases. Specifically, for HIV the implementation updates were given as follows:

- ToT for NAP RO/TL on HIV Prevention Enhanced Outreach Strategy was organized in August 2019. Subsequently the EO manuals were endorsed by MoHS in November 2019.
- The first CBS Multiplier Training in Mawlamyaing, Mon State was completed on 12 December 2019 and remaining sessions will be organized in January 2020 in Yangon, Mandalay and Kachin.

- MdM enrolled and provided Hep C treatment to 144 PWID (56 from MKN, 60 from MG and 28 from Hopin) during the period of July to September 2019.
- Provision of Hep C treatment in Hpakant and in MKN and LSO Prisons by AHRN is still pending due to MoU renewal process.

Finally, StC explained that in order to monitor, assess and manage SRs performances, a set of Key Performance Indicators (KPIs) have been developed and implemented. StC will report on the KPIs at the next CD ExWG meeting.

Discussion Points

- Dr Thandar Lwin, DDG Disease Control directed that a solution to get technical assistance on eHealth should be discussed with Daw Aye Aye Sein, DDG Admin & Finance. It was mentioned that WHO Regional Adviser on eHealth, Mr Mark Landry has offered to help identify additional experts given that previous consultants contacted have declined.
- With regard to the CHW policy, the translation into Myanmar has been done and was put up for MoHS approval on 16 December 2019.
- The DDG also guided that PRs should meet with Dr Win Naing, DDG Procurement and Supply Management to discuss a more integrated and strategic approach to Global Fund support to procurement and storage/warehouses. This issue could also in collaboration with PSM and Chemonics be brought up at the next HSS ExWG meeting or in the HSS TSG on Procurement and Supply Chain Management. Mr Ben Zinner, USAID offered to assist on this. With regard to procurement of drugs and avoiding stock-outs, the PR is confident that there will be no stock-outs in 2020, but they requested assistance in ensuring future approval processes particularly with regards to HIV and procurement of methadone and ARVs are managed faster and more smoothly.
- Mr Ben Zinner, USAID asked that viral load testing results are included in the reports to the CD ExWG in the future.
- Dr Thandar Lwin, DDG Disease Control directed UNOPS PR to ensure savings from MHAA of USD 100,000 that are suggested to be reallocated to NMCP are discussed at the Malaria TSG and that the reallocation eventually is passed through CD ExWG for approval.

Action Points

- PR to discuss eHealth TA solution with Daw Aye Aye Sein, DDG Admin & Finance.
- PR to work with Dr Win Naing, DDG Procurement and Supply Management, Chemonics and USAID to develop a more integrated and strategic approach to Global Fund support to procurement and storage/warehouses.
- MOHS to work towards a solution to get faster approvals of procurement of particularly methadone and ARVs, but also commodities within the TB programme.
- PRs to include viral loads in the reports to the CD ExWG.
- UNOPS PR to submit to the Malaria TSG proposal for reallocation of USD 100,000 from MHAA savings.

9) AoB

The suggestion by the Global Fund to conduct CCM refresher training for CD ExWG members was presented.

Discussion Points

- Members agreed to doing the CCM training visit on 27 January 2020 in Yangon.

Action Points

- Secretariat to inform the Global Fund of the CD ExWG's acceptance of training on 27 January 2020.