

# Electronic Report to the Board

## Secretariat's Recommendations on Funding from the COVID-19 Response Mechanism

GF/B45/ER07

### **Board Decision**

Purpose of the paper: This document proposes the following decision point:

GF/B45/EDP08: Approval of the Secretariat's Recommendation on Funding from the 2021 COVID-19 Response Mechanism<sup>1</sup>

*Document Classification: Internal.*

*Document Circulation: Board Members, Alternate Board Members, Constituency Focal Points and Committee Members.*

*This document may be shared by the Focal Points within their respective Board constituency. The document must not however be subject to any further circulation or otherwise be made public.*

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<sup>1</sup> The Secretariat recommends the approval of funding from the 2021 COVID-19 Response Mechanism for Ghana up to an amount of US\$39,032,779 and Kenya up to an amount of US\$71,123,060.

## Decision

**Decision Point: GF/B45/EDP08: Approval of the Secretariat's Recommendation on Funding from the COVID-19 Response Mechanism**

The Board:

1. Notes its decision in GF/B44/EDP18, which requires the Secretariat to recommend to the Board, for its approval, any COVID-19 Response Mechanism ("C19RM") awards exceeding US\$35 million, as measured in aggregate by country (not including any funding awarded for COVID-19 commodities through fast-track investments or C19RM funding awarded in 2020);
2. Approves the funding recommended for each country, as listed in Table 1 of GF/B44/ER07; and
3. Delegates to the Secretariat authority to redistribute the overall upper-ceiling of funding available for each country among its constituent grants in accordance with the previously approved principles under GF/B44/EDP18.

**This decision does not raise new, material budgetary implications for operating expenses.**

# Executive Summary

## Context and Input Received

### Secretariat's Recommendation on Funding from the COVID-19 Response Mechanism (C19RM)

The Secretariat recommends the approval of funding from C19RM for Ghana, up to an amount of US\$39,032,779, and for Kenya, up to an amount of US\$71,123,060.

The country awards in Table 1 are recommended by the Secretariat following internal review processes, which included input from a C19RM Technical Advisory Group of relevant ACT-Accelerator partners (CTAG) and GAC partners.

For each country funding request, the Secretariat reviewed (i) the strategic focus of the investment; (ii) alignment with WHO technical guidance, the C19RM Technical Information Note, the National Strategic Preparedness and Response Plan for COVID-19 and guidance from partners on alignment with the HIV, TB and malaria mitigation plans in the country; (iii) linkages with underlying grants and service disruption for human immunodeficiency virus (HIV), tuberculosis (TB) and malaria programs; (iv) alignment with principles of stakeholder and community engagement, gender equity and human rights; (v) availability of appropriate procurement channels (global availability and sourcing implication of the health products requested to be procured), especially related to supply-side aspects, including the availability of scarce products; (vi) the technical soundness of the request and expected outcomes; (vii) the feasibility and assumptions of proposed activities and the associated budget, including performance and absorption of C19RM 2020 awards; (viii) complementarity/potential duplication with other available sources of funding; (ix) residual risks, including associated fiduciary risks related to implementation arrangements and/or interventions, and mitigating and assurance measures to ensure that funds are used for intended purposes; and (x) value for money.

A list of documents per country to substantiate the Board decision is provided below.

- C19RM Funding Request;
- C19RM budget (as revised for final recommendation for Board approval, if applicable);
- List of health products (as revised, if applicable);
- National Strategic Preparedness and Response Plan for COVID-19 and budget; and
- Other essential support documents of the C19RM Funding Request:
  - Quantification or needs assessment for COVID-19 health products;
  - COVID-19 National Testing Strategy (where available);
  - C19RM Health Product Management Template (HPMT);
  - C19RM Funding Landscape Table;
  - HIV, TB and malaria program mitigation plans (where relevant);
  - Civil Society suggestions for inclusion in the C19RM Full Funding Request.

All relevant documents containing the Secretariat's reasons for its recommendation to the Board have been made available on the Governance Extranet and are accessible through these links for [Ghana](#) and [Kenya](#).

## Input Sought

The Board is requested to review the Secretariat recommendation and approve, on a 'no objection' basis, the decision point GF/B45/EDP08.

**Table 1: Secretariat's Recommendation on Funding from C19RM<sup>2</sup>**

Please note that each country name is [linked](#) to the extranet site where relevant supporting documents are available for review.

Country/ Multicountry	Grant name	Currency	C19RM 2020 carry-over amount <sup>3</sup>	Previously approved C19RM 2021 award <sup>4</sup>	C19RM 2021 recommended amount for Board approval	Total C19RM 2021 funding	% of 2020-2022 allocation	Total C19RM 2021 funding plus C19RM 2020 carry-over	C19RM Unfunded Demand
<a href="#">Ghana</a>	GHA-C-CHAG	US\$	235,770		2,717,392	56,674,028	25.00%	61,537,668	22,203,507
	GHA-C-MOH	US\$	3,846,919	17,641,249	27,072,881				
	GHA-H- WAPCAS	US\$	780,950		634,284				
	GHA-M-MOH	US\$	0		8,608,222				
<a href="#">Kenya</a>	KEN-H-KRCS	US\$	4,978,504	6,229,652	10,543,147	102,271,604	24.63%	131,067,445	49,764,717
	KEN-H-TNT	US\$	5,093,996		6,915,191				
	KEN-M- AMREF	US\$	2,435,652		3,792,053				
	KEN-M-TNT	US\$	45,454		838,952				
	KEN-T- AMREF	US\$	4,162,589	12,459,592	38,326,556				
	KEN-T-TNT	US\$	12,079,646	12,459,301	10,707,161				

<sup>2</sup> The C19RM Investment Committee recommends C19RM Full Funding Requests awards of more than US\$35 million to the Global Fund Board for approval. This amount, measured in aggregate per country, does not include any funding awarded through the C19RM Fast-track process or through C19RM in 2020. The C19RM Investment Committee may also recommend awards under US\$35 million to the Global Fund Board for approval where it determines that the non-health product components of an award are of a nature and scale which raise significant concerns about risk and complexity.

<sup>3</sup> Estimated funds remaining from C19RM 2020 awards previously approved by the C19RM Investment Committee and carried over to this new award.

<sup>4</sup> This includes Secretariat approved Fast-track and Full Funding awards, as well as awards previously approved by the Board.

# Summary of the Secretariat's Funding Recommendations

- i. **Ghana: Ministry of Health (GHA-C-MOH, GHA-M-MOH), West Africa Program to Combat AIDS and STI (WAPCAS) (GHA-H-WAPCAS), Christian Health Association of Ghana (CHAG) (GHA-C-CHAG)**

## 1.1 Background and context<sup>5</sup>

From the first detection of COVID-19 cases in Ghana in March 2020 until 13 June 2021, the country recorded 95,259 confirmed COVID-19 cases and 794 deaths. Over 70 percent of the epidemic is focused mainly in two regions, Greater Accra and Ashanti. Disruption of HIV, TB and malaria programs is clearly evident against a number of indicators. The number of notified cases of all forms of TB decreased by 6 percent; the proportion of suspected malaria cases that receive a parasitological test at public sector health facilities dropped by 17 percent and the proportion of confirmed malaria cases that received first-line antimalarial treatment at public sector health facilities has reduced by 21 percent; and percentage of pregnant women who know their HIV status decreased by 6 percent. It is important to note, however, that Civil Society Organizations performance strengthened during the initial COVID-19 period as TB notifications from Civil Society Organizations rose by 109 percent. In May 2020, the Government of Ghana adopted a medium-term plan, the National Strategic COVID-19 Response Plan: 2020-2024. In this plan, the government intends to increase the number of COVID-19 testing sites, deploy alternative technologies for testing, improve laboratory quality assurance, improve containment and case management, and sustain funding of isolation and quarantine facilities.

**C19RM 2020 Awards.** Ghana received US\$16,214,504 C19RM 2020 funding with the absorption rate estimated to be at least 70 percent on 30 June 2021. The underspend is mainly due to deliveries not yet reported or taking place later, and implementation of a vulnerability assessment to ensure targeted and effective community responses as a requirement to the use of funding. The remaining US\$4,863,640 from C19RM 2020 will be carried over to C19RM 2021.

**Funding landscape<sup>6</sup>.** The costs of strategic priorities in the National Strategic COVID-19 Response Plan for the period 2020 to 2024 are estimated at US\$1,386 million. The Government of Ghana has provided US\$104 million in the 2021 budget for the COVID-19 health response and US\$162 million for operational and procurement activities related to the COVID-19 vaccine program, the latter to be financed through concessional and non-concessional external loans, mainly from the World Bank. For 2020-2022 funding, the development partners have committed US\$680 million towards the COVID-19 response, of which US\$534 million or 79 percent is committed for the 2021 financial year. 65 percent of the external funding is comprised of US\$445 million in loans from the World Bank Group. Other development partners are projected to provide US\$234 million. 48 percent of the US\$1,415 million which partners are expected to provide as support to the health sector in 2020-2022 will go towards the COVID-19 response. The Full Funding Request award is additional and coordinated with existing resources. Close cooperation with USAID, GAVI and the World Bank identified certain oxygen support, laboratory and diagnostic equipment that were being provided by other sources and helped to avoid duplication.

## 1.2 Strategic focus and prioritization of C19RM 2021

Ghana's C19RM 2021 Full Funding Request highlights critical interventions and procurements as essential components of the national response to COVID-19. These interventions will contribute to the efforts to contain the increasing spread of COVID-19 as well as to mitigate disruptions of HIV, TB and malaria programs, including for communities and key populations. Ghana received a US\$17,614,249 C19RM 2021 Fast-track award which

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<sup>5</sup> Data and statistics from Ghana's C19RM 2021 Full funding request.

<sup>6</sup> Data from Ghana's C19RM 2021 Full funding request

invested in immediate Personal Protective Equipment (PPE) and SARS-CoV-2 diagnostics needs, as well as provision of essential health products in anticipation of surge planning including risk of escalation of critical and severe cases should a third wave of COVID-19 infections emerge. The Fast-track award includes 20 to 40 percent of the projected COVID-19 health products needs to respond to the surge and manage severe and critical cases. It aims to support distribution, site preparation, installation support, utilization and maintenance of medical oxygen equipment. The Full Funding Request complements the Fast-track award, C19RM 2020 award, and other funding sources, and includes procurement of antigen rapid diagnostics tests (Ag RDTs) and Polymerase Chain Reaction (PCR) tests to expand diagnostics and cover testing capacity in preparation for the third wave. The Secretariat recommends the following activities to be prioritized for immediate award in line with the three Board categories as outlined below:

**a. Mitigating the impact of COVID-19 on HIV, TB and malaria programs:**

- The proposed HIV interventions will address HIV treatment adherence challenges in the COVID-19 context by adapting its differentiated service delivery approach, strengthening multi-month dispensing, integrating virtual interventions, supporting viral load testing, and meeting targets through expansion of community services, including for key populations. In addition, investments will support a comprehensive and integrated human rights program. They also include HIV self-testing through virtual interventions, improved data generation on viral load testing, and increased capacity of civil society organizations to conduct community outreach and home visits.
- The proposed TB interventions will apply bi-directional COVID-19 and TB screening/testing and contact tracing for TB patients, including in prison settings, building on the Civil Society Organizations case notification component of the 2020-2022 TB grant by providing sufficient Personal Protective Equipment (PPE) and additional resources to increase community outreach. The investments will increase service availability of TB diagnostics by increasing testing capacity in high volume sites with an additional 21 GeneXpert machines and increase availability of diagnostics in sites with less accessibility through the sputum transport system.
- The proposed malaria interventions address COVID-19 challenges through the provision of Personal Protective Equipment (PPE) for 2022 and 2023, support to district level staff to conduct supportive supervision and for healthcare workers to increase community outreach, as well as improved data availability for timely monitoring of malaria services. The investment will also ensure full implementation of seasonal malaria chemoprevention and insecticide treated nets (ITN) campaigns in 2021 and address seasonal malaria chemoprevention gaps in early 2022, for which operational costs have increased due to COVID-19 adaptations.

**b. Reinforcing the COVID-19 national response:**

- The proposed investments will focus on severe and critical COVID-19 cases. Adequate medical and psychosocial care for COVID-19 cases will be provided by filling some of the essential gaps in health and diagnostic equipment and ensuring their utilization through skills gap training. The proposed investments will be used to procure adequate health products for COVID-19 diagnostics including 1.2 million antigen rapid diagnostic tests (Ag RDTs) and over 60 thousand Polymerase Chain Reaction (PCR) reagents for confirmatory tests using GeneXpert equipment. Such investments will also enable the distribution, site preparation, installation support, utilization and maintenance of medical oxygen equipment that was procured with approved funds under the C19RM 2021 Fast-track process. Psychosocial support through Civil Society Organizations services will also be provided, including support for gender-based violence to key and vulnerable populations, extending to the general population affected by COVID-19 within the communities.
- The proposed investments also focus on managing community spread of COVID-19. Personal Protective Equipment (PPE) and other infection prevention and control materials will be procured for health workers through 2022-2023, including volunteers and other cadres working directly in the communities. Such investments will complement the Personal Protective Equipment (PPE) procured for 2021 with funds approved through the C19RM 2020 award and the C19RM 2021 Fast-track. With these funds, 1.7 million FFP2/N95 masks, 5.3 million surgical masks as well as hand sanitizers and other eligible Personal Protective Equipment (PPE) will be procured for infection prevention and control. Community engagement will be a key focus of this award, leveraging existing Civil Society

Organizations structures, especially for HIV, TB and malaria for COVID-19. Surveillance, testing and triaging for COVID-19 will also be extended to the community level. The investment will reinforce risk communication at various levels with the assessment of misinformation and rumours, design and production of relevant social behaviour change communication materials and targeted dissemination, with increased focus on key and vulnerable populations.

**c. Urgent improvement to health and community systems:**

- The funding will support the strengthening of COVID-19 reporting systems within the context of national surveillance of reportable diseases to avoid silo creation. The investment will utilize proven digital platforms (namely SORMAS) to improve COVID-19 surveillance, specifically, contact tracing. Beyond COVID-19, the platform will be utilized to enhance the integrated infectious diseases outbreak surveillance. This investment has been prioritized to scale up real time data reporting from 260 districts, including linking laboratories, hospitals, and health facilities, as well as connecting with targeted community-based reporting and surveillance.
- Health products and waste management systems will be strengthened to address gaps in medical waste management system. The procurement of two autoclaves will allow Ghana to manage the increased volume of medical wastage from COVID-19.
- Community-led systems have also been prioritized in this award aiming to build capacity and expand platforms to ensure better engagement to fight COVID-19. The investment will support community monitoring, sensitization, and engagement through community-based organizations.

**Implementation arrangements.** The implementation of interventions and activities will be split between three Principal Recipients: Ghana's Ministry of Health (MoH), West Africa Program to Combat AIDS and STI (WAPCAS), and Christian Health Association of Ghana (CHAG). Procurement will be initiated by the MoH and done through wambo.org or, where approved by the Global Fund Secretariat, the MoH procurement system. Storage of commodities procured via the Global Fund procurement system will be at the Imperial Health Sciences warehouse in Tema and at the Temporal Central Medical Stores for commodities procured locally.

**C19RM Assurance and Risk Mitigation.** An effective supply chain system, supported by the Global Fund and USAID, will manage COVID-19 health products to the last mile. To mitigate the risk of ineffective utilization of antigen rapid diagnostics tests (Ag RDT) and Polymerase Chain Reaction (PCR) tests through GeneXpert equipment, procurement will be conditioned to the submission of a comprehensive plan for use and rollout of antigen rapid diagnostics tests (Ag RDT) and detailed technical specifications of the GeneXpert machines to ensure it is WHO-compliant for COVID-19 and TB testing. C19RM investment will also guarantee External Quality Assurance for COVID-19 testing. Access to US\$3 million to support malaria insecticide treated nets (ITN) and seasonal malaria chemoprevention 2021-2022 campaigns for COVID-19 adaptation requires conducting a funding gap analysis, taking into consideration efficiencies in program implementation, grant savings, and additional resources from the government and/or partners. Funding to implement a comprehensive multi-sector program to address increased gender-based violence and intimate partner violence since COVID-19, across Principal Recipients, requires Global Fund acceptance of a detailed proposal. Funding for activities that strengthen, or scale-up reporting of COVID-19 related data (including epidemiological or service data) requires submission of an action plan that highlights the coordinated approach to implementation across all grant recipients. Lastly, frequent reviews will be conducted by the Global Fund and Local Fund Agent (LFA) to monitor workplan execution, financial absorption, implementation arrangements, and emerging risks.

### **1.3 C19RM Investment Committee review and recommendations**

- Grant Approvals Committee (GAC) and COVID-19 Technical Advise Group (CTAG) Partners found the Ghana C19RM Full Funding Request sound and aligned to the National Strategic Preparedness and Response Plan (NSPRP) and WHO guidance. Partners also noted the involvement of civil society, communities as well as the national COVID-19 coordinating body in the preparation of the request.
- Partners were seeking information about malaria vector control campaign coverage by the proposed investments, and about the more specific areas of HIV, TB and malaria mitigation interventions. The Secretariat explained to the Investment Committee that the investments will aim to cover the gaps in

Personal Protective Equipment (PPE) for malaria program campaigns, including the seasonal malaria chemoprevention and insecticide-treated nets, as well as the procurement of Personal Protective Equipment (PPE) for civil society organizations. The Secretariat further elaborated that proposed investments aim to increase availability of TB diagnostics in high-burden, high-volume sites. The proposed HIV virtual interventions will focus on HIV self-testing, targeting high risk men. The proposal also includes numerous cross-cutting activities, including risk communication.

- The C19RM Investment Committee sought assurances that the risk mitigation actions related to the funding of the antigen rapid diagnostics tests (Ag RDT) strategy in Ghana would not slow down the procurement of diagnostics. The Secretariat explained that at the time of request submission, Ghana only had four types of rapid diagnostic tests (RDTs) approved, of which one is WHO-pre-qualified and approved but not optimal (however, one additional type of rapid diagnostic test (RDT) has subsequently been added). The Secretariat further explained that while procurement of antigen rapid diagnostics tests (Ag RDTs) approved under the Fast-track award would move ahead, a national testing strategy with a clear roll-out plan for the use of antigen rapid diagnostics tests (Ag RDTs) and Polymerase Chain Reaction (PCR) tests will be required for the procurement of additional diagnostic products from the C19RM Full Funding award to ensure their most effective and impactful use.
- The C19RM Investment Committee sought more information about Ghana's Personal Protective Equipment (PPE) investment plans and current stock. The Secretariat assured the C19RM Investment Committee that the Personal Protective Equipment (PPE) plans were developed in a comprehensive manner established working closely with civil society organizations, and there was already good stock accumulated from the C19RM 2020 award, whereas the 2021 Fast-track award covered Ghana's remaining 2021 needs. The Full Funding request further focused on the country's 2022 and 2023 Personal Protective Equipment (PPE) needs.

ii. **Kenya: The National Treasury of the Republic of Kenya (KEN-H-TNT, KEN-M-TNT, KEN-T-TNT), Amref Health Africa (KEN-M-AMREF, KEN-T-AMREF) and Kenya Red Cross Society (KEN-H-KRCS)**

**2.1 Background and context<sup>7</sup>**

As of 4 July 2021, Kenya had confirmed 185,868 COVID-19 cases and 3,675 COVID-19 related deaths. The country has had three waves of COVID-19: from July to August 2020, October to November 2020 and March 2021 to the present, with the majority of cases reported in Nairobi, Mombasa and Kiambu counties. Kenya launched its COVID-19 vaccination on 15 March 2021 and as of 4 July 2021, 1,473,869 doses of the vaccine have been administered, of these 456,384 persons were fully vaccinated. The vaccination program targets frontline workers, teachers, security officers and persons 58 years and above. Health-seeking behavior for HIV, TB and malaria has been impacted by travel restrictions, stigma, disruption of service delivery, access challenges related to COVID-19 control measures, and diversion of human resources for health to the COVID-19 response. Some of the biggest impacts have been on uptake of HIV and TB treatment services and delays in the completion of the 2020 malaria mass insecticide treated nets campaign which was also delayed. The supply chain and laboratory system have been under increased strain due to the pandemic, including stretched resources and backlogged systems.

**C19RM 2020 Awards.** Under the Global Fund's C19RM 2020 funding, Kenya received US\$36,926,676 which was strongly focused on Personal Protective Equipment (PPE) procurement, diagnostics and laboratory consumables. As at end of May 2021 budget utilization was at 22 percent and had a carry-over amount of US\$28,795,841 which has been considered during development of the C19RM 2021 Full Funding request. This amount relates mainly to obligations for procurements that are underway or delivered but not yet paid. For the C19RM 2020 funding, the Global Fund's Pooled Procurement Mechanism (PPM) was recommended as the preferred procurement channel for C19RM investments by the Investment Committee. However, the Pooled Procurement Mechanism couldn't be utilized because of challenges in aligning with Kenya specific standards, import requirements and specifications, mainly for Personal Protective Equipment (PPE) and manual diagnostic tests. As a result, the procurement channel was reverted to national procurement. The initial challenges faced while attempting to procure using the Pooled Procurement Mechanism and the subsequent tendering and procurement nationally contributed to the delays in completing the C19RM 2020 procurements. All C19RM 2020 health products procured locally were subject to pre-award tender reviews. These challenges have been addressed in C19RM 2021, where the Global Fund has mandated C19RM commodities (both Fast-track and Full Funding Request) to be procured using Pooled Procurement Mechanism in line with the C19RM Health Product Segmentation Framework. The Global Fund Secretariat is currently in discussion with relevant country stakeholders (including the Principal Recipient - National Treasury and Ministry of Health) to ensure potential delays in the importation process are mitigated and appropriate measures taken to avoid delays (including necessary waivers related to import requirements).

**Funding landscape<sup>8</sup>.** In the 2021-2022 fiscal year, the government of Kenya has allocated US\$53 million for HIV, TB and malaria programs meeting its US\$36 million funding commitment despite the impact of the COVID-19 pandemic on the fiscal space. In the same budget, the government has allocated US\$11 million to recruit 5,000 healthcare workers. However, large funding gaps remain in the Kenya funding landscape, including US\$954 million in 2021. The Full Funding request took into account C19RM 2020 funding, the Global Fund 2021-2024 HIV, TB and malaria grants, as well as funding from other sources, including other development partners, domestic resources, World Bank, and PEPFAR. The following areas are covered by other funding sources and were not included in the scope of this request: (1) country-led coordination and planning managed and led by government; (2) infection prevention and control and protection of healthcare workforce and case management; (3) surveillance systems; (4) health products management system. Moreover, this request builds on operational activities and costs already programmed under the Global Fund 2021-2024 core grants and

<sup>7</sup> Data and statistics from Kenya's C19RM 2021 Full funding request.

<sup>8</sup> Data from Kenya's C19RM 2021 Full funding request.

attempts to address gaps of strategic importance and catalytic potential, such as gender-based violence, risk communication, human rights and gender.

## 2.2 Strategic focus and prioritization of C19RM 2021

Kenya's C19RM 2021 Full Funding request highlights critical interventions and procurements as essential components of the national response to COVID-19. It is aligned with the Kenya National COVID-19 Strategic Plan (2020) which is currently being updated. These interventions aim to mitigate the impact of COVID-19 on HIV, TB and malaria programs, including a strong focus on communities and key populations, and to strengthen the health system to increase pandemic preparedness and build a strong interface with community-led responses. In 2021 Kenya received a US\$31,148,545 C19RM Fast-track award which was focused on support for oxygen delivery, Personal Protective Equipment (PPE) for community actors and health facility staff, as well as increasing diagnostic capacity. The Secretariat recommends the following activities to be prioritized for immediate award in line with the three Board categories as outlined below:

### a. Mitigating the impact of COVID-19 on HIV, TB and malaria programs:

- The proposed HIV interventions are designed to contribute to reducing barriers to access to care, regain lost programmatic achievements in HIV testing, treatment and care, and address emerging needs resulting from the COVID-19 pandemic. These include support for existing supply chain systems to facilitate multi-month dispensing and expansion of some of the existing differentiated service delivery models in HIV service delivery i.e. community antiretroviral therapy (ART) refill groups and community outreach visits, that will go a long way in increasing antiretroviral therapy uptake and retention in HIV care in the context of COVID-19. Prevention services such as integrated HIV/Sexual and Reproductive Health outreach, distribution of Pre-exposure Prophylaxis (PrEP) (as well as other prevention products such as condoms, lubricants and self-test kits), and support for community-based testing are also included in the request to further strengthen prevention efforts in the underlying grant. Integration of mental health and psychosocial support services (including social protection) into tele-counselling and digital platforms is expected to improve quality delivery of these services, particularly to vulnerable and key populations during the pandemic.
- The proposed TB interventions will provide continued access to TB diagnosis and support for treatment adherence through expanded community TB case finding and treatment, including TB preventive therapy. TB case finding and diagnostic capacity will be expanded through optimization of existing diagnostic platforms and procurement of additional GeneXpert machines for multi-disease testing and the institution of bi-directional screening of TB and COVID-19. Guidelines and reporting tools will be updated, and frontline workers will be sensitized. Linkage to TB and COVID-19 services will be strengthened through awareness and demand creation at community level and service delivery points through support for mass communication campaigns, targeted outreach, differentiated delivery approaches for community drug susceptible (DS-TB) drugs, and community-level sputum sample collection. Infection prevention and control for TB and COVID-19 will be scaled up.
- The COVID-19 impact on the malaria program manifested itself in the reduction of number of people seeking services in health facilities due to fear of contracting COVID-19 or being tested positive for COVID-19. The proposed malaria interventions therefore aim to enhance health-seeking behavior for malaria and address fear and stigma. This will be done through continued facilitation of referral of high-risk populations by community health workers in high-burden areas, strengthened and expanded quality assurance in malaria and COVID-19 testing, support and capacity building for private pharmacies in high-burden areas, the facilitation of rapid quality assurance visits to ensure accurate diagnosis and data, as well as expanded and strengthened private sector engagement in the malaria response.

### b. Reinforcing the COVID-19 national response:

- The proposed interventions will seek to fight stigma, misinformation and poor adherence to COVID-19 response protocols through use of targeted messages, social behavior change communication, and training of community actors/leaders. These risk communication activities will be informed by a Knowledge, Attitudes and Practices survey for risk profiling and targeted message content development. Through implementation of a comprehensive risk communication strategy, Kenya aims to address the low compliance with COVID-19 preventive measures and encourage the uptake of the COVID-19 vaccine, especially among vulnerable populations and essential workers. In parallel, a rapid

mapping exercise will be conducted to determine any gaps in the reach of communication activities. Community champions, local media, teachers, matrons, and community groups will all be trained on key COVID-19 response messaging.

- The Field Epidemiological Laboratory Training program will be expanded to bolster the health workforce which is critical to the national COVID-19 response.
  - The use of antigen rapid diagnostic tests (Ag RDTs) constitutes an integral part of Kenya's testing strategy and complements the existing Polymerase Chain Reaction (PCR) testing capacity across the country. The procurement of additional antigen rapid diagnostic tests (Ag RDTs) in this request will therefore expand COVID-19 testing capacity at lower-level facilities and improve turn-around time for results to support decision-making.
- c. Urgent improvement to health and community systems:**
- The integration of COVID-19 testing into existing laboratory services such as diagnostics infrastructure, sample transportation, quality assurance and the lab information system will increase efficiency, improve accountability, and provide data for decision-making.
  - The proposed interventions will also increase awareness around rights and reporting structures for gender-based violence among key and vulnerable populations and support post care services. The response will also leverage gender-based violence prevention interventions in the 2021-2024 HIV core grant.
  - Community-led monitoring, community-led advocacy and research, social mobilization and Community-based Organizations capacity building will be supported. Activities will include the development of community-led monitoring and community-led advocacy and research frameworks, the expansion of use of the I-Monitor system, and support for data collection, meetings, and trainings. These investments in community systems aim to strengthen community monitoring and reporting, as well as improve capacity of communities to better respond to the pandemic and increase access to HIV, TB and malaria services.

**Implementation arrangements.** The C19RM Full Funding Request award will be split between six grants managed by three Principal Recipients: The National Treasury of the Republic of Kenya, AMREF Health Africa and Kenya Red Cross Society. This split will leverage the comparative advantage of each principal recipient to ensure well-managed procurement and implementation. No new implementers are proposed, and the C19RM health products will be covered under the same storage and distribution arrangements that cover HIV, TB and malaria health products. With regards to oxygen, there are local suppliers in country for the supply of oxygen to public sector and private sector health care facilities. Oxygen will be procured and installed by AMREF Health Africa.

**C19RM Assurance and Risk Mitigation.** Diagnostics and Personal Protective Equipment (PPE) will be procured using the Global Fund Pooled Procurement Mechanism, while for direct procurements (local procurements of oxygen-related equipment and work, as well as infection prevention and control materials), the Local Fund Agent (LFA) will undertake a pre-award procurement review. The Principal Recipients will conduct storage space assessment for any bulk C19RM procurements, as done for insecticide-treated nets. The Principal Recipient reports will be shared with the Global Fund Secretariat and Local Fund Agent (LFA) for review and in case of any red flags or concerns, the necessary mitigation actions will be taken. In case of any emerging risks identified in distribution plans or other areas, the Local Fund Agent (LFA) will carry out targeted spot check verifications in a sample of sites. AMREF will be working closely with the oxygen subcommittee that was constituted by the national COVID-19 taskforce which will provide the necessary technical expertise for effective operationalization, as well as continue cooperation with the Clinton Health Access Initiative (CHAI) both on oxygen equipment procurement and general implementation. AMREF will leverage its experience in rolling out Resilient and Sustainable Systems for Health (RSSH) interventions including renovation of laboratories / pharmacies in health facilities, and in supporting oxygen installation at county level.

## 2.3 C19RM Investment Committee review and recommendations

- GAC and CTAG partners found Kenya's full funding request sound and aligned to the national strategic preparedness and response plan and WHO guidance. Partners also strongly commended the involvement of civil society, communities as well as the national COVID-19 coordinating body in the preparation of the request, as well as the excellent description of all aspects of disruption caused by COVID-19.
- Partners have also appreciated the strong focus of the request on civil society organizations, community health workers and communities to deliver services to key, marginalized, vulnerable and hard to reach populations, the leveraging of community systems for HIV, TB and malaria, as well as addressing COVID-19 vaccine hesitancy. Partners commended the focus on expansion of the antigen rapid diagnostic test (Ag RDT) testing strategy.
- GAC and CTAG partners appreciated the clear prioritization of proposed interventions and split between the base and above-base allocation as well as building on the Global Fund underlying grants supporting HIV, TB and malaria program efforts.
- GAC and CTAG Partners suggested including the adaptation measures for the 2023 malaria campaign in the base allocation, as the 2020 campaign was delayed due to COVID-19-related challenges and this is seen as a key malaria prevention intervention. The Secretariat has indicated that the next malaria campaign is foreseen in 2024 and it was deemed more strategic to keep related funding in the above-base allocation.
- Both GAC and CTAG Partners and the C19RM Investment Committee sought further information about what seemed to be a relatively low absorption of the C19RM 2020 award. The Secretariat explained that this was due to the fact that the responsibility for C19RM 2020 award procurements were first assigned to Global Fund's Pooled Procurement Mechanism and then later reverted to the country's local procurement because the Pooled Procurement Mechanism could not meet Kenya's import requirements and supply Kenya specific standards / specifications for Personal Protective Equipment (PPE) and manual diagnostic tests. Additionally, the procurements were subject to pre-award Local Fund Agent (LFA) review and Kenya's procurement requirement demands payments to be done after the receipt of goods. The Secretariat further elaborated that this seemingly low absorption was in fact largely related to obligations of procurement already underway.
- The C19RM Investment Committee recommended development of a monitoring system to improve the tracking of commodities flowing through the supply chain and to mitigate any potential delays or escalate for rapid management action when needed. The Secretariat detailed the work already done in this area, including active follow up work with the Kenya government to obtain waivers for import requirements. The Secretariat also intends to follow up on the discussion on the port procedures and will further strengthen proposed monitoring mechanisms, as well as track and report on progress of the procurement and delivery of COVID-19 health products. The Secretariat has also already started the engagement with the Kenya government on tax clearance. The Secretariat has further assured the C19RM Investment Committee that change instituted requiring procurement through Pooled Procurement Mechanism will allow further streamlining of the procedures as only customs clearance will be necessary.
- The C19RM Investment Committee sought assurances on the strategic linkages and programmatic priorities of travel-related costs included in the budget. The Secretariat assured that thorough scrutiny of such costs was done before their prioritization and inclusion in the request and explained that most of these costs were related to community-level and community-led activities and will continue to be monitored. The Secretariat further explained that the majority of these activities will focus on activities aimed at reducing community transmission of COVID-19.

**Table 2: Budget distribution by priority area**

Country/ Multicou ntry	Mitigate COVID-19 impact on HIV, TB and malaria programs		Reinforce COVID-19 national response		Urgent improvement to health and community systems				Total
	Amount	%	Amount	%	Community, Gender and Rights		RSSH Investments		
	Amount	%	Amount	%	Amount	%	Amount	%	Amount
Ghana	US\$ 8,674,178	22.2%	US\$ 23,848,529	61.1%	US\$ 2,731,142	7.0%	US\$ 3,778,930	9.7%	US\$ 39,032,779
Kenya	US\$ 17,477,290	24.6%	US\$ 43,029,452	60.5%	US\$ 9,036,850	12.7%	US\$ 1,579,468	2.2%	US\$ 71,123,060

**Table 3: COVID-19 Health Product Categories distribution by investment type**

Country <sup>9</sup>	Diagnostics RDT	Diagnostics PCR	PPE	Therapeutics O2	Therapeutics other	Other
Ghana	US\$ 3,557,881	US\$ 3,397,873	US\$ 1,609,414	US\$ 2,426,282	US\$ 0	US\$ 28,041,328
Kenya	US\$ 8,932,918	US\$ 581,718	US\$ 1,434,187	US\$ 29,058,346	US\$ 28,725	US\$ 31,087,166

<sup>9</sup> Excluding roll-over amounts from C19RM awards in 2020.

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## Annex 1 – Past Decisions

Pursuant to the Governance Plan for Impact as approved at the 32nd Board Meeting,<sup>10</sup> the following summary of relevant past decision points is submitted to contextualize the decision point proposed in this paper.

Relevant past Decision Point	Summary and Impact
Decision Point: GF/B45/EDP06: Secretariat's Recommendations on Funding from the COVID-19 Response Mechanism  July 2021	The Board approved the Secretariat's Recommendations on funding from the COVID-19 Response Mechanism for Ethiopia, up to an amount of US\$80,454,416, and Malawi, up to an amount of US\$73,113,943.
Decision Point: GF/B45/EDP04: Secretariat's Recommendations on Funding from the COVID-19 Response Mechanism  July 2021	The Board approved the Secretariat's Recommendations on funding from the COVID-19 Response Mechanism for Uganda, up to an amount of US\$126,862,493.
Decision Point: GF/B44/EDP18: Second Extension of C19RM Timeline and Operational Flexibility for COVID-19  March 2021 <sup>11</sup>	The Board approved a further extension of the timelines for the receipt, award, and use of funds for the Global Fund COVID-19 Response Mechanism based on further modifications proposed by the Secretariat.
Decision Point: GF/B43/EDP12: Extension of C19RM Timeline and Operational Flexibility for COVID-19  September 2020 <sup>12</sup>	The Board approved an extension of the time limit for the award of funds from the Global Fund COVID-19 Response Mechanism.
GF/B42/EDP11: Additional Support for Country Responses to COVID-19  April 2020 <sup>13</sup>	The Board approved operational flexibilities and additional support to countries, including the COVID-19 Response Mechanism, to enable the Global Fund and countries to effectively respond to the negative impact of the COVID-19 pandemic.

<sup>10</sup> <https://www.theglobalfund.org/board-decisions/b32-dp05/>

<sup>11</sup> <https://www.theglobalfund.org/board-decisions/b44-edp18/>

<sup>12</sup> <https://www.theglobalfund.org/board-decisions/b43-edp12/>

<sup>13</sup> <https://www.theglobalfund.org/board-decisions/b42-edp11/>