

Electronic Report to the Board

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

GF/B45/ER17

Board Decision

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

GF/B45/EDP18: Approval of the Secretariat's Recommendation on Funding from the 2021 COVID-19 Response Mechanism¹

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.

¹ The Secretariat recommends the approval of funding from the 2021 COVID-19 Response Mechanism for the Central African Republic, up to an amount of EUR 32,992,851.

Decision

Decision Point: GF/B45/EDP18: 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/ER17; 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 the Central African Republic, up to an amount of EUR 32,992,851.

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 [this link](#).

Input Sought

The Board is requested to review the Secretariat recommendation and approve, on a 'no objection' basis, the decision point GF/B45/EDP18.

Table 1: Secretariat's Recommendation on Funding from C19RM²

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 ³	Previously approved C19RM 2021 award ⁴	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
Central African Republic	CAF-C-CRF	EUR	312,483	0	27,232,403	32,992,851	27.09%	35,119,135	0
	CAF-M-WVI	EUR	1,813,801	0	5,760,448				

² 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.

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

⁴ 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. Central African Republic: The French Red Cross (CAF-C-CRF), World Vision International (CAF-M-WVI)

1.1 Background and context⁵

The COVID-19 epidemic began in the Central African Republic (CAR) with the first case detected on 14 March 2020. As of 9 September 2021, CAR's Ministry of Health reported 11,309 COVID-19 cases and 100 deaths. In the first four months of 2021, six times as many cases (1,571) were confirmed as in the last four months of 2020 (259) and the death toll due to COVID-19 has risen by 44 percent. The country has conducted 55,638 COVID-19 tests from March 2020 to May 2021 averaging 3,700 tests per month with positivity rates reaching 13 percent. As of 1 September 2021, 107,904 vaccine doses have been administered from the 382,400 COVAX allocated amount. An additional 150,000 SINOVAC vaccinations have been donated to CAR according to the Ministry of Health. The COVID-19 epidemic has had negative impacts on the overall health system in CAR, already undermined by multiple military-political conflicts. As part of the implementation of the 2021-2023 HIV/TB and malaria grants, a rapid assessment of the impact of COVID-19 and the pre- and post-election crisis in CAR, was conducted in the first quarter of 2021. The results of this assessment showed that the COVID-19 pandemic had a negative impact in the fight against HIV, TB and malaria. The functioning of the diagnostic and care centers for the three diseases was disrupted. The closure of borders, particularly with Cameroon, delayed the delivery of drugs and other products needed for the management of the HIV, TB and malaria programs, sometimes resulting in stock shortages at health facilities and at the central level. The demand for care has decreased due to the fear of COVID-19 spread through the health facilities as well as due to the stigma of COVID-19 patients. The survey noted difficulties in the transmission of reports (low completeness), a deterioration of the main indicators of quality of care, an increase in patients lost to follow-up. Community services have also been disrupted and were not always available.

C19RM 2020 Awards. In 2020 the Global Fund contributed EUR 3,917,706 for the COVID-19 response in CAR. Of this amount, EUR 889,197 came from savings identified in the 2017-2019 allocation period HIV-TB grant and EUR 3,028,509 from the C19RM 2020 funding included in the 2020-2022 allocation period HIV-TB (CAF-C-CRF) and malaria (CAF-M-WVI) grants. This funding was focused on the procurement of health products and equipment for COVID-19 diagnostics, such as GeneXpert machines and Personal Protective Equipment (PPE). The award also allowed the implementation of sensitization campaigns as well as mask and hand washing kit distribution campaigns in six out of 16 prefectures. EUR 1.81 million of the Global Fund Pooled Procurement Mechanism (PPM) orders was placed by World Vision International on 16 December 2020 (gloves and masks), but were only delivered after the 30 June 2021 cut-off date, thus showing a 0 percent absorption under the CAF-M-WVI grant. The current absorption rate of the CAF-C-CRF grant is 74 percent due to the delays in implementing civil society activities during the humanitarian crisis following presidential elections from January to April 2021.

Funding landscape.⁶ CAR's COVID-19 national response plan (NSPRP) is estimated at EUR 1.3 billion. It is organized in three pillars: public health, socio-economic and security and human rights. The Global Fund's contribution to the COVID-19 response in CAR will cover needs within the public health pillar of the NSPRP. CAR's COVID-19 response, with an estimated cost of EUR 173 million, relies heavily on external funding. External sources, including the Global Fund, the World Bank, GAVI and the European Union, represent 68 percent of the overall estimated funding needs, while domestic funds only represent 13 percent of the estimated

⁵ Data and statistics from Central African Republic's C19RM 2021 full funding request.

⁶ Data from Central African Republic's C19RM 2021 full funding request.

budget. Contributions from external donors (excluding the proposed C19RM 2021 award) are estimated at EUR 92.5 million for the period covering 2021-2023. National contributions are only provided for 2021 and represent EUR 16.9 million. The proposed investments of the C19RM 2021 award were shared and discussed with other financing partners including the World Bank, the European Union, GAVI and Médecins Sans Frontières (MSF) to avoid duplication.

1.2 Strategic focus and prioritization of C19RM 2021

CAR's C19RM Full Funding Request is fully aligned with C19RM and WHO guidance. The C19RM 2021 Full Funding Request supports the NSPRP, complements the C19RM 2020 award and the Global Fund 2020-2022 allocation period grant investments, while addressing the gaps to mitigate the COVID-19 effects on HIV, TB and malaria programs. It focuses on COVID-19 case management, clinical operation and treatment, infection prevention and control activities and COVID-19 diagnostics. 74 percent of the requested budget will be used for health product procurement, including PPE, oxygen equipment and administration, diagnostics and testing, antigen rapid diagnostic tests (Ag RDT) and lab reagents. The remaining 26 percent of the budget will address the needs of community surveillance, warehousing, health equipment power supply and availability, technical assistance as well as HIV and TB activities. CAR has not submitted a request for the C19RM 2021 Fast-track award. The Secretariat recommended 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:

- With a particular focus on key and vulnerable populations, the proposed HIV interventions aim to implement COVID-19 adapted approaches such as multi-month and community drug dispensing, antiretroviral drugs support groups at community level and drop-in centers.
- The proposed TB interventions will focus on maintaining and reinforcing treatment adherence throughout the COVID-19 pandemic, improve sample transportation, intensify active case finding, decentralization of diagnosis to the community and improved infection control.
- The proposed malaria interventions will allow for the adaption of the long-lasting insecticidal nets distribution campaigns to address COVID-19 challenges (PPE, information, education and behavior change communication campaigns), as well as technical assistance activities to develop a new community health strategy for malaria.

b. Reinforcing the COVID-19 national response:

- This C19RM 2021 Full Funding Request is strongly focused on reinforcing CAR's COVID-19 response through the procurement of relevant health products in line with the national quantification conducted by the Ministry of Health with the support of international partners, including PPE, laboratory equipment and tests, and medical oxygen for the management of severe and critical cases. The PPE and related infection prevention and control investments will protect facility- and community-based health workers delivering HIV, TB, malaria and other essential services.
- Proposed activities include relevant training and supervision to be provided to health and laboratory staff to ensure that national testing, infection control and case management protocols and guidelines are respected.
- Proposed investments will strengthen risk communication by deploying community health workers to decentralize health services and scale-up awareness raising at the community level.

c. Urgent improvement to health and community systems:

- Health systems investments: proposed investments include lab equipment increasing COVID-19 diagnostic capacity and power supply, training for lab personnel, technical assistance to develop a sample transportation strategy and a waste management strategy.
- Community and community-based surveillance investments: proposed activities complement CAR's 2020-2022 allocation period grant investments improving community interventions for key and

vulnerable populations, as well as implementing civil society organizations' capacity building activities. Such investments support the scope of decentralization of HIV, TB and malaria services to the community during the COVID-19 pandemic and also allow capacity reinforcement of local organizations that have better access to key and vulnerable populations.

Implementation arrangements. The C19RM 2021 award will be implemented by the two current Principal Recipients (PRs): World Vision International (WVI) and the French Red Cross (CRF). The procurement of health products will be completed in accordance with the Global Fund Health Product Segmentation Framework. The Global Fund Pooled Procurement Mechanism PPM/Wambo.org will be used for the procurement of all COVID-19-related health products. Local procurement is planned for a small number of items as recommended in the segmentation framework (disinfectant, dexamethasone and enoxaparin).

C19RM Assurance and Risk Mitigation. The Local Fund Agent (LFA) will conduct the system review of warehousing, inventory management and distribution of COVID-19 products, pre-award procurement reviews for nationally sourced mainstream and strategic products; as well as targeted programmatic and financial spot checks based on identified risks and materiality. The LFA will also perform supply chain and health services spot checks and reviews to monitor operationalization of Pressure Swing Adsorption (PSA) oxygen plants and oxygen equipment. The PR will submit a detailed implementation plan for the procurement and installation of oxygen concentrators and ventilators and PSA plants, including details of warranty and maintenance services and technical support. Prior to the use of C19RM 2021 award funds, the PR, in cooperation with the World Food Program, will submit to the Global Fund a detailed workplan and budget ensuring adequate storage space, distribution arrangements, human resources and information system. The PR will also submit to the Global Fund for its approval a proposal defining expected performance criteria and achievement verification methodology for the incentives, as well as the detailed training and supervision plan for the activities approved under the C19RM budget. The PR, in collaboration with the Global Fund, will further develop the strategy for community led monitoring systems and approaches, as well as submit Terms of Reference to facilitate and broker access to technical support for the integration of C19RM related investments into community led monitoring systems.

1.3 C19RM Investment Committee review and recommendations

- GAC and CTAG partners (Partners) assessed CAR's Full Funding Request as technically sound. They agreed that the requested health products were aligned with the WHO, Global Fund and NSPRP guidelines, and that their quantities were appropriate to cover identified needs for reinforcing the national COVID-19 response.
- One partner disagreed that the funding request provided adequate evidence demonstrating that the funding request development process was inclusive of civil society, key and vulnerable populations and aligned with the national COVID-19 response coordinating body and NSPRP. The Secretariat highlighted that the funding request included extensive supplementary documentation detailing a highly inclusive process that fully engaged community leaders, key populations and civil society, alongside international development partners, and Country Coordinating Mechanism members. The Secretariat has assessed the consultation process in CAR as exceeding expectations despite the significant challenges of the context. The Secretariat further assured the Partners that the Full Funding Request supports the NSPRP and that the COVID-19 national coordinating body was consulted throughout the process and endorsed the C19RM funding request.
- Partners noted the need to strengthen human resources for the implementation of the proposed activities. The Secretariat concurred that human resource availability is a known challenge in CAR and highlighted that it is working with the Ministry of Health to undertake a study on human resources for health to assess health facility and district levels needs through the 2020-2022 allocation period grants. The Secretariat also assured that a proper human resource structure and support system will be in place prior to equipment deployment to health facilities.

- Partners requested to ensure necessary power supply and availability and international technical assistance for the installation of oxygen equipment. The Secretariat pointed out that the award includes power supply options for oxygen equipment while the PR and CAR Ministry of Health will work with MSF and other international partners to ensure proper Standard Operating Procedures (SOPs) for oxygen therapy.
- The C19RM Investment Committee acknowledged the difficult operating context in CAR due to multiple political-military crisis and appreciated the focus of the proposed C19RM 2021 award investments to assist the country's COVID-19 response. The C19RM Investment Committee noted that the 2017-2019 allocation period Global Fund grants were implemented with a good absorption rate and that the root causes of the low C19RM 2020 award absorption rate were to the delays for some health product deliveries which only arrived after the 30 June 2021 will be subsequently integrated into the C19RM 2021 award and the new implementation period. The C19RM Investment Committee appreciated the inclusive process of the proposal preparation and revision which allowed for timely discussion and addressing issues raised by the reviewers.
- The C19RM Investment Committee discussed the proposed travel-related costs, salaries and incentives proposed in the Full Funding Request and noted that such costs were harmonized with the previous grants and deemed the costs of such interventions to be reasonable. The C19RM Investment Committee also noted that such interventions were strengthening community surveillance activities including the epidemiological investigation and contact tracing activities as well as addressing the HR issues raised by the Partners including through proposed incentives for nurses and severe cases management teams, antiretroviral drug community distribution campaigns, phone assistance for violence victims and drop-in centers workers. The C19RM Investment Committee noted the importance of a clear training plan being submitted prior to the release of funds.
- The C19RM Investment Committee appreciated the choice and institutional capacity of the PRs to effectively implement, as well as the health-product focus of the investments that will facilitate the implementation and absorption of the recommended award. However, noting the multiple military-political conflicts and fragile operating environment in CAR, the C19RM Investment Committee requested close monitoring and reporting back on the progress of implementation within 12 months. The C19RM Investment Committee also confirmed that Central African Republic may access the remaining EUR 3,549,278 for immediate C19RM 2021 award to reach the 30 percent C19RM indicative Qualitative Adjustment ceiling for the country, should the country decide to present an additional request to address programmatic gaps, noting the short time remaining for the preparation of such a request.

Table 2: Budget distribution by priority area

Country/ Multicountry	Mitigate COVID-19 impact on HIV, TB and malaria programs		Reinforce COVID-19 national response		Urgent improvement to health and community systems				Total
					Community, Gender and Rights		RSSH Investments		
	Amount	%	Amount	%	Amount	%	Amount	%	Amount
Central African Republic	EUR 1,854,575	5.6%	EUR 29,003,753	87,9%	EUR 822,027	2.5%	EUR 1,312,496	4.0%	EUR 32,992,851

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

Country ⁷	Diagnostics RDT	Diagnostics PCR	PPE	Therapeutics O2	Therapeutics other	Other ⁸
Central African Republic	EUR 1,966,186	EUR 3,900,383	EUR 8,566,280	EUR 8,287,371	EUR 896,494	EUR 9,376,137

⁷ Excluding roll-over amounts from C19RM awards in 2020.

⁸ This category includes all Health Products that do not fall into any of the five specific categories, as well as any other non-Health Product interventions.

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Annex 1 – Past Decisions

Pursuant to the Governance Plan for Impact as approved at the 32nd Board Meeting,⁹ 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/B44/EDP18: Second Extension of C19RM Timeline and Operational Flexibility for COVID-19 March 2021 ¹⁰	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 ¹¹	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 ¹²	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.

⁹ <https://www.theglobalfund.org/board-decisions/b32-dp05/>

¹⁰ <https://www.theglobalfund.org/board-decisions/b44-edp18/>

¹¹ <https://www.theglobalfund.org/board-decisions/b43-edp12/>

¹² <https://www.theglobalfund.org/board-decisions/b42-edp11/>